

## MS-B

# 2021 Middle School (7<sup>th</sup>/8<sup>th</sup> Grade) 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: AB D
- To change your answer, erase your old answer completely.
- 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
- What is your sex?
  - A. Female
  - B. Male
- In what grade are you?
  - A. 6th grade
  - B. 7th grade
  - C. 8th grade
  - D. Ungraded or other grade
- Are you Hispanic or Latino?
  - A. Yes
  - B. No
- 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

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	
	90	
60	(3)	
7	4	
	(3) (6)	
	6	
	<b>®</b>	
	9	
	10	
	Û	

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)	@	
3	3	3
	4	4
		(5)
	6	6
	7	7
	8	8
	9	9

- 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. 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 question asks about safety.

- 11. Have you ever ridden in a car or other vehicle driven by someone who had been using marijuana (also called pot or weed)?
  - A. Yes
  - B. No

### The next 2 questions ask about violence-related behaviors and experiences.

- 12. Have you ever carried a weapon such as a gun, knife, or club **on school property**?
  - A. Yes
  - B. No
- 13. 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

The next question asks 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

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 or killing themselves.

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

#### The next 11 questions ask about cigarette smoking.

- 17. 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
- 18. 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
- 19. 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
- 20. 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
- 21. 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

- 22. 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
- 23. 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
- 24. 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
- 25. 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
- 26. 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
- 27. How wrong do you think it is for someone your age to smoke cigarettes?
  - A. Very wrong
  - B. Wrong
  - C. A little bit wrong
  - D. Not wrong at all

The next 2 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.

- 28. Have you ever used an electronic vapor product?
  - A. Yes
  - B. No
- 29. 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 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.

- 30. 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
- 31. 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
- 32. Do you think you would be able to quit using tobacco products if you wanted to?
  - A. I do not use tobacco products now
  - B. Yes
  - C. No

The next 12 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.

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

- 34. 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
- 35. 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
- 36. During the past 30 days, on how many days did you have **5 or more** drinks of alcohol in a row, that is, within a couple of hours?
  - A. 0 days
  - B. 1 day
  - C. 2 days
  - D. 3 to 5 days
  - E. 6 to 9 days
  - F. 10 to 19 days
  - G. 20 or more days
- 37. 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
- 38. 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

- 39. 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
- 40. 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
- 41. 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
- 42. 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
- 43. 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
- 44. 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

The next 9 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.

- 45. Have you ever used marijuana?
  - A. Yes
  - B. No

- 46. 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
- 47. 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
- 48. 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
- 49. 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
- 50. 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
- 51. 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
- 52. 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

- 53. Do you think using marijuana would negatively impact your goals or future?
  - A. Definitely yes
  - B. Probably yes
  - C. Probably not
  - D. Definitely not

The next question asks about the use of prescription pain medicine without a doctor's prescription or differently than how a doctor told you to use it. For this question, count drugs such as codeine, Vicodin, OxyContin, Hydrocodone, and Percocet.

- 54. Have you ever taken **prescription pain medicine** without a doctor's prescription or differently than how a doctor told you to use it?
  - A. Yes
  - B. No

#### The next 8 questions ask about other drugs.

- 55. During the past 12 months, do you recall hearing, reading or watching an advertisement about the prevention of substance use?
  - A. Yes
  - B. No
  - C. Not sure
- 56. During the past 12 months, how many times have you been drunk or high **at school**?
  - A. 0 times
  - B. 1 or 2 times
  - C. 3 to 9 times
  - D. 10 to 19 times
  - E. 20 to 39 timesF. 40 or more times
- 57. Do you agree or disagree with the following statement? "My family has clear rules about alcohol and drug use."
  - A. Strongly agree
  - B. Agree
  - C. Disagree
  - D. Strongly disagree
- 58. 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

- 59. How wrong do your parents feel it would be for you to take prescription drugs not prescribed to you?
  - A. Very wrong
  - B. Wrong
  - C. A little bit wrong
  - D. Not wrong at all
- 60. How wrong do your friends feel it would be for you to take prescription drugs not prescribed to you?
  - A. Very wrong
  - B. Wrong
  - C. A little bit wrong
  - D. Not wrong at all
- 61. 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?
  - A. Very hard
  - B. Sort of hard
  - C. Sort of easy
  - D. Very easy
- 62. How much do you think people risk harming themselves (physically or in other ways) if they take prescription drugs that are not prescribed to them?
  - A. No risk
  - B. Slight risk
  - C. Moderate risk
  - D. Great risk

#### The next question asks about sexual intercourse.

- 63. Have you ever had sexual intercourse?
  - A. Yes
  - B. No

The next 4 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.

- 64. 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

- 65. 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
- 66. 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
- 67. 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

#### The next 2 questions ask about physical activity.

- 68. 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

- 69. 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

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 2 questions ask about your experiences during this time, whether in the past or continuing now.

- 70. 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
- 71. 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 3 questions ask about other health-related topics.

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

- 73. Do you still have asthma?
  - A. I have never had asthma
  - B. Yes
  - C. No
  - D. Not sure
- 74. During the past 12 months, about how many days did you miss school because of your asthma?
  - A. I have never had asthma
  - B. I did not miss any days of school because of my asthma
  - C. 1 or 2 days
  - D. 3 or 4 days
  - E. 5 or more days

The next 4 questions ask about your school, your family, your community, and support that you get.

- 75. 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
- 76. 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
- 77. How often does your family give you love and support?
  - A. Never
  - B. Rarely
  - C. Sometimes
  - D. Most of the time
  - E. Always
- 78. 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

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.

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