<table>
<thead>
<tr>
<th><strong>Title</strong></th>
<th>Mental health First Aid in an Irish Context</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Author(s)</strong></td>
<td>Shanahan, Anne-Lisa</td>
</tr>
<tr>
<td><strong>Publication Date</strong></td>
<td>2013-02-01</td>
</tr>
<tr>
<td><strong>Item record</strong></td>
<td><a href="http://hdl.handle.net/10379/3407">http://hdl.handle.net/10379/3407</a></td>
</tr>
</tbody>
</table>
Appendix E

Questionnaires – MHFA participant pre and post training

Mental Health First Aid

Initial questionnaire

Dear course participant,

Thank you for taking part in the Mental Health First Aid (MHFA) training program. This program is being evaluated to determine its value, to identify its strengths and weaknesses and to establish its affects upon its participants.

As part of this exercise, we are seeking your assistance in completing this form. All answers are confidential and are unidentifiable.

1. What is your age? __________ years

2. Your gender? Male Female

Today’s date ________________
3. What is the highest level of education you have completed to date?
   None/ primary not complete
   Primary or equivalent
   Intermediate/junior/group certificate or equivalent
   Leaving certificate or equivalent
   Diploma/ certificate
   Primary degree
   Post graduate/ Higher degree
   Refusal

4. Which of these descriptions BEST describes your usual situation in regard to work?
   Employee (inc. apprenticeship or community employment)
   Self employed outside farming
   Farmer
   Student full-time
   On state training scheme (FAS, Failte Ireland etc)
   Long term sickness or disability
   Home duties/ looking after the home or family
   Retired
   Other (please specify) _________________________________

5. Note below if you have any prior training, learning or knowledge of mental health issues? (eg qualifications, training courses, work related learning or personal experiences).
6. What is your current level of **knowledge** of Mental Health First Aid issues? None Some Adequate Good Complete

7. How **skilful** are you in managing mental health? Not at all Somewhat Adequate Good Completely

8. How **confident** are you that you could manage a mental health crisis? Not at all Somewhat Adequate Good Completely

9. If you encountered a mental health crisis today what would be your level of **competence** to deal with it? Not at all Somewhat Adequate Good Completely

10. Note briefly your reasons for undertaking the Mental Health First Aid program.

11. What do you expect the MHFA training will enable you to do in the future, that you currently cannot do?
12. Please rate your knowledge about the following issues?

<table>
<thead>
<tr>
<th>None</th>
<th>Some</th>
<th>Adequate</th>
<th>Good</th>
<th>Complete</th>
</tr>
</thead>
</table>

Depression  
Suicide/self harm  
Anxiety  
Psychosis  
Drug and alcohol misuse

13. How would you generally rate your mental health?

<table>
<thead>
<tr>
<th>Very poor</th>
<th>Poor</th>
<th>Neither good nor poor</th>
<th>Good</th>
<th>Very good</th>
</tr>
</thead>
</table>

14. Have you actively tried to manage / protect your mental health?

<table>
<thead>
<tr>
<th>Not at all</th>
<th>Sometimes</th>
<th>Consistently</th>
</tr>
</thead>
</table>

15. What behaviours/ activities do you undertake to protect your mental health?

16. If you had concerns about your mental health, what would help ease your concerns?

17. The following statements ask you to rate your ability to be able to control and master mental health issues.

<table>
<thead>
<tr>
<th>Strongly agree</th>
<th>agree</th>
<th>disagree</th>
<th>strongly disagree</th>
</tr>
</thead>
</table>
• There is really no way I can solve some of the problems I have.
• Sometimes I feel I am being pushed around in life.
• I have little control over things that happen to me.
• I can do just about anything I really set my mind to.
• I often feel helpless in dealing with problems in life.
• What happens to me in the future depends on me.
• There is little I can do to change many of the important things in my life.

18. The following statements ask you about how you feel things have been with you during the past 4 weeks. For each question, please give one answer that comes closest to the way you have been feeling.

   **How much IN THE PAST 4 WEEKS have you……..**

<table>
<thead>
<tr>
<th>All of the time</th>
<th>Most of the time</th>
<th>A good bit of the time</th>
<th>Some of the time</th>
<th>A little of the time</th>
<th>None of the time</th>
</tr>
</thead>
</table>

• Did you feel full of life?
• Have you been a nervous person?
• Have you felt so down in the dumps that nothing could cheer you up?
• Have you felt calm and peaceful?
• Did you have a lot of energy?
• Have you felt downhearted and blue?
• Did you feel worn out?
• Have you been a happy person?
• Did you feel tired?
19. Below are some statements about feelings and thoughts.
Please tick the boxes that best describes your experience of each over the last 2 weeks.

<table>
<thead>
<tr>
<th>Statement</th>
<th>None of the time</th>
<th>Rarely</th>
<th>Some of the time</th>
<th>Often</th>
<th>All of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td>I’ve been feeling optimistic about the future</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>I’ve been feeling useful</td>
<td></td>
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<tr>
<td>I’ve been feeling relaxed</td>
<td></td>
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<tr>
<td>I’ve been feeling interested in other people</td>
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<tr>
<td>I’ve had energy to spare</td>
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<tr>
<td>I’ve been dealing with problems well</td>
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<tr>
<td>I’ve been thinking clearly</td>
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<tr>
<td>I’ve been feeling good about myself</td>
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<tr>
<td>I’ve been feeling close to other people</td>
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<tr>
<td>I’ve been feeling confident</td>
<td></td>
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<tr>
<td>I’ve been able to make up my own mind about things</td>
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<tr>
<td>I’ve been feeling loved</td>
<td></td>
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<tr>
<td>I’ve been interested in new things</td>
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<tr>
<td>I’ve been feeling cheerful</td>
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</tbody>
</table>

Thank you for your assistance
Thank you for taking part in the Mental Health First Aid (MHFA) training program. This program is being evaluated to determine its value, to identify its strengths and weaknesses and to establish its affects upon its participants.

