



HS-A

2021 High School Maine Integrated Youth Health Survey

This survey is about your health behavior and things that affect it. It will tell us what you and other students do that may affect your health. About 95,000 students in Maine are being asked to take this survey. The answers you give will be used to create better health education and programs 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.

You may choose to take the survey or not take it. Your choice will not affect your grade in this class. There is some risk that some questions may make you feel uncomfortable. If you are not comfortable answering a question, just leave it blank. You can stop answering questions at any time you want. There is no penalty for not completing the survey. It should not take you longer than this class period.

The benefit to you in taking this survey is that your school and community may be better able to create programs that help you stay healthy.

Some questions ask about your background such as your race, age, and gender. These will be used only to describe the types of students completing the survey. No answers will be used to find out your name. No names will ever be reported. The survey is research. This means that we will use your answers to help us learn about Maine students in general.

Be sure to read every question. Fill in the ovals completely. When you are finished, follow the instructions of your teacher.

If you have questions about the survey, your teacher will have contact names for someone to e-mail or call.

THANK YOU very much for your help!

Directions:

- Use a #2 pencil or a blue or black pen.
- Make dark marks.
- Fill in a response like this: (A) (B) (●) (D)
- To change your answer, erase your old answer completely.

1. How old are you?
 - A. 12 years old or younger
 - B. 13 years old
 - C. 14 years old
 - D. 15 years old
 - E. 16 years old
 - F. 17 years old
 - G. 18 years old or older

2. What is your sex?
 - A. Female
 - B. Male

3. In what grade are you?
 - A. 9th grade
 - B. 10th grade
 - C. 11th grade
 - D. 12th grade
 - E. 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. How tall are you without your shoes on?
 Directions: Write your height in the shaded blank boxes. Fill in the matching oval below each number.
Example:

Height	
Feet	Inches
5	7
(3)	(0)
(4)	(1)
●	(2)
(6)	(3)
(7)	(4)
	(5)
	(6)
	●
	(8)
	(9)
	(10)
	(11)

7. How much do you weigh without your shoes on?
 Directions: Write your weight in the shaded blank boxes. Fill in the matching oval below each number.
Example:

Weight		
Pounds		
1	5	2
(0)	(0)	(0)
●	(1)	(1)
(2)	(2)	●
(3)	(3)	(3)
	(4)	(4)
	●	(5)
	(6)	(6)
	(7)	(7)
	(8)	(8)
	(9)	(9)

8. What language is spoken most often at home? (Select only **one** response.)
 - A. Acholi
 - B. Arabic
 - C. English
 - D. French
 - E. Khmer
 - F. Somali
 - G. Spanish
 - H. Some other language

9. Which of the following best describes you?
 - A. Heterosexual (straight)
 - B. Gay or lesbian
 - C. Bisexual
 - D. I describe my sexual identity some other way
 - E. I am not sure about my sexual identity (questioning)
 - F. I do not know what this question is asking

10. Some people describe themselves as transgender when their sex at birth does not match the way they think or feel about their gender. Are you transgender?
 - A. No, I am not transgender
 - B. Yes, I am transgender
 - C. I am not sure if I am transgender
 - D. I do not know what this question is asking

11. During the past 30 days, where did you usually sleep?
 - A. In my parent's or guardian's home
 - B. In the home of a friend, family member, or other person because I had to leave my home or my parent or guardian cannot afford housing
 - C. In a shelter or emergency housing
 - D. In a motel or hotel
 - E. In a car, park, campground, or other public place
 - F. In a dormitory or other school housing
 - G. I do not have a usual place to sleep
 - H. Somewhere else

The next 3 questions ask about violence-related behaviors and experiences.

12. Do you agree or disagree with the following statement? "I feel safe at my school."
 - A. Strongly agree
 - B. Agree
 - C. Disagree
 - D. Strongly disagree

13. Have you been forced (physically or otherwise) to have sexual contact? (Select only **one** response.)
 - A. Yes, I have been forced to have sexual contact **both during** the past 12 months and **before** then
 - B. Yes, I have been forced to have sexual contact, but **not during** the past 12 months
 - C. Yes, I have been forced to have sexual contact, but **only during** the past 12 months
 - D. No, I have never been forced to have sexual contact

14. Has violence in your home, or the threat of violence, ever made you want to leave your home, even just for a short while?
 - A. Yes
 - B. No

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.

