

2013 Hawai‘i Middle School Youth Risk Behavior Survey

This survey is about health behavior. It has been developed so you can tell us what you do that may affect your health. The information you give will be used to improve health education for young people like yourself.

DO NOT write your name on this survey. The answers you give will be kept private. No one will know what you write. Answer the questions based on what you really do.

Completing the survey is voluntary. Whether or not you answer the questions will not affect your grade in this class. If you are not comfortable answering a question, just leave it blank.

The questions that ask about your background will be used only to describe the types of students completing this survey. The information will not be used to find out your name. No names will ever be reported.

Make sure to read every question. Fill in the ovals completely. When you are finished, follow the instructions of the person giving you the survey.

Thank you very much for your help.

Directions

- Use a #2 pencil only.
- Make dark marks.
- Fill in a response like this: A B ● D.
- If you change your answer, erase your old answer completely.

1. How old are you?
 - A. 10 years old or younger
 - B. 11 years old
 - C. 12 years old
 - D. 13 years old
 - E. 14 years old
 - F. 15 years old
 - G. 16 years old or older
2. What is your sex?
 - A. Female
 - B. Male
3. In what grade are you?
 - A. 6th grade
 - B. 7th grade
 - C. 8th grade
 - D. Ungraded or other grade
4. Are you Hispanic or Latino?
 - A. Yes
 - B. No
5. What is your race? (**Select one or more responses.**)
 - A. American Indian or Alaska Native
 - B. Black or African American
 - C. Filipino
 - D. Japanese
 - E. Native Hawaiian/Part Hawaiian
 - F. Other Asian
 - G. Other Pacific Islander
 - H. White

6. Which one of these groups **best** describes you? (Select only **one** response.)
 - A. Hispanic or Latino
 - B. Native Hawaiian
 - C. Filipino
 - D. Japanese
 - E. White
 - F. Other Pacific Islander
 - G. Some other race or ethnicity
 - H. I do not describe myself as only one race or ethnicity
7. During the past 12 months, how would you describe your grades in school?
 - A. Mostly A's
 - B. Mostly B's
 - C. Mostly C's
 - D. Mostly D's
 - E. Mostly F's
 - F. None of these grades
 - G. Not sure

The next 4 questions ask about safety.

8. **When you ride a bicycle**, how often do you wear a helmet?
 - A. I do not ride a bicycle
 - B. Never wear a helmet
 - C. Rarely wear a helmet
 - D. Sometimes wear a helmet
 - E. Most of the time wear a helmet
 - F. Always wear a helmet
9. **When you rollerblade or ride a skateboard**, how often do you wear a helmet?
 - A. I do not rollerblade or ride a skateboard
 - B. Never wear a helmet
 - C. Rarely wear a helmet
 - D. Sometimes wear a helmet
 - E. Most of the time wear a helmet
 - F. Always wear a helmet
10. Have you ever ridden in a car driven by someone who had been drinking alcohol?
 - A. Yes
 - B. No
 - C. Not sure

11. Have you ever ridden in a car driven by someone who had been high on marijuana or other illegal drugs?
A. Yes
B. No
C. Not sure

The next 10 questions ask about violence-related behaviors.

12. During the past 12 months, did you carry a **weapon** such as a gun, knife, or club?
A. Yes
B. No
13. During the past 12 months, did you carry a **weapon** such as a gun, knife, or club **on school property**?
A. Yes
B. No
14. During the past 12 months, did you ever **not** go to school because you felt you would be unsafe at school or on your way to or from school?
A. Yes
B. No
15. During the past 12 months, did someone ever threaten or injure you with a weapon such as a gun, knife, or club **on school property**?
A. Yes
B. No
16. During the past 12 months, have you been in a physical fight?
A. Yes
B. No
17. During the past 12 months, were you ever in a physical fight **on school property**?
A. Yes
B. No
18. During the past 12 months, were you in a physical fight in which you were hurt and had to be treated by a doctor or nurse?
A. Yes
B. No

19. Have you ever been physically forced to have sexual intercourse when you did not want to?
A. Yes
B. No
20. During the past 12 months, did someone you were dating or going out with physically hurt you on purpose? (Count such things as being hit, slammed into something, or injured with an object or weapon.)
A. I did not date or go out with anyone during the past 12 months
B. Yes
C. No
21. During the past 12 months, did someone you were dating or going out with force you to do sexual things that you did not want to do? (Count such things as kissing, touching, or being physically forced to have sexual intercourse.)
A. I did not date or go out with anyone during the past 12 months
B. Yes
C. No

The next 4 questions ask about bullying. Bullying is when 1 or more students tease, threaten, spread rumors about, hit, shove, or hurt another student over and over again. It is not bullying when 2 students of about the same strength or power argue or fight or tease each other in a friendly way.

22. Have you ever been bullied **on school property**?
A. Yes
B. No
23. Have you ever been **electronically** bullied? (Count being bullied through e-mail, chat rooms, instant messaging, websites, or texting.)
A. Yes
B. No
24. Have you ever threatened someone else **electronically**? (Count being bullied through e-mail, chat rooms, instant messaging, websites, online gaming, or texting)
A. Yes
B. No

25. Do you agree or disagree that harassment and bullying by other students is a problem at your school?
- A. Strongly agree
 - B. Agree
 - C. Not sure
 - D. Disagree
 - E. Strongly disagree

The next question asks about hurting yourself on purpose.

26. Have you ever done something to purposely hurt yourself without wanting to die, such as cutting or burning yourself on purpose?
- A. Yes
 - B. No

The next 5 questions ask about attempted suicide. Sometimes people feel so depressed about the future that they may consider attempting suicide or killing themselves.

27. Have you ever felt 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
28. Have you ever **seriously** thought about killing yourself?
- A. Yes
 - B. No
29. Have you ever made a **plan** about how you would kill yourself?
- A. Yes
 - B. No
30. Have you ever **tried** to kill yourself?
- A. Yes
 - B. No
31. **If you tried to kill yourself** did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?
- A. I did not try to kill myself
 - B. Yes
 - C. No

The next 3 questions ask about tobacco use.

32. Have you ever tried cigarette smoking, even one or two puffs?
- A. Yes
 - B. No
33. How old were you when you smoked a whole cigarette for the first time?
- A. I have never smoked a whole cigarette
 - B. 8 years old or younger
 - C. 9 years old
 - D. 10 years old
 - E. 11 years old
 - F. 12 years old
 - G. 13 years old or older
34. During the past 30 days, on how many days did you smoke cigarettes?
- A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days

The next 7 questions ask about drinking alcohol. This includes drinking beer, wine, wine coolers, and liquor such as rum, gin, vodka, or whiskey. For these questions, drinking alcohol does not include drinking a few sips of wine for religious purposes.

35. Have you ever had a drink of alcohol, other than a few sips?
- A. Yes
 - B. No
36. How old were you when you had your first drink of alcohol other than a few sips?
- A. I have never had a drink of alcohol other than a few sips
 - B. 8 years old or younger
 - C. 9 years old
 - D. 10 years old
 - E. 11 years old
 - F. 12 years old
 - G. 13 years old or older

37. During the past 30 days, did you have at least one drink of alcohol?
 A. Yes
 B. No
38. During the past 30 days, did you have at least one drink of alcohol **on school property**?
 A. Yes
 B. No
39. During the past 30 days, on how many days did you have 5 or more drinks of alcohol in a row, that is, within a couple of hours?
 A. 0 days
 B. 1 day
 C. 2 days
 D. 3 to 5 days
 E. 6 to 9 days
 F. 10 to 19 days
 G. 20 or more days
40. During the past 12 months, how many of your 4 best friends have tried beer, wine, or hard liquor (such as rum, gin, vodka, or whiskey) when their parents did not know about it?
 A. 0
 B. 1
 C. 2
 D. 3
 E. 4
 F. Not sure
41. How wrong do your parents feel it would be for you to drink beer, wine, or hard liquor (such as rum, gin, vodka, or whiskey) regularly?
 A. Very wrong
 B. Wrong
 C. A little bit wrong
 D. Not at all wrong
 E. Not sure

The next 3 questions ask about marijuana use. Marijuana also is called grass, pot, or *pakalōlō*.

42. How old were you when you tried marijuana for the first time?
 A. I have never tried marijuana
 B. 8 years old or younger
 C. 9 years old
 D. 10 years old
 E. 11 years old
 F. 12 years old
 G. 13 years old or older
43. During the past 30 days, how many times did you use marijuana?
 A. 0 times
 B. 1 or 2 times
 C. 3 to 9 times
 D. 10 to 19 times
 E. 20 to 39 times
 F. 40 or more times
44. During the past 30 days, did you use marijuana **on school property**?
 A. Yes
 B. No

The next 8 questions ask about other drugs.

45. Have you ever used **any** form of cocaine, including powder, crack, or freebase?
 A. Yes
 B. No
46. Have you ever sniffed glue, breathed the contents of spray cans, or inhaled any paints or sprays to get high?
 A. Yes
 B. No
47. During the past 30 days, how many times did you sniff glue, breathe the contents of aerosol spray cans, or inhale any paints or sprays to get high?
 A. 0 times
 B. 1 or 2 times
 C. 3 to 9 times
 D. 10 to 19 times
 E. 20 to 39 times
 F. 40 or more times

48. Have you ever used **methamphetamines** (also called speed, crystal, crank, or ice)?
 A. Yes
 B. No
49. Have you ever used **ecstasy** (also called MDMA)?
 A. Yes
 B. No
50. Have you ever taken a **prescription drug** (such as OxyContin, Percocet, Vicodin, codeine, Adderall, Ritalin, or Xanax) without a doctor's prescription?
 A. Yes
 B. No
51. During the past 12 months, has anyone offered, sold, or given you an illegal drug **on school property**?
 A. Yes
 B. No
52. During the past 12 months, have you attended school under the influence of alcohol or other illegal drugs, such as marijuana or cocaine?
 A. Yes
 B. No

The next 6 questions ask about alcohol and drugs.

