Self-completion questionnaire (10-15 yrs)

INTERVIEWER WRITE IN FROM CAPI SCREEN

Serial          Address          HH.No  ChkL  P.No

First name      Int No          F/Area  F/Month
COMPLETING THE QUESTIONNAIRE

The questions inside cover a wide range of subjects, but each one can be answered simply by ticking the box next to the answer, as in the example below. Next to some of the boxes are arrows and instructions. They show or tell you which question to answer next. If there are no special instructions, just answer the next question.

Example Question

Q16 Did you have breakfast today?

Yes [ ]
No [ ] → 18

When you have finished answering the questionnaire, please seal it in the envelope and hand it back to the interviewer. If you have any questions or need help, please ask the interviewer. Thank you again for your help.
1. Please write in your date of birth.
   Day [ ] Month [ ] Year [ ]

2. Please tick whether you are male or female.
   Male [ ] Female [ ]

3. How many hours do you spend watching TV, including video and DVDs, on a normal school day?
   None [ ] Less than an hour [ ] 1-3 hours [ ] 4-6 hours [ ] 7 or more hours [ ]

4. How many hours do you spend watching TV, including video and DVDs, on a weekend, that is on Saturday or Sunday?
   None [ ] Less than an hour [ ] 1-3 hours [ ] 4-6 hours [ ] 7 or more hours [ ]

5. Do you belong to a social web-site such as Bebo, Facebook or MySpace?
   Yes [ ] No [ ]

6. How many hours do you spend chatting or interacting with friends through a social web-site like that on a normal school day?
   None [ ] Less than an hour [ ] 1-3 hours [ ] 4-6 hours [ ] 7 or more hours [ ]

7. Do you ever play multi-player online games?
   Yes [ ] No [ ]
In the past 7 days, how many times have you eaten an evening meal together with the rest of your family who live with you?

- None
- 1 or 2 times
- 3-5 times
- 6-7 times

About how many hours do you spend doing or helping with housework in an average week, such as time spent tidying your bedroom, cooking, cleaning or doing laundry?

- Don’t do any housework
- Less than one hour
- 1-3 hours
- 4-6 hours
- 7 or more hours

In the past month, how many times have you stayed out after 9.00pm at night without your parents knowing where you were?

- Never
- 1-2 times
- 3-9 times
- 10 or more times

How many close friends do you have – friends you could talk to if you were in some kind of trouble?

- Write in number

Do you have a steady boyfriend or girlfriend?

- Yes
- No

Please say whether you strongly agree, agree, disagree, or strongly disagree, that the following statements apply to yourself.

- I feel I have a number of good qualities
- I feel that I do not have much to be proud of
- I certainly feel useless at times
- I am able to do things as well as most other people
- I am a likeable person
- I can usually solve my own problems
- All in all, I am inclined to feel I am a failure
- At times I feel I am no good at all
Now some questions about how you spend your free time.

14 How often do you...

<table>
<thead>
<tr>
<th><strong>YPFPARTY</strong></th>
<th>Go to a party, dance, disco, or nightclub</th>
</tr>
</thead>
<tbody>
<tr>
<td>YPFCINEMA</td>
<td>Go to the cinema</td>
</tr>
<tr>
<td>YPPAINT</td>
<td>Do painting, drawing, printmaking or sculpture</td>
</tr>
<tr>
<td>YPFTHEATRE</td>
<td>Go to the theatre (for example play, pantomime or opera)</td>
</tr>
<tr>
<td>YPPCART</td>
<td>Use a computer to create original artworks or animation</td>
</tr>
<tr>
<td>YPFLVESPT</td>
<td>Go to watch live sport</td>
</tr>
<tr>
<td>YPFO2PUB</td>
<td>Go to a pub or bar</td>
</tr>
<tr>
<td>YPFHNGHM</td>
<td>Just hang around/mess about near your home</td>
</tr>
<tr>
<td>YPFHNGTN</td>
<td>Just hang around/mess about in the high street or the town/city centre</td>
</tr>
</tbody>
</table>

And how often do you...