15. During the past 12 months, have you ever been bullied **on school property**?
 - A. Yes
 - B. No

16. During the past 12 months, have you ever been **electronically** bullied? (Count being bullied through texting, Instagram, Facebook, or other social media.)
 - A. Yes
 - B. No

17. Has anyone ever made offensive racial comments or attacked you at school based on your race or ethnicity?
 - 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, that is, taking some action to end their own life.

18. 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

19. During the past 12 months, when you felt sad or hopeless, from whom did you get help? (Select only **one** response.)
 - A. I did not feel sad or hopeless
 - B. I did feel sad or hopeless but did not seek help
 - C. Parent or other adult relative
 - D. Teacher or other school staff
 - E. Other adults
 - F. Friends
 - G. None of the above

20. During the past 12 months, did you ever **seriously** consider attempting suicide?
 - A. Yes
 - B. No

The next 11 questions ask about cigarette smoking.

21. 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
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 or 10 years old
 - D. 11 or 12 years old
 - E. 13 or 14 years old
 - F. 15 or 16 years old
 - G. 17 years old or older
23. How much do you think people risk harming themselves (physically or in other ways) if they smoke one or more packs of cigarettes per day?
 - A. No risk
 - B. Slight risk
 - C. Moderate risk
 - D. Great risk
24. If you wanted to get some cigarettes, how easy would it be for you to get some?
 - A. Very hard
 - B. Sort of hard
 - C. Sort of easy
 - D. Very easy
25. Do you think that you will try a cigarette soon?
 - A. I definitely will
 - B. I probably will
 - C. I probably will not
 - D. I definitely will not
26. Do you think you will smoke a cigarette at any time during the next year?
 - A. I definitely will
 - B. I probably will
 - C. I probably will not
 - D. I definitely will not

27. Think of your closest friends. How many in the past year have smoked cigarettes?
 - A. None of my friends
 - B. 1 of my friends
 - C. 2 of my friends
 - D. 3 of my friends
 - E. 4 of my friends
28. If one of your closest friends offered you a cigarette, would you smoke it?
 - A. Definitely yes
 - B. Probably yes
 - C. Probably not
 - D. Definitely not
29. How wrong do your friends feel it would be for you to smoke cigarettes?
 - A. Very wrong
 - B. Wrong
 - C. A little bit wrong
 - D. Not wrong at all
30. During the past 7 days, on how many days were you in the same car 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
31. 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 electronic vapor products, such as JUUL, SMOK, Suorin, Vuse, and blu. Electronic vapor products include e-cigarettes, vapes, vape pens, e-cigars, e-hookahs, hookah pens, and mods.

32. Have you ever used an electronic vapor product?
A. Yes
B. No
33. 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
34. If you wanted to get electronic vapor products, how easy would it be for you to get one?
A. Very hard
B. Sort of hard
C. Sort of easy
D. Very easy

The next 2 questions ask about all tobacco products. Please consider cigarettes, electronic vapor products, smokeless tobacco (chewing tobacco, snuff, dip, snus, or dissolvable tobacco products), cigars (including little cigars or cigarillos), shisha or hookah tobacco, and pipe tobacco when answering these questions.

35. How wrong do your parents feel it would be for you to use any tobacco products?
A. Very wrong
B. Wrong
C. A little bit wrong
D. Not wrong at all
36. When you go to a supermarket, grocery store, convenience store or gas station mini-mart, how often do you see tobacco industry advertisements on signs or poster boards?
A. A lot
B. Sometimes
C. Hardly ever
D. Never
E. I never go to a supermarket, grocery store, convenience store or mini-mart
F. I don't know/I'm not sure

The next 16 questions ask about drinking alcohol. This includes drinking beer, wine, flavored alcoholic beverages, 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.