As part of this exercise, we are seeking your assistance in completing this form. All answers are confidential and are unidentifiable.

1. What is your age? ________ years

2. Your gender?  Male  Female
3. What is the highest level of education you have completed to date?
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   - Primary or equivalent
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   - Post graduate/ Higher degree
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4. Which of these descriptions BEST describes your usual situation in regard to work?
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   - On state training scheme (FAS, Failte Ireland etc)
   - Long term sickness or disability
   - Home duties/ looking after the home or family
   - Retired
   - Other (please specify) ___________________________________________

5. What is your current level of knowledge of Mental Health First Aid issues?  
   None  Some  Adequate  Good  Complete

6. How skilful are you in managing mental health emergencies?  
   Not at all  Somewhat  Adequate  Good  Completely
7. How **confident** are you that you could manage a mental health emergency? Not at all  Somewhat  Adequate  Good  Completely

8. If you encountered a mental health emergency today what would be your level of **competence** to deal with it? Not at all  Somewhat  Adequate  Good  Completely

9. Has your **attitude** toward mental health issues changed since doing the training? Not at all  Somewhat  Completely

Please describe

10. Please rate your current knowledge about the following issues?

   Depression  Suicide/self harm  Anxiety  Psychosis  Drug and alcohol misuse

   None  Some  Adequate  Good  Complete

11. Were any elements of the course new to you? If yes, which elements?
12. Was the content relevant? Very Some parts Not really Not at all

13. Do you feel there was anything missing from the course that could/should be included?

14. What section of the course was most useful to you? Of no value useful very useful essential content
The ALGEE mnemonic
Depression
Self harm/ suicide
Anxiety
Psychosis
Bi polar disorder
Alcohol and other drugs

15. Do you feel prepared to be able to apply Mental Health First Aid to a variety of situations/ individuals?
Very prepared Somewhat prepared Need more preparation Not at all prepared
16. Are there any mental health situations where you would feel unable to apply Mental Health First Aid?

17. What would need to change to give you the confidence to apply the principles of the course more widely?

18. Please evaluate the following elements of the course structure and presentation

<table>
<thead>
<tr>
<th>needs attention</th>
<th>fair</th>
<th>good</th>
<th>great</th>
<th>perfect</th>
</tr>
</thead>
<tbody>
<tr>
<td>Content</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>Time frames/ session lengths/ times</td>
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<tr>
<td>Materials (manual and handouts)</td>
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<tr>
<td>Venue</td>
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<td>Videos</td>
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<td>Case studies</td>
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<td>“Lecture” style information provision</td>
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<tr>
<td>Discussions (whole group)</td>
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<tr>
<td>Discussions (small group)</td>
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<tr>
<td>Group dynamics (mix/contribution by members etc)</td>
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<tr>
<td>Quizzes</td>
<td></td>
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<tr>
<td>The presenter’s knowledge of the material</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>The presenters support of participants</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>Delivery style of the presenter</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Administration associated with the course</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
If you identified any element(s) that needs attention, what needs to be done?

19. Please comment on the relevance of the course aims and objectives and whether you feel these have been met.

20. If you have discussed the course with others can you briefly describe the exchange?

21. How would you generally rate your mental health?

<table>
<thead>
<tr>
<th></th>
<th>Very poor</th>
<th>Poor</th>
<th>Neither good nor poor</th>
<th>Good</th>
<th>Very good</th>
</tr>
</thead>
</table>

22. Has your approach to your own mental health changed since doing the course? Significant change Some change No change

How?
23. The following statements ask you to rate your ability to be able to control and master mental health issues.

- There is really no way I can solve some of the problems I have.
- Sometimes I feel I am being pushed around in life.
- I have little control over things that happen to me.
- I can do just about anything I really set my mind to.
- I often feel helpless in dealing with problems in life.
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24. The following statements ask you about how you feel things have been with you during the past 4 weeks. For each question, please give one answer that comes closest to the way you have been feeling.

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- Have you felt so down in the dumps that nothing could cheer you up?
- Have you felt calm and peaceful?
- Did you have a lot of energy?
- Have you felt downhearted and blue?
- Did you feel worn out?
- Have you been a happy person?
- Did you feel tired?
25. Below are some statements about feelings and thoughts. Please tick the boxes that best describes your experience of each over the last 2 weeks.

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<th>Often</th>
<th>All of the time</th>
</tr>
</thead>
</table>

I’ve been feeling optimistic about the future
I’ve been feeling useful
I’ve been feeling relaxed
I’ve been feeling interested in other people
I’ve had energy to spare
I’ve been dealing with problems well
I’ve been thinking clearly
I’ve been feeling good about myself
I’ve been feeling close to other people
I’ve been feeling confident
I’ve been able to make up my own mind about things
I’ve been feeling loved
I’ve been interested in new things
I’ve been feeling cheerful

Thank you very much for your assistance