

**Susie Wiet, MD**

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Pre-Conference

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# Health Resilience Stress Questionnaire (HRSQ): a community collaboration

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Child and Adolescent Psychiatry

Addiction Medicine

## Disclaimers

- no affiliations with any financially-interested company
- no known royalty, stock or financial interest in any industry-sponsored company
- no position in any financially-interested company

# Addiction is the AVOIDANCE of SELF

Susie Wiet, MD

## Traumatic Experiences

Neurobiological changes in HPA

Persistent impact of the *unthinkable and unspeakable*

Changed neuroreceptors,

neurochemistry, neuropathways,  
stress hormone system

Altered immune system, hormone  
systems, epigenetic changes,  
genetic predisposition

Dysfunction

Drugs

Disease

Death

**Cannabis** isn't a gateway drug.

**Alcohol** isn't a gateway drug.

**Nicotine** isn't a gateway drug.

**Caffeine** isn't a gateway drug.

**Trauma** is the gateway. **Childhood abuse** is the gateway. **Molestation** is the gateway. **Neglect** is the gateway.

Drug abuse, violent behavior, hyper sexuality and self harm are often **symptoms** (not the cause) of much bigger **issues**. And it almost always stems from a **childhood** filled with **trauma**, absent parents, and an abusive family.

But most people are too busy laughing at the **homeless** and **drug addicts** to realize your own **children** could be in their shoes in **15 years**.

**Communicate. Empathize. Rehabilitate.**

**Russel Brand**



# Tool to stratify risk

- traumatic experiences
- mitigated by resilience
- time efficient for primary care

...there is  
nothing  
like that...

...well, I have  
nothing else  
to do...

**October 2014 – Post-TRC Symposium**

# Health Resiliency Stress Questionnaire (HRSQ)

## Health-Resiliency-Stress Questionnaire (HRSQ)

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: Female Male Other  
Clinic or Provider: \_\_\_\_\_ Date: \_\_\_\_\_ Zip Code: \_\_\_\_\_

PART A

TOTAL HRSQ Risk-Value Score: \_\_\_\_\_

We each have our own ways that we view ourselves and cope with difficult times.

PLEASE CIRCLE THE ANSWER THAT SHOWS HOW TRUE EACH STATEMENT IS FOR YOU:	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1) I tend to bounce back quickly after hard times.	1	2	3	4	5
2) I have a hard time making it through stressful events.	5	4	3	2	1
3) It does not take me long to recover from a stressful event.	1	2	3	4	5
4) It is hard for me to snap back when something bad happens.	5	4	3	2	1
5) I usually come through difficult times with little trouble.	1	2	3	4	5
6) I tend to take a long time to get over set-backs in my life.	5	4	3	2	1

PLEASE CIRCLE THE ANSWER THAT SHOWS HOW TRUE EACH STATEMENT IS FOR YOU:	Not true at all	Rarely true	Sometimes true	Often true	True nearly all the time
1) I am hopeful about life in general.	1	2	3	4	5
2) I feel loved and supported.	1	2	3	4	5
3) I ask for help when I need it.	1	2	3	4	5
4) I have healthy, trusting relationship(s).	1	2	3	4	5
5) I choose healthy activities to decrease stress.	1	2	3	4	5
6) I can find positive solutions to life's problems.	1	2	3	4	5
7) I like who I am.	1	2	3	4	5
8) I feel optimistic about my future.	1	2	3	4	5

PART B



...let's capture consumer feedback and demographics. How did you know I have been looking for more to do?

Name: \_\_\_\_\_ Date: \_\_\_\_\_

PART D

PLEASE FILL IN AND CIRCLE THE ANSWERS THAT BEST DESCRIBE YOUR EXPERIENCES.

	Age first occurred	Yes	No
1) Did you live with anyone who was depressed, mentally ill, OR suicidal?		Yes	No
2) Did you live with anyone who was a problem drinker or alcoholic?		Yes	No
3) Did you live with anyone who used illegal drugs OR who abused prescription medications?		Yes	No
4) Did you live with anyone who served time or was sentenced to serve time in a prison, jail, OR other correctional facility?		Yes	No
5) Were your parents separated, divorced, one parent never involved OR lose a parent to death or abandonment (including foster or protector care placement)?		Yes	No
6) Did you often feel that you did not have enough to eat, had to wear dirty clothes, had no one to protect you?		Yes	No
7) Did you often feel that your parents were not able to care for you due to their own struggles?		Yes	No
8) Did you often feel that no one in your family loved you, thought that you were important or special?		Yes	No
9) Did you often feel that your family didn't look out for each other, feel close or support each other?		Yes	No
10) In your home, did you ever see or hear domestic abuse (such as physical assaults or verbal threats)?		Yes	No
11) Were you often afraid to go home?		Yes	No
12) In your home, were you ever physically hurt, injured OR threatened by anyone? (Do not include light spanking)		Yes	No
13) In your home, did anyone do any of the following: swear at you, insult you, humiliate you, OR put you down?		Yes	No
14) Did anyone ever touch you inappropriately (sexually) OR watch you bathe/undress that made you feel uncomfortable, embarrassed, or ashamed?		Yes	No
15) Did anyone ever make you watch sexual acts (including pornography) OR try to make you touch them sexually?		Yes	No
16) Did anyone ever coerce OR force you into having sex?		Yes	No
17) Were you often bullied at school (e.g. about your race, sexuality, immigration, intellect, etc.) AND felt unprotected?		Yes	No
18) Were you or your family ever homeless?		Yes	No
19) Were you often afraid to be outside because of violence in your community?		Yes	No
20) Other trauma or abuse (e.g. medical trauma, incarceration, etc.) please write-in if you feel comfortable doing so:		Yes	No

PART E

Do you ever wonder if any of the experiences listed above have affected your health today?	Yes	No
Do you want help to address any of the experiences listed above?	Yes	No
I feel it is appropriate for my care provider to know about my answers to these questions.	Yes	No
Were the questions on this form easy to understand? (If not, circle the questions that were not.)	Yes	No

PART F

Please circle the answer that fits best. (OPTIONAL)

Where did you complete this survey?	Medical office (indicate: Primary Care, Specialty, Emergency Room)	Therapist's office	Home	Other				
What is your race?	Alaskan Native	Asian	Black	Native American	Pacific Islander	White (non-Hispanic)	White (Hispanic)	Mixed race
What is your yearly household income?	< \$15,000	\$15,001-\$40,000	\$40,001-\$65,000	\$65,001-\$90,000	\$90,001+			
How many health care providers (both physical and mental health) do you have?	0	1-3	4-6	7-9	10+			
How many current health (physical and mental) related diagnoses do you have?	0	1-3	4-6	7-9	10+			
How many medications are you currently prescribed?	0	1-3	4-6	7-9	10+			
As an adult, how many times have you been hospitalized for your physical health? (DO NOT include uncomplicated child birth)	0	1-3	4-6	7-9	10+			
How many times have you been hospitalized for your mental health?	0	1-3	4-6	7-9	10+			
On average, how many times do you go to the emergency room for medical or psychiatric care in a usual year?	0	1-3	4-6	7-9	10+			

COMMENTS: \_\_\_\_\_

# Health Resiliency Stress Questionnaire (HRSQ)



**Getting the  
HRSQ  
into the  
hands of the  
providers**



## SUGGESTED INTRODUCTION OF THE HRSQ

"I am / We are really interested in helping you to be the healthiest you can be. Filling out this questionnaire may give both of us (you and me / clinic) helpful information about your health and wellness. Please fill this out as completely and as best you can."



