
Appendix II. Youth Risk Behavior Surveillance System Questionnaire

A copy of the most recent version of the questionnaire may be obtained on request to CDC, MS K33, 4770 Buford Hwy. NE, Atlanta, GA 30341—3724. The questionnaire may be copied, modified, or administered without permission. A citation acknowledging the Centers for Disease Control and Prevention (CDC) as the source of the questionnaire is suggested.

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
4. How do you describe yourself?
 - a. White-not Hispanic
 - b. Black-not Hispanic
 - c. Hispanic
 - d. Asian or Pacific Islander
 - e. Native American or Alaskan Native
 - f. Other
5. Compared to other students in your class, what kind of student would you say you are?
 - a. One of the best
 - b. Far above the middle
 - c. A little above the middle
 - d. In the middle
 - e. A little below the middle
 - f. Far below the middle
 - g. Near the bottom
6. How often do you wear a seat belt when riding in a car driven by someone else?
 - a. Never
 - b. Rarely
 - c. Sometimes
 - d. Most of the time
 - e. Always
7. During the past 12 months, how many times did you ride a motorcycle?
 - a. 0 times
 - b. 1 to 10 times
 - c. 11 to 20 times
 - d. 21 to 39 times
 - e. 40 or more times
8. When you rode a motorcycle during the past 12 months, how often did you wear a helmet?
 - a. I did not ride a motorcycle during the past 12 months
 - b. Never wore a helmet
 - c. Rarely wore a helmet
 - d. Sometimes wore a helmet
 - e. Most of the time wore a helmet
 - f. Always wore a helmet
9. During the past 12 months, how many times did you ride a bicycle?
 - a. 0 times
 - b. 1 to 10 times
 - c. 11 to 20 times
 - d. 21 to 39 times
 - e. 40 or more times
10. When you rode a bicycle during the past 12 months, how often did you wear a helmet?
 - a. I did not ride a bicycle during the past 12 months
 - b. Never wore a helmet
 - c. Rarely wore a helmet
 - d. Sometimes wore a helmet
 - e. Most of the time wore a helmet
 - f. Always wore a helmet
11. 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?
 - a. 0 times
 - b. 1 time
 - c. 2 or 3 times
 - d. 4 or 5 times
 - e. 6 or more times

12. During the past 30 days, how many times did **you** drive a car or other vehicle when you had been drinking alcohol?
 - a. 0 times
 - b. 1 time
 - c. 2 or 3 times
 - d. 4 or 5 times
 - e. 6 or more times
 13. During the past 12 months, when you went swimming in places such as a pool, lake, or ocean, how often was an adult or a lifeguard watching you?
 - a. I did not go swimming during the past 12 months
 - b. Never
 - c. Rarely
 - d. Sometimes
 - e. Most of the time
 - f. Always
 14. During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club?
 - a. 0 days
 - b. 1 day
 - c. 2 or 3 days
 - d. 4 or 5 days
 - e. 6 or more days
 15. During the past 30 days, on how many days did you carry a gun?
 - a. 0 days
 - b. 1 day
 - c. 2 or 3 days
 - d. 4 or 5 days
 - e. 6 or more days
 16. During the past 12 months, how many times were you in a physical fight?
 - a. 0 times
 - b. 1 time
 - c. 2 or 3 times
 - d. 4 or 5 times
 - e. 6 or 7 times
 - f. 8 or 9 times
 - g. 10 or 11 times
 - h. 12 or more times
 17. The **last time** you were in a physical fight, with whom did you fight?
 - a. I have never been in a physical fight
 - b. A total stranger
 - c. A friend or someone I know
 - d. A boyfriend, girlfriend, or date
 - e. A parent, brother, sister, or other family member
 - f. Someone not listed above
 - g. More than one of the persons listed above
 18. During the past 12 months, how many times were you in a physical fight in which you were injured and had to be treated by a doctor or nurse?
 - a. 0 times
 - b. 1 time
 - c. 2 or 3 times
 - d. 4 or 5 times
 - e. 6 or more times
- Sometimes people feel so depressed and hopeless 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 **seriously** consider attempting suicide?
 - a. Yes
 - b. No
 20. During the past 12 months, did you make a plan about how you would attempt suicide?
 - a. Yes
 - b. No
 21. During the past 12 months, how many times did you actually attempt suicide?
 - a. 0 times
 - b. 1 time
 - c. 2 or 3 times
 - d. 4 or 5 times
 - e. 6 or more times
 22. If you attempted suicide during the past 12 months, did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?
 - a. I did not attempt suicide during the past 12 months
 - b. Yes
 - c. No
- The next nine questions ask about tobacco use.
23. Have you ever tried cigarette smoking, even one or two puffs?
 - a. Yes
 - b. No

24. Do you think you will try cigarette smoking during the next 12 months?
- I have already tried cigarette smoking
 - Yes**, I think I will try cigarette smoking during the next 12 months
 - No**, I think I will **not** try cigarette smoking during the next 12 months
25. How old were you when you smoked a whole cigarette for the first time?
- I have never smoked a whole cigarette
 - Less than 9 years old
 - 9 or 10 years old
 - 11 or 12 years old
 - 13 or 14 years old
 - 15 or 16 years old
 - 17 or more years old
26. Have you ever smoked cigarettes regularly, that is, at least one cigarette every day for 30 days?
- Yes
 - No
27. How old were you when you first started smoking cigarettes regularly? (at least one cigarette every day for 30 days)
- I have never smoked cigarettes regularly
 - Less than 9 years old
 - 9 or 10 years old
 - 11 or 12 years old
 - 13 or 14 years old
 - 15 or 16 years old
 - 17 or more years old
28. During the past 30 days, on how many days did you smoke cigarettes?
- 0 days
 - 1 or 2 days
 - 3 to 5 days
 - 6 to 9 days
 - 10 to 19 days
 - 20 to 29 days
 - All 30 days
29. During the past 30 days, on the days you smoked, how many cigarettes did you smoke **per day**?
- I did not smoke cigarettes during the past 30 days
 - Less than 1 cigarette per day
 - 1 cigarette per day
 - 2 to 5 cigarettes per day
 - 6 to 10 cigarettes per day
 - 11 to 20 cigarettes per day
 - More than 20 cigarettes per day
30. During the **past 6 months**, did you **try to quit** smoking cigarettes?
- I did not smoke cigarettes during the past 6 months
 - Yes
 - No
31. During the past 30 days, did you use **chewing tobacco**, such as Redman, Levi Garrett, or Beechnut, or **snuff**, such as Skoal, Skoal Bandits, or Copenhagen?
- No, I did not use chewing tobacco or snuff during the past 30 days
 - Yes, **chewing tobacco** only
 - Yes, **snuff** only
 - Yes, **both chewing tobacco and snuff**
- The next four 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.
32. How old were you when you had your first drink of alcohol other than a few sips?
- I have never had a drink of alcohol other than a few sips
 - Less than 9 years old
 - 9 or 10 years old
 - 11 or 12 years old
 - 13 or 14 years old
 - 15 or 16 years old
 - 17 or more years old
33. During your life, on how many days have you had at least one drink of alcohol?
- 0 days
 - 1 or 2 days
 - 3 to 9 days
 - 10 to 19 days
 - 20 to 39 days
 - 40 to 99 days
 - 100 or more days
34. During the past 30 days, on how many days did you have at least one drink of alcohol?
- 0 days
 - 1 or 2 days
 - 3 to 5 days
 - 6 to 9 days
 - 10 to 19 days
 - 20 to 29 days
 - All 30 days

35. 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?
- 0 days
 - 1 day
 - 2 days
 - 3 to 5 days
 - 6 to 9 days
 - 10 to 19 days
 - 20 or more days

The next three questions ask about the use of marijuana, which is also called grass or pot.

36. How old were you when you tried marijuana for the first time?
- I have never tried marijuana
 - Less than 9 years old
 - 9 or 10 years old
 - 11 or 12 years old
 - 13 or 14 years old
 - 15 or 16 years old
 - 17 or more years old
37. During your life, how many times have you used marijuana?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 to 99 times
 - 100 or more times
38. During the past 30 days, how many times did you use marijuana?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 or more times

The next seven questions ask about cocaine and other drugs.

39. How old were you when you tried **any** form of cocaine, including powder, crack, or freebase, for the first time?
- I have never tried cocaine
 - Less than 9 years old
 - 9 or 10 years old
 - 11 or 12 years old
 - 13 or 14 years old

- 15 or 16 years old
- 17 or more years old

40. During your life, how many times have you used **any** form of cocaine including powder, crack, or freebase?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 or more times
41. During the past 30 days, how many times did you use **any** form of cocaine, including powder, crack, or freebase?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 or more times
42. During your life, how many times have you used the **crack** or **freebase** forms of cocaine?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 or more times
43. During your life, how many times have you used any other type of illegal drug, such as LSD, PCP, ecstasy, mushrooms, speed, ice, heroin, or pills without a doctor's prescription?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 or more times
44. During your life, how many times have you taken **steroid** pills or shots without a doctor's prescription?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 or more times

45. During your life, have you ever injected (shot up) any illegal drug?
- a. Yes
 - b. No

The next two questions ask about AIDS/HIV education and information.

46. Have you ever been taught about AIDS/HIV infection in school?
- a. Yes
 - b. No
 - c. Not sure
47. Have you ever talked about AIDS/HIV infection with your parents or other adults in your family?
- a. Yes
 - b. No
 - c. Not sure

The next nine questions ask about sexual behavior.

48. Have you ever had sexual intercourse?
- a. Yes
 - b. No
49. How old were you when you had sexual intercourse for the first time?
- a. I have never had sexual intercourse
 - b. Less than 12 years old
 - c. 12 years old
 - d. 13 years old
 - e. 14 years old
 - f. 15 years old
 - g. 16 years old
 - h. 17 or more years old
50. During your life, with how many people have you had sexual intercourse?
- a. I have never had sexual intercourse
 - b. 1 person
 - c. 2 people
 - d. 3 people
 - e. 4 people
 - f. 5 people
 - g. 6 or more people
51. During the **past 3 months**, with how many people did you have sexual intercourse?
- a. I have never had sexual intercourse
 - b. I have had sexual intercourse, but not during the past 3 months
 - c. 1 person

- d. 2 people
- e. 3 people
- f. 4 people
- g. 5 people
- h. 6 or more people

52. Did you drink alcohol or use drugs before you had sexual intercourse the **last time**?
- a. I have never had sexual intercourse
 - b. Yes
 - c. No
53. The **last time** you had sexual intercourse, did you or your partner use a condom?
- a. I have never had sexual intercourse
 - b. Yes
 - c. No
54. The **last time** you had sexual intercourse, what one method did you or your partner use to **prevent pregnancy**? (Select only **one** response.)
- a. I have never had sexual intercourse
 - b. No method was used to prevent pregnancy
 - c. Birth control pills
 - d. Condoms
 - e. Withdrawal
 - f. Some other method
 - g. Not sure
55. How many times have you been pregnant or gotten someone pregnant?
- a. 0 times
 - b. 1 time
 - c. 2 or more times
 - d. Not sure
56. Have you ever been told by a doctor or nurse that you had a sexually transmitted disease such as genital herpes, genital warts, chlamydia, syphilis, gonorrhea, AIDS, or HIV infection?
- a. Yes
 - b. No

The next four questions ask about body weight.

57. How do **you** think of yourself?
- a. Very underweight
 - b. Slightly underweight
 - c. About the right weight
 - d. Slightly overweight
 - e. Very overweight

58. Which of the following are you trying to do?
- a. **Lose** weight
 - b. **Gain** weight
 - c. **Stay** the same weight
 - d. I am **not trying to do anything** about my weight

59. During the past 7 days, which **one** of the following did you do to lose weight or to keep from gaining weight?
- a. I did not try to lose weight or keep from gaining weight
 - b. I dieted
 - c. I exercised
 - d. I exercised and dieted
 - e. I used some other method, but I did not exercise or diet

60. During the past 7 days, which **one** of the following did you do to lose weight or to keep from gaining weight?
- a. I did not try to lose weight or keep from gaining weight
 - b. I made myself vomit
 - c. I took diet pills
 - d. I made myself vomit and took diet pills
 - e. I used some other method, but I did not vomit or take diet pills

The next seven questions ask about food you ate yesterday. Think about all meals and snacks you ate yesterday 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.

61. Yesterday, did you eat fruit?
- a. No
 - b. Yes, once only
 - c. Yes, twice or more
62. Yesterday, did you drink fruit juice?
- a. No
 - b. Yes, once only
 - c. Yes, twice or more
63. Yesterday, did you eat green salad?
- a. No
 - b. Yes, once only
 - c. Yes, twice or more
64. Yesterday, did you eat **cooked** vegetables?
- a. No
 - b. Yes, once only
 - c. Yes, twice or more

65. Yesterday, did you eat hamburger, hot dogs, or sausage?
- a. No
 - b. Yes, once only
 - c. Yes, twice or more
66. Yesterday, did you eat french fries or potato chips?
- a. No
 - b. Yes, once only
 - c. Yes, twice or more
67. Yesterday, did you eat cookies, doughnuts, pie, or cake?
- a. No
 - b. Yes, once only
 - c. Yes, twice or more

The next eight questions ask about physical activity.

68. On how many of the past 7 days did you exercise or participate in sports activities for at least 20 minutes **that made you sweat and breathe hard**, such as basketball, jogging, fast dancing, swimming laps, tennis, fast bicycling, or similar aerobic activities?
- 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. On how many of the past 7 days did you do **stretching exercises**, such as toe touching, knee bending, or leg stretching?
- a. 0 days
 - b. 1 day
 - c. 2 days
 - d. 3 days
 - e. 4 days
 - f. 5 days
 - g. 6 days
 - h. 7 days
70. On how many of the past 7 days did you do exercises to **strengthen or tone your muscles**, such as push-ups, sit-ups, or weight lifting?
- a. 0 days
 - b. 1 day
 - c. 2 days
 - d. 3 days

- e. 4 days
 - f. 5 days
 - g. 6 days
 - h. 7 days
71. On how many of the past 7 days, did you walk or bicycle for at least 30 minutes at a time? (Include walking or bicycling to or from school.)
- a. 0 days
 - b. 1 day
 - c. 2 days
 - d. 3 days
 - e. 4 days
 - f. 5 days
 - g. 6 days
 - h. 7 days
72. 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
73. 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. More than 30 minutes
74. During the past 12 months, on how many sports teams **run by your school**, did you play? (Do not include PE classes.)
- a. None
 - b. 1 team
 - c. 2 teams
 - d. 3 or more teams
75. During the past 12 months, on how many sports teams **run by organizations outside of your school**, did you play?
- a. None
 - b. 1 team
 - c. 2 teams
 - d. 3 or more teams
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