

**Global School-based Student Health Survey (GSHS)
Core-Expanded Questions for the Alcohol Use Module**

Alcohol Use	
<p>The next question asks about how often you see alcohol advertisements on videos, magazines, or the internet or at movie theaters, sports events, or music concerts.</p> <p>1. During the past 30 days, how often did you see any alcohol advertisements?</p> <p>a. Never b. Rarely c. Sometimes d. Almost daily e. Daily</p>	<p>2. What type of alcohol do you usually drink? SELECT ONLY ONE RESPONSE.</p> <p>a. I do not drink alcohol b. Beer, lager, or stout c. Wine d. Spirits, such as COUNTRY SPECIFIC OPTIONS e. COUNTRY SPECIFIC OPTION f. COUNTRY SPECIFIC OPTION g. Some other type</p>
<p>3. How many of your friends frequently drink 5 or more drinks on one occasion?</p> <p>a. None b. A few c. Some d. Most e. All</p>	<p>Staggering when walking, not being able to speak right, and throwing up are some signs of being really drunk.</p> <p>4. How old were you the first time you drank so much alcohol that you were really drunk?</p> <p>a. I have never drank so much alcohol that I was really drunk b. 7 years old or younger c. 8 or 9 years old d. 10 or 11 years old e. 12 or 13 years old f. 14 or 15 years old g. 16 or 17 years old h. 18 years old or older</p>
<p>Staggering when walking, not being able to speak right, and throwing up are some signs of being really drunk.</p> <p>5. During the past 30 days, how many times did you drink so much alcohol that you were really drunk?</p> <p>a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 or more times</p>	<p>6. During the past 30 days, how many times did you get into trouble with your family or friends, miss school, or get into fights as a result of drinking alcohol?</p> <p>a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 or more times</p>
<p>7. Which of your parents or guardians drink alcohol?</p> <p>a. Neither b. My father or male guardian c. My mother or female guardian d. Both e. I do not know</p>	<p>8. Where were you the last time you had a drink of alcohol?</p> <p>a. I have never had a drink of alcohol b. At home c. At someone else's home d. At school e. Out on the street, in a park, or in some other open area f. At a bar, pub, or disco g. In a restaurant h. Some other place</p>
<p>9. With whom do you usually drink alcohol?</p> <p>a. I do not drink alcohol b. With my friends c. With my family d. With persons I have just met e. I usually drink alone</p>	<p>10. Are you allowed to drink alcohol at home?</p> <p>a. I do not drink alcohol b. Yes c. No</p>

<p>11. During the past 30 days, did anyone refuse to sell you alcohol because of your age?</p> <p>a. I did not try to buy alcohol during the past 30 days</p> <p>b. Yes, someone refused to sell me alcohol because of my age</p> <p>c. No, my age did not keep me from buying alcohol</p>	<p>12. Do any of your brothers or sisters drink alcohol?</p> <p>a. I do not have brothers or sisters</p> <p>b. Yes</p> <p>c. No</p> <p>d. I do not know</p>
<p>13. How many of your friends drink alcohol?</p> <p>a. None</p> <p>b. A few</p> <p>c. Some</p> <p>d. Most</p> <p>e. All</p>	<p>14. Do your parents or guardians know that you drink alcohol?</p> <p>a. I do not drink alcohol</p> <p>b. Yes</p> <p>c. No</p> <p>d. I do not know</p>
Role of the Media and Advertising	
<p>15. When you watch television, videos, or movies, how often do you see actors drinking alcohol?</p> <p>a. I do not watch television, videos, or movies</p> <p>b. Never</p> <p>c. Rarely</p> <p>d. Sometimes</p> <p>e. Most of the time</p> <p>f. Always</p>	<p>16. When you go to sports events, fairs, concerts, community events, or social gatherings how often do you see advertisements for alcohol?</p> <p>a. I do not go to sports events, fairs, concerts, community events, or social gatherings</p> <p>b. Never</p> <p>c. Rarely</p> <p>d. Sometimes</p> <p>e. Most of the time</p> <p>f. Always</p>
<p>17. During the past 30 days, how many advertisements for alcohol have you seen when you watched television?</p> <p>a. I have not watched television during the past 30 days</p> <p>b. A lot</p> <p>c. A few</p> <p>d. None</p>	<p>18. During the past 30 days, how many advertisements for alcohol have you seen on billboards?</p> <p>a. I have not seen a billboard during the past 30 days</p> <p>b. A lot</p> <p>c. A few</p> <p>d. None</p>
<p>19. During the past 30 days, how many advertisements for alcohol have you seen in newspapers or magazines?</p> <p>a. I have not seen a newspaper or magazine during the past 30 days</p> <p>b. A lot</p> <p>c. A few</p> <p>d. None</p>	<p>20. During the past 30 days, how many advertisements for alcohol have you seen on the internet?</p> <p>a. I have not used the internet during the past 30 days</p> <p>b. A lot</p> <p>c. A few</p> <p>d. None</p>
<p>21. Do you have something, such as a t-shirt, pen, backpack, or other item, with an alcohol brand logo on it?</p> <p>a. Yes</p> <p>b. No</p>	

Knowledge, Attitudes, Skills, and Sources of Information	
<p>22. If one of your best friends offered you a drink of alcohol, would you drink it?</p> <p>a. Definitely not b. Probably not c. Probably yes d. Definitely yes</p>	<p>23. How difficult do you think it would be for you to get alcohol, such as COUNTRY SPECIFIC EXAMPLES, if you wanted to?</p> <p>a. Impossible b. Very difficult c. Fairly difficult d. Fairly easy e. Very easy f. I do not know</p>
<p>24. During this school year, were you taught in any of your classes the problems associated with drinking alcohol?</p> <p>a. Yes b. No c. I do not know</p>	<p>25. During this school year, were you taught in any of your classes the effects of alcohol use on decision making?</p> <p>a. Yes b. No c. I do not know</p>
<p>26. During this school year, were you taught in any of your classes how to tell someone you did not want to drink alcohol?</p> <p>a. Yes b. No c. I do not know</p>	

