



HS-B

2019 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?
- Heterosexual (straight)
 - Gay or lesbian
 - Bisexual
 - Not sure
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?
- No, I am not transgender
 - Yes, I am transgender
 - I am not sure if I am transgender
 - I do not know what this question is asking
11. During the past 30 days, where did you usually sleep?
- In my parent's or guardian's home
 - 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
 - In a shelter or emergency housing
 - In a motel or hotel
 - In a car, park, campground, or other public place
 - In a dormitory or other school housing
 - I do not have a usual place to sleep
 - Somewhere else

The next 3 questions ask about safety.

12. When you rode a bicycle during the past 12 months, how often did you wear a helmet?
- I did not ride a bicycle during the past 12 months
 - Never wore a helmet
 - Rarely wore a helmet
 - Sometimes wore a helmet
 - Most of the time wore a helmet
 - Always wore a helmet
13. During the past 30 days, how many times did you **ride** in a car or other vehicle driven by someone who had been drinking alcohol?
- 0 times
 - 1 time
 - 2 or 3 times
 - 4 or 5 times
 - 6 or more times
14. During the past 30 days, how many times did you **ride** in a car or other vehicle driven by someone who had been taking illegal drugs such as marijuana, cocaine, heroin, or LSD?
- 0 times
 - 1 time
 - 2 or 3 times
 - 4 or 5 times
 - 6 or more times

The next 3 questions ask about violence-related behaviors.

15. Do you agree or disagree with the following statement? "I feel safe at my school."
- Strongly agree
 - Agree
 - Disagree
 - Strongly disagree
16. Have you ever been forced (physically or otherwise) to have sexual contact? (Select only **one** response.)
- Yes, this happened to me **both before and during** the past year
 - Yes, this happened to me **only before** the past year
 - Yes, this happened to me **only during** the past year
 - No, I have never been forced to have sexual contact
17. Has violence in your home, or the threat of violence, ever made you want to leave your home, even just for a short while?
- Yes
 - No

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.

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

The next 3 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.

19. 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?
- Yes
 - No
20. During the past 12 months, when you felt sad or hopeless, from whom did you get help? (Select only **one** response.)
- I did not feel sad or hopeless
 - I did feel sad or hopeless but did not seek help
 - Parent or other adult relative
 - Teacher or other school staff
 - Other adults
 - Friends
 - None of the above

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

The next 12 questions ask about cigarette smoking.

22. 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
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 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
24. 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
25. How wrong do your parents feel it would be for you to smoke cigarettes?
- A. Very wrong
 - B. Wrong
 - C. A little bit wrong
 - D. Not wrong at all
26. 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

27. 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
28. 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
29. 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
30. If one of your best friends offered you a cigarette, would you smoke it?
- A. Definitely yes
 - B. Probably yes
 - C. Probably not
 - D. Definitely not
31. 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
32. 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
33. Besides yourself, does anyone who lives in your home smoke cigarettes now?
- A. Yes
 - B. No

The next 2 questions ask about other tobacco products.

34. During the past 30 days, on how many days did you use **chewing tobacco, snuff, dip, snus, or dissolvable tobacco products**, such as Copenhagen, Grizzly, Skoal, or Camel Snus? (Do not count any electronic vapor products.)
- 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 15 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. During your life, on how many days have you had at least one drink of alcohol?
- A. 0 days
 - B. 1 or 2 days
 - C. 3 to 9 days
 - D. 10 to 19 days
 - E. 20 to 39 days
 - F. 40 to 99 days
 - G. 100 or more days
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. If a kid drank some alcohol in your neighborhood, would he or she be caught by the police?
A. Definitely yes
B. Probably yes
C. Probably not
D. Definitely not
45. 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
46. 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
47. How wrong would most adults over 21 in your neighborhood 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. 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
49. 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

50. 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 10 questions ask about marijuana use. Marijuana also is called pot, weed, or cannabis.

51. 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
52. 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
53. 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
54. During the past 30 days, how did you usually use marijuana? (Select only one response.)
A. I did not use marijuana during the past 30 days
B. I smoked it in a joint, bong, pipe, or blunt
C. I ate it in food such as brownies, cakes, cookies, or candy
D. I drank it in tea, cola, alcohol, or other drinks
E. I vaporized it
F. I dabbled it using waxes or concentrates
G. I used it some other way
55. 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

56. 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
57. 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
58. 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
59. If a kid used marijuana in your neighborhood, would he or she be caught by the police?
 A. Definitely yes
 B. Probably yes
 C. Probably not
 D. Definitely not
60. How wrong do you think it is for someone your age to use marijuana?
 A. Very wrong
 B. Wrong
 C. A little bit wrong
 D. Not wrong at all

The next question asks about the use of prescription pain medication 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.

61. During your life, how many times have you taken **prescription pain medicine** without a doctor's prescription or differently than how a doctor told you to use it?
 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 19 questions ask about other drugs.

62. During your life, how many times have you sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high?
 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. During the past 30 days, how many times did you sniff glue, breathe the contents of aerosol spray cans, or inhale any paints or sprays to get high?
 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
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. During your life, how many times have you used any form of cocaine, including powder, crack, or freebase?
 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
66. During your life, how many times have you used heroin (also called smack, junk, or China White)?
 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

67. During your life, how many times have you used methamphetamines (also called speed, crystal meth, crank, ice, or meth)?
- 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
68. During your life, how many times have you used ecstasy (also called MDMA)?
- 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
69. During your life, how many times have you used hallucinogenic drugs, such as LSD, acid, PCP, angel dust, mescaline, or mushrooms?
- 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
70. How many times in the past year (12 months) 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 times
 - F. 40 or more times
71. How many times in the past year (12 months) have you sold illegal drugs?
- 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
72. During the past 12 months, has anyone offered, sold, or given you an illegal drug **on school property**?
- A. Yes
 - B. No
73. If you wanted to get a drug like cocaine, LSD, or amphetamines, how easy would it be for you to get some?
- A. Very hard
 - B. Sort of hard
 - C. Sort of easy
 - D. Very easy
74. 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
75. 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
76. Have you ever lived with an adult who had a problem with alcohol or drugs?
- A. Yes
 - B. No
77. 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
78. 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?
- A. No risk
 - B. Slight risk
 - C. Moderate risk
 - D. Great risk
79. 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

80. 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

The next question asks about synthetic marijuana use. Synthetic marijuana is also called Spice, fake weed, K2, King Kong, Yucatan Fire, or Skunk.

81. During your life, how many times have you used synthetic marijuana (also called K2, Spice, fake weed, King Kong, Yucatan Fire, or Skunk)?
- 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 question asks about sexual behavior.

82. Have you ever had sexual intercourse?
- A. Yes
 - B. 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.

83. 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
84. 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

85. 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

86. 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

87. 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 4 questions ask about physical activity.

88. 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

89. In an average week when you are in school, on how many days do you go to physical education (PE) classes?
- 0 days
 - 1 day
 - 2 days
 - 3 days
 - 4 days
 - 5 days
90. Do any of your classroom teachers provide short physical activity breaks during regular class time? (Do not count your physical education teacher.)
- Yes
 - No
91. During the past 12 months, on how many sports teams did you play? (Count any teams run by your school or community groups.)
- 0 teams
 - 1 team
 - 2 teams
 - 3 or more teams

The next 3 questions ask about protection from the sun.

92. When you are outside for more than one hour on a sunny day, how often do you wear sunscreen with an SPF of 15 or higher?
- Never
 - Rarely
 - Sometimes
 - Most of the time
 - Always
93. During the past 12 months, how many times did you get a sunburn (that is, how many times did exposed parts of your skin stay red for several hours after you had been out in the sun)?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 or more times
94. 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** include getting a spray-on tan.)
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 or more times

The next 12 questions ask about your school, your family, your community, and support that you get.

95. During an average week, how many hours do you spend in clubs or organizations (other than sports) outside of regular school hours?
- 0 hours
 - 1 hour
 - 2 hours
 - 3 to 5 hours
 - 6 to 10 hours
 - 11 or more hours
96. Do you agree or disagree that at least one of your teachers really cares and gives you help and support when you need it?
- Strongly agree
 - Agree
 - Not sure
 - Disagree
 - Strongly disagree
97. How often does your school enforce rules fairly?
- Never
 - Rarely
 - Sometimes
 - Most of the time
 - Always
98. How often do adults in your school address conflict, negative language, and bullying in positive ways to help students?
- Never
 - Rarely
 - Sometimes
 - Most of the time
 - Always
99. How often does one of your parents talk with you about what you are doing in school?
- About every day
 - About once or twice a week
 - About once or twice a month
 - Less than once a month
 - Never
100. 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."
- Never
 - Rarely
 - Sometimes
 - Most of the time
 - Always

101. 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
102. 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
103. How often do you feel your school cares about kids and encourages them?
- A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always
104. 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
105. How often does your family give you love and support?
- A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always

106. 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.

107. 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
108. 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.

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