

Middle School

Spring 2013 Maryland Youth Tobacco and 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

The next 4 questions ask about safety.

6. **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
7. **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
8. How often do you wear a seat belt when **riding** in a car?
 - A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always
9. Have you ever ridden in a car driven by someone who had been drinking alcohol?
 - A. Yes
 - B. No
 - C. Not sure

The next 4 questions ask about violence-related behaviors.

10. Have you ever carried a weapon, such as a gun, knife, or club?
 - A. Yes
 - B. No
11. Have you ever been in a physical fight?
 - A. Yes
 - B. No
12. 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
13. How often do you feel safe and secure in your neighborhood?
 - A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always

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.

14. Have you ever been bullied **on school property**?
 - A. Yes
 - B. No
15. Have you ever been **electronically** bullied? (Count being bullied through e-mail, chat rooms, instant messaging, websites, or texting.)
 - A. Yes
 - B. No

The next 2 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.

16. 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
17. Have you ever **seriously** thought about killing yourself?
 - A. Yes
 - B. No

The next 4 questions ask about any tobacco use. This could include use of cigarettes, smokeless tobacco, cigars, or any other product that includes tobacco.

18. During the past 12 months, did you try or use **tobacco products** for the first time?
 - A. Yes
 - B. No
19. During the past 12 months, did you **quit using all tobacco products**?
 - A. I did not use any tobacco products during the past 12 months
 - B. Yes, I quit using all tobacco products during the past 12 months
 - C. No, I did not quit using all tobacco products during the past 12 months

20. During the past 30 days, what tobacco product flavor did you use most often? (Do **not** count menthol cigarettes.)
- A. I did not use a flavored tobacco product during the past 30 days
 - B. Fruit flavored
 - C. Candy flavored
 - D. Spice flavored, such as vanilla or cinnamon
 - E. Alcoholic beverage flavored
 - F. Mint or wintergreen flavored
 - G. Some other flavor
21. During the past 30 days, which flavored tobacco products (such as fruit-, candy-, or alcohol-flavored tobacco products) did you use? (Do **not** count menthol cigarettes.)
- A. I did not use any flavored tobacco products during the past 30 days
 - B. Only flavored cigars, cigarillos, or little cigars
 - C. Only flavored smokeless tobacco products
 - D. Both flavored cigar products and flavored smokeless tobacco products

The next 7 questions ask only about cigarette use.

22. 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

23. During your life, about how many cigarettes have you smoked?
- A. 0 cigarettes
 - B. 1 or more puffs but never a whole cigarette
 - C. 1 cigarette
 - D. 2 to 5 cigarettes
 - E. 6 to 15 cigarettes (about 1/2 pack total)
 - F. 16 to 25 cigarettes (about 1 pack total)
 - G. 26 to 99 cigarettes (more than 1 pack but less than 5 packs)
 - H. 100 or more cigarettes (5 or more packs)
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, 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

26. **When you bought or tried to buy cigarettes** in a store during the past 30 days, were you ever asked to show proof of age?
- A. I did not try to buy cigarettes in a store during the past 30 days
 - B. Yes, I was asked to show proof of age
 - C. No, I was not asked to show proof of age
27. During the past 30 days, did anyone refuse to sell you cigarettes because of your age?
- A. I did not try to buy cigarettes during the past 30 days
 - B. Yes
 - C. No
28. Menthol cigarettes are cigarettes that taste like mint. During the past 30 days, did you **usually** smoke menthol cigarettes?
- A. I did not smoke cigarettes during the past 30 days
 - B. Yes
 - C. No
 - D. Not sure

The next question asks only about smokeless tobacco use.

29. 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

The next 2 questions ask only about cigar use.

30. 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
31. During the past 30 days, what type of cigar did you **usually** smoke?
- A. I did not smoke any type of cigar during the past 30 days
 - B. Cigarillos or small cigars (with or without tips), such as Black & Mild's, Phillies, or Swisher Sweets
 - C. Blunts (tobacco only)
 - D. Little cigars that look like brown cigarettes
 - E. Some other type of cigar

The next 3 questions ask about secondhand smoke.

32. Does anyone who lives with you now smoke cigarettes or cigars?
- A. Yes
 - B. No
33. Which of the following statements best describes the rules about smoking inside the home where you live?
- A. Never allowed inside my home
 - B. Allowed only at some times or in some places
 - C. Always allowed inside my home

34. 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 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days
 - G. 6 days
 - H. 7 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.

