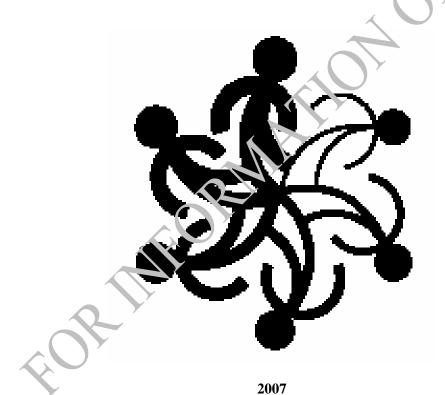
NATIONAL LONGITUDINAL SURVEY OF CHILDREN & YOUTH

Cycle 7 Survey Instruments 2006/2007 Book 2 – Youth Questionnaires





Statistique Canada

Ressources humaines et Développement social Canada

Canadä

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Également dispondule en français sous le titre: Enquête longitudinale nationale sur les enfants et les jeunes, Matériel d'enquête 2006-2007 - Cycle 7.

National Longitudinal Survey of Children and Youth - Cycle 7

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FOR INFORMATION ON INTERPREDICTION OF THE PROPERTY OF THE PROP

INTRODUCTION

The National Longitudinal Survey of Children and Youth (NLSCY) instruments – by which we mean the various questionnaires used to gather information from parents, children and youth, and teachers – can be divided into 3 groups:

- A- **Electronic questionnaires** loaded on the interviewers' laptops and administered by interviewers to parents and youth using computer-assisted (CAPI or CATI) methods:
 - Household contact information
 - Parent questionnaire
 - Child questionnaire
 - Youth questionnaire
- B- Paper questionnaires, self administered:
 - Booklet 21 self complete for 12- and 13-year-olds
 - Booklet 22 self complete for 14- and 15-year-olds
 - Booklet 23 self complete for 16- and 17-year-olds
- C- Other Instruments to be administered by interviewers:
 - Peabody Picture Vocabulary Test Revised (PPVT-?) (Direct Measure, 4- and 5-year-olds)
 - Who Am I? (Direct Measure, 4- and 5-year-olds).
 - Number Knowledge (Direct Measure, 4- and 5- rear olds)
 - Math tests (Direct Measure, Grades 4 tc 10)
 - Problem Solving Exercise (Direct Measure 16- and 17-year-olds)

For Cycle 7, there are two published documents containing survey instruments: Book 1 contains the electronic questionnaires and Book 2 contains the set administered paper questionnaires listed in B above. The instruments listed in C above will not be published. Several of them are available from publishers. Please see list at the end of this section.

This is **Book 2**. It includes the youth paper so!f complete questionnaires.

The reader may also wish to refer to the cocumentation from previous cycles, available upon request or on the Statistics Canada website at statean.ca\Products and Services

Cycle 1

National Longitudinal Survey of Children: Survey Instruments for 1994/1995 Data Collection, Cycle 1

National Longitudi. al Survey of Children: Overview of Survey Instruments for 1994/1995 Data Collection, Cycle 1

National Lon, itudinal Survey of Children and Youth: User's Handbook and Microdata Guide

Cycle 2

National Longitudinal Survey of Children and Youth: Survey Instruments for 1996/1997 Data Collection, Cycle 2

National Longitudinal Survey of Children and Youth: Overview of Survey Instruments for 1996/1997 Data Collection, Cycle 2

Cycle 3

National Longitudinal Survey of Children and Youth: Cycle 3 Survey Instruments for 1998/1999 Book 1-Parents and Child

National Longitudinal Survey of Children and Youth: Cycle 3 Survey Instruments for 1998/1999 Book 2 – Education; 10- and 11-year-olds; 12- and 13-year-olds; 14- and 15-year-olds

National Longitudinal Survey of Children and Youth: Overview of Survey Instruments for 1998/1999 Data Collection, Cycle 3

Cycle 4

National Longitudinal Survey of Children and Youth: Cycle 4 Survey Instruments for 2020/2001 Book 1-Parent, Child and Youth

National Longitudinal Survey of Children and Youth: Cycle 4 Survey Instruments for 2000/2001 Book 2-Teacher, Principal and Youth (10- to 17-year-olds)

National Longitudinal Survey of Children and Youth: Overview of Survey I. struments for 2000/2001 Data Collection, Cycle 4

Cycle 5

National Longitudinal Survey of Children and Youth: Cycle 5 Curvey Instruments for 2002/2003 Book 1-Parent, Child and Youth

National Longitudinal Survey of Children and Youth: Cycl. 5 Survey Instruments for 2002/2003 Book 2-Teacher and Youth Questionnaires

National Longitudinal Survey of Children at a Youth: Survey Overview for 2002/2003 Data Collection, Cycle 5

Cycle 6

National Longitudinal Survey of Children and Youth: Cycle 6 Survey Instruments for 2004/2005 Book 1-Parent, Child and Youth

National Longitudina. Survey of Children and Youth: Cycle 6 Survey Instruments for 2004/2005 Book 2-Teacher and Youth. Questionnaires

National Longi udinal Survey of Children and Youth: Survey Overview for 2004/2005 Data Collection, Cycle 6

List of the Direct Measures publishers

PPVT-R and EVIP

Jessica Oliver, President Psycan Corporation 12-120 West Beaver Creek Rd. Richmond Hill, ON L4B 1L2 Tel: (905) 731-8795

Fax: (905) 731-5029 mail@psycan.com www.psycan.com

Math Tests (Grades 4 to 10)

David Galati Canadian Test Centre 85 Citizen Court, Unit # 7 Markham, Ontario L6G 1A8

Tel.: (905) 513-6636 Fax.: (905) 513-6639 ctdavid@on.aibn.com

Who Am I?

ACER Press Customer Service Private Bag 55 Camberwell, VIC 3124 AUSTRALIA www.acerpress.com.au

Number Knowledge

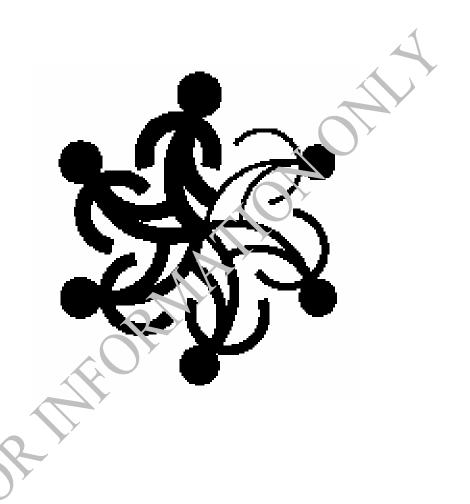
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Ages & Stages Questionnaires® (ASQ): A Parent-Completed, Child-Monitoring System, Second Edition

Heati er Lengyel Subsidiary Rights & Contracts Manager Brookes Publishing Co. & Health Professions Press P.O. Box 10624 Baltimore, Maryland 21285-0624, USA Tel. (410) 337-9580 Fax (443) 279-0976 hlengyel@brookespublishing.com FOR INFORMATION ONLY

National Longitudinal Survey of Children & Youth

Cycle 7 Survey Instruments 2006/2007



BOOKLET 21: SELF-COMPLETED QUESTIONNAIRE FOR 12- AND 13-YEAR-OLDS

BOOKLET 21	
SELF-COMPLETED QUESTIONNAIRE FOR 12- AND 13-YEAR-OLDS	. 11

FOR THE ORDINATION OF THE PARTY OF THE PARTY



National Longitudinal Survey of Children and Youth

Cycle 7

Booklet 21E

Confidential when completed

Collected under the authority of the Statistics Act, revised statutes of Canada, 1985, Chapter S19.

Aussi disponible en français



Please read instructions on next page before beginning.

	₩
FOR OFFICE USE ONLY	
Person ID	
Respondent's First Name	
Assignment No.	
Time Started	

8-5300-447.1: 2006-06-14 STC/ENM-040-75020



Statistics Statistique Canada Canada



INST RUCTIONS

This questionnaire asks about you, your family, your friends, how you feel and what you like to do. Your answers will help the government to plan programs and services for young people like yourself.

This is not a test and there are no right or wrong answers. Some questions may seem personal and some are about things not everybody does. Take your time and please be sure to answer each question based on what you really think. You can choose whether or not to fill out this questionnaire. If you need help with any questions, you may ask the interviewer.

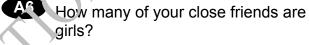
When you answer these questions, you can mark your answers like this \otimes or fill in the circle \bullet , or write a number in the boxes, as in the examples below. When you write your answers, make sure you press hard with your pencil.

Example 1

B1 How do you feel about school?

- ° I like school very much.
- 1 \otimes I like school quite a bit.
- ² O I like school a bit.
- ³ O I don't like school very much.
- ⁴ O I hate school.

Example 3



93 O None

OR

0 3 number of girls



Nomember that the KIDS HELP PHONE is available to help you at any time if you feel like you would like to talk to someone about a problem.

1-(800) 668-6868

Statistics Canada will keep your answers PRIVATE.

No one from your home or your school will see what you write.

THANK YOU FOR YOUR HELP!

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A			A
•			•

Friends and Famil Please answer the following	<i>5</i>				
statements about your friends and others your age.	False	Mostly false	Sometimes true/ Sometimes false	Mostly true	True
I have many friends.	$^{\circ}\bigcirc$	1 🔿		³ O	4 🔿
I get along easily with others my age.	5 🔾	6 🔾	7 🔾	*O	⁹ O
Others my age want me to be their friend.	°O	1 🔿	² O	³ O	4 🔿
Most others my age like me.	5 🔿	⁶ O	⁷ O	⁸ O	⁹ O
For the rest of this questi you trust and confide in. or outside school.	onnaire, by They may b	"close frie e friends t	ends", we mean hat you hang out	the people t with at s	e that chool
About how many days a week do yo things with close friends outside of hours?	ou do school	02 Le 03 1 0 04 2	ss than or ce a veek day a week 3 days a week 5 days a week 7 days a week		
How many of your close friends are	OP				
girls?	>	None	OR	Jei Jei	
boys?		94	OR		
How often do you share your secret private feelings with your close frien	s and ds?	° O All	the time		
		¹ O Mo	st of the time		
		² O Sor	me of the time		
		³ O Rai	rely		
		⁴ O Ne	/er		

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Page 03

*	*
*	*

A9	How many of your close friends do the following:	None	A few	Most	All
	a. smoke cigarettes?	° 🔿	1 🔘	2 🔘	3 🔘
	b. drink alcohol?	4 🔘	5 🔘	6 🔾	7 🔘
	c. break the law by stealing, hurting someone or damaging property?	0 🔘	1 🔘	2 🔘	3 🔘
	d. have tried marijuana?	4 🔘	5 🔘	6 🔾	7 🔘
	e. have tried drugs other than marijuana?	° O	1 🔿	² O	3 🔾
A10	Other than your close friends, do you had anyone else in particular you can talk to yourself or your problems?	ave o about	⁸ ○ Yes →	Go to question A	A11
			9 O No →	Go to questเบา A	A12
A11	What is their relationship to you? (Mark everyone you feel you can talk about yourself or your problems.)	to	12 O Teacher 13 O Coach or leader)	re ne family	de or church
A12	In the past 6 months, how well have you gotten along with other young people su friends or classmates?	u uch as	17 O Pretty well, s	o problems nardly any problems some problems , many problems all, constant problems	3

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*			,	*
A13	In the past 6 months, how well have you gotten along with your brothers and sisters, step brothers and sisters, or foster brothers and sisters? (Answer about the ones you spend the most time with.)	1 \(\) 2 \(\) 3 \(\) 4 \(\) 6 \(\) 7 \(\)	Very well, no problems Quite well, hardly any problems Pretty well, some problems Not too well, many problems Not well at all, constant problems I am not in touch with my brothers and sisters I don't have brothers and sisters	K —
	E OR THE STATE OR			

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_				_	_	
(9 -	CTI		7	-	C~	haal
9	U	U	ν.	\mathbf{P}	SC	hoo

B	How do you feel about school?	°
		T like school very much
		I like school quite a bit
		² O I like school a bit
		³ O I don't like school very much
		⁴ O I hate school
B2	Are you in the same school that you were in two years ago?	⁸ O Yes → Go to question B5
		⁹ O No → Go to question B3
B 3	For your most recent change in schools, why did you change schools? (Please mark all that apply.)	¹ O I changed from elementary school to high school
		² O I changed from elementary school to middle school or junior high
		³ O I changed from middle school or junior high to high school
		⁴ O I r. oved ⁵ O : was expelled
		Other reason
B4	What did you find hard to get used to about your new school? (Please mark all that apply.)	Organizing homework
		Organizing nomework New teachers
		04 Changing classes
		Onlinging classes Having to make new friends
		⁰⁶ O Finding my way around
		Taking the bus to a new school
		Other
B 5	How well do you think you are doing in your school work?	⁰⁹ O Very well
		¹⁰ O Well
		¹¹ O Average
		¹² O Poorly
		¹³ O Very poorly

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H de	low important is it to you to o the following in school:	Very important	Somewhat important	Not very important	Not important at all
а	. make friends?	1 🔘	2 🔘	3 🔘	4 🔘
b	. get good grades?	5 🔘	6 🔾	7 🔘	8 🔘
C.	. participate in extra- curricular activities?	1 🔘	2 🔘	3 🔘	4 🔘
d	. learn new things?	5 🔾	6 🔾	7 🔾	8 🔾
е	. always show up for class on time?	1 🔘	2 🔘	3 🔘	4 🔘
f.	express your opinion in class'	5 0	6 🔾	7 🔘	8 🔘
g	. take part in student council or other similar groups?	1 🔘	2 🔘	3 🔘	4 🔘
H	low do you like the following ubjects:	I hate I do it like			l don't take it
а	. Math	01 02	03 0	04 🔘	05 🔘
b	. English	06 0	0	09 🔘	10 🔘
C	. French	01 0	0 0 0	04	05 🔘
d	. Science	06 0	0 % 0	09	10 🔘
е	. Gym/Phys. Ed.	01 0 92	03 O	04	05 🔾
f.	Arts (art, music, drama)	05 07	08 0	09	10 🔘
H	low often do you feel like ar. ວນ ut of things) at schoo.?	sider (or left	°O All the time		
			1 O Most of the	time	
			² O Some of the	time	
	y		³ Rarely		
			⁴ O Never		
S	ince the beginning of this chool year, how many mes have you	Never	Once or twice	3 or 4 times	5 times or more
а	skipped a day of school without permission?	1 🔘	2 🔘	³ O	4 🔿
_		5 0	6 🔾	⁷ O	* O

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*

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The next statem teachers and ho		All the time	Most of the time	Some of the time	Rarely	Never	
a. In general, m	ny teachers treat	00	01	02	03	04	
·							Don't need help
b. If I need extra teachers give	a help, my e it to me.	05	06	07	08	09	10
							No homewor
c. I have a plac homework or	e at home to do r study.	00	01	02 🔾	03 🔾	04 🔘	05
							No homewor
d. When my tea homework, I	achers give me do it.	06	07	08	09	10	11 🔿
			³ O ⁴ O ⁵ O	A few time: Less than o Almost nev	once a month	1	
In the ne	ext statemer live with yo	nts, par ou at hor	ents included in Most of the	Less than of Almost nev	once a month ver rdians.	They a	No problem
a. If I have prob	o live with you	All the	ents included in Most of the time	Less than of Almost new ude guar fluence y	rdians.	They a	
a. If I have prob	olems at school, are ready to	All the	ents ibclude and in Most of the time	Less than of the time	rdians. Your life.	They a	No problem at school
a. If I have probing parents a help.	plems at school, are ready to	All the time	ents included in Most of the time	Less than of the time	rdians. rour life.	They a	No problem at school

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⁶ ○ other

SECTION C About me

Choose the answer that best describes how you feel.	False	Mostly false	Sometimes false/ Sometimes true	Mostly true	True
a. In general, I like the way I am.	00 🔘	01 🔘	02 🔘	03 🔘	04 🔘
b. Overall I have a lot to be proud of.	05 🔘	06 🔘	07	08 🔘	09
c. A lot of things about me are good.	00 🔘	01 🔘	02	03 🔘	04
d. When I do something, I do it well.	05 🔵	06	07	08 🔘	09 🔘
e. I like the way I look.	00 🔘	01 🔵	02	03 🔘	04
Now you will be asked about you only one answer for each set	ourself and how yountence.)	ı relate to oth	er people at hom	e and at school	ol. (Choose
		Rarely True Of Me	Sometimes True Of Mo	Cfter True Of Me	Very Often True Of Me
a. It is easy to tell people how	I feel.	1	20	3 🔾	4
b. I like doing things for others	S.	50	0	7 🔾	8
c. I get angry easily.		0:	20	3 🔾	4 🔾
d. I can understand hard ques	etions.	C.	6 🔾	7 🔾	8 🔾
e. I think that most things I do turn out OK.	will	10	2 🔿	3 O	4
f. I can talk easily about my feelings.	(EU)	5	6 🔾	7 🔾	8
g. I feel bad when other people have their feelings hurt.	e,	1	2 🔾	3 <u></u>	4
h. I get upset દાsily.		5	6 🔾	7	8
i. I can come up with many w a hard question when I war	ays of answering it to.	1	2 🔾	3 🔾	4
j. I hope for the best.		5	₆ \bigcirc	7 🔾	8
k. I can easily describe my fee	elings.	1	2 🔾	3 🔾	4
I know when people are up they say nothing.	set, even when	5	6 🔾	7 🔾	8 🔾
m. When I get angry, I act with	out thinking.	1	2 🔾	3 🔾	4 🔾
n. When answering hard ques many solutions.	stions, I try to think o	f 5	6 🔾	7 🔵	8
I enjoy the things I do.		1	2 🔾	3 🔾	4

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¹O Str	rongly disagree		
2			
3 🔿			
4			
O 30	oligiy agree		
5 St	rongly disagree		
6			
7			
8 🔿			
∪ Sti	rongly agree		
one			
Never	Once or twice	3 or 4 times	5 times or more
01	02 🔾	03 🔿	04
05	06	07	08
	A		
	2		
09 🔘	10 🔾	11	12 🔘
13 🔘	14 🔘	15 🔵	16
17 🔘	18 🔘	19	20 🔾
21 🔘	22 🔿	23 🔘	24 🔘
	2 Dis 3 Ag 4 Str 5 Str 6 Dis 7 Ag 8 Str One Never 01 0 05 0 17 0	Disagree Agree Strongly disagree Strongly disagree Disagree Agree Agree Strongly agree Once or twice Once or twice Once or twice Once or twice	Disagree Agree Strongly agree Strongly disagree Disagree Agree Strongly agree Cone Never Once or twice 4 time 01

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*

SECTION D Feelings and Behaviours

Rea	ad the following statements and choose the wer that best describes you.	Never or not true	Sometimes or somewhat true	Often or very true
а.	I show sympathy to (I feel sorry for) someone who has made a mistake.	10	2	3 O
b.	I can't sit still, I am restless.	4 🔘	5 🔾	6
C.	I destroy my own things.	⁷ O	8 🔾	°
d.	I try to help someone who has been hurt.	1 🔾	2	3 🔾
e.	I steal at home.	4 🔿	5 🔾	6
f.	I am unhappy or sad.	⁷ O	80	9
g.	I get into many fights.	10	20	3
h.	I offer to help clear up a mess someone else has made.	4 🔿	00	6
i.	I am easily distracted. I have trouble sticking to any activity.	70	8 🔾	9
j.	When I am mad at someone, I try to get others to dislike him/her.	10	2	3
k.	I am not as happy as other people my age.	4 🔾	5 🔾	6
I.	I destroy things belonging to the family or other young people.	7 🔾	8	9 O
m.	If there is an arguin ent, I try to stop it.	1 🔿	2 🔿	³
n.	I can't concentrate, I can't pay attention.	4 🔿	5	6
0.	I am too fearful or nervous.	⁷ O	⁸ O	90
p.	When I am mad at someone, I become friends with another as revenge.	10	2 🔾	3
0	I am impulsive, I act without thinking.	4 🔾	5	6 O

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answer that best describes you.	Never or not true	Sometimes or somewhat true	Often or very true
r. I tell lies or cheat.	7	80	°O
s. I offer to help other young people (friend, brother or sister) who are having difficulty with a task.	10	² O	³O
t. I worry a lot.	4 🔿	5 🔾	6
I have difficulty waiting for my turn in games or group activities.	7 🔿	8 🔿	9
v. When another young person accidentally hurts me, I assume that he/she meant to do it, and I react with anger and fighting.	1 🔘	² C	³O
w. When I am mad at someone, I say bad things behind his/her back.	4 🔿	90	°O
x. I physically attack people.	70	*O	⁹ O
y. I comfort another young person (friend, brother or sister) who is crying or upset.	10	² ()	³O
z. I cry a lot.	40	5	₆ O
aa. I vandalize.	70	8 🔾	°O
bb. I threaten people.	1 🔿	² O	³ O
cc. I help to pick up things that another young person has dropped.	4 🔿	5 🔾	⁶ O
dd. I bully or am mean to others.	⁷ O	* O	°O
ee. I cannot settle to anything for more than a few moments.	1	² O	3 🔾
ff. When I am mad at someone, I say to others: let's not be with him/her.	4 🔿	5	6
gg. I am nervous, highstrung or tense.	7	⁸ O	°O
nh. I kick or hit other people my age.	1	²	3 ←

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	Never or not true	Sometimes or somewhat true	Often or very true
ii. When I am playing with others, I invite bystanders to join in a game.	4 🔿	5 🔾	6
jj. I steal outside my home.	7 🔿	⁸ O	9
kk. I am inattentive, I have difficulty paying attention to someone.	10	² O	³O
II. I have trouble enjoying myself.	4 🔿	5 🔾	6
mm. I help other people my age (friends, brother or sister) who are feeling sick.	7 🔿	*O	°O
nn. When I am mad at someone, I tell that person's secrets to a third person.	1	30	3
oo. I encourage other people my age who cannot do things as well as I can.	40	5 O	⁶ O
Some of the following questions millike you need support, we encourage	ant be hard for	or you to answer. If	you feel or nurse,
Some of the following questions milike you need support, we encourage or use the resources provided to you	ght be hard for	or you to answer. If your family doctor ewer.	f you feel or nurse,
Has anyone in your school committed		or you to answer. If your family doctor ewer.	f you feel or nurse,
Some of the following questions milike you need support, we encourage or use the resources provided to you have anyone in your school committed suicide?	° O Yes, w	rithin the last year nore than a year ago	f you feel or nurse,
Has anyone in your school committed	° O Yes, w	ithin the last year nore than a year ago ver	f you feel or nurse,
Has anyone in your school committed suicide? Has anyone that you have personally known	O Yes, w	ithin the last year nore than a year ago ver	f you feel or nurse,
Has anyone in your school committed suicide? Has anyone that you have personally known	O Yes, working Yes, more of the Yes, more of the Yes, working the Yes, wor	rithin the last year nore than a year ago ver know	f you feel or nurse,
Has anyone in your school committed suicide? Has anyone that you have personally known	O Yes, working Yes, more of the Yes, more of the Yes, working the Yes, wor	rithin the last year nore than a year ago ver know rithin the last year nore than a year ago ver	f you feel or nurse,
Has anyone in your school committed	O Yes, word Yes, model of Yes, model of Yes, model of Yes, word of Yes, word of Yes, model of Yes, m	rithin the last year nore than a year ago ver know rithin the last year nore than a year ago ver	f you feel or nurse,

Statistics Canada will keep your answers PRIVATE. No one from your home or your school will see what you write.

In the past 12 months, how many times did you attempt suicide?	\	ever/ one → Go to	o question D	07)
	4.	nce		
	- 0	lore than once		
If you attempted suicide during the past 12 months, did you have to be	6 O Y	es		
treated by a doctor, nurse or other health professional (for a physical injury or counselling)?	⁷ O N	o		
During the past 12 months, about how many times	Never	Once or twice	3 or 4 times	5 times
a. have you stayed out all night without permission?	1 🔿	² O	³C	40
b. were you questioned by the police about anything that they thought you did?	5 🔿	6 O	70	8
c. have you run away from home?	1 🔿	200	30	4
 d. have you intentionally damaged or destroyed anything that didn't belong to you? 	5	60	7	⁸ O
have you fought with someone to the point where they needed care for their injuries?	10	² 🔾	³	4
f. have you carried a weapon for the purpose of defending yourself or using it in a fight?	5 🔾	⁶ O	7	8
g. have you sold any drug ??	1 🔿	² 🔾	³	⁴ C
h. have you atteninted to touch anyone in a sexual with while knowing that they would probably object to this?	5 🔾	⁶ 🔾	⁷ O	*C
In the past 12 months, were you part of a gang that broke the law by stealing, hurting someone, damaging property, etc.?	¹ O Ye	es		
comcone, damaging property, etc.:	² No)		

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	ne past e you	12 months, how often	Never	Less than once a week	1 to 3 times a week	4 or more times a week
a.	activition an inst	sports or done physical es without a coach or ructor (e.g. biking, skateng, etc.)?	1 🔘	² O	³ O	4 🔘
b.	instruc	sports with a coach or tor, other than in gym class? ning lessons, baseball, hockey,	5 🔘	6 🔾	7 🔾	8 0
C.	karate	part in dance, gymnastics, or other groups or lessons, han in gym class?	1 🔘	2 🔿	³ O	4 🔘
d.	taken p groups of clas	part in art, drama or music s, clubs or lessons, outside s?	5 🔘	6 🔾	7 ()	8 🔿
e.	as Gui	part in clubs or groups such des or Scouts, 4-H club, unity, church or other us groups?	1 🔘	² C	3 0	4 🔘
f.	done a model	hobby or craft (drawing, building, etc.)?	5 🔾	0,0	7 🔿	8 🔘
that	: you do	the one sport or physical activity the most often, how long do you end being active in one session?		do not do physica	I activities	
This or ir	s may b nstructo	e an activity with or without a soco or, but does not include gym clars.	h	to 15 minutes 6 to 30 minutes		
			25.0	1 to 59 minutes to 2 hours		
		R	06 N	Nore than 2 hours		
resp	oonsibil	ocractivities, do you have special ities such as team tain, secretary, etc.?	¹O Ye	s		
			² No			
How (not	v often t for sch	do you read for fun nool)?	⁰⁷ E	very day		
			200 🔾	t few times a week Once a week	(
			40.0	t few times a mont		

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11 Less than once a month

Almost never

During the past 12 months, have you volunteered or helped without pay by (Include volunteer work done for credit at	1 🔾	doing activities at school (yearbook committee, school patrol, student council, etc.)
school) (Please mark all that apply.)	² O	supporting a cause (food bank, environmental group, etc.)
	³ O	fund raising (a charity, school trips, etc.)
	4 🔘	helping in your community (hospital volunteering work in a community organization, etc.)
	5 🔾	helping neighbours or relatives (cutting grass, babysitting or shovelling snow for a neighbour, etc.)
	6 🔾	doing another volunteer activity (without pay)
	⁷ O	I have not done any of these activities without pay. → Go to question E7
During the past 12 months, how often have you volunteered or helped without pay ?	01	Everyday
you volumed ou holped mandat pay.	02	A few times a week
	03	Once a week
	04	A few times a month
	05	Less than once a month
On average, about how many hours a day do you watch TV or videos, or play video	01	I don't watch TV videos or play video games
games?	02	Less than 1 nour a day
	03	1 to 2 hours a day
	04	3 to 4 i ours a day
	05()	5 to 6 hours a day
	06	7 or more hours a day
		·
Do you use the Internet		
	Yes	No
a. at home?	1 🔘	2 🔾
b. at school?	3 🔾	4 🔘
c. somewhere else?	5 🔾	6 🔾
Not including Internet use, do you use a computer		
	Yes	No
	Yes	No
computer		

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*				*
(10)	On average, about how many hours a day do you spend on a computer (doing work, playing games, e-mailing, chatting, surfing the Internet, etc.)?	07 O 08 O 09 O 11 O 12 O	I don't use a computer Less than 1 hour a day 1 or 2 hours a day 3 or 4 hours a day 5 or 6 hours a day 7 or more hours a day	
(1)	Is there a computer in your home? (Even if you don't use it.)	¹ O ² O	Yes No	
(3)	On average, how much time in a day do you spend at home looking after a younger brother or sister while your parents are not home?	01 O O O O O O O O O O O O O O O O O O O	I don't have a younger brother or sister I don't spend any time at home looking after a younger brother or sister while my parents are not home Less than 1 hour a day 1 to 2 hours a day 3 to 4 hours a day 5 to 6 hours a day 7 or more hours a day	
E13	On average, how much time in a day do you spend alone at home while nobody else is home?	08 O	I don't spend time alone while nobody else is home Less than 1 hour a day 1 to 2 hours a day 3 to 4 hours a day 5 to 6 hours a day 7 or more hours a day	

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SECTION F

Smoking,	Drinking	and	Drugs
----------	----------	-----	-------

In this section, we would like to ask with smoking, drinking and drugs.	k you some questions about your experiences
Some of the questions will apply to or used drugs.	you even if you have not smoked, had a drink
Please be as honest as you can – y will make sure no one will find out	our answers are private and Statistics Canada who filled out each questionnaire.
Which of the following best describes your experience with smoking cigarettes:	01 ☐ I have never smoked Go to question F4 02 ☐ I have only had a few puffs
	03 ☐ I do not smoke anymore → Go to question F3
	OR I smoke
	⁰⁴ A few times a year
	 A rout cince or twice a month About 1-2 days a week
	About 3-5 days a week About 6-7 days a week
On the days that you smoke, about how many cigarettes do you usually smoke?	number of cigarettes
If you have smoked one or more cigarettes every day for at least 7 days in a row, how old were you when you first did so?	⁹⁸ I have never done this
	OR I was years old
	, , , , , , , , , , , , , , , ,

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★ The next questions are about drinking alcohol.

✓ one bottle of beer or✓ one glass of wine or✓ one shot of liquor.	
Which of the following best describes your experience with drinking alcohol:	01 ☐ I have never had a drink of alcohol ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
	1 have only had a few sips
	⁰³ O I only tried once or twice (at least one drink)
	I do not drink alcohol anymore
	OR
	I drink (at least one drink)
	⁰⁵ A few times a year
	Of About once or twice a month
	OBO About 3-5 days a week
	About 3-5 da s a week OBOUT C 7 Hays a week
How old were you when you first had a drink of alcohol?	years old.
Have you ever been drunk?	¹O Yes
EO!	² ○ No → Go to question F9
How old were you when you were drunk for the first time?	I was years old.
In the past 12 months, how often have you been drunk?	⁰¹ Never
Y	⁰² A few times
	O3 About once or twice a month
	⁰⁴ About 1-2 days a week
	05 About 3-5 days a week
	06 About 6-7 days a week

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*									
		he next questions are a rugs.	bout drug	use. Please	e answer e	ven if yo	u do not	use	
F9	Wh	ich of the following best descril ir experience with using marijua	bes ana	01	I have never	done it			
	and a jo	l cannabis products (also know int, pot, grass or hash) in the pmonths?	n as	02	I have done months	it, but not c	luring the p	ast 12	
				OR					
					e past 12 r juana	nonths, I	have us	ed	
				03	A few times				
				04	About once	or twice a	month		
				05	About 1-2 d	ays a week	(
				06	About 3-5 d	ays a week	(
				07	About 6-7 d	ays a week	(
							1		
F10	exp	ich best describes your erience with the following drug he past 12 months:	gs I have I have never done it, done it but not in		In the past '2 months I have used it				
				the past 12 months	1 to ?	3 to 5 times	6 to 9 times	10 times or more	
	а.	Hallucinogens like LSD/acid, magic mushrooms	01	02	03	04	05	06	
	b.	Glue or solvents	07	V8 ()	09	10	11	12	
	C.	Drugs without a prescription or advice from a doctor: downers, uppers, tranquilizers, ritaii.,							
		etc.	13	14 🔾	15	16	17	18	
	d.	Other cruqs "ke ecstasy, crack, cocaine, horoin, speed etc.	19	20 🔿	21	22	23	24	

If you have never tried any of the above drugs, GO TO SECTION G.

