2010 Healthy Youth Survey–Form NS

We are asking you to take part in this survey about issues facing students in communities in Washington. The questions in this survey ask for your opinions about yourself, your friends, your school, and your neighborhood. School, community, county, and state officials will use the information from this survey in planning future programs to help youth.

Your answers to these questions are *anonymous*. This means that no one will know how you answered or which answer sheet is yours. **Do not write your name anywhere on the answer sheet.** If you do not want to take this survey now, tell your teacher and you will be given an alternative activity.

Some of the questions are personal, such as asking about your relationships and whether you get in fights or use drugs. Some students may find some of the questions uncomfortable or upsetting. You will be given a list of numbers to call if you want to talk to someone about the survey or feelings it brings up.

The survey is completely voluntary. You don't have to do this survey. You may skip any question you do not wish to answer or stop at any time. It will not affect your grades. Other students have said this survey is interesting and they enjoyed filling it out. We hope you will too. If you have any questions about this survey you may ask your teacher before beginning.

Please take a minute to read the instructions below before starting the survey.

Instructions

1. This is not a test, so there are no right or wrong answers.

2. The questions should be answered by marking one of the answer spaces on the answer sheet. If you don't find an answer that fits exactly, use one that comes closest. If any question does not apply to you, or you are not sure of what it means, just leave it blank.

3. Your answers will be read by a computer. Please follow these instructions carefully.

   - Use a pencil only.
   - Make heavy marks inside the bubbles.
   - Erase cleanly any answer you wish to change.
   - Make no other markings or comments on the answer pages.

This kind of mark will work:
Correct Mark

These kinds of marks will NOT work:
Incorrect Marks

1. How old are you?
   a. 12 or younger
   b. 13
   c. 14
   d. 15
   e. 16
   f. 17
   g. 18
   h. 19 or older

2. Are you:
   a. Female
   b. Male

3. What grade are you in?
   a. 7th
   b. 8th
   c. 9th
   d. 10th
   e. 11th
   f. 12th
   g. Ungraded or other

4. How do you describe yourself? (**Select one or more responses**.)
   a. American Indian or Alaskan Native
   b. Asian or Asian American
   c. Black or African-American
   d. Hispanic or Latino/Latina
   e. Native Hawaiian or other Pacific Islander
   f. White or Caucasian
   g. Other

The next questions ask about personal safety.

5. **When you rode a bicycle** during the past 12 months, how often did you wear a helmet?
   a. I did not ride a bicycle in the past 12 months
   b. Never wore a helmet
   c. Rarely wore a helmet
   d. Sometimes wore a helmet
   e. Most of the time wore a helmet
   f. Always wore a helmet

6. How often do you wear a life vest when you're in a **small** boat like a canoe, raft, or small motorboat?
   a. Never go boating in a small boat
   b. Never
   c. Less than half the time
   d. About half the time
   e. More than half the time
   f. Always

7. How often do you wear a seat belt when **riding in** a car driven by someone else?
   a. Never
   b. Rarely
   c. Sometimes
   d. Most of the time
   e. Always

8. During the past 30 days, how many times did you **ride** in a car or other vehicle **driven by someone who had been drinking alcohol**?
   a. 0 times
   b. 1 time
   c. 2 – 3 times
   d. 4 – 5 times
   e. 6 or more times

9. During the past 30 days, how many times did you **drive** a car or other vehicle **when you had been drinking alcohol**?
   a. 0 times
   b. 1 time
   c. 2 – 3 times
   d. 4 – 5 times
   e. 6 or more times

The next questions ask about fighting and other issues related to safety.