**Global School-based Student Health Survey (GSHS)
Core-Expanded Questions for the Dietary Behaviours Module**

Dietary Behaviours	
1. During the past 30 days, how often did you eat breakfast? a. Never b. Rarely c. Sometimes d. Most of the time e. Always	2. How do you describe your weight? a. Very underweight b. Slightly underweight c. About the right weight d. Slightly overweight e. Very overweight
3. Which of the following are you trying to do about your weight? a. I am not trying to do anything about my weight b. Lose weight c. Gain weight d. Stay the same weight	4. During the past 12 months, have you been weighed and measured? a. Yes b. No
5. What is the main reason you do not eat breakfast? a. I always eat breakfast b. I do not have time for breakfast c. I cannot eat early in the morning d. There is not always food in my home e. Some other reason	6. During the past 30 days, did you exercise to lose weight or to keep from gaining weight? a. Yes b. No
7. During the past 30 days, did you take any diet pills, powders, or liquids without a doctor's advice to lose weight or to keep from gaining weight? a. Yes b. No	8. During the past 30 days, did you eat less food, fewer calories, or foods low in fat to lose weight or to keep from gaining weight? a. Yes b. No
9. During the past 30 days, did you go without eating for 24 hours or more (also called fasting) to lose weight or to keep from gaining weight? a. Yes b. No	10. During the past 30 days, did you vomit or take laxatives to lose weight or to keep from gaining weight? a. Yes b. No
11. During the past 30 days, did you exercise to gain weight? a. Yes b. No	12. During the past 30 days, did you eat more food, more calories, or foods high in fat to gain weight? a. Yes b. No
13. During the past 30 days, did you take any pills, powders, or liquids without a doctor's advice to gain weight? a. Yes b. No	14. During the past 30 days, how often did you bring your lunch to school? a. Never b. Rarely c. Sometimes d. Most of the time e. Always
15. During the past 30 days, how often was breakfast offered to you at school? a. Never b. Rarely c. Sometimes d. Most of the time e. Always	16. During the past 30 days, how often was lunch offered to you at school? a. Never b. Rarely c. Sometimes d. Most of the time e. Always

<p>17. During the past 7 days, how many times did you drink milk or eat milk products, such as COUNTRY SPECIFIC EXAMPLES?</p> <p>a. I did not drink milk or eat milk products during the past 7 days b. 1 to 3 times during the past 7 days c. 4 to 6 times during the past 7 days d. 1 time per day e. 2 times per day f. 3 times per day g. 4 or more times per day</p>	<p>18. During the past 7 days, how many times did you eat salty foods, such as COUNTRY SPECIFIC EXAMPLES OF SALTY FOODS?</p> <p>a. I did not eat salty foods during the past 7 days b. 1 to 3 times during the past 7 days c. 4 to 6 times during the past 7 days d. 1 time per day e. 2 times per day f. 3 times per day g. 4 or more times per day</p>
<p>19. During the past 7 days, how many times did you eat foods high in fat, such as COUNTRY SPECIFIC EXAMPLES OF HIGH FAT FOODS?</p> <p>a. I did not eat foods high in fat during the past 7 days b. 1 to 3 times during the past 7 days c. 4 to 6 times during the past 7 days d. 1 time per day e. 2 times per day f. 3 times per day g. 4 or more times per day</p>	<p>20. During the past 7 days, how many times did you drink 100% fruit juices, such as COUNTRY SPECIFIC EXAMPLES?</p> <p>a. I did not drink 100% fruit juices during the past 7 days b. 1 to 3 times during the past 7 days c. 4 to 6 times during the past 7 days d. 1 time per day e. 2 times per day f. 3 times per day g. 4 or more times per day</p>
<p>21. During the past 7 days, how many times did you drink a can, bottle, or glass of a sugar-sweetened beverage such as a sports drink (COUNTRY SPECIFIC EXAMPLES), energy drink (COUNTRY SPECIFIC EXAMPLES), or fruit drink that was not 100% juice (COUNTRY SPECIFIC EXAMPLES)? (Do not count carbonated soft drinks or diet drinks.)</p> <p>a. I did not drink these sugar-sweetened beverages during the past 7 days b. 1 to 3 times during the past 7 days c. 4 to 6 times during the past 7 days d. 1 time per day e. 2 times per day f. 3 times per day g. 4 or more times per day</p>	<p>Q21 IS A NEW QUESTION SO EVERY QUESTION AFTER THIS NEEDS TO BE RENUMBERED.</p>
<p>Role of the Media and Advertising</p>	
<p>The next 7 questions ask about how carbonated soft drinks, such as COUNTRY SPECIFIC EXAMPLES (<i>Do not include diet soft drinks</i>) and foods from fast food restaurants, such as COUNTRY SPECIFIC EXAMPLES, are advertised and sold.</p> <p>22. When you watch television, videos, or movies, how often do you see advertisements for carbonated soft drinks or fast foods?</p> <p>a. I do not watch television, videos, or movies b. Never c. Rarely d. Sometimes e. Most of the time f. Always</p>	<p>23. During the past 30 days, how many advertisements for carbonated soft drinks or fast foods did you see when you watched television?</p> <p>a. I did not watch television during the past 30 days b. A lot c. A few d. None</p>