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, 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

The next 3 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
40. 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

The next 7 questions ask about other drugs.

41. Have you ever used **any** form of cocaine, including powder, crack, or freebase?
- A. Yes
 - B. No
42. Have you ever taken **heroin** (also called smack, junk, or China White)?
- A. Yes
 - B. No
43. Have you ever sniffed glue, breathed the contents of spray cans, or inhaled any paints or sprays to get high?
- A. Yes
 - B. No

44. Have you ever taken **steroid pills or shots** without a doctor's prescription?
 A. Yes
 B. No
45. 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
46. During the past 30 days, how many times did you take a **prescription drug** (such as OxyContin, Percocet, Vicodin, codeine, Adderall, Ritalin, or Xanax) without a doctor's prescription?
 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
47. During the past 12 months, has anyone offered, sold, or given you an illegal drug **on school property**?
 A. Yes
 B. No

The next 2 questions ask about body weight.

48. How do **you** describe your weight?
 A. Very underweight
 B. Slightly underweight
 C. About the right weight
 D. Slightly overweight
 E. Very overweight
49. 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

The next question asks about eating breakfast.

50. 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 5 questions ask about physical activity.

51. 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
52. 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

53. 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
54. 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
55. During an average physical education (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 to 20 minutes
 - D. 21 to 30 minutes
 - E. 31 to 40 minutes
 - F. 41 to 50 minutes
 - G. 51 to 60 minutes
 - H. More than 60 minutes

The next 6 questions ask about other health-related topics.

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

57. Has a doctor or nurse ever told you that you have asthma?
- A. Yes
 - B. No
 - C. Not sure
58. During the past 12 months, did you have any asthma symptoms?
- A. I do not have asthma
 - B. Yes, I have had asthma symptoms during the past 12 months
 - C. No, I have not had asthma symptoms during the past 12 months
59. On an average school night, how many hours of sleep do you get?
- A. 4 hours or less
 - B. 5 hours
 - C. 6 hours
 - D. 7 hours
 - E. 8 hours
 - F. 9 hours
 - G. 10 or more hours
60. How do you describe your health in general?
- A. Excellent
 - B. Very Good
 - C. Good
 - D. Fair
 - E. Poor
61. During the past 12 months, how many times did you use an indoor tanning device such as a sunlamp, sunbed, or tanning booth? (Do **not** count getting a spray-on tan.)
- 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

The next 4 questions ask about your attitudes and beliefs about tobacco use.

62. Do you think young people who smoke have more friends?
A. Definitely yes
B. Probably yes
C. Probably not
D. Definitely not
63. Do you think smoking makes young people look cool or fit in?
A. Definitely yes
B. Probably yes
C. Probably not
D. Definitely not
64. Do you think smokers have shorter lives than non-smokers?
A. Definitely yes
B. Probably yes
C. Probably not
D. Definitely not
65. During the last school year (2011-2012), were you taught in any of your classes about the dangers of tobacco use?
A. Yes
B. No
C. Not sure

The next 3 questions ask about your attitudes and beliefs about drinking alcohol.

66. How wrong do your parents feel it would be for you to drink beer, wine, or hard liquor (such as, vodka, whiskey, or gin) at least once or twice a month?
A. Very wrong
B. Wrong
C. A little wrong
D. Not at all wrong

67. How much do people risk harming themselves (physically and in other ways) if they have one or two drinks of alcohol (beer, wine, or liquor) nearly every day?
A. No risk
B. Slight risk
C. Moderate risk
D. Great risk
68. How much do people risk harming themselves physically and in other ways if they have five or more drinks of alcohol once or twice a week?
A. No risk
B. Slight risk
C. Moderate risk
D. Great risk

The next 5 questions ask about whether adults are available for you to talk to when you need to.

69. Outside of school, is there an adult you can talk to about things that are important to you?
A. Yes
B. No
70. Besides your parents, how many adults would you feel comfortable seeking help from if you had an important question affecting your life?
A. 0 adults
B. 1 adult
C. 2 adults
D. 3 adults
E. 4 adults
F. 5 or more adults
71. During the past 12 months, did you talk to a teacher or other adult in your school about a personal problem you had?
A. Yes
B. No

72. Do you agree or disagree that your teachers really care about you and give you a lot of encouragement?
- A. Strongly agree
 - B. Agree
 - C. Not sure
 - D. Disagree
 - E. Strongly disagree

73. Do you participate in any extracurricular activities at school such as sports, band, drama, clubs, or student government?
- A. Yes
 - B. No

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