53. Do you ever use alcohol or drugs to relax, feel better about yourself, or fit in?
 A. Yes
 B. No
54. Do you ever use alcohol or drugs while you are alone?
 A. Yes
 B. No
55. Do you ever forget things you did while using alcohol or drugs?
 A. Yes
 B. No
56. Do your family or friends ever tell you that you should cut down on your drinking or drug use?
 A. Yes
 B. No

57. Have you ever gotten into trouble while you were using alcohol or drugs?
 A. Yes
 B. No
58. If you thought that your alcohol or drug use was causing you problems, would you seek help from a counselor or doctor?
 A. Yes
 B. No

The next 4 questions ask about sexual intercourse.

59. Have you ever had sexual intercourse?
 A. Yes
 B. No
60. How old were you when you had sexual intercourse for the first time?
 A. I have never had sexual intercourse
 B. 8 years old or younger
 C. 9 years old
 D. 10 years old
 E. 11 years old
 F. 12 years old
 G. 13 years old or older
61. With how many people have you ever had sexual intercourse?
 A. I have never had sexual intercourse
 B. 1 person
 C. 2 people
 D. 3 people
 E. 4 people
 F. 5 people
 G. 6 or more people
62. The **last time** you had sexual intercourse, did you or your partner use a condom?
 A. I have never had sexual intercourse
 B. Yes
 C. No

The next 5 questions ask about body weight.

63. How do **you** describe your weight?
 A. Very underweight
 B. Slightly underweight
 C. About the right weight
 D. Slightly overweight
 E. Very overweight

64. Which of the following are you trying to do about your weight?
- A. **Lose** weight
 - B. **Gain** weight
 - C. **Stay** the same weight
 - D. I am **not trying to do anything** about my weight
65. Have you ever **gone without eating for 24 hours or more** (also called fasting) to lose weight or to keep from gaining weight?
- A. Yes
 - B. No
66. Have you ever **taken any diet pills, powders, or liquids** without a doctor's advice to lose weight or to keep from gaining weight? (Do **not** count meal replacement products such as Slim Fast.)
- A. Yes
 - B. No
67. Have you ever **vomited or taken laxatives** to lose weight or to keep from gaining weight?
- A. Yes
 - B. No

The next question asks about eating breakfast.

68. During the past 7 days, on how many days did you eat **breakfast**?
- A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days
 - G. 6 days
 - H. 7 days

The next 8 questions ask about physical activity.

69. During 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 increased your heart rate and made 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
70. On how many of the past 7 days did you do exercises to **strengthen or tone your muscles**, such as push-ups, sit-ups, or weight lifting?
- A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days
 - G. 6 days
 - H. 7 days
71. On an average school day, how many hours do you watch TV?
- 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

72. On an average school day, how many hours do you play video or computer games or use a computer for something that is not school work? (Count time spent on things such as Xbox, PlayStation, an iPod, an iPad or other tablet, a smartphone, YouTube, Facebook or other social networking tools, and the Internet.)
- A. I do not play video or computer games or use a computer for something that is not school work
 - 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
73. 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
74. In an average week when you are in school, on how many days do you walk or ride your bike **to school** when weather allows you to do so?
- A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days
75. In an average week when you are in school, on how many days do you walk or ride your bike **home from school** when weather allows you to do so?
- A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days

76. During the past 12 months, on how many sports teams did you play? (Count any teams run by your school or community groups.)
- A. 0 teams
 - B. 1 team
 - C. 2 teams
 - D. 3 or more teams

The next 11 questions ask about other health-related topics.

77. Have you ever been taught about AIDS or HIV infection in school?
- A. Yes
 - B. No
 - C. Not sure
78. Has a doctor or nurse ever told you that you have asthma?
- A. Yes
 - B. No
 - C. Not sure
79. Do you still have asthma?
- A. I have never had asthma
 - B. Yes
 - C. No
 - D. Not sure
80. When was the last time you saw a doctor or nurse 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
81. 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

82. During the past 12 months, did you have a toothache?
A. Yes
B. No
C. Not sure
83. On an average school night, how many hours of sleep do you get?
A. 4 or less hours
B. 5 hours
C. 6 hours
D. 7 hours
E. 8 hours
F. 9 hours
G. 10 or more hours
84. Is there at least one teacher or other adult in this school that you can talk to if you have a problem?
A. Yes
B. No
C. Not sure

85. Outside of school, is there an adult you can talk to about things that are important to you?
A. Yes
B. No
C. Not sure
86. During the past 12 months, have you talked with at least one of your parents or another adult in your family about the dangers of tobacco, alcohol, or drug use?
A. Yes
B. No
C. Not sure
87. How likely is it that you will complete high school?
A. Definitely will not
B. Probably will not
C. Probably will
D. Definitely will
E. Not sure

**This is the end of the survey.
Thank you very much for your help.**