<p>24. During the past 30 days, how many advertisements for carbonated soft drinks or fast foods did you see on the internet?</p> <p>a. I did not use the internet during the past 30 days b. A lot c. A few d. None</p>	<p>25. During the past 30 days, how many text messages or mobile phone calls did you get that encouraged you to go to a carbonated soft drink or fast food company website?</p> <p>a. I did not receive text messages or mobile phone calls during the past 30 days b. A lot c. A few d. None</p>
<p>26. Can you buy carbonated soft drinks or get them for free in your school?</p> <p>a. Yes b. No</p>	<p>27. Can you buy fast foods or get them for free in your school?</p> <p>a. Yes b. No</p>
<p>28. During the past 30 days, how many advertisements for carbonated soft drinks or fast foods did you see in your school?</p> <p>a. I did not see any advertisements for carbonated soft drinks or fast foods in my school b. A lot c. A few d. None</p>	
Knowledge, Attitudes, Skills, and Sources of Information	
<p>29. During this school year, were you taught in any of your classes the benefits of healthy eating?</p> <p>a. Yes b. No c. I do not know</p>	<p>30. During this school year, were you taught in any of your classes the benefits of eating more fruits and vegetables?</p> <p>a. Yes b. No c. I do not know</p>
<p>31. During this school year, were you taught in any of your classes how to safely prepare or store food?</p> <p>a. Yes b. No c. I do not know</p>	<p>32. During this school year, were you taught in any of your classes healthy ways to gain weight?</p> <p>a. Yes b. No c. I do not know</p>
<p>33. During this school year, were you taught in any of your classes healthy ways to lose weight?</p> <p>a. Yes b. No c. I do not know</p>	

**Global School-based Student Health Survey (GSHS)
Core-Expanded Questions for the Drug Use Module**

<p>1. During your life, how many times have you got into trouble with your family or friends, missed school, or got into fights, as a result of using drugs?</p> <p>a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times</p>	<p>2. During the past 12 months, how many times have you used marijuana (also called COUNTRY SPECIFIC SLANG TERMS FOR MARIJUANA)?</p> <p>a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times</p>
<p>3. How difficult do you think it would be for you to get marijuana (also called COUNTRY SPECIFIC SLANG TERMS FOR MARIJUANA) if you wanted to?</p> <p>a. Impossible b. Very difficult c. Fairly difficult d. Fairly easy e. Very easy f. I do not know</p>	<p>4. During the past 12 months, how many times have you used amphetamines or methamphetamines (also called COUNTRY SPECIFIC SLANG TERMS FOR AMPHETAMINES AND METHAMPHETAMINES)?</p> <p>a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times</p>
<p>5. During the past 30 days, how many times have you used amphetamines or methamphetamines (also called COUNTRY SPECIFIC SLANG TERMS FOR AMPHETAMINES AND METHAMPHETAMINES)?</p> <p>a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times</p>	<p>6. How difficult do you think it would be for you to get amphetamines or methamphetamines (also called COUNTRY SPECIFIC SLANG TERMS FOR AMPHETAMINES AND METHAMPHETAMINES) if you wanted to?</p> <p>a. Impossible b. Very difficult c. Fairly difficult d. Fairly easy e. Very easy f. I do not know</p>
<p>7. During your life, how many times have you used cocaine (also called COUNTRY SPECIFIC SLANG TERMS FOR COCAINE)?</p> <p>a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times</p>	<p>8. During the past 12 months, how many times have you used cocaine (also called COUNTRY SPECIFIC SLANG TERMS FOR COCAINE)?</p> <p>a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times</p>
<p>9. During the past 30 days, how many times have you used cocaine (also called COUNTRY SPECIFIC SLANG TERMS FOR COCAINE)?</p> <p>a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times</p>	<p>10. How difficult do you think it would be for you to get cocaine (also called COUNTRY SPECIFIC SLANG TERMS FOR COCAINE) if you wanted to?</p> <p>a. Impossible b. Very difficult c. Fairly difficult d. Fairly easy e. Very easy f. I do not know</p>

<p>11. During your life, how many times have you used solvents or inhalants (also called COUNTRY SPECIFIC SLANG TERMS FOR SOLVENTS OR INHALANTS)?</p> <ul style="list-style-type: none"> a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times 	<p>12. During the past 12 months, how many times have you used solvents or inhalants (also called COUNTRY SPECIFIC SLANG TERMS FOR SOLVENTS OR INHALANTS)?</p> <ul style="list-style-type: none"> a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times
<p>13. During the past 30 days, how many times have you used solvents or inhalants (also called COUNTRY SPECIFIC SLANG TERMS FOR SOLVENTS OR INHALANTS)?</p> <ul style="list-style-type: none"> a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times 	<p>14. How difficult do you think it would be for you to get solvents or inhalants (also called COUNTRY SPECIFIC SLANG TERMS FOR SOLVENTS OR INHALANTS) if you wanted to?</p> <ul style="list-style-type: none"> g. Impossible h. Very difficult i. Fairly difficult j. Fairly easy k. Very easy l. I do not know
<p>15. During your life, how many times have you used ecstasy (also called COUNTRY SPECIFIC SLANG TERMS FOR ECSTASY)?</p> <ul style="list-style-type: none"> a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times 	<p>16. During the past 12 months, how many times have you used ecstasy (also called COUNTRY SPECIFIC SLANG TERMS FOR ECSTASY)?</p> <ul style="list-style-type: none"> a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times
<p>17. During the past 30 days, how many times have you used ecstasy (also called COUNTRY SPECIFIC SLANG TERMS FOR ECSTASY)?</p> <ul style="list-style-type: none"> a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times 	<p>18. How difficult do you think it would be for you to get ecstasy (also called COUNTRY SPECIFIC SLANG TERMS FOR ECSTASY) if you wanted to?</p> <ul style="list-style-type: none"> a. Impossible b. Very difficult c. Fairly difficult d. Fairly easy e. Very easy f. I do not know
<p>19. During your life, how many times have you used heroin (also called COUNTRY SPECIFIC SLANG TERMS FOR HEROIN)?</p> <ul style="list-style-type: none"> a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times 	<p>20. During the past 12 months, how many times have you used heroin (also called COUNTRY SPECIFIC SLANG TERMS FOR HEROIN)?</p> <ul style="list-style-type: none"> a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times
<p>21. During the past 30 days, how many times have you used heroin (also called COUNTRY SPECIFIC SLANG TERMS FOR HEROIN)?</p> <ul style="list-style-type: none"> a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times 	<p>22. How difficult do you think it would be for you to get heroin (also called COUNTRY SPECIFIC SLANG TERMS FOR HEROIN) if you wanted to?</p> <ul style="list-style-type: none"> a. Impossible b. Very difficult c. Fairly difficult d. Fairly easy e. Very easy f. I do not know

<p>23. During your life, how many times have you taken a prescription drug (such as COUNTRY SPECIFIC OPTION) without a doctor's prescription?</p> <p>a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times</p>	<p>24. During the past 12 months, how many times have you taken a prescription drug (such as COUNTRY SPECIFIC OPTION) without a doctor's prescription?</p> <p>a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times</p>
<p>25. During the past 30 days, how many times have you taken a prescription drug (such as COUNTRY SPECIFIC OPTION) without a doctor's prescription?</p> <p>a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times</p>	<p>26. During your life, how many times have you used a needle to inject any illegal drug into your body?</p> <p>a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times</p>
<p>27. During your life, how many times have you used COUNTRY SPECIFIC OPTION?*</p> <p>a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times</p> <p>*This question can be written to address any type of drug.</p>	<p>28. During the past 12 months, how many times have you used COUNTRY SPECIFIC OPTION?*</p> <p>a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times</p> <p>*This question can be written to address any type of drug.</p>
<p>29. During the past 30 days, how many times have you used COUNTRY SPECIFIC OPTION?*</p> <p>a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 to 19 times e. 20 or more times</p> <p>*This question can be written to address any type of drug.</p>	<p>30. How difficult do you think it would be for you to get COUNTRY SPECIFIC OPTION if you wanted to?*</p> <p>a. Impossible b. Very difficult c. Fairly difficult d. Fairly easy e. Very easy f. I do not know</p> <p>*This question can be written to address any type of drug.</p>
Knowledge, Attitudes, Skills, and Sources of Information	
<p>31. During this school year, were you taught in any of your classes the problems associated with using drugs, such as COUNTRY SPECIFIC EXAMPLES?</p> <p>a. Yes b. No c. I do not know</p>	

**Global School-based Student Health Survey (GSHS)
Core-Expanded Questions for the Hygiene Module**

Hygiene - Recommended core-expanded questions are shaded grey.	
1. Is there a source of clean water for drinking at school ? a. Yes b. No	2. During the past 30 days, how did you usually wash your hands before eating? a. I did not wash my hands before eating during the past 30 days b. In a dish of water used by others c. In a dish of water used only by me d. Under running water e. Some other way
3. During the past 30 days, how did you usually wash your hands before eating at school ? a. I did not wash my hands before eating at school b. In a dish of water used by others c. In a dish of water used only by me d. Under running water e. Some other way	4. During the past 30 days, how often did you wash your hands before eating at school ? a. Never b. Rarely c. Sometimes d. Most of the time e. Always
5. During the past 30 days, how often did you wash your hands after using the toilet or latrines at school ? a. Never b. Rarely c. Sometimes d. Most of the time e. Always	6. During the past 30 days, how often did you use soap when washing your hands at school ? a. I did not wash my hands at school b. Never c. Rarely d. Sometimes e. Most of the time f. Always
7. Is there a place for you to wash your hands after using the toilet or latrine at school ? a. There are no toilets or latrines at school b. Yes c. No	8. Is there a place for you to wash your hands before eating at school ? a. Yes b. No
9. Do you bring water from home to drink while you are at school ? a. Yes b. No	10. How often do you drink water from the water source at school ? a. There is not a water source at school b. Never c. Rarely d. Sometimes e. Most of the time f. Always
11. During the past 30 days, how often did you use the toilets or latrines at school ? a. There are no toilets or latrines at school b. Never c. Rarely d. Sometimes e. Most of the time f. Always	12. Are there separate toilets or latrines for boys and girls at school ? a. There are no toilets or latrines at school b. Yes c. No
13. Are the toilets or latrines safe at school ? a. There are no toilets or latrines at school b. Yes c. No	14. Are the toilets or latrines clean at school ? a. There are no toilets or latrines at school b. Yes c. No

15. Are the toilets or latrines easy to get to at school ? a. There are no toilets or latrines at school b. Yes c. No	16. Are the toilets or latrines private at school ? a. There are no toilets or latrines at school b. Yes c. No
Oral Health	
17. How would you describe the health of your teeth? a. Excellent b. Very good c. Good d. Average e. Poor f. Very poor	18. How would you describe the health of your gums? a. Excellent b. Very good c. Good d. Average e. Poor f. Very poor
19. During the past 12 months, did a tooth ache cause you to miss classes or school? a. Yes b. No	20. During the past 12 months, how often did you have a tooth ache or feel discomfort because of your teeth? a. Never b. Rarely c. Sometimes d. Most of the time e. Always
21. Do you use toothpaste that contains fluoride? a. Yes b. No c. I do not know	22. When was the last time you saw a dentist for a check-up, exam, teeth cleaning, or other dental work? a. During the past 12 months b. Between 12 and 24 months ago c. More than 24 months ago d. Never e. I do not know
23. During the past 12 months, how many times did you go to the dentist? a. 0 times b. 1 time c. 2 times d. 3 times e. 4 times f. 5 or more times	24. What was the main reason for your last visit to the dentist? a. I have never been to the dentist b. Something was wrong with my teeth or gums c. For follow-up treatment from an earlier visit d. For a check-up or exam e. I do not know
25. Which of the following do you use most often to clean your teeth or gums? a. Toothbrush b. Wooden toothpicks c. Plastic toothpicks d. Dental floss or thread e. Charcoal f. Chew stick or COUNTRY SPECIFIC OPTION g. Something else	26. Do you have difficulty biting hard foods? a. Yes b. No
27. Are you satisfied with the appearance of your teeth? a. Yes b. No	28. Do you have difficulty chewing? a. Yes b. No
29. Do you avoid smiling or laughing because of how your teeth look? a. Yes b. No	30. Do other students in your school make fun of your teeth? a. Yes b. No

<p>31. How many cavities have you had in your permanent teeth?</p> <p>a. 0 cavities b. 1 cavity c. 2 or 3 cavities d. 4 or 5 cavities e. 6 or more cavities f. I do not know</p>	
Knowledge, Attitudes, Skills, and Sources of Information	
<p>32. During this school year, were you taught in any of your classes the importance of hand washing?</p> <p>a. Yes b. No c. I do not know</p>	<p>33. During this school year, were you taught in any of your classes the importance of cleaning or brushing your teeth?</p> <p>a. Yes b. No c. I do not know</p>
<p>34. During this school year, were you taught in any of your classes where to get treatment for a worm infection?</p> <p>a. Yes b. No c. I do not know</p>	<p>35. During this school year, were you taught in any of your classes how to avoid worm infections?</p> <p>a. Yes b. No c. I do not know</p>

**Global School-based Student Health Survey (GSHS)
Core-Expanded Questions for the Mental Health Module**

Mental Health	
<p>1. During the past 12 months, how often have you been so worried about something that you wanted to use alcohol or other drugs to feel better?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>2. During the past 12 months, how often have you been so worried about something that you could not eat or did not feel hungry?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>3. During the past 12 months, how often have you had a hard time staying focused on your homework or other things you had to do?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>4. If you attempted suicide during the past 12 months, did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?</p> <p>a. I did not attempt suicide during the past 12 months b. Yes c. No</p>
Knowledge, Attitudes, Skills, and Sources of Information	
<p>5. During this school year, were you taught in any of your classes how to manage anger?</p> <p>a. Yes b. No c. I do not know</p>	<p>6. During this school year, were you taught in any of your classes signs of depression and suicidal behavior?</p> <p>a. Yes b. No c. I do not know</p>
<p>7. During this school year, were you taught in any of your classes what to do if a friend is thinking about suicide?</p> <p>a. Yes b. No c. I do not know</p>	<p>8. During this school year, were you taught in any of your classes how to handle stress in healthy ways?</p> <p>a. Yes b. No c. I do not know</p>

**Global School-based Student Health Survey (GSHS)
Core-Expanded Questions for the Physical Activity Module**

Physical Activity	
<p>1. During the past 12 months, on how many sports teams did you play?</p> <p>a. 0 teams b. 1 team c. 2 teams d. 3 or more teams</p>	<p>2. During the past 7 days, on how many days did you do exercises to strengthen or tone your muscles, such as push-ups, sit-ups, or weight lifting?</p> <p>a. 0 days b. 1 day c. 2 days d. 3 days e. 4 days f. 5 days g. 6 days h. 7 days</p>
<p>3. During the past 7 days, on how many days did you do stretching exercises, such as toe touching, knee bending, or leg stretching?</p> <p>a. 0 days b. 1 day c. 2 days d. 3 days e. 4 days f. 5 days g. 6 days h. 7 days</p>	<p>4. On an average school night, how many hours of sleep do you get?</p> <p>a. 4 or less hours b. 5 hours c. 6 hours d. 7 hours e. 8 hours f. 9 hours g. 10 or more hours</p>
Knowledge, Attitudes, Skills, and Sources of Information	
<p>5. During this school year, were you taught in any of your classes how to develop a physical fitness plan for yourself?</p> <p>a. Yes b. No c. I do not know</p>	<p>6. During this school year, were you taught in any of your classes about preventing injury during physical activity?</p> <p>a. Yes b. No c. I do not know</p>
<p>7. During this school year, were you taught in any of your classes the benefits of physical activity?</p> <p>a. Yes b. No c. I do not know</p>	<p>8. During this school year, were you taught in any of your classes about opportunities for physical activity in your community?</p> <p>a. Yes b. No c. I do not know</p>

**Global School-based Student Health Survey (GSHS)
Core-Expanded Questions for the Protective Factors Module**

<p>1. Do you think of yourself as a religious or spiritual person?</p> <p>a. Yes b. No</p>	
Connection to Parents	
<p>2. During the past 30 days, how often did your parents or guardians comfort you?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>3. During the past 30 days, how often did your parents or guardians respect your sense of freedom?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>

<p>4. During the past 30 days, how often did your parents or guardians support and encourage you?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>5. During the past 30 days, how often did your parents or guardians understand you?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>6. During the past 30 days, how often did your parents or guardians give you attention and listen to you?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>7. During the past 30 days, how often did your parents or guardians have open communication with you?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>8. During the past 30 days, how often did your parents or guardians show you affection?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>9. During the past 30 days, how often did your parents or guardians spend time with you?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>10. During the past 30 days, how often did your parents or guardians praise you?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>11. During the past 30 days, how often did your parents or guardians give you advice and guidance?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>12. During the past 30 days, how often did your parents or guardians provide for your necessities?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>13. During the past 30 days, how often did your parents or guardians buy you things?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>14. During the past 30 days, how often did your parents or guardians give you money?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	
Parental Disrespect of Individuality/Worth	
<p>15. During the past 30 days, how often did your parents or guardians ridicule you or put you down (for example, say you were stupid or useless)?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>16. During the past 30 days, how often did your parents or guardians expect too much of you (for example, to do better in school or be a better person)?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>

<p>17. During the past 30 days, how often did your parents or guardians embarrass you in public or in front of your friends?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>18. During the past 30 days, how often did your parents or guardians unfairly compare you to someone else (such as to your brother or sister or to themselves)?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>19. During the past 30 days, how often did your parents or guardians not respect you as a person (for example, not let you talk or favour someone else more than you)?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>20. During the past 30 days, how often did your parents or guardians ignore you (for example, walk away from you or not pay attention to you)?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>21. During the past 30 days, how often did your parents or guardians try to make you feel guilty for something you had done or something they thought you should do?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	
Parent Monitoring and Knowledge of Friends and Activities	
<p>22. During the past 30 days, how often did your parents or guardians try to know who your friends were?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>23. During the past 30 days, how often did your parents or guardians really know who your friends were?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>24. During the past 30 days, how often did your parents or guardians try to know where you went at night?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>25. During the past 30 days, how often did your parents or guardians really know where you went at night?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>26. During the past 30 days, how often did your parents or guardians try to know how you spent your money?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>27. During the past 30 days, how often did your parents or guardians really know how you spent your money?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>

<p>28. During the past 30 days, how often did your parents or guardians try to know where you were most afternoons after school?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>29. During the past 30 days, how often did your parents or guardians really know where you were most afternoons after school?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>30. During the past 30 days, how often did your parents or guardians try to know what you did with your free time?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	

**Global School-based Student Health Survey (GSHS)
Core-Expanded Questions for the Module on Sexual Behaviours that Contribute
to HIV Infection, Other STI, and Unintended Pregnancy**

Sexual Behaviors	
<p>1. If you wanted to get a condom or [COUNTRY SPECIFIC SLANG TERM FOR CONDOM], how would you most likely get it?</p> <p>a. I would get it from a vending machine b. I would get it in a store or shop or from a street vendor c. I would get it from a pharmacy, clinic, or hospital d. I would give someone else money to buy it for me e. COUNTRY SPECIFIC OPTION f. I would get it some other way g. I do not know</p>	<p>2. Did you drink alcohol or use other drugs before you had sexual intercourse the last time?</p> <p>a. I have never had sexual intercourse b. Yes c. No</p>
<p>3. The first time you had sexual intercourse, did you or your partner use a condom or [COUNTRY SPECIFIC SLANG TERM FOR CONDOM]?</p> <p>a. I have never had sexual intercourse b. Yes c. No</p>	<p>4. The first time you had sexual intercourse, did you or your partner use any other method of birth control or protection, such as withdrawal, rhythm (safe time), birth control pills, or any other method to prevent pregnancy?</p> <p>a. I have never had sexual intercourse b. Yes c. No</p>
<p>5. How often do you or your partner use a condom or [COUNTRY SPECIFIC SLANG TERM FOR CONDOM] when you have sexual intercourse?</p> <p>a. I have never had sexual intercourse b. Never c. Rarely d. Sometimes e. Most of the time f. Always</p>	<p>6. During the past 12 months, how many times did you have sexual intercourse?</p> <p>a. 0 times b. 1 time c. 2 or 3 times d. 4 to 9 times e. 10 to 29 times f. 30 or more times</p>
<p>7. During your life, with whom have you had sexual contact?</p> <p>a. I have never had sexual contact b. Females c. Males d. Females and males</p>	<p>8. Which of the following best describes you?</p> <p>a. Heterosexual (straight) or [COUNTRY SPECIFIC TERM] b. Gay or lesbian or [COUNTRY SPECIFIC TERM] c. Bisexual or [COUNTRY SPECIFIC TERM] d. Not sure</p>
<p>9. What is the main reason you have <u>not</u> had sexual intercourse?</p> <p>a. I have had sexual intercourse b. I want to wait until I am older c. I want to wait until I am married d. I do not want to risk getting pregnant e. I do not want to risk getting a sexually transmitted infection, such as HIV or AIDS f. I have not had a chance to have sex or met anyone that I wanted to have sex with g. It is against my religious values h. Some other reason</p>	<p>10. If you wanted to get birth control, how would you most likely get it?</p> <p>a. I would get it from a vending machine b. I would get it in a store or shop or from a street vendor c. I would get it from a pharmacy, clinic, or hospital d. I would give someone else money to buy it for me e. I would borrow it from someone else f. COUNTRY SPECIFIC OPTION g. I would get it some other way h. I do not know</p>

11. Have you ever been told by a doctor or nurse that you had a sexually transmitted infection, such as HIV, AIDS, or [COUNTRY SPECIFIC OPTIONS]?	12. Have you ever been tested for HIV infection or AIDS?
a. Yes b. No c. I do not know	a. Yes b. No
13. How many times have you been pregnant or gotten someone pregnant?	
a. 0 times b. 1 time c. 2 or more times d. I do not know	
Knowledge, Attitudes, Skills, and Sources of Information	
14. Have you ever heard of HIV infection or AIDS?	15. Can a pregnant woman with HIV infection or AIDS infect her unborn child?
a. Yes b. No	a. Yes b. No c. I do not know
16. Can people protect themselves from HIV infection or AIDS by using a condom or [COUNTRY SPECIFIC SLANG TERM FOR CONDOM] correctly every time they have sexual intercourse?	17. Can people get HIV infection or AIDS from mosquito bites?
a. Yes b. No c. I do not know	a. Yes b. No c. I do not know
18. Can people get HIV infection or AIDS by sharing a meal with someone who is infected?	19. Can people protect themselves from HIV infection or AIDS by having one uninfected faithful partner?
a. Yes b. No c. I do not know	a. Yes b. No c. I do not know
20. Can a healthy-looking person be infected with HIV?	21. Do you know how to tell someone you do not want to have sexual intercourse with them unless a condom or [COUNTRY SPECIFIC SLANG TERM FOR CONDOM] is used?
a. Yes b. No c. I do not know	a. Yes b. No c. I do not know
22. Do you know how to tell someone you do not want to have sexual intercourse with them?	23. Can a woman with HIV infection or AIDS infect her newborn child while breastfeeding?
a. Yes b. No c. I do not know	a. Yes b. No c. I do not know
24. Have you ever talked about HIV infection or AIDS with your parents or guardians?	25. During this school year, were you taught in any of your classes how to use a condom or [COUNTRY SPECIFIC SLANG TERM FOR CONDOM]?
a. Yes b. No	a. Yes b. No c. I do not know

<p>26. During this school year, were you taught in any of your classes how to avoid HIV infection or AIDS?</p> <p>a. Yes b. No c. I do not know</p>	<p>27. During this school year, were you taught in any of your classes the benefits of delaying sexual intercourse?</p> <p>a. Yes b. No c. I do not know</p>
<p>28. During this school year, were you taught in any of your classes where to get tested for HIV infection or AIDS?</p> <p>a. Yes b. No c. I do not know</p>	<p>29. During this school year, were you taught in any of your classes that condoms or [COUNTRY SPECIFIC SLANG TERM FOR CONDOMS] are effective in preventing HIV?</p> <p>a. Yes b. No c. I do not know</p>
<p>30. During this school year, were you taught in any of your classes how to tell someone you do not want to have sexual intercourse with them?</p> <p>a. Yes b. No c. I do not know</p>	<p>31. During this school year, were you taught in any of your classes how to tell someone you do not want to have sexual intercourse unless a condom or [COUNTRY SPECIFIC SLANG TERM FOR CONDOM] is used?</p> <p>a. Yes b. No c. I do not know</p>
<p>32. During this school year, were you taught in any of your classes the importance of being kind and supportive to persons with HIV infection or AIDS?</p> <p>a. Yes b. No c. I do not know</p>	<p>33. During this school year, were you taught in any of your classes the signs and symptoms of HIV infection or AIDS?</p> <p>a. Yes b. No c. I do not know</p>
<p>34. During this school year, were you taught in any of your classes where to get treatment for HIV infection or AIDS?</p> <p>a. Yes b. No c. I do not know</p>	<p>35. During this school year, were you taught in any of your classes about menstruation or [COUNTRY SPECIFIC TERM FOR MENSTRUATION]?</p> <p>a. Yes b. No c. I do not know</p>
<p>36. During this school year, were you taught in any of your classes about the signs of pregnancy?</p> <p>a. Yes b. No c. I do not know</p>	<p>37. During this school year, were you taught in any of your classes about how to avoid getting infected with HIV while having sex?</p> <p>a. Yes b. No c. I do not know</p>
<p>38. During this school year, were you taught in any of your classes that both boys and girls should be treated fairly and with respect?</p> <p>a. Yes b. No c. I do not know</p>	

Global School-based Student Health Survey (GSHS) Core-Expanded Questions for the Tobacco Use Module

See the latest version of the Global Youth Tobacco Survey (GYTS) questionnaire for additional questions on tobacco use.

**Global School-based Student Health Survey (GSHS)
Core-Expanded Questions for the Violence and Unintentional Injury Module**

Violence	
<p>Violence occurs when a person or a group of people attack other people or a group of people with insults, hits, assault, robbery, or rape.</p> <p>1. Do you belong to any violent group?</p> <p>a. Yes b. No</p>	<p>2. Have you ever been physically forced to have sexual intercourse when you did not want to?</p> <p>a. Yes b. No</p>
<p>3. During the past 12 months, where did the most serious injury that happened to you occur?</p> <p>a. I was not seriously injured during the past 12 months b. At home c. At school d. At work e. On a playing field or court or in a gymnasium f. On or near a road g. In a park h. Somewhere else</p>	<p>4. During the past 30 days, on how many days did you carry a weapon, such as a gun, knife, club or COUNTRY SPECIFIC OPTIONS]?</p> <p>a. 0 days b. 1 day c. 2 or 3 days d. 4 or 5 days e. 6 or more days</p>
<p>5. During the past 30 days, on how many days did you carry a weapon, such as a gun, knife, club or COUNTRY SPECIFIC OPTIONS, on school property?</p> <p>a. 0 days b. 1 day c. 2 or 3 days d. 4 or 5 days e. 6 or more days</p>	<p>6. During the past 12 months, how many times did anyone force you to do sexual things that you did not want to do? (Count such things as kissing, touching, or being physically forced to have sexual intercourse.)</p> <p>a. 0 times b. 1 time c. 2 or 3 times d. 4 or 5 times e. 6 or more times</p>
<p>7. During the past 12 months, how many times did someone you were dating or going out with force you to do sexual things that you did not want to do? (Count such things as kissing, touching, or being physically forced to have sexual intercourse.)</p> <p>a. I did not date or go out with anyone during the past 12 months b. 0 times c. 1 time d. 2 or 3 times e. 4 or 5 times f. 6 or more times</p>	<p>8. During the past 12 months, how many times did someone you were dating or going out with physically hurt you on purpose? (Count such things as being hit, slammed into something, or injured with an object or weapon.)</p> <p>a. I did not date or go out with anyone during the past 12 months b. 0 times c. 1 time d. 2 or 3 times e. 4 or 5 times f. 6 or more times</p>
<p>9. During the past 30 days, on how many days did you not go to school because you felt you would be unsafe at school or on your way to or from school?</p> <p>a. 0 days b. 1 day c. 2 or 3 days d. 4 or 5 day e. 6 or more days</p>	<p>10. During the past 30 days, on how many days did you carry a gun?</p> <p>a. 0 days b. 1 day c. 2 or 3 days d. 4 or 5 days e. 6 or more days</p>