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	w old were you when you did the owing drugs for the first time?	I have never d	one it	I first did it when I was
a.	Marijuana and cannabis products	99 🔾	OR	yea old
b.	Hallucinogens like LSD/acid, magic mushrooms	99 🔘	OR	yea old
C.	Glue or solvents	99 🔾	OR	yea
d.	Drugs without a prescription or advice from a doctor: downers, uppers, tranquilizers, ritalin, etc.	99 🔘	OR	yea old
e.	Other drugs like ecstasy, crack, cocaine, heroin, or speed etc.	99 🔾	OR	yea old

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SECTION G My Parent(s)

My n	nother							
G	Think of the mother you spend the most time with. Is she (Mark only one.)	 o1 O your biological/birth mother? o2 O your adoptive mother? 						
	(Mark Only One.)							
		03 🔘	your stepmother?					
		04 🔘	your foster mother?					
		05 🔘	another person (a moth	er figure)?				
			OR					
		06 O	I am not in touch with my mother	→ Go to	o stion G4			
				1				
G2	Thinking of the mother you have identified in the previous question:							
			A çreal di al	Some	Very little/ Not at all			
	How well do you feel that your mother understands you?		0	1 🔿	2			
	b. How much fairness do you receive from your mother?		30	4 🔿	5 🔾			
	c. How much affection do you receive from your mother?		6	7 🔿	8 🔾			
G3	Overall, how would you describe your relationship with your mourer?	1 🔿	Very close					
		² O Somewhat close						
	EQ.	³ O	Not very close					
	Y							

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No one from your home or your school will see what you write.

k

My F	ather							
G4	Now think of the father you spend the most time with. Is he (Mark only one.)	01 🔿	your biological/birth fat	ther?				
	(Mark Only One.)	⁰² your adoptive father?						
		03 🔘	your stepfather?					
		04 🔘	your foster father?					
		05 🔘	another person (a fath	er figure)?				
			OR					
		06 O	I am not in touch with my father	→ Go to	tion G7			
G5	Thinking about the father you have identified in the previous question:							
			A great deal	Some	Very little/ Not at all			
	How well do you feel that your father understands you?		°O	10	2 🔾			
	b. How much fairness do you receive from your father?		30	4 🔿	5 🔾			
	c. How much affection do you receive from your father?		⁶ O	7 🔿	8 🔾			
G6	Overall, how would you describe your relationship with your father?	70	Very close					
		2 0	Somewhat close					
		³ O	Not very close					
	Answer the following questions thinkin identified in the previous questions.	ng of th	ne father and moth	er you ha	ve			
G7	How well do you think your parents get along with each other?	° O	Very well					
		1 🔿	Fairly well					
		2 🔾	Not very well					
		³ O	My parents are not in t	ouch with ea	ach other			
G8	How often do your parents disagree about how to deal with you and your brother(s) and sister(s)?	01 02 03 04 05	Never Rarely Sometimes Often					
		06	Always I don't know					
		07	My parents are not in t	ouch with ea	ach other			
ĺ		_						

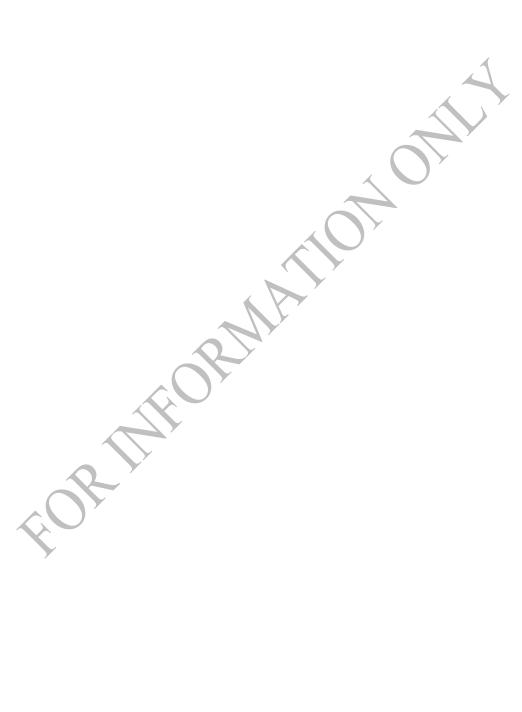
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	with whe mud	v often do your parents get upset one another, including times en they are mad but don't say ch?		Never Rarely Somei Control Co	times s	ouch with ead	ch other
10	For	each of the following statements, us	e the choice	that best descr	ibes the way you	ır parent(s) (d	or
		pparent(s), foster parent(s) or guardia parent(s)	an(s)) in gene Never	eral nave acted Rarely	Sometimes	tne past 6 m Often	ontns. Always
	а	smile at me.	5	°O	⁷ ()	80	°O
_		want to know exactly where I am and what I am doing.	°O	1 ()	² ()	³O	4 🔿
-	C.	soon forget a rule they have made.	5 🔾	6 🔾	7 🔾	(C) 8	9 O
_	d.	praise me (say nice things about me).	° 🔿	1 🔿	2 🔾	³O	4 🔘
_	e.	let me go out any evening I want.	5 🔾	⁶ O	70	80	9 🔾
_	f.	tell me what time to be home when I go out.	° 🔿	10	² O	³ O	4 🔘
_	g.	nag me about little things.	5 🔾	₆ C	70	8 🔾	9 🔾
_	h.	listen to my ideas and opinions.	°O	10	2 🔾	³ O	4 🔘
_	i.	and I solve a problem together whenever we disagree about something.	153	e O	7 🔾	⁸ O	9 🔘
	j.	only keep rules when it suits them.	, O	1	² O	³ O	4 🔿
	k.	get angry and yell at mo	5 🔾	6 🔾	7 🔿	8	⁹ O
_	l.	make sure I know I am appreciated.	°O	1 🔿	² O	³ O	4 🔘
_	m.	threaten put ishment more often than they use it.	5 🔿	6 🔾	7 🔿	8 🔾	° O
_	n.	speak of the good things I do.	°O	1 🔿	² O	³ O	4 🔘
_	0.	find out about my misbehaviour.	5 🔿	⁶ O	7 🔿	8 🔾	⁹ O
_	p.	enforce a rule or do not enforce a rule depending upon their mood.	° 🔿	1 🔿	² O	³ O	4 🔿
_	q.	hit me or threaten to do so.	5 🔿	6 🔾	7 🔿	8 🔘	9 🔾
_	r.	seem proud of the things I do.	° 🔿	1 🔿	2	³ O	4 🔾
_	S.	seem too busy to spend as much time with me as I'd like.	5 🔾	6	7 🔾	*O	°O
-	t.	take an interest in where I am going and who I am with.	°O	1	² O	³ O	4 🔿

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@	Your parents let you decide	Almost never	Sometimes	Often	Always
	a. the time you go to bed on weeknights.	5 🔾	6 O	⁷ O	⁸ O
	b. the people you hang around with.	1 🔾	² O	³	4
	c. how much television you watch.	5 🔾	⁶ O	7	80



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ECTION H	Health						
In gener health is	al, would you say your 		² ve ³ gc ⁴ fa	xcellent? ery good? ood? ir?			
How tall (Please not sure	are you? estimate if you are)		OR	Feet Metre		Inches	etres
How mu (Please not sure	ch do you weigh? estimate if you are)		OR		Pounds Kilogra	4	
During thave you	the past 6 months, how often u had the following?	Seldom or never	Abou once mont	a 🔨	bout once a week	More than once a week	Most days
a. Hea	dache	5 🔾	6 () >	7 🔿	⁸ O	°O
b. Stor	mach ache	°O	10)	2 🔾	3 🔾	4 🔿
c. Bac	kache	⁵ C	e C)	7 🔿	⁸ O	°O
d. Diffi	culties in getting to sleep	00	¹ C)	2	³ O	4 🔿
How ofte you ride	en do you use a seat beit wron in a car?		°O Off	ways ten ometimes eldom or r sually ther		t belt where I s	sit
How ofte you ride	en do you wear a helmet when your bicycle?		1 Off	ways ten ometimes			
			2	eldom or r	never		
			⁴O Id	o not ride	a bicycle		

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*		*
	During a school week (Monday to Friday), how many days do you normally eat breakfast?	⁵ Never
		⁶ O 1 or 2 days
		⁷ 3 or 4 days
		⁸ O Every school day
H8	Would you say you are	¹ Trying to lose weight?
		² Trying to gain weight?
		³ Trying to stay the same weight?
		Not trying to do anything about your weight?
Puk	berty	
H9	many different aspects of their lives. Would you say that your body hair ("body	
	hair" means underarm and pubic hair) has begun to grow?	Has not yet started growing Phas barely started growing
		30
		Growth of body hair is definitely underway Growth of body hair seems completed
	25	Boys go to question H12 Girls go to question H10
For	girls only	
(110)	Have your breasts becam to grow?	⁵ Have not yet started growing
		⁶ Have barely started growing
		⁷ O Breast growth is definitely underway
		⁸ O Breast growth seems completed
	Have you begun to menstruate (your monthly periods)?	¹O Yes
		² O No
		Girls go to question H14

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A		A
×		X

For	boys only					
	Have you noticed a deepening of your voice?	⁵ O Has not yet started changing				
		[€] Has barely started changing				
		⁷ O Voice is definitely changing				
		⁸ O Voice change seems completed				
H13	Have you begun to grow hair on your face?	¹ Has not yet started growing				
	your lace.	² O Has barely started growing				
		³ Facial hair growth is definitely underway				
		⁴ O Facial hair growth seems completed				

OR I wa		How old were you when you had your first boyfriend/girlfriend?	93 ☐ I've never had a boyfriend/gir. frienc → Go to section
Outside of school hours, at out how many days a week do your boyfriend/girlfriend? One day a week One day a week One day a week One day a week			
Outside of school hours, at out how many days a week do you set your boyfriend/girlfriend? Outside of school hours, at out how many days a week do you set your boyfriend/girlfriend? Never Outside of school hours, at out how many days a week do you set your boyfriend/girlfriend? Outside of school hours, at out how many days a week do you set your boyfriend/girlfriend? Outside of school hours, at out how many days a week do you set your boyfriend/girlfriend? Outside of school hours, at out how many days a week do you set your boyfriend/girlfriend? Outside of school hours, at out how many days a week do you set your boyfriend/girlfriend? Outside of school hours, at out how many days a week do you set your boyfriend/girlfriend? Outside of school hours, at out how many days a week do you set your boyfriend/girlfriend? Outside of school hours, at out how many days a week do you set your boyfriend/girlfriend? Outside of school hours, at out how many days a week do you set your boyfriend/girlfriend? Outside of school hours, at out how many days a week do you set your boyfriend/girlfriend?		Do you have a boyfriend/girlfriend right now?	Yes → Go to question H16
many days a week do vou se your boyfriend/girlfriend? Never Less than once a week One day a week	_		² O No → Go to question H17
One day a week		Outside of school hours, about how many days a week do you sex your boyfriend/girlfriend?	⁰⁵ O Never
20.		EQ.	Less than once a week
9 ,		Y	20.00
⁰⁹ O 4 or 5 days a week			•
¹⁰ 6 or 7 days a week			

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How often have you had the following experiences with boyfriend/girlfriend?	ne ı a	Never	Once	A few times	Often
a. Kissing.		1	² O	³ O	4
b. Petting above the wai	st.	5	6 O	7	80
c. Petting below the wai	st.	1	² O	³ O	40
d. Sexual intercourse (g	oing all the way).	5 🔿	⁶ O	⁷ O	80

FORTHIRORANIA

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SECTION I Work

	Since September, on average, how		
	many hours per week have you worked for pay ?	1 🔘	I have not worked since September Go to section J
		2 🔘	1 to 4 hours a week
		3 🔘	5 to 9 hours a week
		4 🔘	10 to 14 hours a week
		5 🔘	15 or more hours a week
12	Does this work cause you to study		
	less or do less school work than you would like?	1 🔘	Yes, a great deal
		2 🔾	Yes, somewhat
		3 🔾	No, not at all less
		1	
) ′	
	,		

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When you are finished, please: put this questionnaire in the envelope.

Thank you very much for helping us.

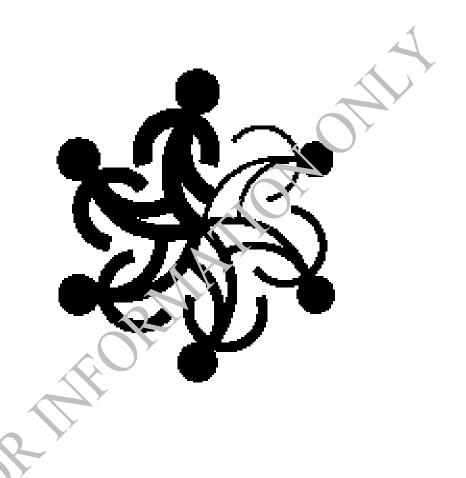
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return it to the Interviewer.

FORTHERMATION

National Longitudinal Survey of Children & Youth

Cycle 7 Survey Instruments 2006-2007



BOOKLET 22: SELF-COMPLETED QUESTIONNAIRE FOR 14- AND 15-YEAR-OLDS

FORTHER



National Longitudinal Survey of Children and Youth

Cycle 7

Booklet 22E

Confidential when completed

Collected under the authority of the Statistics Act, revised statutes of Canada, 1985, Chapter S19.

Aussi disponible en français



Please read instructions on next page before beginning.

	(30)
FOR OFFICE USE ONLY	
Person ID	
Respondent's First Name	
Assignment No.	
Time Started	

8-5300-448.1: 2006-06-14 STC/ENM-040-75020



Canadä

INSTRUCTIONS

This questionnaire asks about you, your family, your friends, how you feel and what you like to do. Your answers will help the government to plan programs and services for young people like yourself.

This is not a test and there are no right or wrong answers. Some questions may seem personal and some are about things not everybody does. Take your time and please be sure to answer each question based on what you really think. You can choose whether or not to fill out this questionnaire. If you need help with any questions, you may ask the interviewer.

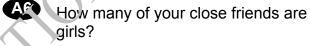
When you answer these questions, you can mark your answers like this or fill in the circle , or write a number in the boxes, as in the examples below. When you write your answers, make sure you press hard with your pencil.

Example 1

How do you feel about school?

- [°]O I like school very much.
- ¹⊗ I like school quite a bit.
- ² O I like school a bit.
- ³ O I don't like school very much.
- ^⁴ O I hate school.

Example 3



93 O None

OR

0 3 number of girls



Nomember that the KIDS HELP PHONE is available to help you at any time if you feel like you would like to talk to someone about a problem.

1-(800) 668-6868

Statistics Canada will keep your answers PRIVATE.

No one from your home or your school will see what you write.

THANK YOU FOR YOUR HELP!

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L	+
•	

Please answer the following statements about your friends and others your age. I have many friends.	False	Mostly false	Sometimes true/	Mostly	
	False	Mostly		Mostly	_
I have many friends.		idise	Sometimes false	true	True
	°O	1 🔿	² O	3 🔾	4 🔿
I get along easily with others my age.	5 🔿	6 🔾	7 🔾	8 🔾	⁹ O
Others my age want me to be their friend.	° O	1 🔿	² O	3 🔾	4 🔿
Most others my age like me.	5 🔿	6 🔾	7 🔾	8 🔾	9 🔾
For the rest of this question you trust and confide in. The or outside school.	naire, by ey may b	"close frice e friends t	ends", we mean t hat you hang out	the people with at so	e that chool
I feel that my close friends really know am.	/ who I	°O Fa	lse		
		¹ O Mc	ostly false	,	
		² O So	metimes false/Sometii	mes true	
		3 O N C	ostly rue		
		⁴ C Tru	ue		
	6				
things with close friends outside of scho	lo oo'	⁰¹ O Ne	ver		
nours.		⁰² O Les	ss than once a week		
		⁰³ O 1 c	lay a week		
		⁰⁴ O 2-3	3 days a week		
		⁰⁵ O 4-5	5 days a week		
		⁰⁶ O 6-7	⁷ days a week		
How many of your close friends are:					
		None	Numb	er	
girls?		93	OR		
boys?		94	OR		
f N I a	For the rest of this question you trust and confide in. The or outside school. About how many days a week do you chings with close friends outside of schoours? How many of your close friends are:	For the rest of this questionnaire, by you trust and confide in. They may b or outside school. About how many days a week do you do things with close friends outside of school nours? How many of your close friends are:	For the rest of this questionnaire, by "close frie you trust and confide in. They may be friends to or outside school. If feel that my close friends really know who I am. About how many days a week do you do things with close friends outside of school nours? About how many days a week do you do things with close friends outside of school nours? About how many days a week do you do things with close friends outside of school nours? About how many days a week do you do nours? About how many days a week do you do nours? About how many days a week do you do nours? About how many days a week do you do nours? About how many days a week do you do nours? None	For the rest of this questionnaire, by "close friends", we mean you trust and confide in. They may be friends that you hang out or outside school. If eel that my close friends really know who I am. About how many days a week do you do things with close friends outside of school nours? About how many days a week do you do things with close friends outside of school nours? About how many days a week do you do things with close friends outside of school nours? About how many days a week do you do things with close friends outside of school nours? About how many days a week do you do things with close friends outside of school nours? About how many days a week do you do things with close friends a week of things with close friends a week of things a week of the first part	For the rest of this questionnaire, by "close friends", we mean the people you trust and confide in. They may be friends that you hang out with at stor outside school. If feel that my close friends really know who I am. If feel that my close friends really know who I am. About how many days a week do you do things with close friends outside of school nours? About how many days a week do you do things with close friends outside of school nours? About how many days a week do you do things with close friends outside of school nours? About how many days a week do you do things with close friends outside of school nours? About how many days a week do you do things with close friends outside of school nours? About how many days a week do you do things with close friends outside of school nours? Never 20 Less than once a week 30 0 1 day a week 30 0 2-3 days a week 30 0 6-7 days a week How many of your close friends are:

B

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.9	How often do you share your secrets and private feelings with your close friends?	0	O All the time		
	,	1	O Most of the tim	ne	
		2	O Some of the ti	me	
		3	O Rarely		
		4	O Never		
10	How many of your close friends do the following:				
	mends do the following.	None	A few	Most	All
	a. smoke cigarettes?	0 (1 (2 (³ ()
-		4 ()	5 0		7 🔾
-	b. drink alcohol?				
	 break the law by stealing, hurting someone or damaging property? 	° ()	1 🔘	2	³ O
-	d. have tried marijuana?	4 🔿	5 🔾	60	7 🔾
	e. have tried drugs other than	0 0	1.0		2 0
-	marijuana?	°O	10	30	³ O
1 10	Since the beginning of this		$\frac{1}{\sqrt{2}}$		
	school year, how many of	None	A few	Most	All
	your close friends have done the following:		Y		
_	the following: a. worked for an employer or at odd jobs?	4 ()	5 🔾	6 🔾	7 🔿
-	the following:	4 C)	⁵ O	⁶ O	⁷ O
-	the following: a. worked for an employer or at odd jobs? b. cut or skipped a day at school	4 Q		<u> </u>	
-	 a. worked for an employer or at odd jobs? b. cut or skipped a day at school without permission? c. been suspended from school? d. dropped out of school or 	4 () 0 () 4 ()	10	² O	³ O
-	a. worked for an employer or at odd jobs?b. cut or skipped a day at school without permission?c. been suspended from school?	4 Q	10	² O	³ O
-	 a. worked for an employer or at odd jobs? b. cut or skipped a day at school without permission? c. been suspended from school? d. dropped out of school or 	4 Q	10	² O	³ O
12)	 a. worked for an employer or at odd jobs? b. cut or skipped a day at school without permission? c. been suspended from school? d. dropped out of school or more than one week? 	4 Q	10	² O	³ O
12)	 a. worked for an employer or at odd jobs? b. cut or skipped a day at school without permission? c. been suspended from school or more than one week? 	4 O	1 O 5 O Some of the	² O ⁶ O Most of the	3 O 7 O All the
12	 a. worked for an employer or at odd jobs? b. cut or skipped a day at school without permission? c. been suspended from school or more than one week? For each of u e following statements, mark the circle that	4 O	1 O 5 O Some	2 O 6 O 2 O Most	3 O 7 O 3 O All
12	a. worked for an employer or at odd jobs? b. cut or skipped a day at school without permission? c. been suspended from school? d. dropped out of school or more than one week? For each of the following statements, mark the circle that best corresponds to your situation with your close friends.	4 O	1 O 5 O Some of the	² O ⁶ O Most of the	3 O 7 O All the
12	 a. worked for an employer or at odd jobs? b. cut or skipped a day at school without permission? c. been suspended from school or more than one week? For each of u e following statements, mark the circle that	4 O	1 O 5 O Some of the	² O ⁶ O Most of the	3 O 7 O All the
12	a. worked for an employer or at odd jobs? b. cut or skipped a day at school without permission? c. been suspended from school? d. dropped out of school or more than one week? For each of the following statements, mark the circle that best corresponds to your situation with your close friends. a. My close friends push me to succeed and to do interesting things that I would not do by myself.	4 O	1 O 5 O 1 O Some of the Time	² O ⁶ O Most of the Time	3 O 7 O 3 O All the Time
12	 a. worked for an employer or at odd jobs? b. cut or skipped a day at school without permission? c. been suspended from school? d. dropped out of school or more than one week? For each of u e following statements, mark the circle that best corresponds to your situation with your close friends. a. My close friends push me to succeed and to do interesting things that	4 O	1 O 5 O 1 O Some of the Time	² O ⁶ O Most of the Time	3 O 7 O 3 O All the Time
12	a. worked for an employer or at odd jobs? b. cut or skipped a day at school without permission? c. been suspended from school? d. dropped out of school or more than one week? For each of the following statements, mark the circle that best corresponds to your situation with your close friends. a. My close friends push me to succeed and to do interesting things that I would not do by myself. b. When I make a decision, I take my	4 O	1 O 5 O 1 O Some of the Time	² O ⁶ O Most of the Time	3 O 7 O 3 O All the Time

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Other than your close friends, do you have anyone else in particular you can talk to about yourself or your problems?	(8 O	Yes →	Go to question A14
	⁹ O	No →	Go to question A15
What is their relationship to you? (Mark everyone you feel you can talk to about yourself or your problems.)	01 O 02 O 03 O 04 O 05 O 06 O 07 O 08 O	Stepfather Brother Sister Grandpar	rent
	09 O 10 O 11 O 12 O 13 O	A friend of Parent's Teacher/ Coach or leader)	of the family boyfriend/gin/riend Counse.or of school leader (a.g. Scout, Guide or church
Overall, how would you describe your relationship with your brother(s) and sister(s)? (Include step or foster siblings).	14 O 15 O 16 O 17 O 18 O	Somewhat Not very	at close
	What is their relationship to you? (Mark everyone you feel you can talk to about yourself or your problems.)	What is their relationship to you? (Mark everyone you feel you can talk to about yourself or your problems.) Output Overall, how would you describe your relationship with your brother(s) and sister(s)? (Include step or foster siblings).	What is their relationship to you? (Mark everyone you feel you can talk to about yourself or your problems.) Of the relationship to you? (Mark everyone you feel you can talk to about yourself or your problems.) Other relationship with your describe your relationship with your brother(s) and sister(s)? (Include step or foster siblings). Other test of the relationship with your brother(s) and sister(s)? (Include step or foster siblings). Other test of the relationship with your brother(s) and sister(s)? (Include step or foster siblings).

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(9 -	CTI		7	-	2~	haal
9	U	U	ν.	\mathbf{P}	SC	hoo

B1 B2	How do you feel about school? Are you in the same school that you were in two years ago?	 O I like school very much O I like school quite a bit O I like school a bit O I don't like school very much O I hate school 8 O Yes → Go to question B5
B3		⁹ O No → Go to question B3
В	For your most recent change in schools, why did you change schools? (Please mark all that apply.)	I changed from elementary school to high school I changed from elementary school to middle school or junior high I changed from middle school or junior high to high school I moved I was expelled Other reason
B4	What did you find hard to get used to about your new school? (Please mark all that apply.)	Organizing homework Organizing homework New teachers Having to make new friends Having my way around Taking the bus to a new school Other
B5	How well do you think you are doing in your school work?	O9 O Very well O Well Average Poorly Very poorly

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A
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B6	How important is it to you to do the following in school:	Very important	Somewhat important	Not very important	Not important at all
	a. make friends?	1 🔿	2 🔘	³ O	4 🔘
	b. get good grades?	5 🔾	6 🔾	⁷ O	⁸ O
	c. participate in extra-curricular activities?	1 🔾	² O	³ O	4 🔾
	d. learn new things?	5 🔾	6 🔾	⁷ O	⁸ O
	e. always show up for class on time	? 1 0	2 🔾	³ O	4 🔾
	f. express your opinion in class?	5 🔾	6 🔾	⁷ O	8 🔾
	g. take part in student council or oth similar groups?	ner 1 O	2 🔘	³ O	4 🔿
	h. hand in assignments on time?	5 🔾	6 🔾	⁷ O	8 O
B7		ate I don't lil t it very t much	(e	I like it a lot	I don't take it
	a. Math	02 0	03 🔿	04	05
	b. English	0 07 0	08 O	09	10 🔘
	c. French	0 0.0	03	04 🔘	05
	d. Science	O 07 O	08	09	10 🔘
	e. Gym/Phys. Ed.	O 02 O	03	04	05
	f. Arts (art, music, drama)	07 0	08	09	10
B8	How much action spirit does your s have?	ochool ° (Almost all stu	udents have a lot of	f school spirit
	,	1 (Most student	s have a lot of scho	ool spirit
		2 (Some studer	its have a lot of sch	nool spirit
		3 (O Very few stud	dents have a lot of	school spirit
B9	How much school spirit do you have	e? ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° °	O A great deal		
		02 (O Some		
		03 (O Very little		
		04 (None		

*

How often do you feel like an outsider (or left out of things) at school?	¹ O M ² O So ³ O R	I the time ost of the time ome of the time arely ever		
Since the beginning of the school year, how often have you taken part in the following school-based activities (other than in class)?	Never	Less than once a week	1 to 3 times a week	4 or more times a week
Played sports or done physical activities without a coach or an instructor (e.g., softball at lunch)?	01	02	03	04
 b. Played sports with a coach or instructor, other than for gym class (e.g., school teams)? 	05	06	⁰⁷ Q	08 🔿
c. Taken part in dance, gymnastics, karate or other groups or lessons, other than in gym class?	09	¹⁰ O	10	¹² O
d. Taken part in art, drama or music groups, clubs or lessons, outside of class?	01 🔿	02	03 0	04 🔘
Taken part in a school club or group such as yearbook club, photography club or student council?	05	06	07 🔿	08
Since the beginning of this school year, how many times have you			3 or times	5 times or more
a. skipped a day of school without permission?	2	0	³ O	4 🔿
b. been suspended from school?	6	0	⁷ O	8 🔾
Have you ever dropped out of school for more				
than a week?	(01 O Y	∕es → Go to	question E	314
	02 O N	lo → Go to	question E	315

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Th lor	ne last time you dropped out of s ng was it for?	school, how	1 C 2 C 3 C 4 C	Less than a 1-3 months 4-6 months More than	;		
	ne next statements are about tea omework.	All the	Most of	Some of	Rarely	Never	
a.	. In general my teachers treat	time	the time	the time	03 🔾	04	
	me fairly.	O	"O	" <u>O</u>	O	- °O	
						1	Don' need help
b.	If I need extra help, my teachers give it to me.	05	06	07	08	⁰⁹ O	10
					7		No homewor
C.	I have a place at home to do homework or study.	00 🔘	01	02	~O	04 🔘	05
				(0)			No homewor
d.	. When my teachers give me homework, I do it.	06	07	080	09	10	11
Ho cla	ow often do you talk to a teacher ass?	r outside ຈຸ	° C 1 C 2 C	Everyday A few times Once a wee			

⁴ O Less than once a month

⁵ O Almost never

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	All the time	Most of the time	Some of the time	Rarely	Never	No problemat schoo
If I have problems at school, my parents are ready to help.	⁰⁰ O	01 🔿	02	03	04	05
b. My parents encourage me to do well at school.	06 🔾	07	08	09 🔾	10 🔘	
c. My parents expect too much of me at school.	⁰⁰ O	01	02	03 🔾	04	
How far do you hope to go in scho to complete	ol? I hope	° C) middle sch	nool/junior hi	97	
		² C	a university	y degree		
		5 C	I don't kno	one univers w	ity degree	
	S		Other			
EO/F						
Y						

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SECTION C About me

Choose the answer that best describes how you feel.	False	Mostly false	Sometimes false/ Sometimes true	Mostly true	True
a. In general, I like the way I am.	00 O	01	02	03 🔾	04 🔘
b. Overall I have a lot to be proud of.	05	06	07 🔘	08 🔾	09
c. A lot of things about me are good.	00 O	01 🔾	02	03	04 🔘
d. When I do something, I do it well.	05 🔾	06 🔾	07	08	09
e. I like the way I look.	00 0	01 🔿	02	03	04
Now you will be asked about yourself a only one answer for each sentence.)	nd how yo ı	u relate to oth	er people at hon	ne ar.d a scho	ol. (Choose
,		Rarely True Of Me	Sometimes True Of ing	Or'en True Of Me	Very Ofte True Of N
a. It is easy to tell people how I feel.		1	20	3 🔾	4 🔾
b. I like doing things for others.		50	6O	7 🔿	8
c. I get angry easily.		0	2 0	3 🔾	4
d. I can understand hard questions.		50	6 🔾	7	8
e. I think that most things I do will turn out OK.	R	10	2 🔿	3 🔾	4
f. I can talk easily about my feelings.		5	6 🔾	7 🔾	8
g. I feel bad when other people have their feelings nurt.		1	2 🔾	з 🔘	4
h. I get up set easily.		5	₆ \bigcirc	⁷ O	8
i. I can come up with many ways of ar a hard question when I want to.	nswering	1	2 🔾	3 🔾	4 🔾
j. I hope for the best.		5	6 🔾	7 🔾	8
k. I can easily describe my feelings.		1	2 🔾	3 🔾	4 🔾
I know when people are upset, ever they say nothing.	n when	5	6 🔾	7 🔾	8
m. When I get angry, I act without think	ing.	1	2 🔾	3 🔾	4 🔾
n. When answering hard questions, I to many solutions.	ry to think o	of 5	6 🔾	7 🔾	8
I enjoy the things I do.		1	2 🔾	3 🔾	4

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C 3	In general, I am happy with how things are for me in my life now.	¹ () ² () ³ () 4 ()	Strongly disagree Disagree Agree Strongly agree	
C4	The next five years look good to me.	5 O 6 O 7 O 8 O	Strongly disagree Disagree Agree Strongly agree	
C5	The following is a series of events that may directly affect youths. Have you personally ever been through any of these events?		Yes	No
	a. A painful break-up with your boyfriend/girlfriend.		10	2 0
	a. At paintar broak ap war your boymonargiimiona.		30	4 🔾
	b. A serious problem in school.			
	c. A pregnancy or an abortion.		10	² O
	d. The death of someone close to you.		³O	4 🔾
	e. Another difficult event; specify:		1	² O
		_		
C6	In the past 12 months, have you personally bean treated unfairly because of			
	unfairly because of	Yes	No	l don't know
	a. your sex/gender?	01 🔿	02	03 🔾
	b. your race, skin colour, or ethnic group?	04 🔘	05	06
	c. your religion?	01 🔘	02	03
	d. another reason?	04 🔘	05	06
	d. another reason?			

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In the past 12 mo	nths, how many times did	I someone			
say something per made you feel extr uncomfortable?	sonal about you that remely	Never	Once or twice	3 or 4 times	5 times or more
a. While at school	or on a school bus.	01 🔘	02	03 🔘	04
b. Elsewhere (inc	uding at home).	05 🔾	06	07	08
threaten to hurt yo hurt you?	u but not actually				
a. While at school	or on a school bus.	09	10 🔘	11 🔘	12 🔘
b. Elsewhere (incl	uding at home).	13 🔘	14 🔘	15 🔘	16
				14	
physically attack o	r assault you?		, 0		
a. While at school	or on a school bus.	17 🔾	18 ()	19 🔿	20
b. Elsewhere (inc	uding at home).	21 (22 🔿	23 🔘	24 🔘
	luding at home).				

SECTION D Feelings and Behaviours

	Never or not true	Sometimes or somewhat true	Often or very true
I show sympathy to (I feel sorry for) someone who has made a mistake.	10	² O	³O
b. I can't sit still, I am restless.	4 🔿	5 🔾	₆ O
c. I destroy my own things.	7	⁸ O	⁹ O
d. I try to help someone who has been hurt.	1	² O	³ O
e. I steal at home.	4 🔿	⁵ O	⁶ O
f. I am unhappy or sad.	7 🔿	8 Q	9
g. I get into many fights.	10	20	³ O
h. I offer to help clear up a mess someone else has made.	40	5 (6
i. I am easily distracted. I have trouble sticking to any activity.	70	*O	9
j. When I am mad at someone, I try to get otne. to dislike him/her.	10	² ()	³ O
k. I am not as happy as other people my age.	4 🔿	5	6
l. I destroy things belonging to my family or other young people.	⁷ O	8 🔾	9
m. If there is an arguir ent, I try to stop it.	10	² O	³ O
n. I can't concentrate, I can't pay attention.	4 🔿	5	6
o. I am too fearful or nervous.	⁷ O	*	90
p. When I am mad at someone, I become friends with another as revenge.	10	² O	3
q. I am impulsive, I act without thinking.	4 🔿	5	⁶ O
r. I tell lies or cheat.	⁷ O	*O	⁹ O
s. I offer to help other young people (friend, brother or sister) who are having difficulty with a task.	1	² ()	³()

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t. I worry a lot. 1. I have difficulty waiting for my turn in games or group activities. 1. When another young person accidentally hurts me, I assume that heishe meant to do it, and I react with anger and flighting. 1. W. When I am mad at someone, I say bad things behind hisher back. 1. I physically attack people. 2. I comfort another young person (friend, brother or sister) who is cryting or upset. 2. I cry a lot. 3. I help to pick up things which another young person has dropped. 3. I help to pick up things which another young person has dropped. 4. I bully or am mean to others. 4. I help to pick up things which another young person has dropped. 5. I cannot settle to anything for more than a few moments. 6. I cannot settle to anything for more than a few moments. 6. I cannot settle to anything for more than a few moments. 7. I cannot settle to anything or ense. 8. I am nervous, highstrung or ense. 8. I am nervous, highstrung or ense. 8. I am inattentive, I have difficulty paying attention to someone. 8. I am inattentive, I have difficulty paying attention to someone. 8. I have trouble enjoying myself. 9. I concourage other people my age who cannot do things as well as I can.	Read the following sta answer that best desc	itements and choose the ribes you.	Never or not true	Sometimes or somewhat true	Often or very true
y. When another young person accidentally hurts me, I assume that he/she meant to do it, and I react with anger and fighting. w. When I am mad at someone, I say bad things behind his/her back. x. I physically attack people. y. I comfort another young person (friend, brother or sister) who is crying or upset. z. I cry a lot. aa. I vandalize. bb. I threaten people. cc. I help to pick up things which another young person has dropped. dd. I bully or am mean to others. ee. I cannot settle to anything for more than a few moments. ff. When I am mad at someone, I say is owners: let's not be with him/her. gg. I am nervous, highstruity ownerse. ii. When I an mad at someone, I say is owners: by an	t. I worry a lot.		4 🔿	5	⁶ O
assume that he/she meant to do it, and I react with anger and fighting. w. When I am mad at someone, I say bad things behind his/her back. x. I physically attack people. 7	u. I have difficulty group activities.	vaiting for my turn in games or	7	8 O	⁹ O
behind his/her back. X. I physically attack people. 7	assume that he	she meant to do it, and I	me, I	² ()	³ O
y. I comfort another young person (friend, brother or sister) who is crying or upset. z. I cry a lot. aa. I vandalize. bb. I threaten people. cc. I help to pick up things which another young person has dropped. cd. I bully or am mean to others. ee. I cannot settle to anything for more than a few moments. ff. When I am mad at someone, I say to owners: let's not be with him/her. gg. I am nervous, highstrury ownerse. fh. I kick or hit other neople my age. ii. When I am, playing with others, I invite bystans ers to join in a game. ji. I steal outside my home. kk. I am inattentive, I have difficulty paying attention to someone. II. I have trouble enjoying myself. nn. When I am mad at someone, I tell that person's secrets to a third person.	w. When I am mad behind his/her b	at someone, I say bad things ack.	4 🔿	5	⁶ O
z. I cry a lot. z. I cry a lot. 4	x. I physically attac	ck people.	7 🔿	8	9
aa. I vandalize. To To To To To To To T	y. I comfort anothe or sister) who is	er young person (friend, brother crying or upset.	1	² O	³ O
bb. I threaten people. cc. I help to pick up things which another young person has dropped. dd. I bully or am mean to others. ee. I cannot settle to anything for more than a few moments. ff. When I am mad at someone, I say to oners: let's not be with him/her. gg. I am nervous, highstrung or ense. for a someone, I say to oners: let's not be with him/her. gg. I am nervous, highstrung or ense. for a someone, I say to oners: let's not be with other people my age. ii. When I am slaying with others, I invite bystant are to join in a game. iii. When I am slaying with others, I invite bystant are to join in a game. jj. I steal outside my home. 7	z. I cry a lot.		4 🔿	⁵ O	6
cc. I help to pick up things which another young person has dropped. dd. I bully or am mean to others. ee. I cannot settle to anything for more than a few moments. ff. When I am mad at someone, I say u. o.ners: let's not be with him/her. gg. I am nervous, highstrung o. sense. 7 8 9 9 hh. I kick or hit otiler people my age. ii. When I am playing with others, I invite bystar, ters to join in a game. 7 8 9 iii. I steal outside my home. 7 8 9 6 6 6 7 8 9 9 1 1 1 2 3 6 6 7 8 9 9 1 1 1 1 2 3 6 6 7 8 9 9 1 1 1 1 1 2 3 6 6 7 8 9 9 1 1 1 1 1 2 3 1 1 1 1 2 3 1 1 1 1 2 3 1 1 1 1 2 3 1 1 1 1 1 2 3 1 1 1 1 1 2 3 1 1 1 1 1 1 1 1 2 3 1 1 1 1 1 1 1 2 3 1 1 1 1 1 1 1 1 1 1 1 1	aa. I vandalize.		7 🔿		9
person has dropped. dd. I bully or am mean to others. ee. I cannot settle to anything for more than a few moments. ff. When I am mad at someone, I say to others: let's not be with him/her. gg. I am nervous, highstrung otherse. hh. I kick or hit office people my age. ii. When I an talaying with others, I invite bystant lers to join in a game. iii. When I an talaying with others, I invite bystant lers to join in a game. 7	bb. I threaten peop	le.	1	100	³ O
ee. I cannot settle to anything for more than a few moments. ff. When I am mad at someone, I say to others: let's not be with him/her. gg. I am nervous, highstrung or sense. 7	cc. I help to pick up person has dro	things which another young oped.	40	5	₆ O
more than a few moments. ff. When I am mad at someone, I say to oriers: let's not be with him/her. gg. I am nervous, highstrung or lense. 7 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	dd. I bully or am me	an to others.	⁷ O	8 O	9
gg. I am nervous, highstrung on ense. 7 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9			10	² O	³ O
hh. I kick or hit ot. er people my age. 1	ff. When I am mad let's not be with	at someone, I say ι οιńers: him/her.	4 🔿	5	⁶ O
ii. Wher I an. playing with others, I invite bystan. Playing are to join in a game. 7	gg. I am nervous, hi	ghstrung or tense.	⁷ O	8	°O
bystar Ners to join in a game. jj. I steal outside my home. 7	hh. I kick or hit oti 🤋	r people my age.	1	² O	³ O
kk. I am inattentive, I have difficulty paying attention to someone. II. I have trouble enjoying myself. III. I have trouble enjoying myself. I	ii. Wher I an. าlay bystan ters to jo	ng with others, I invite in in a game.	4 🔿	5	⁶ O
to someone. II. I have trouble enjoying myself. Mm. I help other people my age (friends, brother or sister) who are feeling sick. Mm. I help other people my age (friends, brother or sister) who are feeling sick. Mm. I help other people my age (friends, brother or sister) who are feeling sick. Mm. I help other people my age (friends, brother or sister) who are feeling sick. Mm. I help other people my age (friends, brother or sister) who are feeling sick. Mm. I help other people my age (friends, brother or sister) who are feeling sick. Mm. I help other people my age (friends, brother or sister) who are feeling sick. Mm. I help other people my age (friends, brother or sister) who are feeling sick. Mm. I help other people my age (friends, brother or sister) who are feeling sick. Mm. I help other people my age (friends, brother or sister) who are feeling sick. Mm. I help other people my age (friends, brother or sister) who are feeling sick. Mm. I help other people my age (friends, brother or sister) who are feeling sick. Mm. I help other people my age (friends, brother or sister) who are feeling sick. Mm. I help other people my age who cannot see the sister of the	jj. I steal outside r	ny home.	⁷ O	8 O	9
mm. I help other people my age (friends, brother or sister) who are feeling sick. nn. When I am mad at someone, I tell that person's secrets to a third person. 2 3 0 1 0 1 0 1 0 1 0 1 0 1 0 0 1 0 0 0 0		I have difficulty paying attention	1 1	² O	³ O
nn. When I am mad at someone, I tell that person's secrets to a third person. 1 2 3 0	II. I have trouble e	njoying myself.	4 🔿	5 🔾	6
oo. I encourage other people my age who cannot	mm. I help other pec sister) who are	ple my age (friends, brother or feeling sick.	⁷ O	8	⁹ O
oo. I encourage other people my age who cannot do things as well as I can.	nn. When I am mad secrets to a third	at someone, I tell that person's person.	1	²	³O
	oo. I encourage oth do things as we	er people my age who cannot Il as I can.	4 🔿	5	⁶ O

	A
	X

Has anyone in your school committed suicide?	0 🔿			
	1 🔾	Yes, within the la	•	
	2 🔾	Yes, more than a	a year ago	
	3 🔾	No, never		
	³ ()	I don't know		
Has anyone that you have personally known committed suicide?	4 🔿	Yes, within the la	st year	
	5 🔾	Yes, more than a	year ago	
	6 🔾	No, never	4	
	7 🔾	I don't know	13	Y
In the past 12 months, did you seriously consider attempting suicide?	1 🔘	Yes		
	$(^2 O$	No → Go to	question [07
In the west 40 security because with a did				
In the past 12 months, how many times did you attempt suicide?	$\sqrt{3}$	Ne√er/ none → Go	to question	D7
	, O	Once		
R	5 0	More than once		
If you attempted suicide during the past 12 months, did you have to be treated by a doctor, nurse or other health professional (for	6 🔾	Yes		
a physical injury or couns (ling)?	7 🔾	No		
In the past 12 months, about how many times	Never	Once or twice	3 or 4 times	5 times o more
a. have you stayed out all night without permission?	1	² O	3	4
b. were you questioned by the police about anything that they thought you did?	5 🔾	⁶ O	7	8
c. have you run away from home?	1	² O	3	4
d. have you intentionally damaged or destroyed anything that didn't		⁶ ()		

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r

In the	ne past 12 months, about how ny times	Never	Once or twice	3 or 4 times	5 times or more
е.	have you fought with someone to the point where they needed care for their injuries?	1 ()	² O	³	4 🔿
f.	have you carried a weapon for the purpose of defending yourself or using it in a fight?	5	6	⁷ O	*O
g.	have you sold any drugs?	1	² O	3	4
h.	have you attempted to touch anyone in a sexual way while knowing that they would probably object to this?	5	⁶ O	⁷ O	*0
that	ne past 12 months, were you part of a gang broke the law by stealing, hurting neone, damaging property, etc.?	¹	es o		,

SECTION E Activities

	Outside of school, during the past 1 months, how often have you	12				
	months, now often have you		Never	Less than once a week	1 to 3 times a week	4 or more times a week
	 a. played sports or done physical ac without a coach or an instructor biking, skateboarding, etc.)? 		1 ()	2 🔿	³ 🔘	4 🔘
	 b. played sports with a coach or ins (swimming lessons, baseball, hoc 	tructor	5 (⁶ ()	7 ()	⁸ ()
	c. taken part in dance, gymnastics, other groups or lessons (always coutside of school)?	karate or	1 ()	² ()	³ O	4 ()
	d. taken part in art, drama or music clubs or lessons (again outside of	groups,	5 ○	° ()	7 ()	* 0
	e. taken part in clubs or groups such Guides or Scouts, 4-H club, comr church or other religious groups?	n as	1 ()	² ()	3 0	4 🔾
	f. done a hobby or craft (drawing, m building, etc.)?	nodel	5 🔘	6 O	7 0	8 🔾
	This may be an activity with or witho or instructor, but does not include gy	ut a coach	04 31 05 1	to 15 minutes to 30 minutes to 59 minutes to 2 hours ore than 2 hours		
	In any of your activities, at school or school, do you have special respons such as team leader captain, secret	ibilities	¹ O Ye			
	Excluding for school or for work, how often do you	Daily	Weekly	Monthly	Several times a year	Never
_	a. use a public library?	01	02	03	04	05
	b. write letters, poetry, stories, journals, etc.?	06	07	080	09	10
	c. read newspapers or magazines?	11 🔘	12	13	14	15
		16 🔿	17			20 🔿

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E	In the past 12 months, have you volunteered or helped without pay by (Include volunteer work done for credit at	1 🔿	doing activities at school (yearbook committee, student council, etc.)
	school) (Mark all that apply.)		supporting a cause (food bank, environmental group, etc.)
		³ O	fund raising (a charity, school trips, etc.)
		4 🔿	helping in your community (hospital volunteering, work in a community organization, etc.)
		5 🔾	helping neighbours or relatives (cutting grass, babysitting or shovelling snow for a neighbour, etc.)
		6 🔾	doing another volunteer activity (without pay)
		(⁷ O	I have not done any of these activities without pay → Go to E7
E 6	In the past 12 months, how often have you volunteered or helped without pay?	01	Everyday
		02	A few times a week
		04	Once a week
		05	A few times a month
			Less than coce a month
3	On average, about how many hours a day do you watch TV or videos, or play video games?	01	Lunn : watch TV or videos or play video games
		02	Lyss than 1 hour a day
		03 0	1 or 2 hours a day
	2	04	3 or 4 hours a day
		05	5 or 6 hours a day
		06	7 or more hours a day
E8	Do you use the Internet		
		Ye	s No
	a. at home?	¹ C	2 🔾
	b. at school?	3 C	4 🔾
	c. somewhere else?	5 🖯	6 🔾
E 9	Not including Internet use, do you use a		
	computer	Ye	s No
	a. at home?	¹ C	2 ()
	b. at school?	3 C	4 ()
	c. somewhere else?	5 C	6 🔾

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On average, about how many hours a day do you spend on a computer (doing work, playing games, e-mailing, chatting, surfing the Internet, etc.)?	I don't use a computer Less than 1 hour a day 1 or 2 hours a day 3 or 4 hours a day 5 or 6 hours a day 7 or more hours a day
Is there a computer in your home? (Even if you don't use it.)	¹ O Yes ² O No
On average, how much time in a day do you spend at home looking after a younger brother or sister while your parents are not home?	I don't have a younger brother or sister I don't spend any time at hor ie looking after a younger brother or sister while my parents are not home Less than 1 hour a day 1 to 2 hours a day 5 3 to 4 hours a day 7 or mure hours a day

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SECTION F

Smoking, Drinking and Drugs

In this section, we would like to ask you some questions about your experiences with smoking, drinking and drugs.

Some of the questions will apply to you even if you have not smoked, had a drink or used drugs.

Please be as honest as you can – your answers are private and Statistics Canada will make sure no one will find out who filled out each questionnaire.

-			
(3)	Which of the following best describes your experience with smoking cigarettes:	I have never smoke I have only had a fe	w puffs Go to question F4
		OR	
		I smoke	
		04 A few times a year	
		05 About once or twice	a month
		⁰⁶ A hout -2 days a w	eek
		⁰⁷ About 3-5 days a w	eek
		About 6-7 days a w	eek
E 2	On the days that you smoke, about how many		
	cigarettes do you usually smoke?	numb	er of cigarettes
F3	If you have smoked one or nore cigarettes every day for at least r days in a row, how old were you when you was 2?	98 O I have never done	this
		OR	
		l was	years old

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The next questions are about drinking alcohol.

A drink of alcohol is, for example:

✓ one bottle of beer or

✓ one glass of wine, or

✓ one shot of liquor.

F4	Which of the following best describes your experience with drinking alcohol:	O1 ☐ I have never had a drink of alcohol O2 ☐ I have only had a few sips O3 ☐ I only tried once or twice (at least one drink) O4 ☐ I do not drink alcohol anymore OR	
		I drink (at least one drink)	
		05.0	
		Of A few times a year Of About once or twice a month	
		Of About 1-2 uays a week	
		⁰⁸ About 3-5 days a week	
		⁰⁹ About 6-7 days a week	
F 5	How old were you when you first had a drink of alcohol?	I was years old.	
F6	Have you ever been drunk?	¹O Yes	
	CR.	² O No → Go to question F9	
7	How old were you when you were drunk for the first time?	I was years old.	
F8	In the past 12 months, how often have you been drunk?	⁰¹ O Never	
		⁰² A few times	
		⁰³ About once or twice a month	
		⁰⁴ About 1-2 days a week	
		⁰⁵ About 3-5 days a week	
		⁰⁶ About 6-7 days a week	

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		he next questions are a rugs	bout dr	ug use.	Pleas	se answe	r even if y	ou do no	tuse
F	your experience with using marijuana			01 🔿	I have ne	ver done it			
	and cannabis products (also known as a joint, pot, grass or hash) in the past 12 months?			02 🔿	I have do	ne it, but not o	during the p	ast 12 months	
					OR				
						past 12 m uana	onths, I have	used	
					03 🔘	A few time	es		
					04 🔘	About one	ce or twice a r	month	
					05 🔾	About 1-2	days a week		
					06 🔘	About 3-5	days a week		
					07	About 6-7	days a week		
£10	\							4	
	exp	ich best describes your erience with the following gs in the past 12 months:	l have never	I hav	but	In the	past 12 mon	hs I have ι	used it
			done it	not in t past 1 month	12	1 or 2 times	3 to 5	6 to 9 times	10 times or more
		Hallucinogens like LSD/acid, magic mushrooms	01	02)	03 C	04	05	06
	b.	Glue or solvents	07	08		C'	10 🔾	11 🔿	12 🔾
	(Drugs without a prescription or advice from a doctor: downers, uppers, tranquilizers, ritalin, etc.	¹³ O	14 (15 🔿	¹⁶ O	17 🔾	18
	(Other drugs like ecstasy, crack, cocaine, heroin, speed, etc.	19 🔾	20 C)	21 🔿	22 🔿	23 🔾	24 🔘
	I	you have not tried o	ov of the	a abaya	druge	a a ta a	action C		
~		you have ne ve tried a	iy Oi tile	e above	urugs	s, go to s	ection G.		
3	Ho\ follo	w old were you when you did to owing droas for the first time ?	he ?			I have ne		I first did it was	
	a.	Marijuana and cannabis prod	lucts			99 🔘	OR		years
	b.	Hallucinogens like LSD/acid,	magic mu	ushrooms		99 🔘	OR		years old
	C.	Glue or solvents				99 🔾	OR		years
	d.	Drugs without a prescription doctor: downers, uppers, tran	or advice inquilizers,	from a ritalin, etc) .	99 🔾	OR		years
	e.	Other drugs like ecstasy, cracocaine, heroin, speed, etc.	ck,			99 🔘	OR		years old

(F)

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SECTION G My Parent(s)

m	other		
	Think of the mother you spend the most time with. Is she (Mark one only.)	of your biological/birth mother?	
		your adoptive mother?	
		your stepmother?	
		your foster mother?	
		os another person (a mother figure)?
		OR	
		06 ○ I am not in touch with my mother → Go to questi	on G4
<u> </u>			
	Thinking of the mother you have identified in the previous question:	A great deal Some	Very little Not at all
_	a. How well do you feel that your mother understands you?	°C) 10	2 🔾
_	b. How much fairness do you receive from your mother?	30 40	5 🔾
	c. How much affection do you receive from your mother?	⁶ O ⁷ O	8 🔿
_			
	Overall, how would you describe your relationship with your mother?	¹ O Very close	
		² O Somewhat close	
	EOF	³ Not very close	

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ly F	ather	
4	Now think of the father you spend the most time with. Is he	on your biological/birth father?
	(Mark one only.)	⁰² your adoptive father?
		⁰³ your stepfather?
		⁰⁴ your foster father?
		⁰⁵ another person (a father figure)?
		OR
		06 ○ I am not in touch with my father → Go to question G7
5	Thinking about the father you have identified in the previous question:	4
		A great deal Some Very little/
	a. How well do you feel that your father understands you?	0 10 2 ₀
	b. How much fairness do you receive from your father?	³ C ⁴ O ⁵ O
	c. How much affection do you receive from your father?	6
6	Overall, how would you describe your relationship with your father?	O Very close
		² Somewhat close
		³ Not very close
	Answer the following questions thinking identified in the previous questions.	ng of the father and mother you have
7	How well do you think your parents get along with each other?	⁰ O Very well
		¹ Fairly well
	>	² Not very well
		³ My parents are not in touch with each other
8	How often do your parents disagree about how to deal with you and your	⁰¹ O Never
	brother(s) and sister(s)?	°2 Rarely
		03 Sometimes

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⁰⁴O Often

⁰⁵O Always

I don't know

 07 My parents are not in touch with each other

	A
T	*

wi wh m	ow often do your parents get upset th one another, including times nen they are mad but don't say uch? or each of the following statements, use the epparent(s), foster parent(s) or guardian(s)	e choice t	hat best describ	ents are not in tou pes the way your	parent(s) (o	r
	y parent(s)	Never	Rarely	Sometimes	Often	Always
a.	smile at me.	5 🔿	⁶ O	7	⁸ O	⁹ O
b.	want to know exactly where I am and what I am doing.	°O	1 ()	2 🔾	³ O	4
C.	soon forget a rule they have made.	5 🔿	⁶ O	7	O	9
d.	praise me (say good things about me).	°O	1 ()	20	3 🔿	4
_e.	let me go out any evening I want.	5	⁶ O	70	*O	9 🔾
f.	tell me what time to be home when I go out.	°O	10	² O	³ O	4 🔘
g.	nag me about little things.	5	60	⁷ O	8 🔾	9
h.	listen to my ideas and opinions.	°O	10	2 🔾	³ O	4
i. 	and I solve a problem together whenever we disagree about something.	SQ.	⁶ О	7	⁸ O	⁹ O
j.	only keep rules when it suits them.	°O	1 ()	2 🔾	³ O	4 🔘
k.	get angry and yell at me.	5	⁶ O	⁷ O	* O	9
	make sure I knov. I am appreciated.	°O	10	² O	³ O	4 🔘
m.	threaten pun shment more often than they use it	5 🔿	6 🔾	7 🔿	⁸ O	9 🔾
n.	speak of the good things I do.	°O	1 🔿	² O	³ O	4 🔘
0.	find out about my misbehaviour.	5	⁶ O	⁷ O	8 🔿	9
p.	enforce a rule or do not enforce a rule depending upon their mood.	$^{\circ}\bigcirc$	1 🔿		³ O	4 🔘
q.	hit me or threaten to do so.	5	⁶ O	7 🔿	8 🔾	9
r.	seem proud of the things I do.	°O	1	2 🔿	³ O	4 🔿
s. 	seem too busy to spend as much time with me as I'd like.	5 🔿	6	⁷ O	*O	⁹ O
t.	take an interest in where I am going and who I am with.	°O	1	² O	³ O	4

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*

In general, would you say your h	ealth is	excelled very good? Good? fair? poor?			
How tall are you? (Please estimate if you are not se	ure.)	OR Me		Inches	etres
How much do you weigh? (Please estimate if you are not so	ure.)	OR	Poun. Kilk gr		
During the past 6 months, how o have you had the following?	ften Seldom or never	Al ou once a n onth	About once a week	More than once a week	Most days
a. Headache	⁵ O	60	7	⁸ O	9
b. Stomach ache	Po	1 🔾	2	³ O	4 🔿
c. Backache	5 _O	⁶ O	7	8 🔾	°O
d. Difficulties in getting to veep	00	1	² O	³ O	4 🔿
In a school week (M. nc.ay to Frie how many days to you normally breakfast?	day), eat	⁵ O Never	lays a week		
Y		⁷ O 3 or 4 c	days a week		

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*		*					
Pube	erty						
	We know that the following questions might be difficult, but would appreciate you answering them as well as you can. Changes in young people's bodies can affect many different aspects of their lives.						
ha	ould you say that your body hair ("body air" means underarm and pubic hair) has egun to grow?	Has not yet started growing Has barely started growing Growth of body hair is definitely underway Growth of body hair seems completed Boys go to question H10 Girls go to question H8					
For gi	irls only						
Н8 на	ave your breasts begun to grow?	 Have not yet started growing Have barely started growing Breast growth is definitely underway 					

Breast growth seems completed

months old.

years

and

⁹⁹ Have not yet started

	Girls go to question H12		
For boys on v			
H10 Have you noticed a deepening of your voice?	Has not yet started changing Has barely started changing Voice is definitely changing Voice change seems completed		
H11 Have you begun to grow hair on your face?	Has not yet started growing Has barely started growing Facial hair growth is definitely underway Facial hair growth seems completed		

I was

OR

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H9 If you have begun to menstruate (your monthly periods), at what age did you start?

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⊥		
X		×

Do you have a boyfriend/girlfriend right now?	OR I was years old
Do you have a boyfriend/girlfriend right now?	
po you have a boymona/grimona right how.	¹○ Yes → Go to question H14
	² O No → Go to question H16
How long have you been going out with (dating) him/her?	Less than 1 mont.) 1 to 5 months Comparison of months to a year Over a year
Outside of school hours, about how many days a week do you see your boyfriend/girlfriend?	Never Conclusion Never Conclusion Never Conclusion Never Less than once a week Conclusion Never Conclusion Never

H16	In the past 12 months, how many boyfriends/girlfriends have you had?	¹¹ O None
	, ,	¹² O 1
		¹³ O 2 or 3
		¹⁴ O 4 or 5
		¹⁵ O 6 or more
	We know that the following question you answering them as well as you conderstand the concerns of youth you	s might be sensitive, but would appreciate can. Your answers will help us to better our age.
	Please remember that Statistics Canadilled out each questionnaire.	ada will make sure no one will find out who
(117)	Have you ever had consentual sexual intercourse?	⁸ ○ Yes → Go to question H18
		°O No → Go to section I
(118)	How old were you when you first had	
	consentual sexual intercourse?	I was years old
H19	How old was the partner with whom you first had consentual sexual intercourse?	He or she was years old
		OR
		99 I don't know
H20	Did you or your partner use a concom the last time you had consentual second intercourse?	¹ O Yes
	ar III	² O No
(121)	Did you or your partner use other methods of birth control pills, diaphragm,	³O Yes
	etc.) the last time you had consentual sexual intercourse?	⁴ O No
		⁵ O I don't know

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*

SECTION I Work

The following questions are about all types of work experiences including odd jobs (such as babysiting or mowing lawns), jobs for employers (including restaurant server, cashier or sales assistant), both part-time and full-time work, paid or unpaid.

during this school year		
,		
Are you currently doing any work	Vac	N.a.
a. for pay for an employer (for example, at a store or restaurant)?	Yes ⁰⁹	No
b. for pay at odd jobs (babysitting, mowing a neighbour's lawn or delivering flyers)?	11 🔾	12 🔿
c. at your family's farm or business (with or without pay)?	¹³ O	14 🔘
d. without pay (for example, CO-OP Program)?	15	16
If you are not currently working → Go to ques	stion 15	
Thinking of all the jobs you currently have: what type of work are you doing? (Mark all that apply.)	огк. g in a restaurant or fast fo	ood outlet, e
² Wysto	orking in a store (convenience ore, gas station, clothing or sho	store, groc oe store, et
³ O Wo	orking in another type of servic nstruction, hospital, office, are	ce (for exan
⁴ O Do ne	ning odd jobs (babysitting, mov ighbour's lawn or delivering fly	ving a vers, etc.)
5 O wa	orking at my family's business	or farm
6 0 01	her type of work. Specify:	



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	None		Number of hours
a. Monday to Friday?	95	OR	
b. Saturday and Sunday?	97	OR	
Does this work cause you to st school work than you would like	udy less or do less e?	3 C 4 C 5 C	Yes, a great deal less Yes, somewhat less No, not at all less I do not go to school anymore
nmer Work			
This past summer, did you do	any work		Yes No
a. for pay for an employer (for example, at a store or r	estaurant)?		12 0 13 0
b. for pay at odd jobs (for exar mowing a neighbour's lawn	mple, babysitting, or delivering flyers)?		14 0 15 0
c. at your family's farm or busi (with or without pay)?	iness		16 O 17 O
d. without pay (for example, C	O-OP program)?		18 0 19 0
If you did not work last. Think of all the jobs you had summer; what types of work of (Mark all that apply)	tini past id you do?	Wo stor Wo Wo Wo Wo Wo Wo Doi Doi Doab New	orking in a restaurant or fast food outlet, etc. orking in a store (grocery or convenience re, clothing or shoe store, etc.) orking in a gas station orking in a camp orking in another type of service (for example spital, office, arena, etc.) orking in construction, landscaping or inting ing odd jobs (cutting grass, house-sitting, bysitting, delivering flyers and/or wspapers, running errands, etc.) orking at my family business or farm over type of work. Specify:

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Thank you very much for helping us.

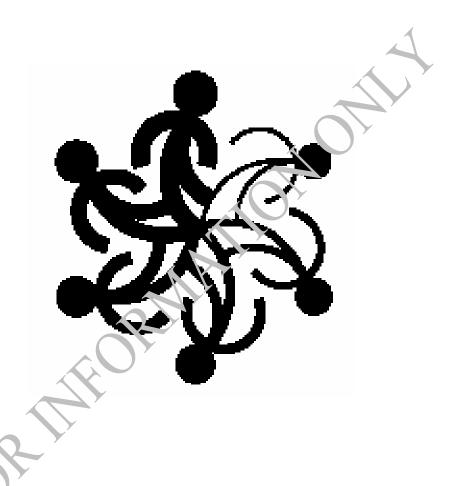
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return it to the interviewer.

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National Longitudinal Survey of Children & Youth

Cycle 7 Survey Instruments 2006/2007



BOOKLET 23: SELF-COMPLETED QUESTIONNAIRE FOR 16-AND 17-YEAR-OLDS

FOR THE ORDER OF T



National Longitudinal Survey of Children and Youth

Cycle 7

Booklet 23E

Confidential when completed

Collected under the authority of the Statistics Act, revised statutes of Canada, 1985, Chapter S19.

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Please read instructions on next page before beginning.

	₩
FOR OFFICE USE ONLY	
Person ID	
Respondent's First Name	
Assignment No.	
Time Started	

8-5300-449.1: 2006-06-15 STC/ENM-040-75020



Canadä

INSTRUCTIONS

This is a questionnaire that asks about you, your family, your friends, how you feel and what you like to do. Your answers will help the government to plan programs and services for young people like yourself.

This is not a test and there are no right or wrong answers. Some questions may seem personal and some are about things not everybody does. Take your time and please be sure to answer each question based on what you really think. You can choose whether or not to fill out this questionnaire. If you need help with any questions, you may ask the interviewer.

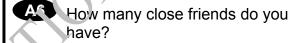
When you answer these questions, you can mark your answers like this ♂ or fill in the circle ♠, or write a number in the boxes, as in the examples below. When you write your answers, make sure you press hard with your pencil.

Example 1

B1 How do you feel about school?

- $^{\circ}$ O I like school very much.
- $^{\scriptscriptstyle 1}$ \otimes I like school quite a bit.
- ² O I like school a bit.
- ³ O I don't like school very much.
- ⁴ O I hate school.

Example



93 O None

OR

0 3 number of close friends



Remember that the KIDS HELP PHONE is available to help you at any time if you feel like you would like to talk to someone about a problem.

1-(800) 668-6868

Statistics Canada will keep your answers PRIVATE.

No one from your home or your school will see what you write.

THANK YOU FOR YOUR HELP!

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*

SEC	TION A	Friends and Family					
state		he following ut your friends age.	False	Mostly false	Sometimes false /	Mostly true	True
A1	I have mar	ny friends.	$^{\circ}$ O	1		3 O	4 🔘
A2	I get along my age.	easily with others	5 🔿	6 O	7 🔾	8 🔾	9 🔾
A3	Others my friend.	age want me to be their	°O	1 ()	² O	³ O	4 🔘
A4	Most other	rs my age like me.	5 🔿	6 🔾	⁷ O	8 O	⁹ O
F	or the res	st of this questionnair onfide in. They may b	e, by "clos e friends th	e friend	s", we mean the p	cople tha	nt you utside
	chool.	ny close friends really know		0 O 1 O 2 O 3 O	False Mostly false So netimes false/Someti Mostly true True		
A6		many days a week do you do close friends outside of scho		02 O 03 O 04 O 05 O	Never Less than once a week 1 day a week 2-3 days a week 4-5 days a week 6-7 days a week		
	How many	of your close friends are:		None	Number	_	
A7	female?			93 🔾	OR		
A8	male?			94 🔘	OR		
A9	How often of private feel	do you share your secrets an ings with your close friends?	d	1 O 2 O 3 O	All the time Most of the time Some of the time Rarely Never		

(F)

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		A
7		7

How many of your close friends do the following:						
	G	None	A few	Most	All	
a.	Smoke cigarettes?	° 🔿	1 🔘	² O	3 🔘	
b.	Drink alcohol?	4 🔘	5 🔾	6 🔾	7 🔿	
C.	Break the law by stealing, hurting someone or damaging property?	٥	1 🔘	2 🔾	3 🔘	
d.	. Have tried marijuana?	4 🔘	5 🔾	6 🔘	7 🔾	
е.	Have tried drugs other than marijuana?	° O	1 🔘	2 🔿	3 🔾	
	ince September 1st, how many of you ose friends have done the following:	ur None	A few	Most	AII	
a.	. Worked for an employer or at odd jobs?	4 🔘	5 🔘	6	7 🔾	
b.	Cut or skipped a day at school without permission?	0 🔘	10	2 🔾	3 🔘	
C.	Been suspended from school?	4 🔘	(0)	e 🔾	7 🔾	
d.	Dropped out of school for more than one week?	٥ 🔿	10	2 🔘	3 🔘	
th	or each of the following statements, made circle that corresponds to your situatith your close friends.		7			
	in jour second mande.	Rarely or Never	Some of the time	Most of the time	All the time	
a.	My close friends push me to succeed and to jo interesting things that I would not jo by myself.	4 🔘	5 🔿	e 🔾	7 🔾	
b.	When I make a decision, I take my cose friends' opinion into accound.	° ()	1 🔘	2 🔘	3 🔘	
C.	My close friends push me to do foolish or stupid things.	4 🔘	5 🔿	e 🔾	7 🔾	
aı	other than your close friends, do you ha nyone else in particular you can talk to bout yourself or your problems?	ve		to question A		

(8)

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*			×
A14	What is their relationship to you?	01 🔘	Mother
	(Mark everyone you feel you can talk to about yourself or your problems.)	02 🔘	Father
		03 🔘	Stepmother
		04 🔘	Stepfather
		05 🔘	Brother
		06 🔘	Sister
		07 🔘	Grandparent
		08 🔘	Other relative
		09	A friend of the family
		10 🔘	Parent's boyfriend/girlfriend
		11 🔘	Teacher / counsellor at school
		12 🔘	Coach or leader (e.g. sports coach or spiritual leader)
		13 🔘	Other (eg., family doctor)
A15	Overall, how would you describe your relationship with your brother(s) and sister(s)?	14 🔘	Very close
	(Include step or foster siblings).	15 🔾	Some what close
		16 🔿	, 'ot very close
		17 🔘	i am not in touch with my brother(s) and sister(s)
		18	I don't have brothers and sisters

SECTION B About Me

	noose the answer that best escribes how you feel.	False	Mostly false	Sometimes false/ Sometimes true	Mostly true	True
a.	In general, I like the way I am.	00 🔘	01	02 🔘	03 🔘	04
b.	Overall I have a lot to be proud of.	05	06	07 🔘	08	09
C.	A lot of things about me are good.	00 🔘	01	02 🔘	03 🔾	04
d.	When I do something, I do it well.	05	06	07 🔵	08	09
e.	I like the way I look.	00 🔘	01	02	03 🔘	04
	ow you will be asked about your hoose only one answer for ea		u relate to oth Rarely True Of Me	<u> </u>	one, schoo' and Often True Of Me	work. Very Ofte True Of M
a.	It is easy to tell people how I fe	eel.	1	20	3 🔾	4
b.	I like doing things for others.		50	e O	7 🔾	8 🔾
C.	I get angry easily.		10	2 🔾	3 🔾	4 🔾
d.	I can understand hard question	ns.	5	6 🔾	7 🔾	8
e.	I think that most things I do wil turn out OK.	R	10	2 🔿	3 🔾	4
f.	I can talk easily about my feelings.	*	5	6 🔾	7	8
g.	I feel bad when other people have their feelings burt.		1	2 🔾	3 🔾	4
h.	l get upset earily.		5	6 🔾	7	8
i.	I can come up with many ways a hard question when I want to	s of answering	1	2 🔾	3 O	4
j.	I hope for the best.		5	6 🔾	7	8
k.	I can easily describe my feeling	gs.	1	2 🔾	3 🔾	4 🔾
I.	I know when people are upset they say nothing.	, even when	5	6 🔾	7 🔾	8 🔾
m.	When I get angry, I act without	t thinking.	1	2 🔾	3 🔾	4 🔾
	When answering hard question	ns, I try to think o	of ₅⊖	6 🔿	7 🔘	8
n.	many solutions.					

(F)

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*		*
SECTION B About Me		
In general, I am happy with how things are for me in my life now.	¹ Strongly disagree	

In ge	eneral, I am happy with how gs are for me in my life now.	1	Strongly disagree	e	
	-	2	Disagree		
		3 O	Agree		
		4 🔿	Strongly agree		
The	next five years look good to me.	5 🔾	Strongly disagree)	
		6 🔾	Disagree		
		7	Agree		
		8	Strongly agree		
In th	ne past 2 years , have you personally n through any of these events?			1	
				Yes	No
a. <i>A</i>	A painful break-up with your boyfriend/girlfriend.			0	2 🔘
b. A	A serious problem in school or at work.		A	3 🔾	4 🔘
c. A	A pregnancy or an abortion.			1 🔘	2 🔘
d. 7	The death of someone close to you.			3 🔘	4 🔘
e. 7	The divorce or separation of your parents.			1 🔵	2 🔾
f. A	Another difficult event; specify:			3 🔘	4 🔘
-					
In th	ne past 12 mon hs have you personally n treated unfan ່ງ b cause of				
			Yes	No	l don' know
а. у	our sex/gender?		01 🔘	02	03 🔾
b. y	your race, skin colour, or ethnic group?		04 🔘	05 🔾	06 🔾
c. y	our religion?		01 🔘	02 🔘	03 🔘
d 3	another reason?		04 🔘	05 🔘	06 🔘

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*		*
B7	How often do you feel like an outsider (or left	

B7	How often do you feel like an outsider (or left out of things) at your school? (If you no longer go to school, please refer to the last time you were in school)	01 O 02 O 03 O 04 O 05 O	All the time Most of the time Some of the time Rarely Never		
B8	In the past 12 months, how many times did someone	Never	Once or twice	3 or 4 times	5 times or more
	a. say something personal about you that made you feel extremely uncomfortable?	° 🔿	1 🔘	2 🔾	3 🔾
	b. threaten to hurt you but not actually hurt you?	4 🔿	5 🔾	6 🔾	7 🔾
	c. physically attack or assault you?	⁰ O	1 🔘	² O	3 O
				<i>Y</i>	
В9	How often do you see adults in your house physically fighting, hitting or otherwise trying to hurt each other?	1 O 2 O 3 O 3	Often Sumetimes Seldom		
		4()	Never		
B10	How often do you watch television shows or movies that have a lot of violence in them?	1 0	Often Sometimes		
		3	Seldom		
	COR	4	Never		

B

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SECTION C

Feelings and Behaviours

Please read the following statements and choose the answer that best describes you.

		Rarely or none of the time (less than 1 day)	Some or little of the time (1 to 2 days)	Occasion- ally or a moderate amount of the time (3 to 4 days)	Most of all of the time (5 to 7 da
a.	I did not feel like eating; my appetite was poor.	1	² O	³	4
b.	I felt I could not shake off the blues even with help from my family or friends.	5 🔾	6 O	70	8
C.	I had trouble keeping my mind on what I was doing.	1 ()	² O	³ O	4 🔿
d.	I felt depressed.	5 🔾	6O	70	80
e.	I felt that everything I did was an effort.	1	20	³ O	4 🔿
f.	I felt hopeful about the future.	50) O	7	8
g.	My sleep was restless.	10	20	3 🔾	4 🔿
h.	I was happy.	5 🔿	6 🔾	7	8
i.	I felt lonely.	10	² O	³ O	4
j.	I enjoyed life.	5 🔾	⁶ О	7	8
k.	I had crying spe's.	1	² O	³ 🔾	4 🔿
l.	I felt people cisliked me.	5 🔾	⁶ О	7	*
На	e of the following questions might ort, we encourage you to talk to y ded to you by the interviewer.				ke you ne sources
su	icide?	0	Yes, within the las Yes, more than a <u>y</u>	•	

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Has anyone that you have personally known committed suicide?	5 O Y	es, within the last es, more than a lo, never don't know	•	
In the past 12 months, did you seriously consider attempting suicide?	(3.0	Yes No → Go to	question C7	
In the past 12 months, how many times did you attempt suicide?	4 () (Never/none → Once More than once	Go to que	estion C7
If you attempted suicide during the past 12 months, did you have to be treated by a doctor, nurse or other health professional (for a physical injury or counselling)?	6 O Y	es)	
In the past 12 months, about how many times	Never	Once or twice	3 or 4 times	5 times or more
a. have you stayed out all night without permission?	1	² 🔾	³	4
b. were you guestioned by the police about anything they thought you did?	5 🔿	⁶ О	7	*O
c. have you run away from home?	10	² 🔾	³ O	4
d. have you stolen something from a store or school?	5 🔾	60	70	*

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		Never	Once or twice	3 or 4 times	5 times or more
e.	have you intentionally damaged or destroyed anything that didn't belong to you?	1	2 🔘	³ 🔾	4 🔘
f.	have you fought with someone to the point where they needed care for their injuries?	5 🔾	6 🔾	7 🔿	8 🔾
g.	have you attacked soemone with the idea of seriously hurting him / her?	1 🔘	2 🔿	³ 🔾	4 🔾
h.	have you carried a weapon for the purpose of defending yourself or using it in a fight?	5 🔾	e 🔾	7 🔿	8 🔾
i.	Have you sold any drugs?	1 🔘	2 🔿	3 🔾	4 🔾
j.	have you attempted to touch anyone in any sexual way while knowing that they would probably object to this?	5 🔾	e 🔾	O	80
			0		

In the past 12 months, were you part of a gang that broke the law by stealing, hurting someone, damaging property, etc.?

Yes

 \bigcirc No

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The next questions are about smoking cigarettes.

experience with smoking cigarettes:	01 I have never smoked
	02 Combuteried area as turing Go to
	question
	⁰³ O I do not smoke anymore
	OR
	I smoke
	⁰⁴ A few times a year
	O5 About once or twice a month
	O About 1-2 days a weck
	⁰⁷
	OB About 6-7 days a week
On the days that you smoke, about how many cigarettes do you usually smoke?	
e next questions are about drinking also Irink of alcohol is, for example:	Number of cigarettes
e next questions are about drinking also drink of alcohol is, for example: ✓ one bottle of beer or ✓ one glass of wine or ✓ one shot of liquor.	
rink of alcohol is, for example: ✓ one bottle of beer or ✓ one glass of wine or	ol. I have never had a drink of alcohol
rink of alcohol is, for example: ✓ one bottle of beer or ✓ one glass of wine or ✓ one shot of liquor. Which of the following pest describes your	ol. I have never had a drink of alcohol
rink of alcohol is, for example: ✓ one bottle of beer or ✓ one glass of wine or ✓ one shot of liquor. Which of the following pest describes your	ol. O1 ○ I have never had a drink of alcohol Go to question □
rink of alcohol is, for example: ✓ one bottle of beer or ✓ one glass of wine or ✓ one shot of liquor. Which of the following pest describes your	O¹ I have never had a drink of alcohol O² I have only had a few sips O³ I only tried once or twice
rink of alcohol is, for example: ✓ one bottle of beer or ✓ one glass of wine or ✓ one shot of liquor. Which of the following pest describes your	O¹ I have never had a drink of alcohol O² I have only had a few sips O³ I only tried once or twice (at least one drink) O³ I do not drink alcohol anymore OR
rink of alcohol is, for example: ✓ one bottle of beer or ✓ one glass of wine or ✓ one shot of liquor. Which of the following pest describes your	O¹ I have never had a drink of alcohol O² I have only had a few sips O³ I only tried once or twice (at least one drink) O⁴ I do not drink alcohol anymore OR I drink (at least one drink)
rink of alcohol is, for example: ✓ one bottle of beer or ✓ one glass of wine or ✓ one shot of liquor. Which of the following pest describes your	O1
rink of alcohol is, for example: ✓ one bottle of beer or ✓ one glass of wine or ✓ one shot of liquor. Which of the following pest describes your	O¹ I have never had a drink of alcohol O² I have only had a few sips O³ I only tried once or twice (at least one drink) O⁴ I do not drink alcohol anymore OR I drink (at least one drink) O⁵ A few times a year O6 About once or twice a month
rink of alcohol is, for example: ✓ one bottle of beer or ✓ one glass of wine or ✓ one shot of liquor. Which of the following pest describes your	o1

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L		
K		X

In	In the past 12 months, how often have you been drunk?		⁰¹ Ne	ever			
			⁰² O A	few times			
			⁰³ At	oout once or	twice a mon	th	
			⁰⁴ At	oout 1-2 day	s a week		
			⁰⁵ Ak	oout 3-5 day	s a week		
			⁰⁶ At	oout 6-7 day	s a week		
e n	ext questions are about drug	g use. Ple	ease answe	er even if	you do no	t use dru	ıgs.
	Which of the following best describe your experience with using marijuan	na	⁰¹ I	nave never d	one it		
	and cannabis products (also known a joint, pot, grass or hash) in the pa 12 months?	as ı st		nave done it, onths	but not dusi:	the past	12
			OR	ontrio)	
		In the բ marijua		onths, I ha	ave used		
			⁰³ A	few units			
			04	hout once o	r twice a mor	nth	
			\sim $^{\prime}$	Sout Office of			
			0225	bout 1-2 day			
			°○ A		vs a week		
			°O A	bout 1-2 day	vs a week vs a week		
	hich heet describes your		°O A	bout 1-2 day	vs a week vs a week		
ex	hich best describes your continued by the past 12 months:	I have never	A or A	bout 1-2 day bout 3-5 day bout 6-7 day	vs a week vs a week		ed it
ex	sperience with the following drugs		°°○ A °° ○ A I have	bout 1-2 day bout 3-5 day bout 6-7 day	vs a week vs a week vs a week		10 time
e> in	sperience with the following drugs	never	I have done it, but not in the past 12	bout 1-2 day bout 3-5 day bout 6-7 day In the pass	vs a week vs a week vs a week t 12 months	I have use	10 time
a.	Hallucir ogens like LSD/acio, magic	never done it	I have done it, but not in the past 12 months	bout 1-2 day bout 3-5 day bout 6-7 day In the pass 1 or 2 times	ys a week ys a week ys a week t 12 months 3 to 5 times	I have use	10 time or mor
a. b.	Hallucir ogens like LSD/acio, magic mushroom	never done it	I have done it, but not in the past 12 months	bout 1-2 day bout 3-5 day bout 6-7 day In the past 1 or 2 times	ys a week ys a week ys a week t 12 months 3 to 5 times	I have use 6 to 9 times	10 time or mor

*				*
0 7	In the past 12 months, how many times have you operated a motorized vehicle (eg. car, motorcycle, boat) after you have been drinking alcohol or doing drugs?	10	Never Once or twice	
	difficulty disconding diags:	3 🔾		
		4 🔿	3 or 4 times	
		O	5 times or more	
D8	In the past 12 months, how many times have you been a passenger in a vehicle when the driver has been drinking alcohol or taking	5	Never	
	drugs?	⁶ O	Once or twice	
		⁷ O	3 or 4 times	
		⁸ O	5 times or more	

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SECTION E Health

Adolescence is a time when there are many changes to your body. In this section, we would like to know more about these changes.

Please answer this section as honestly as possible and remember, Statistics Canada will keep your answers confidential.