10. During the past 30 days, on how many days did you:

    A. Carry a weapon such as a gun, knife, or club for self-protection or because you thought you might need it in a fight? (Do NOT include carrying a weapon for hunting, fishing, or camping.)
       a. 0 days
       b. 1 day
       c. 2 – 3 days
       d. 4 – 5 days
       e. 6 or more days

    B. Carry a weapon such as a gun, knife, or club **on school property**?
       a. 0 days
       b. 1 – 5 days
       c. 6 or more days

11. During the past 12 months, how many times were you:

A. In a physical fight?
   a. 0 times
   b. 1 time
   c. 2 – 3 times
   d. 4 – 5 times
   e. 6 or more times

B. In a physical fight **on school property**?
   a. 0 times
   b. 1 time
   c. 2 – 3 times
   d. 4 – 5 times
   e. 6 or more times

12. I feel safe at my school.
   a. Definitely NOT true
   b. Mostly not true
   c. Mostly true
   d. Definitely true

13. A student is being bullied when another student, or group of students, say or do nasty or unpleasant things to him or her. It is also bullying when a student is teased repeatedly in a way he or she doesn't like. It is NOT bullying when two students of about the same strength argue or fight.

   In the last 30 days, how often have you been bullied?
   a. I have not been bullied
   b. Once
   c. 2 – 3 times
   d. About once a week
   e. Several times a week

14. During the past 12 months, have you been a member of a gang?
   a. No
   b. Yes

The next questions ask about sad feelings and attempted suicide. Sometimes people feel so depressed about the future that they may consider attempting suicide, that is, taking some action to end their own life.

15. During the past 12 months, did you ever feel so sad or hopeless almost every day for **two weeks or more in a row** that you stopped doing some usual activities?
   a. Yes
   b. No

16. During the past 12 months, did you ever **seriously** consider attempting suicide?
   a. Yes
   b. No

17. During the past 12 months, did you make a plan about how you would attempt suicide?
   a. Yes
   b. No

18. During the past 12 months, how many times did you actually attempt suicide?
   a. 0 times
   b. 1 time
   c. 2 – 3 times
   d. 4 – 5 times
   e. 6 or more times

19. When you feel sad or hopeless, are there adults you can turn to for help?
   a. I never feel sad or hopeless
   b. Yes
   c. No
   d. Not sure

The next questions ask about tobacco use.

20. During the past 30 days, on how many days did you smoke cigarettes?
   a. None
   b. 1 – 2 days
   c. 3 – 5 days
   d. 6 – 9 days
   e. 10 – 29 days
   f. All 30 days

21. During the past 30 days, on how many days did you use chewing tobacco, snuff, or dip?
   a. None
   b. 1 – 2 days
   c. 3 – 5 days
   d. 6 – 9 days
   e. 10 – 29 days
   f. All 30 days

22. During the past 30 days, on how many days did you smoke cigars, cigarillos, or little cigars?
   a. 0 days
   b. 1 – 2 days
   c. 3 – 9 days
   d. 10 – 29 days
   e. All 30 days

23. Not including menthols - during the past 30 days, on how many days did you **use tobacco** that tastes like **candy, fruit or alcohol** (tobacco includes: little cigars, bidis, cloves, chew, spit, snus, hookah)?
   a. 0 days
   b. 1 – 2 days
   c. 3 – 9 days
   d. 10 – 29 days
   e. All 30 days

24. If one of your best friends offered you a cigarette, would you smoke it?
   a. Definitely no
   b. Probably no
   c. Probably yes
   d. Definitely yes

25. Do you think that you will smoke a cigarette anytime in the next year?
   a. Definitely no
   b. Probably no
   c. Probably yes
   d. Definitely yes

26. Do you think young people risk harming themselves if they smoke 1 – 5 cigarettes a day?
   a. Definitely no
   b. Probably no
   c. Probably yes
   d. Definitely yes

27. During the past year in school, how many times did you get information in classes about the dangers of tobacco use?
   a. None
   b. Once
   c. 2 or 3 times
   d. 4 or more times

28. Do you think that rules about not using tobacco at your school are usually enforced?
   a. Definitely no
   b. Probably no
   c. Probably yes
   d. Definitely yes

29. During the past 30 days, on how many days did you use tobacco (cigarettes, cigars, or chew/dip) **on school property**?
   a. 0 days
   b. 1 – 2 days
   c. 3 – 9 days
   d. 10 – 29 days
   e. All 30 days

The next section asks about your experience with alcohol and other drugs. Remember no one but you will know how you answered.