<p>11. During the past 30 days, how many times has someone threatened or injured you with a weapon, such as a gun, knife, or club, on school property?</p> <p>a. 0 times b. 1 time c. 2 or 3 times d. 4 or 5 times e. 6 or 7 times f. 8 or 9 times g. 10 or 11 times h. 12 or more times</p>	<p>12. During the past 30 days, how many times has someone stolen or deliberately damaged your property, such as your bike, clothing, or books, on school property?</p> <p>a. 0 times b. 1 time c. 2 or 3 times d. 4 or 5 times e. 6 or 7 times f. 8 or 9 times g. 10 or 11 times h. 12 or more times</p>
<p>13. During the past 12 months, how many times were you in a physical fight in which you were injured and had to be treated by a doctor or nurse or missed your usual activities?</p> <p>a. 0 times b. 1 time c. 2 or 3 times d. 4 or 5 times e. 6 or more times</p>	<p>14. During the past 12 months, how many times were you in a physical fight on school property?</p> <p>a. 0 times b. 1 time c. 2 or 3 times d. 4 or 5 times e. 6 or 7 times f. 8 or 9 times g. 10 or 11 times h. 12 or more times</p>
<p>15. During the past 12 months, did your teacher ever hit, slap, or physically hurt you on purpose?</p> <p>a. Yes b. No</p>	<p>16. During the past 12 months, did you ever bully someone on school property?</p> <p>a. Yes b. No</p>
<p>17. During the past 12 months, did you ever bully someone when you were not on school property?</p> <p>a. Yes b. No</p>	<p>18. During the past 12 months, did you ever cyber bully someone? (Count bullying through texting, Instagram, Snapchat, Facebook, COUNTRY SPECIFIC EXAMPLES, or other social media.)</p> <p>a. Yes b. No</p>
<p>19. During the past 12 months, who bullied you most often?</p> <p>a. Students from your school b. Students from another school c. Someone else about your age who is not a student</p>	<p>20. During the past 12 months, how were you bullied face-to-face most often?</p> <p>a. I was not bullied face-to-face during the past 12 months b. I was hit, kicked, pushed, shoved around, or locked indoors c. I was made fun of because of my race, nationality, or color d. I was made fun of because of my religion e. I was made fun of with sexual jokes, comments, or gestures f. I was left out of activities on purpose or completely ignored g. I was made fun of because of how my body or face looks h. I was bullied face-to-face in some other way</p>

<p>21. During the past 12 months, how were you cyber bullied most often?</p> <ul style="list-style-type: none"> a. I was not cyber bullied during the past 12 months b. Nasty or hurtful messages were sent to me c. Nasty or hurtful messages were shared or posted online so others could see them d. I was left out of a group or an activity online e. I was threatened online f. Someone created a website that made fun of me g. Someone took bad or hurtful pictures of me without asking and posted them online h. I was cyber bullied in some other way 	
Unintentional Injury	
<p>22. During the past 30 days, how often did you use a seat belt when riding in a car or other motor vehicle driven by someone else?</p> <ul style="list-style-type: none"> a. I did not ride in a motor vehicle driven by someone else b. Never c. Rarely d. Sometimes e. Most of the time f. Always 	<p>23. During the past 30 days, how often did you ride in a car or other motor vehicle driven by someone who had been drinking alcohol?</p> <ul style="list-style-type: none"> a. I did not ride in motor vehicle driven by someone else b. 0 times c. 1 time d. 2 or 3 times e. 4 or 5 times f. 6 or more times
<p>24. During the past 30 days, how often did you use a seat belt when driving a car or other motor vehicle?</p> <ul style="list-style-type: none"> a. I did not drive a motor vehicle b. Never c. Rarely d. Sometimes e. Most of the time f. Always 	<p>25. During the past 30 days, how often did you wear a helmet when riding a bicycle?</p> <ul style="list-style-type: none"> a. I did not ride a bicycle b. Never c. Rarely d. Sometimes e. Most of the time f. Always
<p>26. During the past 30 days, how many times did you drive a car or other motor vehicle when you had been drinking alcohol?</p> <ul style="list-style-type: none"> a. I did not drive a motor vehicle b. 0 times c. 1 time d. 2 or 3 times e. 4 or 5 times f. 6 or more times 	
Knowledge, Attitudes, Skills, and Sources of Information	
<p>27. During this school year, were you taught in any of your classes how to avoid or prevent motor vehicle accidents?</p> <ul style="list-style-type: none"> a. Yes b. No c. I do not know 	<p>28. During this school year, were you taught in any of your classes how to avoid or prevent other types of accidents, such as fires or poisonings?</p> <ul style="list-style-type: none"> a. Yes b. No c. I do not know
<p>29. During this school year, were you taught in any of your classes how to give first aid?</p> <ul style="list-style-type: none"> a. Yes b. No c. I do not know 	<p>30. During this school year, were you taught in any of your classes how to avoid physical fights and violence?</p> <ul style="list-style-type: none"> a. Yes b. No c. I do not know

<p>31. During this school year, were you taught in any of your classes what to do if someone is trying to force you to have sexual intercourse?</p> <p>a. Yes b. No c. I do not know</p>	<p>32. During this school year, were you taught in any of your classes what to do if someone is trying to touch you in a sexual way when you do not want them to?</p> <p>a. Yes b. No c. I do not know</p>
<p>33. During this school year, were you taught in any of your classes how to avoid being bullied?</p> <p>a. Yes b. No c. I do not know</p>	<p>34. During this school year, were you taught in any of your classes what to do if you were being bullied or if you saw someone being bullied?</p> <p>a. Yes b. No c. I do not know</p>
<p>35. During this school year, were you taught in any of your classes what to do if you were physically attacked or if you saw someone being physically attacked?</p> <p>a. Yes b. No c. I do not know</p>	