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## Youth Risk Behavior Survey Ukraine

This survey is about health behavior. It has been developed so you can tell us what you do that may affect your health. The information you give will be used to develop better health education for young people like yourself.

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

If you are not comfortable answering a question, just leave it blank.

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

Make sure to read every question. Circle the letter of your answer. When you are finished, follow the instructions of the person giving you the survey.

*Thank you very much for your help.*

### **Directions**

- Use a #2 pencil only.
- Circle the letter of your answer.
- To change your answer, erase completely.

1. How old are you?

- A. 13 years old
- B. 14 years old
- C. 15 years old
- D. 16 years old
- E. 17 years old

2. What is your sex?

- A. Female
- B. Male

3. In what grade are you?

- A. 9<sup>th</sup> grade
- B. 10<sup>th</sup> grade
- C. 11<sup>th</sup> grade
- D. Vocational School 1 year
- E. Vocational School 2 year
- F. Ungraded

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

- A. Ukrainian
- B. Russian
- C. Hungarian
- D. Polish
- E. Roma
- F. Slovakian
- G. Jewish
- H. Other

5. How tall are you?

\_\_\_\_\_ Centimeters

6. How much do you weigh?

\_\_\_\_\_ Kilograms

**The next 5 questions ask about personal safety.**

7. **When you rode a motorcycle** during the past 12 months, how often did you wear a helmet?

- A. I did not ride a motorcycle during the past 12 months
- B. Never wore a helmet
- C. Rarely wore a helmet
- D. Sometimes wore a helmet
- E. Most of the time wore a helmet
- F. Always wore a helmet

8. **When you rode a bicycle** during the past 12 months, how often did you wear a helmet?

- A. I did not ride a bicycle during the past 12 months
- B. Never wore a helmet
- C. Rarely wore a helmet
- D. Sometimes wore a helmet
- E. Most of the time wore a helmet
- F. Always wore a helmet

9. How often do you wear a seat belt when **riding in** a car driven by someone else in Ukraine?

- A. Never
- B. Rarely
- C. Sometimes
- D. Most of the time
- E. Always

10. During the past 30 days, how many times did you **ride** in a car or other **vehicle driven by someone who had been drinking alcohol**?

- A. 0 times
- B. 1 time
- C. 2 or 3 times
- D. 4 or 5 times
- E. 6 or more times

11. During the past 30 days, how many times did you **drive** a car or other vehicle **when you had been drinking alcohol**?

- A. 0 times
- B. 1 time
- C. 2 or 3 times
- D. 4 or 5 times
- E. 6 or more times

**The next 10 questions ask about violence-related behaviors.**

12. During the past 30 days, on how many days did you carry **a weapon** such as a gun or knife?

- A. 0 days
- B. 1 day
- C. 2 or 3 days
- D. 4 or 5 days
- E. 6 or more days

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

- A. 0 days
- B. 1 day
- C. 2 or 3 days
- D. 4 or 5 days
- E. 6 or more days

14. During the past 30 days, on how many days did you carry a weapon such as a gun or knife on **school property**?

- A. 0 days
- B. 1 day
- C. 2 or 3 days
- D. 4 or 5 days
- E. 6 or more days

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

- A. 0 days
- B. 1 day
- C. 2 or 3 days
- D. 4 or 5 days
- E. 6 or more days

16. During the past 12 months, how many times has someone threatened or injured you with a weapon such as a gun or knife **on school property**?

- A. 0 times
- B. 1 time
- C. 2 or 3 times
- D. 4 or 5 times
- E. 6 or 7 times
- F. 8 or 9 times
- G. 10 or 11 times
- H. 12 or more times

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

- A. 0 times
- B. 1 time
- C. 2 or 3 times
- D. 4 or 5 times
- E. 6 or 7 times
- F. 8 or 9 times
- G. 10 or 11 times
- H. 12 or more times

18. During the past 12 months, how many times were you in a **physical fight** in which **you were injured** and had to be treated by a doctor or nurse?

- A. 0 times
- B. 1 time
- C. 2 or 3 times
- D. 4 or 5 times
- E. 6 or more times

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

- 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

20. During the past 12 months, did anyone ever hit, slap, or physically hurt you on purpose?  
(**Check all that apply**)

- A. Yes, an adult
- B. Yes, a peer
- C. No

21. Have you ever been forced to have sexual intercourse when you did not want to?

- A. Yes
- B. No

22. During the past 12 months, did you ever witness an adult in your home hit, slap or physically hurt another adult in your home?

- 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

**The next 5 questions ask about sad feelings and attempted suicide. Sometimes people feel so depressed about the future that they may consider attempting suicide, which is, taking some action to end their own life.**

23. During the past 12 months, did you ever feel so sad or hopeless almost every day for **two weeks or more in a row** that you stopped doing some usual activities?

- A. Yes
- B. No

24. During the past 12 months, did you ever **seriously** consider attempting suicide?

- A. Yes
- B. No

25. During the past 12 months, did you make a plan about how you would attempt suicide?

- A. Yes
- B. No

26. During the past 12 months, how many times did you actually attempt suicide?

- A. 0 times
- B. 1 time
- C. 2 or 3 times
- D. 4 or 5 times
- E. 6 or more times

27. **If you attempted suicide** during the past 12 months, did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?

- A. **I did not attempt suicide** during the past 12 months
- B. Yes
- C. No

**The next 12 questions ask about tobacco use.**

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

- A. Yes
- B. No

29. How old were you when you smoked a whole cigarette for the first time?

- A. I have never smoked a whole cigarette
- B. 8 years old or younger
- C. 9 or 10 years old
- D. 11 or 12 years old
- E. 13 or 14 years old
- F. 15 or 16 years old
- G. 17 years old or older

30. During the past 30 days, on how many days did you smoke cigarettes?

- A. 0 days
- B. 1 or 2 days
- C. 3 to 5 days
- D. 6 to 9 days
- E. 10 to 19 days
- F. 20 to 29 days
- G. All 30 days

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

- A. I did not smoke cigarettes during the past 30 days
- B. Less than 1 cigarette per day
- C. 1 cigarette per day
- D. 2 to 5 cigarettes per day
- E. 6 to 10 cigarettes per day
- F. 11 to 20 cigarettes per day
- G. More than 20 cigarettes per day

32. During the past 30 days, on how many days did you smoke **cigarettes on school property**?

- A. 0 days
- B. 1 or 2 days
- C. 3 to 5 days
- D. 6 to 9 days
- E. 10 to 19 days
- F. 20 to 29 days
- G. All 30 days

33. Have you ever smoked cigarettes regularly, that is, at least one cigarette every day for 30 days?

- A. Yes
- B. No

34. Have you ever tried **to quit smoking** cigarettes?

- A. Yes
- B. No

35. During the past 30 days, on how many days did you smoke **cigars**?

- A. 0 days
- B. 1 or 2 days
- C. 3 to 5 days
- D. 6 to 9 days
- E. 10 to 19 days
- F. 20 to 29 days
- G. All 30 days

**The next 5 questions ask about drinking alcohol. This includes drinking beer, wine and liquor such as rum, gin, vodka, or whiskey. For these questions, drinking alcohol does not include drinking a few sips of wine for religious purposes.**

36. During your life, on how many days have you had at least one drink of alcohol?

- A. 0 days
- B. 1 or 2 days
- C. 3 to 9 days
- D. 10 to 19 days
- E. 20 to 39 days
- F. 40 to 99 days
- G. 100 or more days

37. How old were you when you had your first drink of alcohol other than a few sips?

- A. I have never had a drink of alcohol other than a few sips
- B. 8 years old or younger
- C. 9 or 10 years old
- D. 11 or 12 years old
- E. 13 or 14 years old
- F. 15 or 16 years old
- G. 17 years old or older

38. During the past 30 days, on how many days did you have at least one drink of alcohol?

- A. 0 days
- B. 1 or 2 days
- C. 3 to 5 days
- D. 6 to 9 days
- E. 10 to 19 days
- F. 20 to 29 days
- G. All 30 days

39. During the past 30 days, on how many days did you have 5 or more drinks of alcohol in a row, that is, within a couple of hours?

- A. 0 days
- B. 1 day
- C. 2 days
- D. 3 to 5 days
- E. 6 to 9 days
- F. 10 to 19 days
- G. 20 or more days

40. During the past 30 days, on how many days did you have at least one drink of alcohol **on school property**?

- A. 0 days
- B. 1 or 2 days
- C. 3 to 5 days
- D. 6 to 9 days
- E. 10 to 19 days
- F. 20 to 29 days
- G. All 30 days

**The next 4 questions ask about marijuana use. Marijuana also is called grass.**

41. During your life, how many times have you used marijuana?

- A. 0 times
- B. 1 or 2 times
- C. 3 to 9 times
- D. 10 to 19 times
- E. 20 to 39 times
- F. 40 to 99 times
- G. 100 or more times

42. How old were you when you tried marijuana for the first time?

- A. I have never tried marijuana
- B. 8 years old or younger
- C. 9 or 10 years old
- D. 11 or 12 years old
- E. 13 or 14 years old
- F. 15 or 16 years old
- G. 17 years old or older

43. During the past 30 days, how many times did you use marijuana?

- A. 0 times
- B. 1 or 2 times
- C. 3 to 9 times
- D. 10 to 19 times
- E. 20 to 39 times
- F. 40 or more times

44. During the past 30 days, how many times did you use marijuana **on school property**?

- A. 0 times
- B. 1 or 2 times
- C. 3 to 9 times
- D. 10 to 19 times
- E. 20 to 39 times
- F. 40 or more times

**The next 6 questions ask about heroine and other drugs.**

45. During your life, how many times have you used **heroin**?

- A. 0 times
- B. 1 or 2 times
- C. 3 to 9 times
- D. 10 to 19 times
- E. 20 to 39 times
- F. 40 or more times

46. During the past 30 days, how many times did you use **any** form of heroine?

- A. 0 times
- B. 1 or 2 times
- C. 3 to 9 times
- D. 10 to 19 times
- E. 20 to 39 times
- F. 40 or more times

47. During your life, how many times have you taken **steroid pills or shots**?

- A. 0 times
- B. 1 or 2 times
- C. 3 to 9 times
- D. 10 to 19 times
- E. 20 to 39 times
- F. 40 or more times

48. During your life, how many times have you used a **needle and syringe to inject any illegal drug** into your body?

- A. 0 times
- B. 1 time
- C. 2 or more times

49. During the past 30 days, how many times have you sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high?

- A. 0 times
- B. 1 or 2 times
- C. 3 to 9 times
- D. 10 to 19 times
- E. 20 to 39 times
- F. 40 or more times

50. During the past 12 months, has anyone offered, sold, or given you an illegal drug **on school property**?

- A. Yes
- B. No

**The next 8 questions ask about sexual behavior.**

51. Have you ever had sexual intercourse?

- A. Yes
- B. No

52. How old were you when you had sexual intercourse for the first time?

- A. I have never had sexual intercourse
- B. 11 years old or younger
- C. 12 years old
- D. 13 years old
- E. 14 years old
- F. 15 years old
- G. 16 years old
- H. 17 years old or older

53. During your life, with how many people have you had sexual intercourse?

- A. I have never had sexual intercourse
- B. 1 person
- C. 2 people
- D. 3 people
- E. 4 people
- F. 5 people
- G. 6 or more people

54. During the past 3 months, with how many people did you have sexual intercourse?

- A. I have never had sexual intercourse
- B. I have had sexual intercourse, but not during the past 3 months
- C. 1 person
- D. 2 people
- E. 3 people
- F. 4 people
- G. 5 people
- H. 6 or more people

55. Did you drink alcohol or use drugs before you had sexual intercourse the **last time**?

- A. I have never had sexual intercourse
- B. Yes
- C. No

56. The **last time** you had sexual intercourse, did you or your partner use a condom?

- A. I have never had sexual intercourse
- B. Yes
- C. No

57. The **last time** you had sexual intercourse, what **one** method did you or your partner use to **prevent pregnancy**? (Select only one response.)

- A. I have never had sexual intercourse
- B. No method was used to prevent pregnancy
- C. Birth control pills
- D. Condoms
- E. Withdrawal
- F. Some other method
- G. Not sure

58. How many times have you been pregnant or gotten someone pregnant?

- A. 0 times
- B. 1 time
- C. 2 or more times
- D. Not sure

**The next 7 questions ask about body weight.**

59. How do **you** describe your weight?

- A. Very underweight
- B. Slightly underweight
- C. About the right weight
- D. Slightly overweight
- E. Very overweight

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

- A. **Lose** weight
- B. **Gain** weight
- C. **Stay** the same weight
- D. **I am not trying to do anything** about my weight

61. During the past 30 days, did you **exercise** to lose weight or to keep from gaining weight?

- A. Yes
- B. No

62. During the past 30 days, did **you eat less food**, to lose weight or to keep from gaining weight?

- A. Yes
- B. No

63. 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

64. During the past 30 days, did you **take any diet pills** without a doctor's advice to lose weight or to keep from gaining weight?

- A. Yes
- B. No

**The next 7 questions ask about food you ate or drank during the past 7 days. Think about all the meals and snacks you had from the time you got up until you went to bed. Be sure to include food you ate at home, at school, at restaurants, or anywhere else.**

65. During the past 7 days, how many times did you drink 100% fruit juices such as orange juice, apple juice, or grape juice?

