1.pielikums ”Depresijas skrīninga pašaptaujas anketa”

Child: _____ Child age _____
Caregiver: _____ Date: _____

Moods and Feelings Questionnaire (7-18)

This form is about how you might have been feeling or acted recently.
Please check how much you have felt or acted this way in the past two weeks

	0 Not True	1 Sometimes	2 True
I felt miserable or unhappy.	☐	☐	☐
I didn't enjoy anything at all.	☐	☐	☐
I felt so tired I just sat around and did nothing.	☐	☐	☐
I was very restless.	☐	☐	☐
I felt I was no good anymore.	☐	☐	☐
I cried a lot.	☐	☐	☐
I found it hard to think properly or concentrate.	☐	☐	☐
I hated myself.	☐	☐	☐
I felt I was a bad person.	☐	☐	☐
I felt lonely.	☐	☐	☐
I thought nobody really loved me.	☐	☐	☐
I thought I would never be as good as other kids.	☐	☐	☐
I did everything wrong.	☐	☐	☐

Score: _____

Angold, A., Costello, E. J., Messer, S. C., Pickles, A., Winder, F., & Silver, D. (1995)