(1)	How tall are you? (Please estimate if you are not sure)	Feet Inches OR Metres Centimetres
②	How much do you weigh? (Please estimate if you are not sure)	Pounds OR Kilograns
E	Would you say that your body hair ("body means underarm and pubic hair) has begungrow?	hair" un to 1 Has not yet started growing 2 Has barely started growing 3 Crowth of body hair is definitely underway 4 Growth of body hair seems completed
⇒□	For young women only:	
E4	Have your breasts begun to grow?	Have not yet started growing Have barely started growing Breast growth is definitely underway Breast growth seems completed
E5	start?	I was
	95	
⇒∣	For young men only:	
E6	Have you noticed a deepening of your voice?	 Has not yet started changing Has barely started changing Voice is definitely changing Voice change seems completed

B

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(Mark only one of A, B, C or D) 1	erway
Facial hair is definitely underway Facial hair growth seems complete For young men and young women: (Mark only one of A, B, C or D) Trying to lose In the past 7 days, did you do any of the following things to lose weight? (Mark all that apply.) Cor exercised (to burn catories or fat)? Some other? Specify: OR Trying to gain In the past 7 days, did you do any or the following things in order to gain weight or intude? (Mark all that apply.) Trying to gain In the past 7 days, did you do any or the following things in order to gain weight or intude? (Mark all that apply.) Trying to stevel iffed weights or exercised to build muscle? See See See See See See See See See Se	ompleted Go to
For young men and young women: Would you say you are (Mark only one of A, B, C or D) 1 Trying to lose weight?	ompleted Go to
Would you say you are (Mark only one of A, B, C or D) 1	Go to
(Mark only one of A, B, C or D) Trying to lose → In the past 7 days, did you do any of the following things to lose weight? (Mark all that apply.) OR Trying to gain → In the past 7 days, did you do any of the following things to lose weight? (Mark all that apply.) Trying to gain → In the past 7 days, did you do any or the following things in order to gain weight or nau-cle? (Mark all that apply.) Trying to gain → In the past 7 days, did you do any or the following things in order to gain weight or nau-cle? (Mark all that apply.) Trying to stev → In the past 7 days, did you do any or the following things in order to gain weight or nau-cle? (Mark all that apply.) Trying to stev → In the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Trying to stev → In the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) OR Trying to stev → In the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) OR Trying to stev → In the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) OR OR OR OR OR OR OR OR OR O	,
(Mark only one of A, B, C or D) 1	,
(Mark only one of A, B, C or D) 1	,
Trying to lose → weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following things to lose weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following things in order to gain weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following things in order to gain weight or inusple? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following things in order to gain weight or inusple? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.)	,
Trying to lose → weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following things to lose weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following things in order to gain weight or inuscle? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following things in order to gain weight or inuscle? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following things in order to gain weight or inuscle? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Comparison of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.)	,
to lose weight? (Mark all that apply.) ○ dieted (ate less or differently)? ○ exercised (to burn calories or fat)? ○ took diet pills (i.e., Dexatrim)? ○ other? Specify: ○ other? Specify: ○ ate more footh or took food supplements? ○ lifted.whights or exercised to build muscle? ○ useu stooids? ○ other? Specify: ○ ate more footh or took food supplements? ○ lifted.whights or exercised to build muscle? ○ useu stooids? ○ other? Specify:	,
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took diet pills (i.e., Dexatrim)? See See See See See See See See See Se	,
os took diet pills (i.e., Dexatrim)? smoked? os other? Specify: OR Trying to gain → In the past 7 days, did you do any of the following things in order to gain weight or muscle? (Mark all that apply.) os ate more foot or took food supplements? os used steroids? os other? Specify: OR Trying to ster → In the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) os dieted (ate less or differently)? os exercised (to burn calories or fat)? os other? Specify: OR Not trying to ster → See See OR Not trying to ster → See See other? Specify: OR OR OR OR OR OR OR OR OR O	,
OR 2	_
OR 2 Trying to gain > In the past 7 days, did you do any of the following things in order to gain weight or muccle? (Mark all that apply.) 5 ate more food or took food supplements? 7 lifted wights or exercised to build muscle? 9 used steroids? 9 other? Specify: OR 1 Trying to stery > In the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) 1 dieted (ate less or differently)? 1 dieted (ate less or differently)? 2 exercised (to burn calories or fat)? 3 took diet pills (i.e., Dexatrim)? 3 smoked? 5 other? Specify: OR 4 Not trying to do anything to stay the same weight? 1 other? Specify: OR 4 Not trying to stay and the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) 1 other? Specify: 3 other? Specify: 4 Not trying to stay and the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) 6 other? Specify: 6 other? Specify: 6 other? Specify:	_
Trying to gain → In the past 7 days, did you do any or the following things in order to gain weight or nounce? (Mark all that apply.) Solution of the past 7 days, did you do any or the following things in order to gain weight or nounce? (Mark all that apply.) Trying to stav → In the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Trying to stav → the same weight? (Mark all that apply.) In the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Others are defined apply.) Trying to stav → the same weight? (Mark all that apply.) Trying to stav → the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Others are defined apply.) Trying to stav → the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Others are defined apply.) Trying to stav → the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Others are defined apply.) Others are defined apply. Trying to stav → the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Others apply ap	
(Mark all that apply.) of ate more food or took food supplements? of lifted whights or exercised to build muscle? of other? Specify: In the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) of dieted (ate less or differently)? of exercised (to burn calories or fat)? of other? Specify: OR OR OR Not trying to do anything about your of other? Specify: OR Go to Section F	
OR Second Process of Secon	
OR Security of the start of the same wight? Security of the same weight?	
OR Trying to stav → In the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) (Ma	Go to
OR Trying to stave In the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Description of the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) Description of the following to stay the same weight? (Mark all that apply.) Description of the following to stay the same weight? (Mark all that apply.) Description of the following to stay the same weight? (Mark all that apply.) Description of the following to stay the same weight? (Mark all that apply.) Description of the following to stay the same weight? Description of the following the same wei	→ Section F
Trying to stav → In the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) 101	_
Trying to stav → In the past 7 days, did you do any of the following to stay the same weight? (Mark all that apply.) 101	
C orange of differently)? orange of differently)? orange of exercised (to burn calories or fat)? orange of took diet pills (i.e., Dexatrim)? → Se orange of took diet pills (i.e., Dexatrim)? orange of took diet pills (i.e., Dexatrim)? → Se orange of took diet pills (i.e., Dexatrim)? → Se orange of took diet pills (i.e., Dexatrim)? → Se orange of took diet pills (i.e., Dexatrim)? → Se orange of took diet pills (i.e., Dexatrim)? → Se orange of took diet pills (i.e., Dexatrim)? → Se orange of took diet pills (i.e., Dexatrim)? → Se orange of took diet pills (i.e., Dexatrim)? → Se orange of took diet pills (i.e., Dexatrim)? → Se orange of took diet pills (i.e., Dexatrim)? → Se orange of took diet pills (i.e., Dexatrim)? → Se orange of took diet pills (i.e., Dexatrim)?	
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took diet pills (i.e., Dexatrim)? → Se took diet pills (i.e., Dexatrim)? → Se visual smoked? of other? Specify: OR A Not trying to do anything about your → Go to Section F	Go to
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Not trying to do anything about your Go to Section F	_
about your	
weight:	
D	

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How old were you when you had your first boyfriend/girlfriend?	l've never had a boyfriend/girlfriend → Go to question F
	OR I was years old
Do you have a boyfriend/girlfriend right now?	¹○ Yes → Go to question F3
	² O No → Go to question F5
How long have you been going out with (dating) him/her?	⁰¹ O Less than 1 month
	⁰² O 1 to 5 months
	⁰³ O 6 months to a year
	04 Over a year
Outside of school or work hours, about how many days a week do you see your	06 Never
many days a week do you see your boyfriend/girlfriend?	07 Less than once a week
	One day a week
	2 or 3 days a week
	4 or 5 days a week
	6 or 7 days a week
In the past 12 months, how many boyfriends/girlfriends have you had?	¹² None
boymenae/giimienae navo you naa	¹³ O 1
	¹⁴ 2 or 3
	¹⁵ 4 or 5
	¹⁶ O 6 or more
swering them as well as you can. You cerns of youth your age.	might be sensitive, but would appreciate you our answers will help us to better understand the
Have you ever had consensual sexual intercourse?	⁸ O Yes
	°○ No → Go to Section G

*			*
7	How old were you when you first had consensual sexual intercourse?	I was years old	
F8	How old was the partner with whom you first had consensual sexual intercourse?	He or she was years old	_
		OR 99 I don't know	
F9	Are you currently sexually active?	⁸ Yes	
		°○ No → Go to Section G	
F10	What kind of birth control or protection do you and/or your partner use most often? (Mark all that apply)	O1 Condoms (rubbers) Birth control pills	
		Birth contro injection (i.e. Depo-Prover "the shot") Withdrawal (pull-out)	
		Description ("the representation of the repr	
		Some other method Not sure	
~		⁰⁸ O None	_
	Have there been any times when you and a partner did not use any form of birth control or protection?	⁸ Yes ⁹ No → Go to Section G	
	EOF.	10	
	y		

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E12	What was the main reason for not using any birth control or protection?		
	(Mark one only)	09	Sex was unexpected (no time to prepare)
		10	I didn't think I (or she) would get pregnant
		11 🔾	I wanted (she wanted) to get pregnant
		12 🔾	My partner did not want to use it
		13	It's my partner's problem, not mine
		14 🔾	It reduces the pleasure
		15 🔾	It's too expensive
		16	It's morally wrong
		17 🔾	I am too embarrassed to get/use birth control/protection
		18	Other (specify:)
			OR
		19	We always use b. th control/protection
	RAN PARTIES OF THE PA		
			Y

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SECTION G	My Parent(s)
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G1	Think of the mother you are most involved with. Is she		01	your	biological/l	oirth mother	?	
			02	your	adoptive m	nother?		
			03	your	step-moth	er?		
			04	your	foster mot	ner?		
			05	anot	her person	(a mother f	igure)?	
				OR				
			06				_ Go to	
			O		not in touc nother	h with .		tion G6
G2	Thinking of the mother you have identified in the previous question:				A grea deal	ıt So	ome	Very little/Not at all
	How well do you feel that your mother understands you?				٥ ()	1()	2 🔘
	b. How much fairness do you receive from your mother?				3.0	4 ()	5 🔾
	c. How much affection do you receive from your mother?			7	₆ O	7 ()	8 🔾
		(
G3	Overall, how would you describe your relationship with your mother?	2	1 ()	Very	close			
	^(2 🔿	Som	ewhat clos	е		
			³ O	Not	very close			
G4	Tell us how often per veek you do the following activities with your mother:							
	Tollowing activities with 5 m. mother.	Never	Less the once week	а	1 or 2 days	3 or 4 days	5 or 6 days	Every day
	a. Eat a meal together?	01	02		03	04	05	06
	b. Have a discussion together?	07	08		09	10	11	12

Statistics Canada will keep your answers PRIVATE. No one from your home or your school will see what you write.

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*

		Never	Rarely	Sometimes	Often	Always
а.	We make up easily when we have a fight.	° 🔿	1 🔿	2 🔘	3 🔘	4 🔘
b.	We disagree and fight.	5 🔘	6 O	7 🔘	8 🔿	9 🔾
c.	We bug each other or get on each other's nerves.	° 🔿	1 🔘	2 🔿	3 🔘	4 🔘
d.	We yell at each other.	5 🔾	6 🔾	7 🔾	8 🔘	9 🔾
e.	When we argue we stay angry for a very long time.	0 🔘	1 🔿	2 🔿	3 🔘	4 🔿
f.	When we disagree, we refuse to talk to each other.	5 🔘	6 🔾	7 🔘	8 ()	9 O
g.	When we disagree, one of us stomps out of the room, or house, or yard.	° ()	1 🔘	2 🔿	3 🔾	4 🔘
h.	When we disagree about something, we solve problems together.	5 🔘	6 0	70	8 🔘	9 O
i.	When we disagree about something, I give in just to end the argument.	٥ 🔿	10	2 🔘	3 🔘	4 🔘
j.	When we disagree, another person comes in to settle things or find a solution.	383	6 🔾	7 🔘	8 🔾	9 O
Thinv	nink of the father you are most volved with. Is he		o² your o³ your o⁴ your	r biological/birth far adoptive father? step-father? foster father? ther person (a fath		
				not in touch my father	Go to → ques	tion G11

Statistics Canada will keep your answers PRIVATE. No one from your home or your school will see what you write.

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		_

Th ide	ninking of the father you have entified in the previous question:			A great deal	Some	Very little/Not at all
a.	How well do you feel that your father understands you?			° 🔿	1 🔘	2 O
b.	How much fairness do you receive from your father?			3 🔾	4 🔿	5 🔿
C.	How much affection do you receive from your father?			e 🔾	7 🔿	8 🔾
Ov re	verall, how would you describe you lationship with your father?	ır	⁵ O Ver	y close		
			⁶ O Son	newhat close		
			⁷ O Not	very close	4	
Te	ell us how often per week you do the llowing activities with your father:					
		Never	Less than once a week			or 6 Ever ays day
a.	Eat a meal together?	01	02	030 0	4 0	⁵ O 06C
b.	Have a discussion together?	07	 O	09 1	⁰ O 1	10 12
Pe yo	eople often disagree with each othe ou and your father do the following	er The rollowing things.	ing sentences of	describe disagree Sometimes	ements. Te	II us how often Always
a.	We make up easily when we have a fight.	° ()	1 🔘	2 🔾	3 🔘	4 🔘
b.	We discaree and fight.	5 🔘	6 🔾	7 🔘	8 🔾	9 O
	We discaree and fight. We bug each other or get on each other's nerves.	5 O	6 🔾	⁷ O	8 🔾	9 🔾
C.	We bug each other or get on					9 0
c.	We bug each other or get on each other's nerves.	° O	1 ()	² ()	3 🔾	4 🔾
c.	We bug each other or get on each other's nerves. We yell at each other. When we argue we stay angry	5 🔾	1 O	² O	3 O	4 🔾

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+	+

		Never	Rarely	Sometimes	Often	Alway
h.	When we disagree about something, we solve problems together.	5 🔿	6 🔾	7 🔿	8 🔘	9 O
i.	When we disagree about something, I give in just to end the argument.	° 🔿	1 🔿	2 🔘	3 🔘	4 🔘
j.	When we disagree, another person comes in to settle things or find a solution.	5 🔿	e 🔾	7 🔿	8 🔾	9 O
sta	ninking about the mother and/or fathe atements, use the choice that best do y parent(s)	er you have idescribes the v	dentified in the way they have	e previous questio acted toward you	ns, for each o	of the follow 6 months.
		Never	Rarely	Sometimes	Often	Alway
a.	Tell me what time to be home when I go out.	° O	1 ()	2 ()	3 🔘	4 🔘
b.	Take an interest in where I am going and who I am with.	5 🔾	6 C)	7 0	8 🔘	9 O
С.	Ask me to leave a note or call to let them know where I am going.	°O	10	2 🔿	3 🔿	4 🔘
d.	Let me know how to get in touch with them when they are not at home.	20	6 🔾	7 🔾	8 🔾	9 🔾
	ow well do you think you parents		0 O Von			
ge	et along with each other?		very	v well y well		
			2	very well		
			³ •	parents are not in	touch with ea	ich other
ab	ow often do your parents disagree bout how to deal with you and your tother(s) and sister(s)?		⁰¹ O Nev	er		
יוט			02 Rare	•		
			04 🙃	etimes		
			05			
			°°O Alwa	ays		
			06 L do	n't know		

G 14	How often do your parents get upset with one another, including times when they are mad but don't say much?		Never
		09	Rarely
		10	Sometimes Often
		11	
		12	Always
		13 🔾	I don't know
		O	My parents are not in touch with each other
	metimes different situations or circumst xt few questions are about one of these s		
G 15	Have you ever experienced being hungry because there was no food in the house or money to buy food?	10	Yes
	the house of money to buy lood:		No → Go to Section h
G 16	How often has this occurred?	³ O	More often than end of each month
		4 🔘	Regularly, end of the month
		⁵ ()	L very few months
		6 O	Occasionally, not a regular occurrence
GT	How do you or your family cope when this happens?	000	My parent/guardian skips meals or eats less
	(Mark all that apply)	01	I skip meals or eat less
		02	I make sure that others in the house eat before I do
		03	Cut down on variety of foods usually eaten
		04	Seek help from relatives
		05	Seek help from friends
		06	Seek help from social worker/government office
		07	Seek help from food bank (emergency food program)
		08	Use school meal program
		09	Other

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put this questionnaire in the envelope.

return it to the interviewer.

Thank you very much for helping us.

FOR THE ORDER OF THE PARTY OF T

When you are finished, please: