

## **Default Question Block**

I have read and understood the study information that has been sent to me and wish to participate in this study. By completing the survey and submitting my responses, I agree to participate in the study. If you do not wish to participate in the study, please close the browser window that you are viewing this on.

Please select the appropriate box below:	
I am aged 18 and I consent to participate in this study (survey).  I am aged 17 or under and I assent (agree) to participate in this study (survey).	
Please enter your initials, followed by the day and month of your birthday - e.g. Jo Bloggs who was born on the 27th of April would enter: JB2704	
How many close friends do you have?	
O 0	

4 or more				
Overall, how would you	u rate your rela	tionships with y	our close friends	?
Fair Good Excellent  Please answer the following statements				
	Describes me	Describes me	Describes me	Describes me
I feel I am enjoyable to be with	very poorly	quite poorly	quite well	very well
I feel uncomfortable when I have to meet new people	0	0	0	0
I feel at ease with other people	0	0	0	0
I am not very sociable	0	0	0	0
Please answer the following questions, thinking about how much your CLEFT has impacted these areas of your life WITHIN THE LAST WEEK. If you didn't do one or more of these things within the last week, try to respond thinking about how you would have felt about doing each of these things.				
	Hasn't stopped me at all	Stopped me a little bit	Stopped me quite a bit	Stopped me all the time
Go to the beach or pool	0	0	0	0
Go to a social event, party or club	0	0	0	0

	Hasn't stopped me at all	Stopped me a little bit	Stopped me quite a bit	Stopped me all the time
Go shopping for clothes	0	0	0	0
Do a physical activity/sport	0	0	0	0
Use public transport	0	0	0	0
Give an opinion or stand up for myself	0	0	0	0
Go to the doctor or school nurse	0	0	0	0
Go to school	0	0	0	0
Raise my hand in class	0	0	0	0
Spend time with friends and family	0	0	0	0

Please answer the following questions thinking about how much you agree or disagree with each statement IN THE LAST WEEK.

	Strongly Agree	Agree	Disagree	Strongly Disagree
I feel that I am a person of worth, at least on an equal plane with others.	0	0	0	0
I feel that I have a number of good qualities.	0	0	0	0
All in all, I am inclined to feel that I am a failure.	0	0	0	0
I am able to do things as well as most other people.	0	0	0	0
I feel I do not have much to be proud of.	0	0	0	0
I take a positive attitude toward myself.	0	0	0	0
On the whole, I am satisfied with myself.	0	0	0	0
I wish I could have more respect for myself.	0	0	0	0

	Strongly Agree	Agree	Disagree	Strongly Disagree	
I certainly feel useless at times.	0	0	0	0	
At times I think I am no good at all.	0	0	0	0	
How did you find filling out this survey? Please feel free to give us any feedback you nave here.					

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