

BEACON (Brief Evaluation of Adolescents and Children Online)

Version for students in Year 6 to Year 12

What is BEACON (this survey) about?

This survey is called BEACON, which stands for Brief Evaluation of Adolescents and Children Online. It is a mental health screening tool for students to do in school. It aims to identify students who may be going through a difficult time and need additional support.

What does it involve?

You will complete this online survey that asks about any negative feelings, behaviours, or difficulties in your life, as well as other questions about yourself and your life. The survey should take about 5 minutes to complete.

We are going to ask you some questions about how you have generally been feeling over the past few weeks. Please read each question and rate how much you have felt that way over the past few weeks.

	Not at all	Only a little	Sometimes	Quite a lot	A great deal
1. I worried about things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I felt afraid	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I felt afraid that I will make a fool of myself in front of people	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. All of a sudden I felt really scared for no reason at all	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. I felt nervous	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Over the past few weeks, how much did it bother you when you felt scared or worried?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Not at all hard	Only a little hard	Sometimes hard	Quite hard	Very hard
7. When you felt scared or worried, how hard was it for you to get on with parents and family members?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. When you felt scared or worried, how hard was it for you to get on with friends?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. When you felt scared or worried, how hard was it for you to look after your health? (e.g., getting enough sleep, eating properly)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. When you felt scared or worried, how hard was it for you to do activities you enjoy? (e.g., going to the beach or the movies)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please read each question and rate how much you have felt that way over the past few weeks.

	Not at all	Only a little	Sometimes	Quite a lot	A great deal
11. I felt really sad	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. I felt really alone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. I felt like there is nothing to look forward	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. I just didn't enjoy things anymore	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. I felt like crying a lot	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. Over the past few weeks, how much did it bother you when you felt sad or lonely?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Not at all hard	Only a little hard	Sometimes hard	Quite hard	Very hard
17. When you felt sad or lonely, how hard was it for you to look after your health? (e.g., getting enough sleep, eating properly)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. When you felt sad or lonely, how hard was it for you to do daily activities? (e.g., getting ready for school, homework)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. When you felt sad or lonely, how hard was it for you to do activities you enjoy? (e.g., going to the beach or the movies)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please read each question and rate how much you have felt that way over the past few weeks.

	Not at all	Only a little	Sometimes	Quite a lot	A great deal
20. It was hard for me to stay focused and I got distracted easily	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. I found it hard to manage my time properly	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. I didn't enjoy tasks or activities where I had to concentrate for a long time	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. I found it hard to be still when I needed to be (e.g., in class)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. Over the past few weeks, how much did it bother you when you couldn't focus or stay still?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Not at all hard	Only a little hard	Sometimes hard	Quite hard	Very hard
25. When you couldn't focus or stay still, how hard was it for you to look after your health? (e.g., getting enough sleep, eating properly)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. When you couldn't focus or stay still, how hard was it for you to do daily activities? (e.g., getting ready for school, homework)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
27. When you couldn't focus or stay still, how hard was it for you to do activities you enjoy? (e.g., going to the beach or the movies)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please read each question and rate how much you have felt that way over the past few weeks.

	Not at all	Only a little	Sometimes	Quite a lot	A great deal
28. I carefully watched what I ate so that I wouldn't gain weight	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29. I was terrified of gaining weight	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30. I often thought I'm fatter than other people think I am	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31. After I finished eating, I felt guilty and upset with myself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Not at all hard	Only a little hard	Sometimes hard	Quite hard	Very hard
32. When you engaged in these eating behaviours or body image thoughts, how hard was it for you to get on with parents and family members?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33. When you engaged in these eating behaviours or body image thoughts, how hard was it for you to look after your health? (e.g., getting enough sleep, eating properly)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34. When you engaged in these eating behaviours or body image thoughts, how hard was it for you to do daily activities? (e.g., getting ready for school, homework)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35. When you engaged in these eating behaviours or body image thoughts, how hard was it for you to do activities you enjoy? (e.g., going to the beach or the movies)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>