15 Go to youthclubs, scouts, girl guides or other organised activities

16 Over the past month how many books have you read for pleasure? Please do not include comics or magazines. If you have not read any books please enter zero.

14 Tick one box for each line

15 Tick one box for each line

16 Write in number of books
17. Please read each of the following statements and tick the box that best applies to you.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Often</th>
<th>Sometimes</th>
<th>Rarely</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>We discuss books at home</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>We discuss TV programmes we have watched at home</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>My parents/other adults at home buy me books as gifts</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My parents/other adults take me to museums or art galleries</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My parents/other adults take me to watch sporting events</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>My parents/other adults take me to the theatre or to see a dance performance or classical music</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

18. Do you play a musical instrument?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

19. Which of the following regular classes do you do outside school, if any? Please tick all the things you do.

- Music
- Art
- Dance
- Sport
- Tutorials for school subjects
- Religious classes
- None of these

Something else (WRITE IN)
The next few questions are about how you feel about different aspects of your life.

The faces express various types of feelings. Below each face is a number where ‘1’ is completely happy and ‘7’ is not at all happy.

Please tick the box which comes closest to expressing how you feel about each of the following things...

A) Your school work?  YPHSW

B) Your appearance?  YPHAP

C) Your family?  YPHFM

D) Your friends?  YPHFR

E) The school you go to?  YPHSC

F) Which best describes how you feel about your life as a whole?  YPHLF
The next few questions are about any homework you might be asked to do by teachers at your school. ‘Homework’ is any work set for you by teachers which is to be done outside lessons even if you do the work at school after lessons rather than taking it home with you.

21 Do you ever get set any homework at school?  
Yes  
No

22 How often are you given homework?  
Most days 
Once a week at least 
Sometimes, less than once a week 
Hardly ever 
Never

23 During an average week in term time, on how many evenings do you do any homework? Please just think about Monday to Friday evenings during term time.  
Write in the number of evenings you do homework

24 When you do homework on a week-day evening during term time, how many hours do you usually spend doing your homework?  
Write in the number of hours

25 And how many hours do you usually spend doing homework on the weekend during term-time?  
Write in the number of hours

26 Does anyone here at home help you with your homework, even if it’s only occasionally?  
Yes  
No

27 Who usually helps you with your homework?  
Mum or stepmum 
Dad or stepdad 
A brother or sister (or stepbrother/sister) 
Another relative living with you 
Any non-relative living with you 
No one, I do it myself
The next questions are about school and what you want to happen in the future.

28 How important do you think it is for you to do well in your GCSE exams or Standard Grades (if you live in Scotland)?

YPACVWELL

Very important
Important
Not very important
Not at all important

29 At the moment, young people can leave school at 16. What would you most like to do when you are 16?

YPLVSC2DO

Get a full time job
Study full time
Get a job and study
Do something else
Don’t know

30 Would you like to go on to do further full-time education at a college or university after you finish school?

YP2UNI

Yes
No
Don’t know

31 In the last 12 months, have you ever played truant, that is missed school without permission, even if it was only for a half day or single lesson?

YPTRUANT

Yes
No
Here are a few questions about health and nutrition.

32 In general, would you say your health is...

- Excellent
- Very good
- Good
- Fair
- Poor

33 How many portions of fresh fruit or vegetables do you eat on a typical day? One portion is one piece of fruit or one serving of a vegetable or salad item.

- 5 or more portions
- 3 – 4 portions
- 1-2 portions
- None

34 How tall are you without shoes? Please use either feet and inches or metres and centimetres - whichever you know the best.

WRITE IN

- Feet and inches
- Metres and centimetres
- Don't know

35 And how much do you weigh without clothes on? If you are not sure please write in your best guess.

WRITE IN

- Stones and pounds
- Kilograms
- Not sure and can't guess
36. Do you think that you are...
   - About the right weight
   - Underweight
   - Slightly overweight
   - Very overweight
   - Don't know

37. Do you ever diet or try to lose weight?
   - Yes, all the time
   - Yes, some of the time
   - No, never

38. What type of exercise do you do, including things like cycling or walking to school, or what sports do you play? Please tick the box for each one you do.

   - Walking, including walking the dog
   - Swimming or diving
   - Cycling
   - Jogging or running
   - Tennis, squash or badminton
   - Keep fit, aerobics or gym training
   - Football
   - Rugby
   - Netball, basketball or hockey
   - Cricket
   - Athletics
   - Martial Arts
   - Horse riding
   - Gymnastics
   - Dance
   - Other type of sport or activity
39 How many days in a usual week do you play sports, do aerobics or do some other keep fit activity?

- Every day
- 5–6 days
- 3–4 days
- 1–2 days
- Less often than once a week
- Never or hardly ever

40 What is the main way you usually travel to school?

- Walk all the way
- Ride a bike
- By bus or tube
- By car
- By train
- Some other way/combination

41 Do you ever smoke cigarettes at all?

- Yes
- No

42 Please read the statements below and tick the box beside the statement that describes you best.

- I have smoked only once or twice
- I used to smoke but I don’t now
- I sometimes smoke, but not every week
- I usually smoke between one and six cigarettes a week
- I usually smoke more than six cigarettes a week

43 Have you ever had an alcoholic drink? That is a whole drink, not just a sip.

- Yes
- No

Just to remind you, all your answers are confidential and will not be seen by anyone in your household.
**44** How many times in the last four weeks have you had an alcoholic drink?

- Most days
- Once or twice a week
- 2 or 3 times
- Once only
- Never

**45** Thinking back over the last four weeks, how many times (if any) have you had five or more drinks on one occasion? (A ‘drink’ is one pint/bottle/can of beer or cider, 2 alcopops, one small glass of wine, a single measure of spirits).

- None
- Once
- Twice
- Three to five times
- Six to nine times
- Ten times or more

**46** On how many occasions (if any) have you been intoxicated or drunk from drinking alcohol, for example staggered when walking, not being able to speak properly, throwing up or not remembering what happened?

- In your lifetime
- During the last twelve months
- During the last four weeks

**47** Have you ever tried any of the following...?

- Glue/solvent sniffing
- Cannabis (also known as marijuana, dope, hash or skunk)
- Any other illegal drug (including ecstasy, cocaine, speed)

**48** How many times have you ever used or taken any illegal drugs?
51 And how much do you think PEOPLE RISK harming themselves, physically and in other ways, if they...

Tick one box for each line

- Try cannabis (marijuana or hash) once or twice
- Smoke cannabis (marijuana or hash) occasionally
- Smoke cannabis (marijuana or hash) regularly
- Try ecstasy once or twice
- Try an amphetamine (uppers, pep pills, speed) once or twice
- Take amphetamines regularly

50 How much do you think PEOPLE RISK harming themselves, physically and in other ways, if they...

Tick one box for each line

- Smoke cigarettes occasionally
- Smoke one or more packs of cigarettes per day
- Have one or two alcoholic drinks nearly every day
- Have four or five alcoholic drinks nearly every day
- Have five or more alcoholic drinks each weekend

49 How difficult do you think it would be for you to get cannabis (marijuana or hash) if you wanted?

Tick one box for each line

- Impossible
- Very difficult
- Fairly difficult
- Fairly easy
- Very easy
- Don't know

How much do you think PEOPLE RISK harming themselves, physically and in other ways, if they...
The next questions are about what you want to do in the future.

52 At what age do you want to get married? If you don't want to get married then write in zero.

Please write in age: ________

53 At what age would you like to start a family? If you don't want any children, write in zero.

Please write in age: ________

54 Thinking about your own future, what would you like to be doing with your life in about ten years’ time from now? Write in as much as you like in the space provided.

YPFUTATXT

Thank you for your help

Please place the questionnaire in the envelope and hand it back to your interviewer

Or please return to the address below:

National Centre for Social Research
Unit B2, Admiralty Park, Station Road, Holton Heath, Poole, BH16 6HX