

**2023 Massachusetts
Youth Risk Behavior Survey
HINGHAM MIDDLE SCHOOL**

This survey is about health behavior and attitudes. It has been developed so you can tell us what you do that may affect your health. The information you give will be used to shape health, physical education and counseling curricula and programs that meet your unique needs.

DO NOT write your name on this survey. The answers you give will be kept private. No one will know what you write. Answer the questions based on what you really do.

Completing the survey is voluntary. Whether or not you answer the questions will not affect your grade in this class. If you are not comfortable answering a question, just leave it blank.

The questions that ask about your background will be used only to describe the types of students completing this survey. The information will not be used to find out your name. No names will ever be reported.

Make sure to read every question. Fill in the ovals completely. When you are finished, follow the instructions of the person giving you the survey.

Directions:

- Use a # 2 pencil only
- Make dark marks
- Fill in a response like this: A B ● D.
- To change your answer, erase completely
- Choose only one answer for each question (except for question 4.)

THANK YOU VERY MUCH FOR YOUR HELP.

1. How old are you?

- a. 11 years old or younger
- b. 12 years old
- c. 13 years old
- d. 14 years old

2. What is your sex?

- a. Female
- b. Male
- c. Non-binary
- d. Prefer to self-describe
- e. Prefer not to answer

3. In what grade are you?

- a. 6th grade
- b. 7th grade
- c. 8th grade

4. How do you describe yourself? (**Select one or more**)

- a. Asian American (such as Chinese, Japanese, Korean, Thai, Vietnamese, East Indian)
- b. Black or African American
- c. Hispanic or Latino
- d. White
- e. Other

5. During the past 12 months, how would you describe your grades in school?

- a. Mostly A's and B's
- b. Mostly C's
- c. Mostly D's
- d. Mostly F's
- e. Not sure

6. Is there at least one teacher or other adult in this school that you can talk to if you have a problem?

- a. Yes
- b. No
- c. Not sure

7. Within school who is the person you would most likely go to with a problem?

- a. I don't have someone at school I would go to with a problem
- b. Teacher
- c. Counselor
- d. Adjustment counselor
- e. Club/activity advisor

8. Outside of school, is there an adult (or adults) you can talk to about things that are important to you?

- a. Yes, parent or other adult family member
- b. Yes, non-family adult (such as religious leader, club advisor, neighbor, etc.)
- c. Yes, both family and non-family adults
- d. No
- e. Not sure

The following questions ask about personal safety

9. 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

10. 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

11. When you ride a bicycle, how often do you wear a helmet?

- a. I do not ride a bicycle
- b. I rarely or never wear a helmet
- c. Sometimes wear a helmet
- d. Most of the time wear a helmet
- e. Always wear a helmet

12. When you longboard, rollerblade or ride a skateboard, how often do you wear a helmet?

- a. I do not rollerblade or ride a skateboard
- b. I rarely or never wear a helmet
- c. Sometimes wear a helmet
- d. Most of the time wear a helmet
- e. Always wear a helmet

The following questions ask about violence-related behaviors

13. During the past 30 days, on how many days did you **not** go to school because you felt you would be unsafe at school or on your way to or from school?

- a. 0 days
- b. 1 day
- c. 2 or 3 days
- d. 4 or 5 days
- e. 6 or more days

14. During the past 30 days, on how many days did you carry **a weapon**?

- 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 weapon **on school property**?

- 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 have you been bullied **at school**? (Being bullied is defined as verbal, physical, written or electronic action, or other behavior that is intentionally cruel or repetitive.)

- a. 0 times
- b. 1-3 times
- c. 4-6 times
- d. 7-9 times
- e. 10 or more times

17. Have you **ever** been harassed or bullied online (Facebook, email, Twitter, Snapchat, etc.) or with a cell phone (text messaging, photos, etc.)?

- a. Yes
- b. No

18. During the past 12 months, how many times have you been harassed or bullied online (Facebook, email, Twitter, Snapchat, etc.) or with a cell phone (text messaging, photos, etc.)?

- a. 0 times
- b. 1-3 times
- c. 4-6 times
- d. 7-9 times
- e. 10 or more times

19. During the past 12 months, how many times has someone stolen or deliberately damaged your property such as your phone, clothing, books or money on school property?

- a. 0 times
- b. 1-3 times
- c. 4-6 times
- d. 7-9 times
- e. 10 or more times

20. During the past 12 months, how many times were you in a physical fight?

- a. 0 times
- b. 1-3 times
- c. 4-6 times
- d. 7-9 times
- e. 10 or more times

21. During the past 12 months, how many times were you in a physical fight **on school property**?

- a. 0 times
- b. 1-3 times
- c. 4-6 times
- d. 7-9 times
- e. 10 or more times

22. Have you ever been verbally or physically hurt by a close friend or someone in your family?

- a. Yes
- b. No

The next questions ask about emotional health and deliberately hurting yourself, sad feelings and attempted suicide.

Sometimes people feel so depressed about the future that they may consider attempting suicide, which is taking some action to end their life.

23. How often do you feel lonely?
- Never
 - Occasionally
 - Frequently
 - All of the time
24. How often do you feel isolated from others?
- Never
 - Occasionally
 - Frequently
 - All of the time
25. How often do you feel a sense of belonging at school?
- Never
 - Occasionally
 - Frequently
 - All of the time
26. What was the hardest part of covid for you?
- Less time with friends
 - Inability to participate in after school activities
 - Remote school
 - Less one-on-one time with teachers
 - Other
27. How much do you worry (or feel like you can't control how much you worry) about minor things such as homework, talking to a teacher or adjusting to change?
- Never
 - Sometimes
 - Often
 - Always
28. How often do you avoid going places or doing things you normally like to do because you feel anxious?
- Never
 - Sometimes
 - Often
 - Always
29. During the past 12 months, how many times did you hurt or injure yourself **on purpose** without wanting to die? (For example, by cutting, burning, or bruising yourself on purpose).
- 0 times
 - 1 or 2 times
 - 3 to 5 times
 - 6 to 9 times
 - 10 or more times

30. 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

The following questions ask about technology

31. Do you ever pretend to be some else when you are online?
- Yes
 - No
32. Have you ever received a text of a sexual nature (pictures or words)?
- Yes
 - No
33. Have you ever sent a text of a sexual nature (pictures or words) to someone else?
- Yes
 - No
34. Have your parents given you permission to use social media (such as having a Facebook page, Twitter or Snapchat account, or Instagram, etc.)?
- Yes
 - No
 - I have an account but my parents don't know I do.
35. Are your parents supervising your social media account (such as your a Facebook page, Twitter or Snapchat account, or Instagram, etc.)?
- I do not have a social media account (such as a Facebook ,Twitter, Instagram or Snapchat account)
 - Yes
 - No
 - I have an account but my parents don't know I do (so they aren't supervising it).

The following questions ask about tobacco use

36. Have you ever tried cigarette smoking, even one or two puffs?

- a. Yes
- b. No

37. 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

38. 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 or more days

39. During the past 30 days, on the days you smoked, how many cigarettes did you smoke **per day**?

- a. I did not smoke cigarettes in last 30 days
- b. 1 or 2 days
- c. 3 to 5 days
- d. 6 to 9 days
- e. 10 or more days

40. During the past 30 days, on how many days did you use **chewing tobacco or dip**?

- a. 0 days
- b. 1 or 2 days
- c. 3 to 5 days
- d. 6 to 9 days
- e. 10 or more days

41. Have you ever used an e-cigarette or “vaped”?

- a. Yes
- b. No

42. During the past 30 days, on how many days did you use an e-cigarette or “vape”?

- a. 0 days
- b. 1 or 2 days
- c. 3 to 5 days
- d. 6 to 9 days
- e. 10 or more days

43. During the past 30 days how did you usually get your own e-cigarettes or vapor products (select only one)?

- a. I did not use an e-cigarette or vapor product in past 30 days.
- b. I bought them in a store, supermarket, gas station or vape store.
- c. I gave someone else money to buy them for me
- d. I got them on the internet
- e. I got them some other way

The following questions ask about drinking alcohol, drug use and prescription medications.

44. During your life, on how many days have you had at least one drink of alcohol? (For this question, drinking alcohol **does not include** drinking a few sips of wine for religious purposes.)

- a. 0 days
- b. 1 or 2 days
- c. 3 to 9 days
- d. 10 to 19 days
- e. 20 or more days

45. In your lifetime have you ever used marijuana?

- a. Yes
- b. No

46. During your life, how many times have you use marijuana?

- a. 0 times
- b. 1 or 2 times
- c. 3 to 9 times
- d. 10 to 19 times
- e. 20 or more times

47. Have you ever been prescribed a painkiller (such as Oxycontin, Percocet, Vicodin or Codeine) by your doctor to treat a medical issue?

- a. Yes
- b. No

48. During your life, have you ever taken a prescription medication to help you focus (such as Adderall, Ritalin, Concerta, etc) or to treat anxiety (such as Ativan or Xanax) that **was prescribed for you by a doctor**??

- a. Yes
- b. No

49. How did you usually get the prescription drugs that you've taken **without** a doctor's prescription?

- a. I have never taken a prescription drug without a doctor's prescription
- b. I took it from a family member
- c. I took it from someone other than a family member
- d. I bought it from someone
- e. Someone gave it to me

50. Have you ever taken someone else's prescription medicine?

- a. Yes
- b. No

51. Have you ever 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 or more times

52. What part of DARE class did you find most valuable?

- A. I did not take DARE
- B. Learning about how drugs and alcohol impact my health.
- C. How to avoid dangerous situations.
- D. Getting to know a member of the Hingham Police Department
- E. Learning that all decisions have consequences.

The next question asks about sexual education

53. During the past 12 months, about how often have you had a conversation with your parents or other adults in your family about sexual health or ways to prevent sexually transmitted diseases (STDs) or pregnancy?

- a. Not at all in the past 12 months
- b. About once in the past 12 months
- c. About once every few months
- d. About once a month
- e. More than once a month

The next questions ask about your body weight

54. How do you describe your weight?

- a. Very underweight
- b. Slightly underweight
- c. About the right weight
- d. Slightly overweight
- e. Very overweight

55. Which of the following are you trying to do about your weight?

- a. I am not trying to do anything about my weight
- b. Lose weight
- c. Gain weight
- d. Stay the same weight

The following 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 to the time you went to bed. Be sure to indicate food you ate at home, at school, at restaurants or anywhere else.

56. In an average week, how many drinks of soda do you consume? (A drink can be defined as a can, glass or individual bottle).

- a. 0 times per week
- b. 1 per week on average
- c. 2-4 per week on average
- d. 5 or more per week on average

57. In an average week, how many energy drinks (such as Monster, Rockstar, Amp and Red Bull) do you consume? (A drink can be defined as a can, glass or individual bottle).

- a. 0 times per week
- b. 1 per week on average
- c. 2-4 per week on average
- d. 5 or more per week on average

58. On how many of the past 7 days did you eat breakfast?

- a. 0 days
- b. 1 day
- c. 2 - 3 days
- d. 4 - 5 days
- e. 6 - 7 days

59. Overall, how do you feel your eating habits are?

- a. I always eat healthy foods
- b. I sometimes eat healthy foods
- c. I never eat healthy foods
- d. I don't know

The following questions ask about physical activity and how you spend your free time.

60. On how many of the past 7 days did you exercise or participate in physical activity **for at least 30 minutes** that made you **sweat and breathe hard**, such as basketball, soccer, running, swimming laps, fast bicycling, fast dancing or similar aerobic activities?

- a. 0 days
- b. 1 - 2 days
- c. 3 - 4 days
- d. 5 - 6 days
- e. 7 days

61. During the past 12 months, on how many sports teams did you play? (Include any teams run by your school or community groups).

- a. 0 teams
- b. 1 team
- c. 2 teams
- d. 3 or more teams

62. It is recommended that you exercise an average of 1 hour per day. In an average week, how many hours of exercise do you get?

- a. Less than 1 hour
- b. 1 - 5 hours
- c. 5 - 10 hours
- d. > 10 hours

63. On an average school day, how many hours do you watch TV shows - including streaming movies and videos, Netflix, Hulu, etc.?

- a. I do not watch TV on an average school day
- b. Less than 1 hour per day
- c. 1 - 2 hours per day
- d. 2 - 3 hours per day
- e. More than 3 hours per day

64. On an average school day, how many hours do you **play video games (Xbox, Playstation, Wii)**?

- a. I do not play video games on an average school day
- b. Less than 1 hour per day
- c. 1 - 2 hours per day
- d. 2 - 3 hours per day
- e. More than 3 hours per day

65. Excluding time spent doing homework, how much of your free time, on an average day, do you spend on your computer, tablet or phone? (This includes texting, playing games or using apps such as Snapchat, Twitter, Instagram, Facebook, etc.)

- a. Less than 1 hour per day
- b. 1 - 3 hours per day
- c. 3 - 5 hours per day
- d. More than 5 hours per day

66. To what degree do you think the amount of time you regularly spend using your phone/internet or watching TV affects your productivity?

- a. It does not affect my productivity at all
- b. It affects my productivity sometimes
- c. It affects my productivity all the time

67. In an **average month**, how many hours do you spend on **volunteer work, community service**, or helping people outside your home without getting paid? (Do not include community service work that you are required to do as a punishment.)

- a. 0 hours
- b. 1 to 4 hours
- c. 5 to 9 hours
- d. 10 or more hours

68. On how many of the past 7 days did you take part in **organized after school, evening, or weekend activities** (such as school clubs, community center groups, music/art/dance lessons, drama, church or other **supervised** activities)?

- a. 0 or 1 day
- b. 2 or 3 days
- c. 4 or 5 days
- d. 6 or 7 days

69. On average, how many hours of sleep do you get on a typical school night?

- a. 5 or less
- b. 6
- c. 7
- d. 8
- e. 9 or more

70. Which of the following contributes MOST to your stress level **at school**?

- a. I'm not stressed out about school
- b. Not knowing how to prepare for tests/what will be on the test
- c. Writing papers or taking tests
- d. Speaking up/participating in class
- e. Having too much homework each night

**THIS IS THE END
OF THE SURVEY.
THANK YOU VERY
MUCH FOR YOUR
HELP!**