30. During the past 30 days, on how many days did you:

   A. Drink a glass, can, or bottle of alcohol (beer, wine, wine coolers, hard liquor)?
      a. None
      b. 1 – 2 days
      c. 3 – 5 days
      d. 6 – 9 days
      e. 10 or more days

   B. Use marijuana or hashish (grass, hash, pot)?
      a. None
      b. 1 – 2 days
      c. 3 – 5 days
      d. 6 – 9 days
      e. 10 or more days

   C. Not counting alcohol, tobacco, or marijuana, use another illegal drug?
      a. None
      b. 1 – 2 days
      c. 3 – 5 days
      d. 6 – 9 days
      e. 10 or more days

   D. Use derbisol (wagon wheels, hope)?
      a. None
      b. 1 – 2 days
      c. 3 – 5 days
      d. 6 – 9 days
      e. 10 or more days

   E. Use a pain killer TO GET HIGH, like Vicodin, OxyContin (sometimes called Oxy or OC) or Percocet (sometimes called Percs)?
      a. None
      b. 1 – 2 days
      c. 3 – 5 days
      d. 6 – 9 days
      e. 10 or more days

31. How old were you the first time you had more than a sip or two of beer, wine, or hard liquor (for example, vodka, whiskey, or gin)?
    a. Never have
    b. 10 or younger
    c. 11
    d. 12
    e. 13
    f. 14
    g. 15
    h. 16
    i. 17 or older

32. Think back over the last 2 weeks. How many times have you had five or more drinks in a row? (A drink is a glass of wine, a bottle of beer, a shot glass of liquor, or a mixed drink.)
    a. None
    b. Once
    c. Twice
    d. 3 – 5 times
    e. 6 – 9 times
    f. 10 times or more

33. How old were you the first time you smoked marijuana?
    a. Never have
    b. 10 or younger
    c. 11
    d. 12
    e. 13
    f. 14
    g. 15
    h. 16
    i. 17 or older

34. How many times in the past year (12 months) have you been drunk or high at school?
    a. Never
    b. 1 – 2 times
    c. 3 – 5 times
    d. 6 – 9 times
    e. 10 or more times

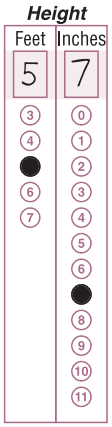
35. Do you think that rules about not drinking alcohol and using drugs at your school are usually enforced?
    a. Definitely no
    b. Probably no
    c. Probably yes
    d. Definitely yes

The next questions ask about body height and weight.

36. How tall are you without your shoes on?

Directions: Write your height in the shaded blank boxes and fill in the matching circle below each number on your answer sheet.

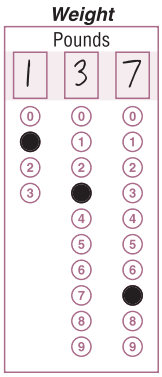
Example



37. How much do you weigh without your shoes on?

Directions: Write your weight in the shaded blank boxes and fill in the matching circle below each number on your answer sheet.

Example



38. Which of the following are you trying to do about your weight?
    a. I am **not trying to do anything** about my weight
    b. **Lose** weight
    c. **Gain** weight
    d. **Stay** the same weight

The next questions are about your eating habits.

39. During the past 7 days, how many times did you drink regular soda, sports drinks (such as Gatorade) and other flavored sweetened drinks (such as Snapple or SoBe) **at school** (including any after-school and weekend activities)? Do not include diet drinks.
    a. 0 times
    b. 1 – 3 times
    c. 4 – 6 times
    d. 7 – 9 times
    e. 10 times or more

40. During the past 7 days, where did you **usually** get the soda or other sweetened drinks that you drank at school? (Choose only one answer.)
    a. I did not drink sodas, sports drinks, or other flavored drinks at school
    b. I brought them from home
    c. I got them from friends
    d. I bought them at school
    e. Other

41. How often do you eat dinner with your family?
    a. Never
    b. Rarely
    c. Sometimes
    d. Most of the time
    e. Always

42. Did you eat breakfast today?
    a. Yes
    b. No

43. How many sodas or pops did you drink yesterday? (Do **not** count diet soda.)
    a. None
    b. 1
    c. 2
    d. 3
    e. 4 or more

The next questions ask about physical activity.

44. In the past 7 days, on how many days were you physically active for a total of **at least 60 minutes per day**? (Add up all the time you spent in any kind of physical activity that increases your heart rate or makes you breathe hard some of the time.)
    a. 0 days
    b. 1 day
    c. 2 days
    d. 3 days
    e. 4 days
    f. 5 days
    g. 6 days
    h. 7 days

45. On an average school day, how many hours do you watch TV, including videos and DVD?
    a. I do not watch TV on an average school day
    b. Less than 1 hour per day
    c. 1 hour per day
    d. 2 hours per day
    e. 3 hours per day
    f. 4 hours per day
    g. 5 or more hours per day

46. On an average school day, how many hours do you play video games or use a computer for fun? (Include activities such as Nintendo, Game Boy, Play Station, computer games, and the Internet.)
    a. I do not play video games or use a computer for fun on an average school day
    b. Less than 1 hour per day
    c. 1 hour per day
    d. 2 hours per day
    e. 3 hours per day
    f. 4 hours per day
    g. 5 or more hours per day

47. In an average week when you are in school, on how many days do you go to physical education (PE) classes?
    a. 0 days
    b. 1 day
    c. 2 days
    d. 3 days
    e. 4 days
    f. 5 days

48. During an average PE class, how many minutes do you spend actually exercising or playing sports?
    a. I do not take PE
    b. Less than 10 minutes
    c. 10 – 20 minutes
    d. 21 – 30 minutes
    e. 31 – 40 minutes
    f. 41 – 50 minutes
    g. 51 – 60 minutes
    h. More than 60 minutes

49. On average how many days a week do you walk to or from school?
    a. Never
    b. 1 – 2
    c. 3 – 4
    d. I walk every day

50. On average how many days a week do you ride a bicycle to or from school?
    a. Never
    b. 1 – 2
    c. 3 – 4
    d. I bike every day

The next questions ask about your health and health care.

51. Has a doctor or nurse ever told you that you have asthma?
    a. Yes
    b. No
    c. Not sure

52. Do you still have asthma?
    a. I have never had asthma
    b. Yes
    c. No
    d. Not sure

53. When was the last time you saw a doctor or health care provider for a check-up or physical exam when you were not sick or injured?
    a. During the past 12 months
    b. Between 12 and 24 months ago
    c. More than 24 months ago
    d. Never
    e. Not sure

54. When was the last time you saw a dentist for a check-up, exam, teeth cleaning, or other dental work?
    a. During the past 12 months
    b. Between 12 and 24 months ago
    c. More than 24 months ago
    d. Never
    e. Not sure

55. During the past 12 months, how many days did you miss some school because of a toothache (do not include toothache due to braces or an injury)?
    a. None
    b. 1 – 4 days
    c. 5 days or more
    d. Not sure

56. How likely would you be to seek help if you were feeling depressed or suicidal?
    a. I never feel depressed or suicidal
    b. Very likely
    c. Somewhat likely
    d. Somewhat unlikely
    e. Very unlikely

57. How likely would you be to seek help for a friend who you thought might be depressed or suicidal?
    a. Very likely
    b. Somewhat likely
    c. Somewhat unlikely
    d. Very unlikely

The next questions ask about things that others may say or do to you.

58. In the past 30 days, how often were you bullied, harassed, or intimidated at school or on your way to or from school:

    A. Because of your race, ethnicity, or national origin or what someone thought it was?
       a. 0 times
       b. 1 time
       c. 2 – 3 times
       d. About once a week
       e. Several times a week or more

    B. Because of your religion or what someone thought it was?
       a. 0 times
       b. 1 time
       c. 2 – 3 times
       d. About once a week
       e. Several times a week or more

C. Because someone thought you were gay, lesbian, or bisexual (whether you are or are not)?
   a. 0 times
   b. 1 time
   c. 2 – 3 times
   d. About once a week
   e. Several times a week or more

D. Because of your gender (being male or female)? This includes sexual jokes, gestures, or comments that make you feel uncomfortable.
   a. 0 times
   b. 1 time
   c. 2 – 3 times
   d. About once a week
   e. Several times a week or more

E. Because you have a health problem or physical or mental disability, or someone thought you did?
   a. 0 times
   b. 1 time
   c. 2 – 3 times
   d. About once a week
   e. Several times a week or more

F. Because of any other reason?
   a. 0 times
   b. 1 time
   c. 2 – 3 times
   d. About once a week
   e. Several times a week or more

59. **In the past 30 days, has someone used the computer or a cell phone to bully, harass or intimidate you?**
   a. Yes
   b. No
   c. I'm not sure

The next questions ask about school, your home, and your community.

60. **What language is usually spoken at home?**
   a. English
   b. Spanish
   c. Russian
   d. Ukrainian
   e. Vietnamese
   f. Chinese
   g. Korean
   h. Japanese
   i. Other

61. **Which of the following best describes where you currently live? (Choose only one answer.)**
   a. My parent's or guardian's home
   b. With friends or other families (because lost home or cannot afford housing)
   c. On your own (because lost home or cannot afford housing)
   d. Motel or hotel
   e. Shelter (shelter or emergency/transitional housing)
   f. Car, park, campground, or other public place
   g. Waiting to be placed in foster care
   h. Another place

62. **Has your parent or guardian served in the military (Army, Navy, Air Force, Marines, Coast Guard, National Guard, and Reserves)?**
   a. No
   b. Yes
   c. Not Sure

63. **Has your military parent or guardian been sent to Iraq, Afghanistan, or other combat zone?**
   a. I do not have a parent or guardian who has ever served in the military
   b. No
   c. Yes
   d. Not Sure

64. **How far did your mother get in school?**
   a. Did not finish high school
   b. Graduated from high school or GED
   c. Had some college or technical training after high school
   d. Graduated from a 4-year college
   e. Earned an advanced graduate degree
   f. Don't know
   g. Does not apply

65. **How far did your father get in school?**
   a. Did not finish high school
   b. Graduated from high school or GED
   c. Had some college or technical training after high school
   d. Graduated from a 4-year college
   e. Earned an advanced graduate degree
   f. Don't know
   g. Does not apply

66. **Putting them all together, what were your grades like last year?**
   a. Mostly As
   b. Mostly Bs
   c. Mostly Cs
   d. Mostly Ds
   e. Mostly Fs

67. Last year in school, were you taught about AIDS or HIV infection?
    a. Yes
    b. No
    c. I'm not sure

68. Last year in school, did you hear or see information at your school about the warning signs of suicide and how to get help for yourself or a friend?
    a. Yes
    b. No
    c. Not sure

69. Think back over the past year in school. How often did you enjoy being in school?
    a. Never
    b. Seldom
    c. Sometimes
    d. Often
    e. Almost always

70. Does your school provide a counselor, intervention specialist, or other school staff member for students to discuss problems with alcohol, tobacco, or other drugs?
    a. No
    b. Yes
    c. I'm not sure

71. During the past 30 days, on how many days did you not go to school because you felt you would be unsafe at school or on your way to and from school?
    a. 0 days
    b. 1 day
    c. 2 or 3 days
    d. 4 or 5 days
    e. 6 or more days

72. During the average week, on how many days do you participate in supervised after-school activities either at school or away from school? Include activities such as sports, art, music, dance, drama, or community service, religious, or club activities.
    a. 0 days
    b. 1 – 2 days
    c. 3 or more days

73. How many hours per week are you currently working for pay, NOT counting chores around your home, yard work, or babysitting?
    a. None - not currently working
    b. 10 hours a week or less
    c. 11 – 30 hours per week
    d. 31 – 40 hours per week
    e. More than 40 hours per week

74. NOT counting chores around your home, while working for pay, have you ever been injured badly enough that you needed to go to a nurse, doctor, or hospital?
    a. Never worked for pay
    b. Have worked, but never been injured enough to see a nurse or doctor
    c. Yes, I was injured at work and needed to go to a nurse, doctor or hospital

75. How would you describe the place that you currently work? (Pick your main job. Choose one.)
    a. Not currently working
    b. Restaurant (including fast food)
    c. Store (including grocery, convenience, clothing, music, or gift stores, gas station)
    d. Hospital, clinic, or nursing home
    e. Construction
    f. Farm or dairy
    g. Factory
    h. Packing house or food processing
    i. Babysitting
    j. Yard work
    k. Other

76. On an average school night how many hours do you sleep?
    a. 5 hours or less
    b. About 6 hours
    c. About 7 hours
    d. About 8 hours
    e. 9 hours or more

77. On an average weekend night (Friday and Saturday night) how many hours do you sleep?
    a. 5 hours or less
    b. About 6 hours
    c. About 7 hours
    d. About 8 hours
    e. 9 hours or more

The following are some statements that you might make about yourself.

With 0 being "not at all true," and 10 being "completely true," please fill in the number on the scale that best describes how closely the statement applies to you.

78. I feel I am getting along with my parents or guardians.
    a. 0 not at all true
    b. 1
    c. 2
    d. 3
    e. 4
    f. 5
    g. 6
    h. 7
    i. 8
    j. 9
    k. 10 completely true

79. I look forward to the future.
    a. 0 not at all true
    b. 1
    c. 2
    d. 3
    e. 4
    f. 5
    g. 6
    h. 7
    i. 8
    j. 9
    k. 10 completely true

80. I feel good about myself.
    a. 0 not at all true
    b. 1
    c. 2
    d. 3
    e. 4
    f. 5
    g. 6
    h. 7
    i. 8
    j. 9
    k. 10 completely true

81. I am satisfied with the way my life is now.
    a. 0 not at all true
    b. 1
    c. 2
    d. 3
    e. 4
    f. 5
    g. 6
    h. 7
    i. 8
    j. 9
    k. 10 completely true

82. I feel alone in my life.
    a. 0 not at all true
    b. 1
    c. 2
    d. 3
    e. 4
    f. 5
    g. 6
    h. 7
    i. 8
    j. 9
    k. 10 completely true

83. Compared with others my age, my life is
    a. 0 much worse than others
    b. 1
    c. 2
    d. 3
    e. 4
    f. 5
    g. 6
    h. 7
    i. 8
    j. 9
    k. 10 much better than others

The next questions ask about tobacco.

84. Do you think the smoke from other people's cigarettes (secondhand smoke) is harmful to you?
    a. Definitely no
    b. Probably no
    c. Probably yes
    d. Definitely yes

85. Some tobacco companies make t-shirts, lighters, or other items that people can buy or receive for free. During the past 12 months, did you buy or receive anything that has a tobacco company name or picture on it?
    a. No
    b. Yes

86. During the past 7 days, on how many days were you in the same room with someone who was smoking cigarettes?
    a. 0 days
    b. 1 – 2 days
    c. 3 – 4 days
    d. 5 – 6 days
    e. 7 days

87. During the past 7 days, on how many days did you ride in a car with someone who was smoking cigarettes?
    a. 0 days
    b. 1 – 2 days
    c. 3 – 4 days
    d. 5 – 6 days
    e. 7 days

88. Which of these best describes the rules about smoking inside the house where you live? Smoking is. . .
    a. Never allowed inside my house
    b. Allowed only at some times or in some places
    c. Always allowed inside my house

89. During the past 30 days, have you seen or heard commercials on TV, the Internet, or on the radio about the dangers of cigarette smoking?
    a. Not in the past 30 days
    b. 1 – 3 times in the past 30 days
    c. 1 – 3 times per week
    d. Daily or almost daily
    e. More than once a day

90. Does anyone who lives with you now smoke cigarettes?
    a. No
    b. Yes

91. How wrong do you think it is for someone your age to smoke cigarettes?
    a. Very wrong
    b. Wrong
    c. A little bit wrong
    d. Not at all wrong

92. Has either of your parents (or guardians) discussed the dangers of tobacco use with you?
    a. Mother (or female guardian) only
    b. Father (or male guardian) only
    c. Both
    d. Neither

93. During the past 30 days, how did you **usually** get your own tobacco? (Choose only one answer.)
    a. I did not use tobacco during the past 30 days
    b. I bought it in a store such as a convenience store, supermarket, discount store or gas station
    c. I bought it from a vending machine
    d. I gave someone else money to buy them for me
    e. I borrowed (or bummed) them from someone else
    f. A person 18 years old or older gave them to me
    g. I took them from a store or a family member
    h. I got them some other way

The next question asks about diabetes.

94. Have you ever been told by a doctor or other health professional that you have diabetes?
    a. No
    b. Yes
    c. I don't know

95. How honest were you in filling out this survey?
    a. I was very honest
    b. I was honest pretty much of the time
    c. I was honest some of the time
    d. I was honest once in a while
    e. I was not honest at all

The next question asks about meals.

96. How often in the past 12 months did you or your family have to cut meal size or skip meals because there wasn't enough money for food?
    a. Almost every month
    b. Some months but not every month
    c. Only 1 – 2 months
    d. Did not have to skip or cut the size of meals

The next questions ask about things others may say or do to you.

97. During the past 12 months, did your boyfriend or girlfriend ever limit your activities, threaten you, or make you feel unsafe in any other way?
    a. No
    b. Yes

98. During the past 12 months, have you had any injuries such as bruises, cuts, black eyes, or broken bones as a result of being hurt by a boyfriend or girlfriend?
    a. No
    b. Yes

99. Have you ever been physically abused by an adult?
    a. No
    b. Yes

100. Not counting TV, movies, video games, and sporting events, have you seen an adult hit, slap, punch, shove, kick, or otherwise physically hurt another adult more than one time?
    a. No
    b. Yes

101. Last year in school, were you taught about abstinence (not having sex) to prevent sexually transmitted diseases (STDs) and pregnancy?
    a. Yes
    b. No
    c. I don't know

102. Last year in school, were you taught about ways other than abstinence to prevent sexually transmitted diseases (STDs) and pregnancy?
    a. Yes
    b. No
    c. I don't know

The next questions ask about asthma.

103. During the past 12 months, how many times did you visit the emergency room or urgent care center because of your asthma?
    a. I do not have asthma
    b. None
    c. 1 to 3 times
    d. 4 to 9 times
    e. 10 to 12 times
    f. More than 12 times
    g. I don't know

104. RESCUE inhalers are asthma medicine that you breathe in through your mouth that gives you QUICK relief from asthma symptoms. They are PRESCRIBED by a doctor. During the past 4 weeks, about how many days per week on average did you use a rescue inhaler?
    a. Never
    b. 1 or 2 days per week
    c. 3 to 6 days per week
    d. Every day, once per day
    e. Every day, twice or more per day
    f. I'm not sure

105. During the past 12 months, how many days did you stay out of school or stay away from your usual activities because of your asthma?
    a. I do not have asthma
    b. None
    c. 1 to 2 days
    d. 3 to 4 days
    e. 5 to 10 days
    f. More than 10 days
    g. I don't know

106. Symptoms of asthma include coughing, wheezing, shortness of breath, and chest tightness when you don't have a cold or the flu. During the past 4 weeks, about how many days per week on average did you have any symptoms of asthma?
    a. Never
    b. 1 or 2 days per week
    c. 3 to 6 days per week
    d. Every day, but not throughout the day
    e. Every day, throughout the day
    f. I'm not sure

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Healthy Youth Survey NS 2010 Answer Sheet

1. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ Ⓗ
2. Ⓐ Ⓑ
3. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ
4. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ

Personal Safety

5. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ
6. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ
7. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
8. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
9. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ

Fighting & Safety

10. A. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
    B. Ⓐ Ⓑ Ⓒ
11. A. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
    B. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
12. Ⓐ Ⓑ Ⓒ Ⓓ
13. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
14. Ⓐ Ⓑ