- A. I did not drink 100% fruit juice during the past 7 days
- B. 1 to 3 times during the past 7 days
- C. 4 to 6 times during the past 7 days
- D. 1 time per day
- E. 2 times per day
- F. 3 times per day
- G. 4 or more times per day

66. During the past 7 days, how many times did you **eat fruit**? (Do not count fruit juice.)

- A. I did not eat fruit during the past 7 days
- B. 1 to 3 times during the past 7 days
- C. 4 to 6 times during the past 7 days
- D. 1 time per day
- E. 2 times per day
- F. 3 times per day
- G. 4 or more times per day

67. During the past 7 days, how many times did you eat **potatoes**? (Do **not** count fried potatoes or potato chips.)

- A. I did not eat potatoes 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

68. During the past 7 days, how many times did you eat **carrots**?

- A. I did not eat carrots 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

69. During the past 7 days, how many times did you eat **other vegetables**? (Do **not** count potatoes, or carrots.)

- A. I did not eat other vegetables during the past 7 days
- B. 1 to 3 times during the past 7 days
- C. 4 to 6 times during the past 7 days
- D. 1 time per day
- E. 2 times per day
- F. 3 times per day
- G. 4 or more times per day

70. During the past 7 days, how many **glasses of milk** did you drink? (Include the milk you drank in a glass or cup, from a carton, or with cereal. Count the half pint of milk served at school as equal to one glass.)

- A. I did not drink milk during the past 7 days
- B. 1 to 3 glasses during the past 7 days
- C. 4 to 6 glasses during the past 7 days
- D. 1 glass per day
- E. 2 glasses per day
- F. 3 glasses per day
- G. 4 or more glasses per day

**The next 8 questions ask about physical activity.**

71. On how many of the past 7 days did you exercise or participate in physical activity for **at least 20 minutes that made you sweat and breathe hard**, such as basketball, football, running, swimming laps, fast bicycling, dancing, or similar aerobic activities?

- A. 0 days
- B. 1 day
- C. 2 days
- D. 3 days
- E. 4 days
- F. 5 days
- G. 6 days
- H. 7 days

72. On how many of the past 7 days did you participate in physical activity for **at least 30 minutes** that did not make you sweat or breathe hard, such as fast walking, slow bicycling, skating, or mopping floors?

- A. 0 days
- B. 1 day
- C. 2 days
- D. 3 days
- E. 4 days
- F. 5 days
- G. 6 days
- H. 7 days

73. On how many of the past 7 days did you do exercises to **strengthen or tone your muscles**, such as push-ups, sit-ups, or weight lifting?

- A. 0 days
- B. 1 day
- C. 2 days
- D. 3 days
- E. 4 days
- F. 5 days
- G. 6 days
- H. 7 days

74. On an average school day, how many hours do you watch TV?

- A. I do not watch TV on an average school day
- B. Less than 1 hour per day
- C. 1 hour per day
- D. 2 hours per day
- E. 3 hours per day
- F. 4 hours per day
- G. 5 or more hours per day

75. In an average week when you are in school, on how many days do you go to physical education (PE) classes?

- A. 0 days
- B. 1 day
- C. 2 days
- D. 3 days
- E. 4 days
- F. 5 days

76. During an average physical education (PE) class, how many minutes do you spend actually exercising or playing sports?

- A. I do not take PE
- B. Less than 10 minutes
- C. 10 to 20 minutes
- D. 21 to 30 minutes
- E. More than 30 minutes

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

- A. 0 teams
- B. 1 team
- C. 2 teams
- D. 3 or more teams

78. During the past 12 months, how many times were you injured while exercising, playing sports, or being physically active and had to be treated by a doctor or nurse?

- A. 0 times
- B. 1 time
- C. 2 times
- D. 3 times
- E. 4 times
- F. 5 or more times

**The next six questions ask about AIDS education and sexually transmitted diseases.**

79. Have you ever been taught about AIDS or HIV infection in school?

- A. Yes
- B. No
- C. Not sure

80. During your life, have **you ever been diagnosed** with any of the following **sexually transmitted diseases**? (**Circle any that you have had.**)

- A. Syphilis
- B. Chlamydia
- C. Gonorrhea
- D. Genital Herpes
- E. Genital Warts

**The next six questions ask about your personal health.**

81. During the past 12 months, how often did you go to a doctor?

- A. Never
- B. Once
- C. 2-3 times

82. During the past 12 months, how often did you go to a dentist?

- A. Never
- B. 1 time
- C. 2 times
- D. 3 times
- E. 4 or more times

83. How often do you brush your teeth?

- A. Never
- B. 1 to 3 times a week
- C. 4 to 6 times a week
- D. 1 time a day
- E. 2 times a day

84. During the past 2 years have you gone to an ophthalmologist?

- A. Yes
- B. No

85. Do you wear glasses or contact lenses?

- A. Yes
- B. No

86. How would you rate your overall health?

- A. Excellent
- B. Very good
- C. Good
- D. Fair
- E. Poor

What do you consider to be the most serious **problem** facing people your age in your community? (Please write your answer in the space below.)

What do you consider to be the most serious **health problem** facing people your age in your community? (If the answer is different than the one given on the previous question, please write your answer in the space below.)

*This is the end of the survey.*

*Thank you very much for your help.*