# Health Resiliency Stress Questionnaire (HRSQ)

## Health-Resiliency-Stress Questionnaire (HRSQ)

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(www.TRcUtah.org)

### SUGGESTED INTRODUCTION to the HRSQ

"I am / We are really interested in helping you to be the healthiest you can be. Filling out this questionnaire may give both of us (you and me / clinic) helpful information about your health and wellness. Please fill this out as completely and as best you can."

### PURPOSE

The HRSQ® was designed to give primary care and mental health providers a quick overview of a person's ability to tolerate and cope with stress in relationship to their health. It is an efficient tool that is self-administered and takes only 2-5 minutes to complete. This questionnaire is intended to identify personal strengths and perceptions, risks due to early life adversity, and start the conversation to help empower patients/clients toward health and wellness.

In the future, we anticipate that the HRSQ® will be able to drive targeted intervention, based on a stratified risk-value. We envision recommendations will address both clinical monitoring (e.g. certain lab values, need for other risk assessments, screening for suicide and addiction, etc.) and patient/client empowerment toward health and wellness (e.g. educational and practical-application materials for building resiliency).

### BACKGROUND

The findings of the Adverse Childhood Experiences Study (ACES; Felitti, Anda, CDC and similar research) have clearly documented the link between increased ACEs and chronic physical and brain health issues. Resiliency traits can alter the experience of stress and adversity. In general, more resiliency is protective against adversity and, less resiliency magnifies the detrimental impact of adversity. These differences often lead to marked alterations in clinical presentation and long-term outcomes. Unrecognized (and unresolved) ACEs continue to impact the neurobiological and epigenetic alterations that influence long-term physical and brain health. Identifying and resolving the emotional impact of trauma has profound effects on building resiliency, which then mitigates (or dampens) the biological impact that adversity can create.

### HOW TO USE THE HRSQ

- 1) Identify and quantify resiliency skills (strengths), tolerance to stress, and expanded Adverse Childhood Experiences.
  - Identify self-reported (self-perception) resiliency traits
  - Identify self-reported (self-perception) mind-body resiliency traits
  - Identify current psychological distress
  - Quantify expanded ACE score
- 2) Provide [psycho-education](#) about the importance of resiliency skills.
- 3) Determine if additional assessment is needed for Post-Traumatic Stress Disorder (PTSD) from the validated measure, PC-PTSD (<http://www.ptsd.va.gov/professional/assessment/screens/pc-ptsd.asp>).
  - A score of 3 or more in Section 3 is a positive screen for PTSD and should be followed-up with a diagnostic assessment for PTSD.
  - A positive score should also be followed up with a PHQ-9 to screen for depression.
- 4) Page 1 can be used repetitively to track improvement.

5) This tool is free and will remain open-source, once validated.

### Participate in the validation process! e-HRSQ version or fax

PAPER VERSION	ELECTRONIC VERSION WEBSITE: <a href="https://trcutah.org/hrsq">https://trcutah.org/hrsq</a>
Fax completed and de-identified forms to: <ul style="list-style-type: none"><li>• 844-838-8100 (secured fax)</li></ul>	<ul style="list-style-type: none"><li>o Provider (or designated staff) will register on the provider-HRSQ website</li><li>o Give your patient/client a HIPPA-compliant code and the website (can be completed in the waiting room or at home) (e.g. MRN, unique identifier, etc.)</li><li>o Receive results by email (will include the code you provided)</li></ul>

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## Health-Resiliency-Stress Questionnaire (HRSQ): Scoring

### The HRSQ is NOT a validated instrument.

The following are *SUGGESTIONS* about how to start a conversation and related considerations about the health concerns associated with a patient/client who has a history of trauma, violence and other forms of abuse.

### SCORING

- add the three Risk-Values together to get the composite **HRSQ-RiskValue score (HRSQ-RV)**
- The HRSQ score determines the level of risk
- The level of risk determines a recommended level of care and/or other follow-up

PARTS A + B TOTAL POINTS	RISK TYPE	RISK VALUE
20-35	Extreme	4
36-50	High	3
51-70	Moderate	2
71-80	Mild	1
81-100	Normative	0

PART C TOTAL POINTS	RISK TYPE	RISK VALUE
3 - 4	High	2
2	Low	1
0 or 1	Normative	0

PART D TOTAL POINTS	RISK TYPE	RISK VALUE
> 6	Extreme	4
5 - 6	High	3
3 - 4	Moderate	2
1 - 2	Mild	1
0	Normative	0

HRSQ Score	Risk Category
7 - 10	Extreme
5 - 6	High
3 - 4	Moderate
1 - 2	Low

### SUGGESTED READING for OVERVIEW

Trauma-Informed Care: [Action Steps - Trauma-Informed Care \(LeitchL-2017\)](#)

Adverse Childhood Experiences Study (ACEs): [CDC and ACEs](#)

### SUGGESTED VIDEOS for OVERVIEW

ACEs Study Overview (3 min): [ACEs Vimeo \(AVAHealth.org\)](#)

Primary Care and ACEs (16 min): [Nadine Burke-Harris MD](#)

Neurobiology of Resilience: Changing Long-Term Effects of Trauma (45 min): <https://vimeo.com/222012334>



[illegible]

YES! of course!



# Health Resiliency Stress Questionnaire (HRSQ)

## Part A: Perception of Psychological Resilience

### PART A

We each have our own **ways to cope** in life and get through difficult times.

