



Kenmore-Tonawanda 2018 Youth Risk Behavior Survey - High School

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.

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 and your answers are not linked to your log-in.

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

1. What school do you attend?

2. How old are you?

- 12 years old or younger
- 13 years old
- 14 years old
- 15 years old
- 16 years old
- 17 years old
- 18 years old or older

3. What is your sex?

- Female
- Male
- Another

4. In what grade are you?

- 9th grade
- 10th grade
- 11th grade
- 12th grade
- Ungraded or other grade

5. Are you Hispanic or Latino?

- Yes
- No

6. What is your race? (Select one or more responses).

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White

7. Would you say that in general your health is _____.

- Excellent
- Very Good
- Good
- Fair
- Poor
- Don't know / Not sure

8. During the past 12 months, how would you describe your grades in school?

- Mostly A's
- Mostly B's
- Mostly C's
- Mostly D's
- Mostly F's
- Not sure



The next 5 questions ask about safety.

9. When you rode a bicycle during the past 12 months, how often did you wear a helmet?

- I did not ride a bicycle in the past 12 months
- Never wore a helmet
- Rarely wore a helmet
- Sometimes wore a helmet
- Most of the time wore a helmet
- Always wore a helmet

10. How often do you wear a seat belt when riding in a car driven by someone else?

- Never
- Rarely
- Sometimes
- Most of the time
- Always

11. 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?

- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

12. During the past 30 days, how many times did you drive a car or other vehicle when you had been drinking alcohol?

- I did not drive a car or other vehicle during the past 30 days
- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

13. During the past 30 days, on how many days did you text or e-mail while driving a car or other vehicle?

- I did not drive a car or other vehicle during the past 30 days
- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days



The next 12 questions ask about violence-related behaviors.

14. During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club?

- 0 days
- 1 day
- 2 or 3 days
- 4 or 5 days
- 6 or more days

15. During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club on school property?

- 0 days
- 1 day
- 2 or 3 days
- 4 or 5 days
- 6 or more days

16. During the past 12 months, on how many days did you carry a gun? (Do not count the days when you carried a gun only for hunting or for a sport, such as target shooting.)

- 0 days
- 1 day
- 2 or 3 days
- 4 or 5 days
- 6 or more days

17. 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 or from school?

- 0 days
- 1 day
- 2 or 3 days
- 4 or 5 days
- 6 or more days

18. During the past 12 months, how many times has someone threatened or injured you with a weapon such as a gun, knife, or club on school property?

- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or 7 times
- 8 or 9 times
- 10 or 11 times
- 12 or more times

19. During the past 12 months, how many times were you in a physical fight?

- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or 7 times
- 8 or 9 times
- 10 or 11 times
- 12 or more times

20. During the past 12 months, how many times were you in a physical fight in which you were injured and had to be treated by a doctor or nurse?

- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

21. During the past 12 months, how many times were you in a physical fight on school property?

- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or 7 times
- 8 or 9 times
- 10 or 11 times
- 12 or more times

22. Have you ever been physically forced to have sexual intercourse when you did not want to?

- Yes
- No

23. During the past 12 months, how many times did anyone 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.)

- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

24. During the past 12 months, how many times 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.)

- I did not date or go out with anyone during the past 12 months
- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

25. During the past 12 months, how many times 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.)

- I did not date or go out with anyone during the past 12 months
- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times



The next 2 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.

26. During the past 12 months, have you ever been bullied on school property?

- Yes
- No

27. During the past 12 months, have you ever been electronically bullied? (Count being bullied through texting, Instagram, Facebook, or other social media).

- Yes
- No



The next 5 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.

28. 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?

- Yes
- No

29. During the past 12 months, did you ever seriously consider attempting suicide?

- Yes
- No

30. During the past 12 months, did you make a plan about how you would attempt suicide?

- Yes
- No

31. During the past 12 months, how many times did you actually attempt suicide?

- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

32. If you attempted suicide during the past 12 months, did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?

I did not attempt suicide during the past 12 months

Yes

No



The next 4 questions ask about cigarette smoking.

33. Have you ever tried cigarette smoking, even one or two puffs?

- Yes
- No

34. How old were you when you first tried cigarette smoking, even one or two puffs?

- I have never tried smoking, not even one or two puffs
- 8 years old or younger
- 9 or 10 years old
- 11 or 12 years old
- 13 or 14 years old
- 15 or 16 years old
- 17 years old or older

35. During the past 30 days, on how many days did you smoke cigarettes?

- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

36. During the past 30 days, on the days you smoked, how many cigarettes did you smoke per day?

- I did not smoke cigarettes during the past 30 days
- Less than 1 cigarette per day
- 1 cigarette per day
- 2 to 5 cigarettes per day
- 6 to 10 cigarettes per day
- 11 to 20 cigarettes per day
- More than 20 cigarettes per day



The next 2 questions ask about electronic vapor products, such as blu, NJOY, Vuse, MarkTen, Logic, Vapin Plus, eGo and Halo. Electronic vapor products include e-cigarettes, e-cigars, e-pipes, vape pipes, vaping pens, e-hookahs, and hookah pens.

37. Have you ever used an electronic vapor product?

- Yes
- No

38. During the past 30 days, on how many days did you use an electronic vapor product?

- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days



The next 3 questions ask about other tobacco products

39. During the past 30 days, on how many days did you use chewing tobacco, snuff, dip, snus, or dissolvable tobacco products, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, Copenhagen, Camel Snus, Marlboro Snus, General Snus, Ariva, Stonewall, or Camel Orbs? (Do not count any electronic vapor products.)

- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

40. During the past 30 days, on how many days did you smoke cigars, cigarillos, or little cigars?

- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

41. During the past 12 months, did you ever try to quit using all tobacco products, including cigarettes, cigars, smokeless tobacco, shisha or hookah tobacco, and electronic vapor products?

- I did not use any tobacco products during the past 12 months
- Yes
- No



The next 4 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.

42. During your life, on how many days have you had at least one drink of alcohol?

- 0 days
- 1 or 2 days
- 3 to 9 days
- 10 to 19 days
- 20 to 39 days
- 40 to 99 days
- 100 or more days

43. How old were you when you had your first drink of alcohol other than a few sips?

- I have never had a drink of alcohol other than a few sips
- 8 years old or younger
- 9 or 10 years old
- 11 or 12 years old
- 13 or 14 years old
- 15 or 16 years old
- 17 years old or older

44. During the past 30 days, on how many days did you have at least one drink of alcohol?

- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

45. During the past 30 days, how did you usually get the alcohol you drank?

- I did not drink alcohol during the past 30 days
- I bought it in a store such as a liquor store, convenience store, supermarket, discount store, or gas station
- I bought it at a restaurant, bar, or club
- I bought it at a public event such as a concert or sporting event
- I gave someone else money to buy it for me
- Someone gave it to me
- I took it from a store or family member
- I got it some other way



The next 2 questions ask about how many drinks of alcohol you have had in a row, that is, within a couple of hours. For the first question, the number of drinks you need to think about is different for female students and male students.

46. During the past 30 days, on how many days did you have 4 or more drinks of alcohol in a row (if you are female) or 5 or more drinks of alcohol (if you are male)?

- 0 days
- 1 day
- 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 or more days

47. During the past 30 days, what is the largest number of alcoholic drinks you had in a row?

- I did not drink alcohol during the past 30 days
- 1 or 2 drinks
- 3 drinks
- 4 drinks
- 5 drinks
- 6 or 7 drinks
- 8 or 9 drinks
- 10 or more drinks



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

48. During your life, how many times have you used marijuana?

- 0 times
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 to 99 times
- 100 or more times

49. How old were you when you tried marijuana for the first time?

- I have never tried marijuana
- 8 years old or younger
- 9 or 10 years old
- 11 or 12 years old
- 13 or 14 years old
- 15 or 16 years old
- 17 years old or older

50. During the past 30 days, how many times did you use marijuana?

- 0 times
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times



The next 10 questions ask about other drugs.

51. During your life, how many times have you used any form of cocaine, including powder, crack, or freebase?

- 0 times
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times

52. During your life, how many times have you sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high?

- 0 times
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times

53. During your life, how many times have you used heroin (also called smack, junk, or China White)?

- 0 times
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times

54. During your life, how many times have you used methamphetamines (also called speed, crystal, crank, or ice)?

- 0 times
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times

55. During your life, how many times have you used ecstasy (also called MDMA)?

- 0 times
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times

56. During your life, how many times have you used synthetic marijuana (also called K2, Spice, fake weed, King Kong, Yucatan Fire, Skunk, or Moon Rocks)?

- 0 times
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times

57. During your life, how many times have you taken steroid pills or shots without a doctor's prescription?

- 0 times
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times

58. During your life, how many times have you taken a prescription pain medicine without a doctor's prescription or differently than how a doctor told you to use it? (Count drugs such as codeine, Vicodin, OxyContin, Hydrocodone, and Percocet.)

- 0 times
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times

59. During your life, how many times have you used a needle to inject any illegal drug into your body?

- 0 times
- 1 time
- 2 or more times

60. During the past 12 months, has anyone offered, sold, or given you an illegal drug on school property?

- Yes
- No



The next 9 questions ask about sexual behavior.

61. Have you ever had sexual intercourse?

- Yes
- No

62. How old were you when you had sexual intercourse for the first time?

- I have never had sexual intercourse
- 11 years old or younger
- 12 years old
- 13 years old
- 14 years old
- 15 years old
- 16 years old
- 17 years old or older

63. During your life, with how many people have you had sexual intercourse?

- I have never had sexual intercourse
- 1 person
- 2 people
- 3 people
- 4 people
- 5 people
- 6 or more people

64. During the past 3 months, with how many people did you have sexual intercourse?

- I have never had sexual intercourse
- I have had sexual intercourse, but not during the past 3 months
- 1 person
- 2 people
- 3 people
- 4 people
- 5 people
- 6 or more people

65. Did you drink alcohol or use drugs before you had sexual intercourse the last time?

- I have never had sexual intercourse
- Yes
- No

66. The last time you had sexual intercourse, did you or your partner use a condom?

- I have never had sexual intercourse
- Yes
- No

67. The last time you had sexual intercourse, what one method did you or your partner use to prevent pregnancy? (Select only one response.)

- I have never had sexual intercourse
- No method was used to prevent pregnancy
- Birth control pills
- Condoms
- An IUD (such as Mirena or ParaGard) or implant (such as Implanon or Nexplanon)
- A shot (such as Depo-Provera), patch (such as Ortho Evra), or birth control ring (such as NuvaRing)
- Withdrawal or some other method
- Not sure

68. During your life, with whom have you had sexual contact?

- I have never had sexual contact
- Females
- Males
- Females and males

69. Which of the following best describes you?

- Heterosexual (straight)
- Gay or Lesbian
- Bisexual
- Not Sure



The next question asks about food you ate or drank during the past 7 days. Think about all the meals and snacks you had from the time you got up until you went to bed. Be sure to include food you ate at home, at school, at restaurants, or anywhere else.

70. During the past 7 days, on how many days did you eatbreakfast?

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days
- 6 days
- 7 days



The next 4 questions ask about physical activity.

71. 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.)

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days
- 6 days
- 7 days

72. On an average school day, how many hours do you watch TV?

- I do not watch TV on an average school day
- Less than 1 hour per day
- 1 hour per day
- 2 hours per day
- 3 hours per day
- 4 hours per day
- 5 or more hours per day

73. 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 on things such as Xbox, PlayStation, an iPad or other tablet, a smartphone, texting, YouTube, Instagram, Facebook or other social media.)

- I do not play video or computer games or use a computer for something that is not school work
- Less than 1 hour per day
- 1 hour per day
- 2 hours per day
- 3 hours per day
- 4 hours per day
- 5 or more hours per day

74. During the past 12 months, on how many sports teams did you play? (Count any teams run by your school or community groups.)

- 0 teams
- 1 team
- 2 teams
- 3 or more teams



The next question asks about concussions. A concussion is when a blow or hit to the head causes problems such as headaches, dizziness, being dazed or confused, difficulty remembering or concentrating, vomiting, blurred vision, or being knocked out.

75. During the past 12 months, how many times did you have a concussion from playing a sport or being physically active?

- 0 times
- 1 time
- 2 times
- 3 times
- 4 or more times



The next 5 questions ask about other health-related topics.

76. Have you ever been taught about AIDS or HIV infection in school?

- Yes
- No
- Not sure

77. Have you ever been tested for HIV, the virus that causes AIDS? (Do not count tests done if you donated blood.)

- Yes
- No
- Not Sure

78. When was the last time you saw a dentist for a check-up, exam, teeth cleaning, or other dental work?

- During the past 12 months
- Between 12 and 24 months
- More than 24 months ago
- Never
- Not sure

79. Has a doctor or nurse ever told you that you have asthma?

- Yes
- No
- Not sure

80. On an average school night, how many hours of sleep do you get?

- 4 or less
- 5 hours
- 6 hours
- 7 hours
- 8 hours
- 9 hours
- 10 or more hours



The next question deals with school attendance.

81. During the previous school year, choose the three (3) top reasons you were absent from school.

- Illness
- Transportation issue
- School feels too unsafe
- Caring for family member(s)
- Pregnant or parenting
- Tooth pain or dental-related problem
- Suspension
- Appointment (doctor, dentist, therapist, etc.)
- Embarrassed about school performance
- Worried about what teachers or other adults may say or do to me because of my school performance
- School work is not interesting
- Overslept or alarm did not go off
- Funeral or family or close relative's death
- I was not absent during the last school year

Other (please specify)



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This is the end of the survey.

Thank you very much for your help.



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If any survey questions bring up issues you would like to confidentially discuss with an adult, there are staff at this school (counselor, social worker, psychologist) or you can call the Child Abuse Hot Line 800-342-3720.