

Debre Markos University

Psychological Distress Survey Questionnaire Template

Date: DD ____ MM ____ YYYY ____

Dear Participant,

My name is _____, and I am conducting this survey on behalf of Debre Markos University. I would like to request you to participate in an important research study titled " Psychological Distress Due to War and Associated Factors among University Students in a Conflict-Affected Region of Ethiopia: A Bayesian Logistic Analysis" This study aims to assess the prevalence and identify predictors of psychological injury among students from conflict-affected areas of northern Ethiopia. Before I start to ask you any questions, we want to assure you that your participation is entirely voluntary and I will ask you to state your consent on this form. Be assured that any information that you will provide will be kept strictly confidential and no personal identifying information will be linked to your answers in any reports or publications. If you have any questions or concerns about this study, please feel free to ask before you decide whether or not to participate. It is important that you understand all aspects of the study before giving your consent. If you do not fully understand the information or feel uncomfortable, do not declare your consent on this form. If you agree to participate, please indicate your consent by signing below. Thank you.

Are you voluntary to participate in this study? ☐ Yes, I consent to participate

☐ No, I do not consent to participate

Instructions: Please answer the following questions by selecting the tick (✓) sign for the following questions below from the given alternatives.

Part I: Socio demographic Characteristics of Students

1.1 Gender of the respondent: ☐ Male ☐ Female

1.2 Year of Study (Bachelor's Program): ☐ First year ☐ Second year ☐ Third year ☐ Fourth year

1.3 Respondents' Region of Origin: ☐ Amhara ☐ Oromia ☐ Benishangul ☐ SNNPR
☐ Addis Ababa ☐ Sidama ☐ other (specify): _____

Part II: Conflict-related and Socioeconomic Experiences

2.1 Have you ever lived in an area where armed conflict (war zone) was taking place?

☐ Yes ☐ No

2.2 Did you participate directly in frontline conflict activities?

☐ Yes ☐ No

2.3 Did you participate in back-line (indirect) activities (like logistics, support) during the conflict?

☐ Yes ☐ No

2.4 During the conflict period, did you help/support your family?

☐ Yes

☐ No

2.5 Are you engaged in self-employment during the conflict period?

☐ Yes

☐ No

2.6 During the conflict period, did you lose a family member?

☐ Yes

☐ No

2.7 During the conflict period, did your family lose property (such as house, or other property)?

☐ Yes

☐ No

2.8 During the conflict period, did you experience a physical injury?

☐ Yes

☐ No

2.9 Have you ever experienced sexual assault during the conflict period?

☐ Yes

☐ No

2.10 During the conflict period, did you experience any psychological distress?

☐ Yes

☐ No