

2011 Nevada 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.

- How old are you?
 - 10 years old or younger
 - 11 years old
 - 12 years old
 - 13 years old
 - 14 years old
 - 15 years old
 - 16 years old or older
 - What is your sex?
 - Female
 - Male
 - In what grade are you?
 - 6th grade
 - 7th grade
 - 8th grade
 - Ungraded or other grade
 - Are you Hispanic or Latino?
 - Yes
 - No
 - 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
 - How long have you lived in Nevada?
 - Less than 1 year
 - 1 to 2 years
 - 3 to 4 years
 - 5 to 6 years
 - 7 or more years
 - How long have you gone to school in the district where you now attend school?
 - Less than 1 year
 - 1 to 2 years
 - 3 to 4 years
 - 5 to 6 years
 - 7 or more years
 - 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
 - None of these grades
 - Not sure
- The next 4 questions ask about safety.**
- When you ride a bicycle**, how often do you wear a helmet?
 - I do not ride a bicycle
 - Never wear a helmet
 - Rarely wear a helmet
 - Sometimes wear a helmet
 - Most of the time wear a helmet
 - Always wear a helmet
 - When you rollerblade or ride a skateboard**, how often do you wear a helmet?
 - I do not rollerblade or ride a skateboard
 - Never wear a helmet
 - Rarely wear a helmet
 - Sometimes wear a helmet
 - Most of the time wear a helmet
 - Always wear a helmet
 - How often do you wear a seat belt when **riding** in a car?
 - Never
 - Rarely
 - Sometimes
 - Most of the time
 - Always
 - Have you ever ridden in a car driven by someone who had been drinking alcohol?
 - Yes
 - No
 - Not sure

The next 9 questions ask about violence-related behaviors.

13. Have you ever carried **a weapon**, such as a gun, knife, or club?
A. Yes
B. No
14. During the past 30 days, did you carry a weapon such as a gun, knife, or club **on school property**?
A. Yes
B. No
15. 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
16. Have you ever been in a physical fight?
A. Yes
B. No
17. Have you ever been in a physical fight in which you were hurt and had to be treated by a doctor or nurse?
A. Yes
B. No
18. During the past 12 months, were you in a physical fight **on school property**?
A. Yes
B. No
19. During the past 12 months, did your boyfriend or girlfriend ever hit, slap, or physically hurt you on purpose?
A. Yes
B. No
20. During the past 12 months, have you been a member of a gang?
A. Yes
B. No

21. Is there gang activity in your school?
A. Yes
B. No
C. Not sure

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.

22. Have you ever been bullied **on school property**?
A. Yes
B. No
23. Have you ever been **electronically** bullied? (Include being bullied through e-mail, chat rooms, instant messaging, Web sites, or texting.)
A. Yes
B. No
24. During the past 12 months, have you ever been the victim of teasing or name calling because of your race or ethnic background?
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.

25. Have you ever **seriously** thought about killing yourself?
A. Yes
B. No
26. Have you ever made a **plan** about how you would kill yourself?
A. Yes
B. No
27. Have you ever **tried** to kill yourself?
A. Yes
B. No

The next 8 questions ask about tobacco use.

28. Have you ever tried cigarette smoking, even one or two puffs?
A. Yes
B. No
29. 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
30. 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
31. During the past 30 days, on the days you smoked, how many cigarettes did you smoke **per day**?
A. I did not smoke cigarettes during the past 30 days
B. Less than 1 cigarette per day
C. 1 cigarette per day
D. 2 to 5 cigarettes per day
E. 6 to 10 cigarettes per day
F. 11 to 20 cigarettes per day
G. More than 20 cigarettes per day
32. During the past 30 days, how did you **usually** get your own cigarettes? (Select only **one** response.)
A. I did not smoke cigarettes during the past 30 days
B. I bought them in a store such as a convenience store, supermarket, discount store, or gas station
C. I bought them 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 family member
H. I got them some other way
33. Have you ever smoked cigarettes daily, that is, at least one cigarette every day for 30 days?
A. Yes
B. No
34. During the past 30 days, on how many days did you use **chewing tobacco, snuff, or dip**, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen?
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
35. 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 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.

36. Have you ever had a drink of alcohol, other than a few sips?
A. Yes
B. No
37. 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

The next 2 questions ask about marijuana use. Marijuana also is called grass or pot.

38. Have you ever used marijuana?
A. Yes
B. No
39. 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

The next 6 questions ask about other drugs.

40. Have you ever used **any** form of cocaine, including powder, crack, or freebase?
A. Yes
B. No

41. Have you ever sniffed glue, breathed the contents of spray cans, or inhaled any paints or sprays to get high?
A. Yes
B. No
42. Have you ever used **methamphetamines** (also called speed, crystal, crank, or ice)?
A. Yes
B. No
43. Have you ever taken **steroid pills or shots** without a doctor's prescription?
A. Yes
B. No
44. 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
45. Have you ever taken **over-the-counter drugs** to get high?
A. Yes
B. No

The next 4 questions ask about sexual intercourse.

46. Have you ever had sexual intercourse?
A. Yes
B. No
47. 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

48. 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

49. 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.

50. How do **you** describe your weight?
- A. Very underweight
 - B. Slightly underweight
 - C. About the right weight
 - D. Slightly overweight
 - E. Very overweight
51. 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
52. 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
53. 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** include meal replacement products such as Slim Fast.)
- A. Yes
 - B. No

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

The next 5 questions ask about physical activity.

55. 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
56. 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
57. 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? (Include activities such as Xbox, PlayStation, Nintendo DS, iPod touch, Facebook, 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

58. 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
59. 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 question asks about gambling.

60. During the past 12 months, did you **gamble**, such as betting money on cards, games of personal skill or sports teams, buying lottery tickets, or gambling in a casino?
- A. Yes
 - B. No

The next 13 questions ask about other health-related topics.

61. Has a doctor or nurse ever told you that you have asthma?
- A. Yes
 - B. No
 - C. Not sure
62. Do you still have asthma?
- A. I have never had asthma
 - B. Yes
 - C. No
 - D. Not sure
63. 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

64. Have you ever been taught about AIDS or HIV infection in school?
- A. Yes
 - B. No
 - C. Not sure
65. Have you ever talked about AIDS or HIV infection with your parents or other adults in your family?
- A. Yes
 - B. No
 - C. Not sure
66. How often do your parents or other adults in your family ask where you are going or with whom you will be?
- A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always
67. How often do you feel safe and secure in your neighborhood?
- A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always
68. How often do you feel safe and secure at school?
- A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always
69. How often do you feel that you are accepted at school?
- A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always
70. 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

71. During the past 30 days, on how many days did you miss classes or school without permission?
- A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 or more days
72. How likely is it that you will complete a post high school program such as a vocational training program, military service, community college, or 4-year college?
- A. Definitely will not
 - B. Probably will not
 - C. Probably will
 - D. Definitely will
 - E. Not sure

73. During the past 30 days, how many times did you perform any organized community service as a non-paid volunteer, such as serving meals to the elderly, picking up litter, helping out at a hospital, or building homes for the poor?
- A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or more times

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