Depression

15. Ⓐ Ⓑ
16. Ⓐ Ⓑ
17. Ⓐ Ⓑ
18. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
19. Ⓐ Ⓑ Ⓒ Ⓓ

Tobacco

20. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ
21. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ
22. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
23. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
24. Ⓐ Ⓑ Ⓒ Ⓓ
25. Ⓐ Ⓑ Ⓒ Ⓓ
26. Ⓐ Ⓑ Ⓒ Ⓓ
27. Ⓐ Ⓑ Ⓒ Ⓓ
28. Ⓐ Ⓑ Ⓒ Ⓓ
29. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ

Alcohol & Other Drugs

30. A. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
    B. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
    C. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
    D. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
    E. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
31. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ Ⓗ Ⓘ
32. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ
33. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ Ⓗ Ⓘ
34. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
35. Ⓐ Ⓑ Ⓒ Ⓓ

Body Height & Weight

36. ***Height***

Feet	Inches
3	0
4	1
5	2
6	3
7	4
	5
	6
	7
	8
	9
	10
	11

37. ***Weight***

Pounds		
0	0	0
1	1	1
2	2	2
3	3	3
	4	4
	5	5
	6	6
	7	7
	8	8
	9	9

38. Ⓐ Ⓑ Ⓒ Ⓓ

Eating Habits

39. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
40. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
41. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
42. Ⓐ Ⓑ
43. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ

Physical Activity

44. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ Ⓗ
45. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ
46. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ
47. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ
48. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ Ⓗ
49. Ⓐ Ⓑ Ⓒ Ⓓ
50. Ⓐ Ⓑ Ⓒ Ⓓ

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Health & Health Care

51. Ⓐ Ⓑ Ⓒ
52. Ⓐ Ⓑ Ⓒ Ⓓ
53. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
54. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
55. Ⓐ Ⓑ Ⓒ Ⓓ
56. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
57. Ⓐ Ⓑ Ⓒ Ⓓ

Things People Say or Do

58. A. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
    B. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
    C. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
    D. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
    E. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
    F. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
59. Ⓐ Ⓑ Ⓒ

School, Home , Community

60. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ Ⓗ Ⓘ
61. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ Ⓗ
62. Ⓐ Ⓑ Ⓒ
63. Ⓐ Ⓑ Ⓒ Ⓓ
64. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ
65. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ
66. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
67. Ⓐ Ⓑ Ⓒ
68. Ⓐ Ⓑ Ⓒ
69. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
70. Ⓐ Ⓑ Ⓒ
71. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
72. Ⓐ Ⓑ Ⓒ
73. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
74. Ⓐ Ⓑ Ⓒ
75. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ Ⓗ Ⓘ Ⓙ Ⓚ
76. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
77. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ

Statements About You

78. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ Ⓗ Ⓘ Ⓙ Ⓚ
79. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ Ⓗ Ⓘ Ⓙ Ⓚ
80. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ Ⓗ Ⓘ Ⓙ Ⓚ
81. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ Ⓗ Ⓘ Ⓙ Ⓚ
82. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ Ⓗ Ⓘ Ⓙ Ⓚ
83. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ Ⓗ Ⓘ Ⓙ Ⓚ

Tobacco

84. Ⓐ Ⓑ Ⓒ Ⓓ
85. Ⓐ Ⓑ
86. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
87. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
88. Ⓐ Ⓑ Ⓒ
89. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ
90. Ⓐ Ⓑ
91. Ⓐ Ⓑ Ⓒ Ⓓ
92. Ⓐ Ⓑ Ⓒ Ⓓ
93. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ Ⓗ

Diabetes

94. Ⓐ Ⓑ Ⓒ
95. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ

Meals

96. Ⓐ Ⓑ Ⓒ Ⓓ

Things People Say or Do

97. Ⓐ Ⓑ
98. Ⓐ Ⓑ
99. Ⓐ Ⓑ
100. Ⓐ Ⓑ
101. Ⓐ Ⓑ Ⓒ
102. Ⓐ Ⓑ Ⓒ

Asthma

103. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ
104. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ
105. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ Ⓖ
106. Ⓐ Ⓑ Ⓒ Ⓓ Ⓔ Ⓕ

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