**PLEASE CIRCLE THE ANSWER THAT SHOWS HOW TRUE EACH STATEMENT IS FOR YOU:**

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5
5	4	3	2	1
1	2	3	4	5
5	4	3	2	1
1	2	3	4	5
5	4	3	2	1

**PLEASE CIRCLE THE ANSWER THAT SHOWS HOW TRUE EACH STATEMENT IS FOR YOU:**

Not true at all	Rarely true	Sometimes true	Often true	True nearly all the time
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5

internal validated  
measure

clinically based  
questions

# Health Resiliency Stress Questionnaire (HRSQ)

## Part A: Perception of Psychological Resilience

### Data Set 1 (n=276)

	Factor	
	1	2
I tend to bounce back quickly after hard times.		-.878
I have a hard time making it through stressful events.		-.681
It does not take me long to recover from a stressful event.		-.897
It is hard for me to snap back when something bad happens.		-.787
I usually come through difficult times with little trouble.		-.695
I tend to take a long time to get over set-backs in my life.		-.712
I stay hopeful, even during stressful times.	.503	-.342
I feel loved and supported.	.712	
I ask for help when I need it.	.629	
I have healthy, trusting relationship(s).	.627	
I choose healthy activities to decrease stress.	.547	
I can find positive solutions to life's problems.	.633	
I like who I am.	.863	
I feel optimistic about my future.	.827	

- Items sort out into 2 factors as anticipated
- Strong reliability (Cronbach's alpha = .93)
- One cross-loading item to be explored further

# Health Resiliency Stress Questionnaire (HRSQ)

## Part A: Perception of Psychological Resilience

### Data Set 2 (n=269)

Pattern Matrix<sup>a</sup>

	Factor	
	1	2
I tend to bounce back quickly after hard times.		.606
I have a hard time making it through stressful events.		.525
It does not take me long to recover from a stressful event.		.638
It is hard for me to snap back when something bad happens.		.850
I usually come through difficult times with little trouble.		.564
I tend to take a long time to get over set-backs in my life.		.751
I stay hopeful, even during stressful times.	.645	
I feel loved and supported.	.765	
I ask for help when I need it.		
I have healthy, trusting relationship(s).	.759	
	.560	
	.669	
	.734	
	.721	

- Items sort out into 2 factors as anticipated
- Strong reliability (Cronbach's alpha = .87)
- One item did not load @ >.3



 Social Research Institute  
College of Social Work  
THE UNIVERSITY OF UTAH

**susie wiet MD**  
HOLISTIC PSYCHIATRY  
youth, adult, trauma, addiction

# Health Resiliency Stress Questionnaire (HRSQ)

## Part B: Perception of Physical Resilience

### PART B

Some <b>physical health problems</b> can make it difficult to function or feel well.					
PLEASE CIRCLE THE ANSWER THAT FITS BEST:	Poor	Fair	Good	Very Good	Excellent
1) My overall physical health is...	1	2	3	4	5
2) My physical ability to do the tasks of everyday life is...	1	2	3	4	5
3) My ability to function when I have physical pain is...	1	2	3	4	5
4) My overall mental health is...	1	2	3	4	5
5) My ability to stay positive when I am not feeling well is...	1	2	3	4	5
6) My ability to function when I am feeling sad or blue is...	1	2	3	4	5
<div style="border: 1px solid black; height: 40px; width: 100%;"></div>					

# Health Resiliency Stress Questionnaire (HRSQ)

## Part B: Perception of Physical Resilience

### Data Set 1 (n=276)

Factor

1

My overall physical health is...	.641
My physical ability to do the tasks of everyday life is...	.640
My ability to function when I have physical pain is...	.608
My overall mental health is...	.842
My ability to stay positive when I am not feeling well is...	.836
My ability to function when I am feeling sad or blue is...	.825

- Items sort out into 1 factor-1 as anticipated
- Strong reliability (Cronbach's alpha = .88)



# Health Resiliency Stress Questionnaire (HRSQ)

## Part B: Perception of Physical Resilience Data Set 2 (n=269)

	Factor 1
My overall physical health is...	.569
My physical ability to do the tasks of everyday life is...	.569
My ability to function when I have physical pain is...	.515
My overall mental health is...	.630
My ability to stay positive when I am not feeling well is...	.692
My ability to function when I am feeling sad or blue is...	.588

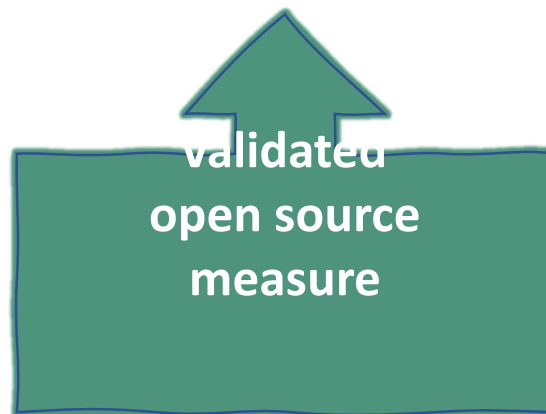
- Items sort out into 1 factor1 as anticipated
- Strong reliability (Cronbach's alpha = .89)

# Health Resiliency Stress Questionnaire (HRSQ)

## Part C: Post-Traumatic Stress Screen

### PART C

In your life, have you ever had any experience that was so frightening, horrible, or upsetting that, <i>in the past month</i> , you:			
1) Have had nightmares about it or thought about it when you did not want to?	Yes	No	Don't Know
2) Tried hard not to think about it or went out of your way to avoid situations that reminded you of it?	Yes	No	Don't Know
3) Were constantly on guard, watchful, or easily startled?	Yes	No	Don't Know
4) Felt numb or detached from others, activities or your surroundings?	Yes	No	Don't Know
<div></div>			



# Health Resiliency Stress Questionnaire (HRSQ)

## Part C: Post Traumatic Stress Screen

### Data Set 1 (n=276)

Factor

1

Had nightmares or thought about it when you did not want to?	.733
Tried hard not to think about it or went out of your way to avoid situations that reminded you of it?	.768
Were constantly on guard, watchful, or easily startled?	.615
Felt numb from your feelings or detached from others, activities or your surroundings?	.637

- Items sort out into 1 factor1 as anticipated
- Moderate reliability (Cronbach's alpha = .78)

# Health Resiliency Stress Questionnaire (HRSQ)

## Part C: Post Traumatic Stress Screen

### Data Set 2 (n=269)

	Factor 1
Had nightmares or thought about it when you did not want to?	
Tried hard not to think about it or went out of your way to avoid situations that reminded you of it?	.342
Were constantly on guard, watchful, or easily startled?	.367
Felt numb from your feelings or detached from others, activities or your surroundings?	.358

- Items sort out into 1 factor1 as anticipated
- Moderate reliability (Cronbach's alpha = .75)
- One item did not load @ >.3

# Health Resiliency Stress Questionnaire (HRSQ)

## Part D: Expanded ACES

### PART D

PLEASE FILL IN AND CIRCLE THE ANSWERS THAT BEST DESCRIBE YOUR EXPERIENCES.			
	Age first occurred	Yes	No
1) Did you live with anyone who was depressed, mentally ill, OR suicidal?		Yes	No
2) Did you live with anyone who was a problem drinker or alcoholic?		Yes	No
3) Did you live with anyone who used illegal drugs OR who abused prescription medications?		Yes	No
4) Did you live with anyone who served time or was sentenced to serve time in a prison, jail, OR other correctional facility?		Yes	No
5) Were your parents separated, divorced, one parent never involved OR lose a parent to death or abandonment (including foster or proctor care placement)?		Yes	No
6) Did you often feel that you did not have enough to eat, had to wear dirty clothes, had no one to protect you?		Yes	No
7) Did you often feel that your parents were not able to care for you due to their own struggles?		Yes	No
8) Did you often feel that no one in your family loved you, thought that you were important or special?		Yes	No
9) Did you often feel that your family didn't look out for each other, feel close or support each other		Yes	No
10) In your home, did you ever see or hear domestic abuse (such as physical assaults or verbal threats)?		Yes	No
11) Were you often afraid to go home?		Yes	No
12) In your home, were you ever physically hurt, injured OR threatened by anyone? (Do not include light spanking)		Yes	No
13) In your home, did anyone do any of the following: swear at you, insult you, humiliate you, OR put you down?		Yes	No
14) Did anyone ever touch you inappropriately (sexually) OR watch you bathe/undress that made you feel uncomfortable, embarrassed, or ashamed?		Yes	No
15) Did anyone ever make you watch sexual acts (including pornography) OR try to make you touch them sexually?		Yes	No
16) Did anyone ever coerce OR force you into having sex?		Yes	No
17) Were you often bullied at school (e.g. about your race, sexuality, immigration, intellect, <u>etc.</u> ) AND felt unprotected?		Yes	No
18) Were you or your family ever homeless?		Yes	No
19) Were you often afraid to be outside because of violence in your community?		Yes	No
20) Other trauma or abuse (e.g. medical trauma, incarceration, etc.) please write-in if you feel comfortable doing so:		Yes	No



# Health Resiliency Stress Questionnaire (HRSQ)

Part D: Expanded ACES  
Data Set 1 (n=276)

- Internal family system factors (mental health, substance abuse, justice-involved)
- Neglect (not enough to eat, dirty clothes)
- Non-sexual abuse (physical, emotional)
- Sexual abuse (touching, coercion, intercourse)

# Health Resiliency Stress Questionnaire (HRSQ)

Part D: Expanded ACES  
Data Set 2 (n=269)

- Internal family system factors (mental health, substance abuse, justice-involved)
  - Neglect (not enough to eat, dirty clothes)
  - Non-sexual abuse (physical, emotional)
  - Sexual abuse (touching, coercion, intercourse)
- 18 Items
  - Sort out into 1 factor 1 as anticipated
  - 1 item did not load @  $>.3$
  - Factor loadings ranged from .30 - .78
  - High reliability (Cronbach's alpha = .89)

# Health Resiliency Stress Questionnaire (HRSQ)

## Part E: Perception of Importance Data Sets 1, 2 (n=276, n=269)

### PART E

Do you ever wonder if any of the experiences listed above have affected your health today?	Yes	No
Do you want help to address any of the experiences listed above?	Yes	No
Were the questions on this form easy to understand? (If not, circle the questions that were not.)	Yes	No
I feel it is appropriate for my care provider to know about my answers to these questions.	Yes	No

- **About 85-87%** who have >1 “yes” in section D have wondered if their experiences have affected their health
- **About 64-67%** wanted help to address experiences
- **Nearly 100%** endorsed that the HRSQ was easy to understand
- **About 83%** believed it was appropriate for their care provider to have awareness about their answers to the questions on the HRSQ

# Health Resiliency Stress Questionnaire (HRSQ)

## Part F: Demographics

### PART F

<b>Please circle the answer that fits best. (OPTIONAL)</b>					
Where did you complete this survey?	Medical office (indicate: Primary Care    Specialty    Emergency Room) Therapist's office    Home    Other				
What is your race?	Alaskan Native    Asian    Black    Native American    Pacific Islander White (non-Hispanic)    White (Hispanic)    Mixed race				
What is your yearly household income?	< \$15,000	\$15,001-\$40,000	\$40,001-\$65,000	\$65,001-\$90,000	\$90,001+
How many health care providers (both physical and mental health) do you have?	0	1-3	4-6	7-9	10+
How many current health (physical and mental) related diagnoses do you have?	0	1-3	4-6	7-9	10+
How many medications are you currently prescribed?	0	1-3	4-6	7-9	10+
As an adult, how many times have you been hospitalized for your physical health? (DO NOT include uncomplicated child birth)	0	1-3	4-6	7-9	10+
How many times have you been hospitalized for your mental health?	0	1-3	4-6	7-9	10+
On average, how many times do you go to the emergency room for medical or psychiatric care in a usual year?	0	1-3	4-6	7-9	10+
COMMENTS:					

# Health Resiliency Stress Questionnaire (HRSQ)

## Exploratory Factor Analysis

### Set 1 (n=276)

- Strong reliability  
(Cronbach's alpha = .93)
- Strong reliability  
(Cronbach's alpha = .88)
- Moderate reliability  
(Cronbach's alpha = .78)

### Set 2 (n=269)

- Strong reliability  
(Cronbach's alpha = .89)
- Strong reliability  
(Cronbach's alpha = .87)
- Moderate reliability  
(Cronbach's alpha = .75)
- High reliability  
(Cronbach's alpha = .89)



**susie  
wiet MD**  
HOLISTIC PSYCHIATRY  
youth, adult, trauma, addiction



# Health Resiliency Stress Questionnaire (HRSQ)

## Electronic Version

THE REQUIREMENTS  
no identifying data is  
collected

full HIPAA compliance  
(pending)

...no, I don't  
have anything  
else to do,  
either...



### Health-Resiliency-Stress Questionnaire (HRSQ)

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Your answers are also important to better understand how stress and resiliency affect health.

Filling out this questionnaire may give you and your provider helpful information about your health and wellness. This form usually takes about 3 - 5 minutes to complete, but don't worry if you need some extra time. Your participation is very important to your health care provider.

If at any point you do not want to complete this questionnaire, simply exit-out and your answers will not be recorded. If you do complete this form, your information will automatically be sent to your health care provider's email. (You will be asked for that in a question below.) Your answers will be recorded in a large database. No information will be recorded about who you are or that can identify you.

Please fill this out as completely and as best as you can. Thank you for participating!

\* Required

Your doctor's or therapist's email address \*

Your answer


Code from your doctor or therapist \*

Your answer

### THE DESIGN


- 1) healthcare provider gives an internal code and provider's email address
- 2) patient enters code and the provider's email
- 3) completed forms are automatically emailed
- 4) pdf responses can be uploaded into EMR
- 5) healthcare provider guidance and suggestions
- 6) self-help handout to help build resilience and decrease emotional dysregulation

<https://trcutah.org/hrsq>



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The Health Resiliency Stress Questionnaire® (HRSQ) provides a quick overview of a person's ability to tolerate and cope with stress, which is known to significantly affect their health. This tool was designed for busy primary care health clinics and is also valued by therapists, treatment centers, medical specialists, naturopaths, and other providers. The HRSQ identifies and quantifies resiliency skills (strengths), tolerance to stress, expanded Adverse Childhood Experiences (ACEs) and other experiences of trauma and/or violence. We know that such toxic stresses are highly associated with pro-inflammatory illnesses, which makes the HRSQ a very important tool for any practice. The HRSQ is an efficient (4-5 min), self-administered tool that can be completed in a waiting room, exam room, or at home. It can be used repeatedly to monitor improvement, in response to healing from the effects of ACEs and other toxic experiences. The future goal is to assist providers with treatment recommendations by stratifying which person may need what treatment recommendations with regard to the effects of trauma. Providers can register for the e-HRSQ and will receive and automated email with full description of their patient/client's responses. The data entered will be pooled and used to study the utility of this instrument. The data set and email responses are HIPAA compliant: only the numerical answer-scores, race, gender, and zip code are recorded, and none are required (all optional). This is an IRB-approved study.



#### HRSQ-Provider Registration: Provider Registration-HRSQ

- Register on the [Provider Registration-HRSQ](#) database (30 seconds)
- Provide each patient/client with a code that is internal to the clinic (e.g., C1t#1 or Dr.S's#2, chocolate3, etc.).
- Provider receives automated results by email; then provider/staff match the clinic-generated code present on the upper left corner of the HRSQ result to the correct chart

PROVIDER REGISTRATION

#### HRSQ Versions:

- Paper version - [HRSQ \(without instructions\)](#)
- Paper version - [HRSQ \(with instructions\)](#)
- Electronic version - [e-HRSQ](#) (HIPAA compliant)

E-HRSQ

#### Scoring and Suggestions

Click here for details on how to score the pdf versions. This same information will be attached to the e-HRSQ result that is sent to the provider's designated email.

SCORING AND SUGGESTIONS

#### HRSQ informed consent (simplified) for patients/clients

Feel free to use our simplified patient/client [informed consent \(simplified\)](#) to introduce your client/patient to the HRSQ.

#### ACEsConnection Blog Article on HRSQ

If you would like to learn more about the history and development of the HRSQ, click the button below. You will see how this instrument is the result of a truly collaborative effort and without funding.

ACES CONNECTION ARTICLE: HRSQ

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[About the TRC](#) [Meeting Information](#) [Contact](#)



optional). This is an IRB-approved study.



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#### ACES CONNECTION ARTICLE: HRSQ

## PROVIDER REGISTRATION

### HRSQ Versions:

- Paper version - [HRSQ \(without instructions\)](#)
- Paper version - [HRSQ \(with instructions\)](#)
- Electronic version — [e-HRSQ](#) (HIPAA compliant)

# Health Resiliency Stress Questionnaire (HRSQ)

Search HRSQ

Current Folder

All

Unread

By Date

hqsresults@gmail.com

Health-Resiliency-Stress Question...

Tue 1/21

Two Weeks Ago

Health-Resiliency-Stress...

Health-Resiliency-Stress Question...

Patient Code: GG

1/13/2020

Three Weeks Ago

Health-Resiliency-Stress...

Health-Resiliency-Stress Question...

Patient Code: MS

1/5/2020

Last Month

Health-Resiliency-Stress...

Health-Resiliency-Stress Question...

Patient Code: BG

12/31/2019

Health-Resiliency-Stress

Health-Resiliency-Stress Questionnaire PatientID: RP

HQ

Health-Resiliency-Stress Questionnaire <hqsresults@gmail.com>

To swiet@susiewietmd.com

You forwarded this message on 1/24/2020 12:52 AM.

e-RP.pdf

74 KB

e-HRSQ Suggested Responses.pdf

342 KB

Patient Code: RP

Age: 24

Gender: Male

Zip Code: 84062

Unique ID:

TOTAL HRSQ Risk-Value Score: Moderate (3)

- The HRSQ team

Health-Resiliency-Stress Questionnaire (HRSQ)

Provider: swiet@susiewietmd.com

Patient Code: RP

Age: 24

Gender: Male

Date: 9/12/2019

Zip Code: 84062

TOTAL HRSQ Risk-Value Score: Moderate (3)

Part A

We each have our own ways to cope in life and get through difficult times.

PLEASE CHOOSE THE ANSWER THAT SHOWS HOW TRUE EACH STATEMENT IS FOR YOU:

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1) I tend to bounce back quickly after hard times.	-	-	3	-	-
2) I have a hard time making it through stressful events.	-	-	3	-	-
3) It does not take me long to recover from a stressful event.	-	-	3	-	-
4) It is hard for me to snap back when something bad happens.	-	-	-	2	-
5) I usually come through difficult times with little trouble.	-	2	-	-	-
6) I tend to take a long time to get over set-backs in my life.	-	-	3	-	-

PLEASE CHOOSE THE ANSWER THAT SHOWS HOW TRUE EACH STATEMENT IS FOR YOU:

	Not true at all	Rarely true	Sometimes true	Often true	True nearly all the time
1) I am hopeful about life in general.	-	-	3	-	-
2) I feel loved and supported.	-	-	-	-	5
3) I ask for help when I need it.	-	-	-	4	-
4) I have healthy, trusting relationship(s).	-	-	-	-	5
5) I choose healthy activities to decrease stress.	-	2	-	-	-
6) I can find positive solutions to life's problems.	-	-	-	4	-
7) I like who I am.	-	-	-	-	5
8) I feel optimistic about my future.	-	-	-	4	-

Part B

Some physical health problems can make it difficult to function or feel well.