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 or 10 years old
D. 11 or 12 years old
E. 13 or 14 years old
F. 15 or 16 years old
G. 17 years old or older
38. 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
39. During the past 30 days, what is the largest number of alcoholic drinks you had in a row, that is, within a couple of hours?
A. I did not drink alcohol during the past 30 days
B. 1 or 2 drinks
C. 3 drinks
D. 4 drinks
E. 5 drinks
F. 6 or 7 drinks
G. 8 or 9 drinks
H. 10 or more drinks
40. During the past 30 days, how did you **usually** get the alcohol you drank?
A. I did not drink alcohol during the past 30 days
B. I bought it in a store such as a liquor store, convenience store, supermarket, discount store, or gas station
C. I bought it at a restaurant, bar, or club
D. I bought it at a public event such as a concert or sporting event
E. I gave someone else money to buy it for me
F. Someone gave it to me
G. I took it from a store or family member
H. I got it some other way
41. During the past 30 days, on how many days did you have at least one drink of alcohol **on school property**?
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

42. If you wanted to get some alcohol, how easy would it be for you to get some?
- A. Very hard
 - B. Sort of hard
 - C. Sort of easy
 - D. Very easy
43. If you drank some alcohol without your parents' permission, would you be caught by your parents?
- A. Definitely yes
 - B. Probably yes
 - C. Probably not
 - D. Definitely not
44. How much do you think people risk harming themselves (physically or in other ways) if they have **1 or 2** drinks of an alcoholic beverage nearly every day?
- A. No risk
 - B. Slight risk
 - C. Moderate risk
 - D. Great risk
45. How much do you think people risk harming themselves (physically or in other ways) if they have **5 or more** drinks of an alcoholic beverage in a row once or twice a week?
- A. No risk
 - B. Slight risk
 - C. Moderate risk
 - D. Great risk
46. If a kid drank some alcohol in your community, would he or she be caught by the police?
- A. Definitely yes
 - B. Probably yes
 - C. Probably not
 - D. Definitely not
47. How wrong do adults in your community think it is for kids your age to drink alcohol?
- A. Very wrong
 - B. Wrong
 - C. A little bit wrong
 - D. Not wrong at all
48. Think of your closest friends. How many in the past year have tried alcohol when their parents didn't know about it?
- A. None of my friends
 - B. 1 of my friends
 - C. 2 of my friends
 - D. 3 of my friends
 - E. 4 of my friends

49. How do you feel about someone your age having **1 or 2** drinks of an alcoholic beverage nearly every day?
- A. Strongly approve
 - B. Approve
 - C. Neither approve nor disapprove
 - D. Disapprove
 - E. Strongly disapprove
50. How wrong do your friends feel it would be for you to have **1 or 2** drinks of an alcoholic beverage nearly every day?
- A. Very wrong
 - B. Wrong
 - C. A little bit wrong
 - D. Not wrong at all
51. How wrong do your parents feel it would be for you to have **1 or 2** drinks of an alcoholic beverage nearly every day?
- A. Very wrong
 - B. Wrong
 - C. A little bit wrong
 - D. Not wrong at all
52. How wrong do you think it is for someone your age to have **5 or more** drinks of alcohol once or twice each week?
- A. Very wrong
 - B. Wrong
 - C. A little bit wrong
 - D. Not wrong at all

The next 11 questions ask about marijuana use. Marijuana also is called pot or weed. For these questions, do not count CBD-only or hemp products, which come from the same plant as marijuana, but do not cause a high when used alone.

53. During your life, how many times have you used 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 to 99 times
 - G. 100 or more times

54. 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 or 10 years old
 - D. 11 or 12 years old
 - E. 13 or 14 years old
 - F. 15 or 16 years old
 - G. 17 years old or older
55. 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
56. If you wanted to get some marijuana, how easy would it be for you to get some?
- A. Very hard
 - B. Sort of hard
 - C. Sort of easy
 - D. Very easy
57. How wrong do your parents feel it would be for you to use marijuana?
- A. Very wrong
 - B. Wrong
 - C. A little bit wrong
 - D. Not wrong at all
58. How much do you think people risk harming themselves (physically or in other ways) if they use marijuana once or twice a week?
- A. No risk
 - B. Slight risk
 - C. Moderate risk
 - D. Great risk
59. How wrong do your friends feel it would be for you to use marijuana?
- A. Very wrong
 - B. Wrong
 - C. A little bit wrong
 - D. Not wrong at all
60. If a kid used marijuana in your community, would he or she be caught by the police?
- A. Definitely yes
 - B. Probably yes
 - C. Probably not
 - D. Definitely not

61. Do you think using marijuana would negatively impact your goals or future?
- A. Definitely yes
 - B. Probably yes
 - C. Probably not
 - D. Definitely not
62. During the past 30 days, how many times did you use marijuana **on school property**?
- 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
63. Think of your closest friends. How many in the past year have used marijuana?
- A. None of my friends
 - B. 1 of my friends
 - C. 2 of my friends
 - D. 3 of my friends
 - E. 4 of my friends

The next 15 questions ask about other drugs.

64. 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
65. How wrong do your parents feel it would be for you to take a prescription drug not prescribed to you?
- A. Very wrong
 - B. Wrong
 - C. A little bit wrong
 - D. Not wrong at all
66. How wrong do your friends feel it would be for you to take a prescription drug not prescribed to you?
- A. Very wrong
 - B. Wrong
 - C. A little bit wrong
 - D. Not wrong at all

67. If you wanted to get prescription drugs (such as OxyContin, Percocet, Vicodin, codeine, Adderall, Ritalin, or Xanax) that were not prescribed to you, how easy would it be to get some?
- Very hard
 - Sort of hard
 - Sort of easy
 - Very easy
68. How much do you think people risk harming themselves (physically or in other ways) if they take a prescription drug that is not prescribed to them?
- No risk
 - Slight risk
 - Moderate risk
 - Great risk
69. During your life, how many times have you used a prescription stimulant (such as Adderall or Ritalin) without a doctor's prescription or differently than how a doctor told you to use it?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 or more times
70. If you wanted to get a prescription stimulant like Adderall or Ritalin, how easy would it be for you to get some?
- Very hard
 - Sort of hard
 - Sort of easy
 - Very easy
71. Think of your closest friends. How many in the past year have used a prescription stimulant such as Adderall or Ritalin without a doctor's prescription or differently than how a doctor told them to use it?
- None of my friends
 - 1 of my friends
 - 2 of my friends
 - 3 of my friends
 - 4 of my friends
72. During your life, how many times have you used hallucinogenic drugs, such as LSD, acid, PCP, Special K, angel dust, mescaline, or mushrooms?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 or more times

73. During the past 12 months, how many times have you been drunk or high **at school**?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 or more times
74. How many times in the past year (12 months) have you sold illegal drugs?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 or more times
75. During the past 12 months, has anyone offered, sold, or given you an illegal drug **on school property**?
- Yes
 - No
76. Do you agree or disagree with the following statement? "My family has clear rules about alcohol and drug use."
- Strongly agree
 - Agree
 - Disagree
 - Strongly disagree
77. During the past 12 months, do you recall hearing, reading, or watching an advertisement about the prevention of substance use?
- Yes
 - No
 - Not sure
78. Have you ever lived with an adult who had a problem with alcohol or drugs?
- Yes
 - No

The next question asks about sexual behavior.

79. Have you ever had sexual intercourse?
- Yes
 - No

The next 5 questions ask 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.

80. During the past 7 days, how many times did you drink **100% fruit juices** such as orange juice, apple juice, or grape juice? (Do **not** count punch, Kool-Aid, sports drinks, or other fruit-flavored drinks.)
- A. I did not drink 100% fruit juice during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
81. During the past 7 days, how many times did you eat **fruit**? (Do **not** count fruit juice.)
- A. I did not eat fruit during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
82. During the past 7 days, how many times did you eat **vegetables**, such as carrots, green salad, corn, or green beans? (Do **not** count french fries or other fried potatoes.)
- A. I did not eat vegetables during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
83. During the past 7 days, how many times did you drink **a can, bottle, or glass of soda, sports drink, energy drink, or other sugar-sweetened beverage** such as Gatorade, Red Bull, lemonade, sweetened tea or coffee drinks, flavored milk, Snapple, or Sunny D? (Do **not** count diet soda, other diet drinks, or 100% fruit juice.)
- A. I did not drink soda, sports drinks, energy drinks, or other sugar-sweetened beverages during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day

84. During the past 7 days, on how many days did you eat dinner **at home** with **at least one of your parents or guardians**?
- 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 7 questions ask about physical activity and health.

85. 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
86. 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
87. Do any of your classroom teachers provide short physical activity breaks during regular class time? (Do **not** count your physical education teacher.)
- A. Yes
 - B. No
88. Do you have any physical disabilities or long-term health problems? (Long-term means 6 months or more.)
- A. Yes
 - B. No
 - C. Not sure

89. Do you have any long-term emotional or behavioral problems? (Long-term means 6 months or more.)
 A. Yes
 B. No
 C. Not sure
90. How long has it been since you last saw a doctor or healthcare provider for a wellness visit, physical, or general-purpose check-up?
 A. Less than a year (12 months) ago
 B. More than a year ago, but less than 2 years ago (12-24 months)
 C. More than 2 years (24 months) ago
 D. Never
 E. Not sure
91. When was the last time you saw a dentist or dental hygienist for a check-up, exam, teeth cleaning, or other dental work?
 A. Less than a year (12 months) ago
 B. More than a year ago, but less than 2 years ago (12-24 months)
 C. More than 2 years (24 months) ago
 D. Never
 E. Not sure

Beginning in early 2020, the United States, along with the rest of the world, experienced the coronavirus disease (COVID-19) pandemic. As part of the response to this pandemic, schools and businesses were closed and people were required to stay at home. Depending on where you live, your experience with the pandemic might still be going on now, or your community and your school might be somewhat back to normal. The next 3 questions ask about your experiences during this time, whether in the past or continuing now.

92. During the COVID-19 pandemic, 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
93. Do you agree or disagree that doing your schoolwork was more difficult during the COVID-19 pandemic than before the pandemic started?
 A. Strongly agree
 B. Agree
 C. Not sure
 D. Disagree
 E. Strongly disagree

94. During the COVID-19 pandemic, how often was your mental health not good? (Poor mental health includes stress, anxiety, and depression.)
 A. Never
 B. Rarely
 C. Sometimes
 D. Most of the time
 E. Always

The next 14 questions ask about your school, your family, your community, and support that you get.

95. 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
96. During an average week, how many hours do you spend in clubs or organizations (other than sports) outside of regular school hours?
 A. 0 hours
 B. 1 hour
 C. 2 hours
 D. 3 to 5 hours
 E. 6 to 10 hours
 F. 11 or more hours
97. Have you ever had a paid job, other than work around the house?
 A. Yes
 B. No
98. Do you agree or disagree that at least one of your teachers really cares and gives you help and support when you need it?
 A. Strongly agree
 B. Agree
 C. Not sure
 D. Disagree
 E. Strongly disagree
99. How often does your school enforce rules fairly?
 A. Never
 B. Rarely
 C. Sometimes
 D. Most of the time
 E. Always

100. How often do adults in your school address conflict, negative language, and bullying in positive ways to help students?
A. Never
B. Rarely
C. Sometimes
D. Most of the time
E. Always
101. How often does one of your parents talk with you about what you are doing in school?
A. About every day
B. About once or twice a week
C. About once or twice a month
D. Less than once a month
E. Never
102. How often is the following statement true for you?
"When I am not at home, one of my parents or guardians knows where I am and whom I am with."
A. Never
B. Rarely
C. Sometimes
D. Most of the time
E. Always
103. Do you agree or disagree that in your community you feel like you matter to people?
A. Strongly agree
B. Agree
C. Not sure
D. Disagree
E. Strongly disagree
104. How often do your parent(s) or guardian(s) try to help you succeed?
A. Never
B. Rarely
C. Sometimes
D. Most of the time
E. Always
105. How often do you feel the people at your school care about students and encourage them?
A. Never
B. Rarely
C. Sometimes
D. Most of the time
E. Always

106. How often do you have support from adults other than your parents?
A. Never
B. Rarely
C. Sometimes
D. Most of the time
E. Always
107. How often does your family give you love and support?
A. Never
B. Rarely
C. Sometimes
D. Most of the time
E. Always
108. Please tell us **how many** of the following six things have **ever** happened to you (**Add up how many ever** happened to you):
- Your parents or guardians got divorced or separated
- A parent or guardian died
- A parent or guardian was in jail or prison
- You lived with an adult who had a mental illness
- Your parent or another adult you lived with often swore at you, insulted you, put you down, or humiliated you.
- You were physically hurt by an adult in your home
A. 0, none of these things have ever happened to me
B. 1
C. 2
D. 3
E. 4
F. 5
G. 6

The next two questions ask about gambling.

109. In your lifetime, how many times have you gambled (bet) with money or something else of value? (Include if you bet at a casino, race track, or online, bought lottery tickets, bet on a sports team, or played cards or other games for money or things.)
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

110. Has the money or time that you spent on gambling led to financial problems or problems in your family, work, school, or personal life?

- A. I have never gambled
- B. Yes
- C. No

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



The Maine Integrated Youth Health Survey is a collaborative effort of the Maine Department of Education and the Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention.