

2015 District of Columbia 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. Asian
 - C. Black or African American
 - D. Native Hawaiian or Other Pacific Islander
 - E. White
6. Which of the following best describes you?
 - A. Heterosexual (straight)
 - B. Gay or lesbian
 - C. Bisexual
 - D. Not sure

7. A **transgender** person is someone whose biological sex at birth **does not match** the way they think or feel about themselves. Are you **transgender**?
 - A. No, I am not transgender
 - B. Yes, I am transgender and I think of myself as really a boy or man
 - C. Yes, I am transgender and I think of myself as really a girl or woman
 - D. Yes, I am transgender and I think of myself in some other way
 - E. I do not know if I am transgender
 - F. I do not know what this question is asking
8. Is one or more of your parents or guardians gay, lesbian, bisexual, or transgender?
 - A. Yes
 - B. No
 - C. Not sure

The next 2 questions ask about safety.

9. During the past 12 months, when you rode a bicycle or used rollerblades or a skateboard, how often did you wear a helmet?
 - A. I did not ride a bicycle or use rollerblades or a skateboard during 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
10. Have you ever ridden in a car driven by someone who had been drinking alcohol?
 - A. Yes
 - B. No
 - C. Not sure

The next 6 questions ask about violence-related behaviors.

11. Have you ever carried **a weapon**, such as a gun, knife, or club?
 - A. Yes
 - B. No
12. 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?
 - A. 0 days
 - B. 1 day
 - C. 2 or 3 days
 - D. 4 or 5 days
 - E. 6 or more days
13. During the past 12 months, how many times have you been afraid of being beaten up **at school**?
 - A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or 7 times
 - F. 8 or 9 times
 - G. 10 or 11 times
 - H. 12 or more times
14. Have you ever been in a physical fight?
 - A. Yes
 - B. No
15. During the past 12 months, have you been a member of a gang or crew?
 - A. Yes
 - B. No

16. 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.)
 - A. I did not date or go out with anyone during the past 12 months
 - B. 0 times
 - C. 1 time
 - D. 2 or 3 times
 - E. 4 or 5 times
 - F. 6 or more times

The next 3 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.

17. Have you ever been bullied **on school property**?
 - A. Yes
 - B. No
18. Have you ever been **electronically** bullied? (Count being bullied through e-mail, chat rooms, instant messaging, websites, or texting.)
 - A. Yes
 - B. No
19. During the past 12 months, have you ever bullied someone else **on school property**?
 - A. Yes
 - B. No

The next 3 questions ask about attempted suicide. Sometimes people feel so depressed about the future that they may consider attempting suicide or killing themselves.

20. Have you ever **seriously** thought about killing yourself?
A. Yes
B. No
21. Have you ever made a **plan** about how you would kill yourself?
A. Yes
B. No
22. Have you ever **tried** to kill yourself?
A. Yes
B. No

The next 3 questions ask about tobacco use.

23. 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
24. 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

25. During the past 30 days, on how many days did you smoke **cigars, cigarillos, or little cigars**?
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 2 questions ask about electronic vapor products, such as blu, NJOY, or Starbuzz. Electronic vapor products include e-cigarettes, e-cigars, e-pipes, vape pipes, vaping pens, e-hookahs, and hookah pens.

26. Have you ever used an electronic vapor product?
A. Yes
B. No
27. During the past 30 days, on how many days did you use an electronic vapor product?
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 3 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.

28. 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
29. During the past 30 days, on how many days did you have at least one drink of alcohol?
- 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
30. How much do you think people risk harming themselves (physically or in other ways) if they have five or more drinks of alcohol (beer, wine, or liquor) once or twice a week?
- A. No risk
 - B. Slight risk
 - C. Moderate risk
 - D. Great risk

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

31. 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
32. 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
33. How much do you think people risk harming themselves (physically or in other ways) if they use marijuana once a month?
- A. No risk
 - B. Slight risk
 - C. Moderate risk
 - D. Great risk

The next 6 questions ask about other drugs.

34. 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)?
- 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
35. During the past 30 days, how many times did you use **synthetic marijuana** (also called K2, Spice, fake weed, King Kong, Yucatan Fire, Skunk, or Moon Rocks)?
- 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
36. How much do you think people risk harming themselves (physically or in other ways) if they smoke synthetic marijuana (also called K2, Spice, fake weed, King Kong, Yucatan Fire, Skunk, or Moon Rocks) once a month?
- A. No risk
 - B. Slight risk
 - C. Moderate risk
 - D. Great risk
37. Have you ever used **any** form of cocaine, including powder, crack, or freebase?
- A. Yes
 - B. No
38. Have you ever sniffed glue, breathed the contents of spray cans, or inhaled any paints or sprays to get high?
- A. Yes
 - B. No

39. 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

The next 6 questions ask about sexual intercourse.

40. Have you ever had sexual intercourse?
- A. Yes
 - B. No
41. 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
42. 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
43. 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

44. The **last time** you had sexual intercourse, how many years younger or older than you was your partner?
- A. I have never had sexual intercourse
 - B. 5 or more years younger
 - C. 3 to 4 years younger
 - D. About the same age
 - E. 3 to 4 years older
 - F. 5 or more years older
 - G. Not sure

45. How many times have you been pregnant or gotten someone pregnant?
- A. 0 times
 - B. 1 time
 - C. 2 or more times
 - D. Not sure

The next 4 questions ask about body weight.

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

47. 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

48. 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

49. Have you ever **vomited or taken laxatives** to lose weight or to keep from gaining weight?
- A. Yes
 - B. No

The next 2 questions ask about physical activity.

50. 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

51. 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 6 questions ask about other topics.

52. Have you ever been taught about AIDS or HIV infection in school?
- A. Yes
 - B. No
 - C. Not sure

53. Has a doctor or nurse ever told you that you have asthma?
- A. Yes
 - B. No
 - C. Not sure

54. 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
55. During the past 30 days, how often did you go hungry because there was not enough food in your home?
- A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always

56. During the past 12 months, have you seen or heard any alcohol, tobacco, or other drug prevention messages from sources outside your school such as on posters, flyers, the radio, the internet, or TV?
- A. Yes
 - B. No
 - C. Not sure
57. 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

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