PLEASE CHOOSE THE ANSWER THAT FITS BEST:

	Poor	Fair	Good	Very Good	Excellent
1) My overall physical health is...	-	-	3	-	-
2) My physical ability to do the tasks of everyday life is...	-	-	-	4	-
3) My ability to function when I have physical pain is...	-	-	-	4	-
4) My overall mental health is...	-	2	-	-	-
5) My ability to stay positive when I am not feeling well is...	-	-	-	4	-
6) My ability to function when I am feeling sad or blue is...	-	2	-	-	-

Total A+B: Moderate (67)

Part C

In your life, have you ever had any experience that was so frightening, horrible, or upsetting that, in the past month, you:

1) Have had nightmares about it or thought about it when you did not want to?	-	No	-
2) Tried hard not to think about it or went out of your way to avoid situations that reminded you of it?	-	No	-
3) Were constantly on guard, watchful, or easily startled?	-	No	-
4) Felt numb or detached from others, activities or your surroundings?	Yes	-	-

Total C: Normative (1)

Part D

1) Did you live with anyone who was severely depressed, mentally ill, OR suicidal?	-	No	
2) Did you live with anyone who was a problem drinker or alcoholic?	-	No	
3) Did you live with anyone who used illegal drugs OR who abused prescription medications?	-	No	
4) Did you live with anyone who served time or was sentenced to serve time in a prison, jail, OR other correctional facility?	-	No	
5) Were your parents separated, divorced, one parent never involved, OR lose a parent to death or abandonment, including foster care or proctor care placement?	-	No	
6) Did you often feel that you did not have enough to eat, had to wear dirty clothes, had no one to protect you?	-	-	
7) Did you often feel that your parents were not able to care for you due to their own struggles?	-	No	
8) Did you often feel that no one in your family loved you, thought that you were important or special?	-	No	
9) Did you often feel that your family didn't look out for each other, feel close or support each other?	-	No	
10) In your home, did you ever see or hear domestic abuse (such as physical assaults or verbal threats)?	-	No	
11) Were you often afraid to go home?	-	No	
12) In your home, were you ever physically hurt, injured OR threatened by anyone? (Do not include light spanking.)	-	No	
13) In your home, did anyone do any of the following: swear at you, insult you, humiliate you, OR put you down?	-	No	
14) Did anyone ever touch you inappropriately (sexually) OR watch you bathe/undress that made you feel uncomfortable, embarrassed, or ashamed?	-	No	
15) Did anyone ever make you watch sexual acts (including pornography) OR try to make you touch them sexually?	-	No	
16) Did anyone ever coerce OR force you into having sex?	-	No	
17) Were you often bullied (e.g. about your race, sexuality, immigrant status, intellect, or disability) AND felt unprotected?	6	Yes	-
18) Were you or your family ever homeless?	-	No	-
19) Were you often afraid to be outside because of violence in your community?	-	No	-
20) Have you experienced other trauma or abuse (e.g. medical trauma, incarceration, etc.)?	-	No	-

Total D: Mild (1)

Part E

1) Do you ever wonder if any of the experiences listed above have affected your health today?	Yes	-
2) Do you want help to address any of the experiences listed above?	Yes	-
3) I feel it is appropriate for my care provider to know about my answers to these questions.	Yes	-

Suggestions

Part C a score of 3 or more:

- Is a positive screen for PTSD and should be followed-up with additional assessment for the diagnosis
- Should be followed up with a PHQ-9

Part D a score of 1 or more:

- Recognize and validate
- Suggested statement: "It looks like you have had a/some (overwhelming) experiences across your life that should never have happened to you or anyone. These kinds of experiences can affect our physical and mental health, so I am grateful that you have shared this information. Learning and building resiliency skills can have a very big and positive impact on our health."
- Self-help [APA Help Center Resilience](#)

Part D a score of 4 or more:

- Very significant risk for adverse health outcomes

PROVIDERS

For more information about the effects of trauma on health: [Google ACEs](#) and [CDC CDC Aces Study](#)

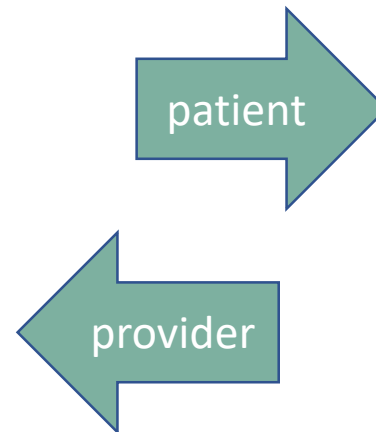
**susie wiet MD**  
HOLISTIC PSYCHIATRY  
youth, adult, trauma, addiction

**TRAUMA-RESILIENCY COLLABORATIVE**



# e-HRSQ

HRSQ Score	Risk Category	Pilot Study Suggestions for the Provider
		<p>The following are suggestions to help providers simply start a clinically relevant and emotionally validating conversation with a client/patient.</p> <p><b>These suggestions are NOT meant or intended to replace other pertinent clinical judgment, clinical monitoring, or clinical treatment.</b> These suggestions are aligned with known disease process or pathology that can arise from unresolved states of traumatic experiences, which has been well-documented in scientific literature.</p> <p>The provider may want to review these recommendations to make a good-fit treatment plans for clients/patients. Providers may add to or delete from this list, as they see fit for their practice.</p> <p>Any provider making use of this list, whether that includes the care provider or the patient/client, shall hold harmless the author and collaborators of the Health Resiliency Stress Questionnaire (HRSQ). This list was compiled in good faith for the betterment of health for humanity and to provide information about the deleterious health risks that are correlated with a history of adversity and how resiliency can mitigate such effects.</p>
7-10	Extreme	<p><b>SUGGESTED RESPONSE:</b>  <i>"I can see from your answers that you have really gone through a lot that no one should have to experience. And I also see that you are really struggling right now. Thank you for being so honest, which helps me to better understand you and things to consider about your health."</i></p> <p><b>UNIVERSAL SCREENING CONSIDERATIONS</b></p> <ul style="list-style-type: none"> <li>Screen for suicide <ul style="list-style-type: none"> <li>Safety plan agreement or referral to higher level of care, if unable to contract for safety</li> </ul> </li> <li>Screen for addiction and safety/reduction plan agreement PRN <ul style="list-style-type: none"> <li>AUDIT-C: <a href="https://www.integration.samhsa.gov/image/s/res/tool_auditc.pdf">https://www.integration.samhsa.gov/image/s/res/tool_auditc.pdf</a></li> <li>DAST-10: <a href="http://www.sbirdtoregon.org/wp-content/uploads/DAST-English-pdf.pdf">http://www.sbirdtoregon.org/wp-content/uploads/DAST-English-pdf.pdf</a></li> </ul> </li> </ul> <p><b>MEDICAL CONSIDERATIONS</b></p> <ul style="list-style-type: none"> <li>Office follow-up visit: within 1 week (for Extreme) and 1-2 weeks (for High), or sooner PRN if no access to mental health provider <ul style="list-style-type: none"> <li>if available: introduce patient to the primary integration team during visit or refer to treatment with a mental health provider or case management</li> <li>further assessment for PTSD and/or other mental health disorders</li> <li>further assessment for addiction <ul style="list-style-type: none"> <li>SBIRT: <a href="https://www.integration.samhsa.gov/clinical-practice/sbirt">https://www.integration.samhsa.gov/clinical-practice/sbirt</a></li> <li>consult with psychiatrist or APRN PRN</li> </ul> </li> </ul> </li> <li>Monitor closely for chronic health disorders due to pro-inflammatory states and as associated with the ACEs: <a href="#">CDC</a> and <a href="#">ACEs</a></li> <li>IF AVAILABLE: referral into intensive medical group visit program, if available (e.g. Complete Health Improvement Program; <a href="https://www.chiphealth.com/">https://www.chiphealth.com/</a>) OR group medical visit (health and wellness)</li> </ul> <p><b>RESILIENCY SKILL-BUILDING</b>  See Self-Help Suggestions and provide information to resources accordingly</p>
5-6	High	<p><b>SUGGESTED RESPONSE:</b>  <i>"I can see from your answers that you have gone through a lot that no one should have to experience. And, I also see that you are having some struggles right now. Thank you for being so honest, which helps me to better understand you and things to consider about your health."</i></p>
3-4	Moderate	<p><b>SUGGESTED RESPONSE:</b>  <i>"I can see from how you answered this that you have some really good ways to cope with stress. I also see that you are having some struggles now that may be related to things that happened to you that should never happen to anyone. Thank you for being so honest, which helps me to better understand you and things to consider about your health."</i></p>
1-2	Low	<p><b>SUGGESTED RESPONSE:</b>  <i>"I can see from how you answered this questionnaire that you have some really excellent ways to cope with stress and that you are not having too many struggles about your health. I do see that you've had some (minor, really significant) experiences in life that don't seem to cause grief for you now. Thank you for being upfront, which helps me to better understand you and things to consider about your health."</i></p>



The following are simply a place to start with resources for educating patients/clients about how they may be able to take a more active role in their health. These are NOT medical interventions and are NOT meant or intended to replace clinical judgment, clinical monitoring, or clinical treatment. Empowering the patient/client typically enhances commitment to health, wellness and recovery from any disease process or pathology, which has been well-documented in scientific literature. The provider may want to explore these links to make a good-fit recommendation to clients/patients. Providers may add to or delete from this list, as they see fit for their practice.

Any person using this list, whether that includes the referring provider or the person who received the referral, shall hold harmless the author and collaborators of the Health Resiliency Stress Questionnaire (HRSQ). This list was compiled in good faith for the betterment of health for humanity.

Education: why building resiliency is important and possible, even in the face of trauma

- o ACEs too high: [ACEsTooHigh Blog](#)
- o ACEs video (3 min, Academy on Violence and Abuse) [ACEs-Health Video](#)
- o American Academy of Pediatrics (Toxic Stress and Resiliency Project): [Toxic Stress-Resiliency \(Am Acad Peds\)](#)
- o CDC's website on ACEs: [ACEs-CDC](#)

Improving resiliency: helps to give structure about how to improve resiliency skills

- [StopStress.com](#)
- [Resiliency Skill-Set \(In the Face of Adversity\)](#)
- [Affirmations - Resiliency Skills \(Mayo Clinic\)](#)
- [Road to Resilience \(APA\)](#)

Positive affirmations: helps to reshape pathways in the brain associated with health and well-being

- o [Positive Affirmations List \(Life-Huffington Post\)](#)
- o [Positive Affirmations Resource \(Louise Hay\)](#)

Trauma-focused guided meditation: can help to shift thoughts into a more peaceful state

- o [Guided Meditation - Letting Go of Grief \(Bellaruth Naperstek\)](#)
- o [Guided Meditation - Healing Trauma Recovery](#)
- o [Guided Meditation - Mindful Peace](#)

Building mindfulness, health and wellness: skills that increase the mind-body connection are associated with improving overall health

- o [Positive Affirmations \(Louise Hay\)](#)
- o [Nutrition for Recovery \(Alliance for Addiction Solutions\)](#)
- o [Movement - Tai Chi and Qi Gong \(NCCIH-NIH\)](#)
- o [Sleep Meditation \(Renegade Pharmacist\)](#)

Emotional regulation: grounding skills are associated with improving overall health

- o [Grounding Techniques - self-help for PTSD \(Anxiety BC\)](#)
- o Start an emotions journal

Connection

- [Connection to others \(Net Family News\)](#)
- [Make Stress Your Friend \(TED Talk-Kelly McGonigal\)](#)

Deep restorative breathing

- o [Breathing for relaxation \(Yoga Journal\)](#)
- o [Breathing techniques \(J Shakeshaft\)](#)

Tapping:

- [Tapping graphic \(Therapeutic Grace\)](#)
- [Tapping demonstration \(The Tapping Solution\)](#)

Crisis hot-lines and links:

- o Suicide prevention (Utah): 1-800-273-8255 (also chat available): [Suicide Prevention Resources](#)
- o Suicide Prevention CHAT: [CHAT](#)
- o Domestic violence shelters: 1-800-799-7233 or [The National Domestic Violence Hotline](#)
- o UTAH "warm-lines" for mental health crises (UTAH ONLY): 801-587-3000

National Alliance for Mental Illness (NAMI) contact information

- o Local: 801-323-9900
- o Toll-free: 877-230-6264
- o UTAH Peer support groups by NAMI (for mental illness): [UTAH resources \(NAMI\)](#)

Addiction-Recovery meetings (e.g. 12-Step, Rational Recovery, Refuge Recovery, etc.)

- o Local: [Community Recovery Meetings Locator](#)
- o National (on-line meetings): [On-Line 12-Step](#)
- o UTAH ONLY: [Meeting Schedule at USARA](#)

# HRSQ-Y

## Health Resiliency Stress Questionnaire for Youth

### PART D

Please read each of the following questions.  
Please DO provide your total score.  
You DO NOT need to identify the specific question.

**MY TOTAL SCORE IS:**

- 1) Did you live with anyone who was depressed, mentally ill, OR suicidal?
- 2) Did you live with anyone who was a problem drinker or alcoholic?
- 3) Did you live with anyone who used illegal drugs OR who abused prescription medications?
- 4) Did you live with anyone who served time or was sentenced to serve time in a prison, jail, OR other correctional facility?
- 5) Were your parents separated, divorced, one parent never involved OR lose a parent to death or abandonment? (including foster or proctor care placement)
- 6) Did you often feel that you did not have enough to eat, had to wear dirty clothes, had no one to protect you?
- 7) Did you often feel that your parents were not able to care for you due to their own struggles?
- 8) Did you often feel that no one in your family loved you, thought that you were important or special?
- 9) Did you often feel that your family didn't look out for each other, feel close or support each other?
- 10) In your home, did you ever see or hear domestic abuse (such as physical assaults or verbal threats)?
- 11) Were you often afraid to go home?
- 12) In your home, were you ever physically hurt, injured OR threatened by anyone? (Do not include light spanking)
- 13) In your home, did anyone do any of the following: swear at you, insult you, humiliate you, OR put you down?
- 14) Did anyone ever touch you inappropriately (sexually) OR watch you bathe/undress that made you feel uncomfortable, embarrassed, or ashamed?
- 15) Did anyone ever make you watch sexual acts (including pornography) OR try to make you touch them sexually?
- 16) Did anyone ever coerce OR force you into having sex?
- 17) Were you often bullied (e.g. about your race, sexuality, immigration, intellect, etc.) at school AND felt unprotected?
- 18) Were you or your family ever homeless?
- 19) Were you often afraid to be outside because of violence in your community?
- 20) Other trauma or abuse (e.g. medical trauma, incarceration, etc.) please write-in if comfortable):

Please indicate if you want or need help with addressing any of the items above.

YES

NO

### HRSQ-Y: I need help card

Study Participant Identifier: \_\_\_\_\_

Please share if you need or want help with one or more of the items on the HRSQ in Part D.

Yes

No

*If you circle "Yes", your teacher will be notified and will refer you to your school or program counselor.*

*The researchers will not know who you are.*

**PLEASE FOLD THIS CARD OVER AND GIVE TO YOUR TEACHER.**



# Spanish

## Cuestionario sobre la resistencia a la salud y el estrés (HRSQ)

Nombre: \_\_\_\_\_ edad: \_\_\_\_\_ sexo: mujer macho otros  
Clínica o proveedor: \_\_\_\_\_ Fecha: \_\_\_\_\_ código postal: \_\_\_\_\_

PARTE A

puntuación de valor de riesgo de HRSQ total:

Cada uno de nosotros tiene nuestras propias

maneras de lidiar con los tiempos de dificultad y Ver Ourselves.

PLEASE Circle la respuesta que muestra la verdad que cada enunciado es para usted:	Fuertemente en desacuerdo	discrepar	Neutral	Acuerdo	Estamos firmemente de acuerdo
1) Tiendo a rebotar de vuelta rápidamente <del>undespues</del> de tiempos difíciles.	1	2	3	4	5
2) Me cuesta hacerlo a través de eventos estresantes.	5	4	3	2	1
3) No me toma mucho tiempo recuperarse de un evento estresante.	1	2	3	4	5
4) Es difícil para mí retroceder cuando algo malo sucede.	5	4	3	2	1
5) Usualmente vengo por momentos difíciles con pequeños problemas.	1	2	3	4	5
6) Tiendo a tomar mucho tiempo para superar los contratiempos en mi vida.	5	4	3	2	1

POR FAVOR CIRCULE LA RESPUESTA QUE MUESTRA CUÁN CIERTO ES PARA USTED CADA DECLARACIÓN:	No es verdad En absoluto	Raramente Verdad	Algunas veces Verdad	frecuentemente Verdad	Cierto casi Todo el rato
1) Tengo esperanzas sobre la vida en general.	1	2	3	4	5
2) Me siento amado y apoyado.	1	2	3	4	5
3) Pido ayuda cuando la necesito.	1	2	3	4	5
4) Tengo una relación sana y confiada(s).	1	2	3	4	5
5) Elijo actividades saludables para disminuir el estrés.	1	2	3	4	5
6) Puedo encontrar soluciones positivas a los problemas de la vida.	1	2	3	4	5
7) Me gusta quien soy.	1	2	3	4	5
8) Me siento optimista sobre mi futuro.	1	2	3	4	5

PARTE B

Cada uno de nosotros tiene nuestras propias formas de hacer que la salud y vernos a nosotros mismos.

POR FAVOR CIRCULE LA RESPUESTA QUE MEJOR SE ADAPTE:	Pobre	Justo	bien	Muy bien	Excelente
1) Mi salud física general es...	1	2	3	4	5
2) Mi capacidad física para hacer las tareas de la vida cotidiana es...	1	2	3	4	5
3) Mi capacidad para funcionar cuando tengo dolor físico es...	1	2	3	4	5
4) Mi salud mental general es...	1	2	3	4	5
5) Mi capacidad para mantenerse positivo cuando no me siento bien es...	1	2	3	4	5
6) Mi capacidad para funcionar cuando me siento triste o azul es...	1	2	3	4	5

# HRSQ-translated

and in Dutch!

# Health Resiliency Stress Questionnaire (HRSQ)

## Pilot Studies

- SAVE SomeBuddy Project: A School-Based Resiliency Skill Building Project  
**Anastasia Najarian, BA July 2019**
- Motivational Screening for Adverse Childhood Experiences and Resilience in Hospitalized Patients with Chronic Disease: A Practice Improvement Project to Increase Awareness and Determine the Need for Intervention  
**Tracy Crum, DNP May 2018**
- Improving Screening and Referral for Violence Against Women: Interpersonal Violence and Adverse Childhood Experiences  
**Emily S. Miller, DNP June 2017**

## Results

- HRSQ-Y was well-received by high-risk teens at (3) school locations
- *Need Help Cards* were successfully used and 4% met with on-site social workers
- Immigrant students successfully completed the paper version or oral translation of the HRSQ
- Extreme Risk group and 60% of the high-risk group had involvement in counseling
- Utilization of complex health services correlated positively with the HRSQ risk categories
- Higher risk category correlated with higher utilization of health services and number of medications
- Efficient, self-administered tool: 2-5 minutes to complete
- Highest completion rate was 82.22%
- Associated with iPad in the waiting room IF not completed at home
- No construct barriers were identified for the HRSQ (barriers were administrative)

high-risk OB study  
Netherlands;

discussing HRSQ/Y  
hospital wide  
Lisette Walbeehm-Hol, MD



# Thank you



alpinemedicalgroup



HOLISTIC PSYCHIATRY  
youth, adult, trauma, addiction

