Self-completion questionnaire (10-15 yrs)

INTerviewer: write in from capi screen

<table>
<thead>
<tr>
<th>Serial</th>
<th>Person number</th>
</tr>
</thead>
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<table>
<thead>
<tr>
<th>First name</th>
<th>Interviewer number</th>
<th>Month</th>
</tr>
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<tbody>
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</table>

Understanding Society
COMPLETING THE QUESTIONNAIRE

The questions inside cover a wide range of subjects, but each one can be answered by marking an “x” in the box next to the answer you want to give, as in the example below.

Please complete the questionnaire in black or blue ink, keeping your answers within the boxes. This questionnaire will be read by a scanner so please mark your changed your mind please completely fill the box to show the mistake and then put an “x” in the box next to the correct answer.

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

16 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 add an ‘x’ to indicate whether you are male or female.
   - Male  
   - Female
   
3. Do you have a social media profile or account on any sites or apps?
   - Yes  
   - No
   
4. How many hours do you spend chatting or interacting with friends through a social web-site or app like that on a normal school day?
   - None
   - Less than an hour
   - 1–3 hours
   - 4–6 hours
   - 7 or more hours
   
5. How many hours do you spend watching television programmes or films on a normal school day? Please remember to include time spent watching programmes and films on a computer or mobile device.
   - None
   - Less than an hour
   - 1–3 hours
   - 4–6 hours
   - 7 or more hours
   
6. Do you have your own personal mobile phone?
   - Yes
   - No
   
7. Is your mobile a smartphone? A smartphone is a mobile phone that can download apps, send emails and surf the internet.
   - Yes
   - No
   
8. How many close friends do you have – friends you could talk to if you were in some kind of trouble?
   - Write in number
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
- 1–2 times
- 3–5 times
- 6–7 times

Do you feel supported by your family, that is the people who live with you?

- I feel supported by my family in most or all of the things I do
- I feel supported by my family in some of the things I do
- I do not feel supported by my family in the things I do

Suppose you felt upset or worried about something and you wanted to talk about it. Who would you turn to first within your family? Please put an ‘x’ in one box only.

- Mum or stepmum
- Dad or stepdad
- A brother or sister (or step-brother/sister)
- Another relative living with you
- Another relative not living with you
- No-one within my family

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

Do you have any brothers or sisters living with you at home?

- Yes
- No
The next few questions are about your relationship with your parents even if either of them live in a different household to you.

14. How often do any of your brothers or sisters do any of the following to you at home?

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Not much (1–3 times in last 6 months)</th>
<th>Quite a lot (more than 4 times in the last 6 months)</th>
<th>A lot (a few times every week)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hit, kick, or push you</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Take your belongings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Call you nasty names</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Make fun of you</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

15. How often do you do any of the following to your brothers or sisters at home?

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<tr>
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</table>

16. Most children have occasional quarrels with their parents. How often do you quarrel with your mother?

<table>
<thead>
<tr>
<th>YPARGM</th>
<th>Most days</th>
<th>More than once a week</th>
<th>Less than once a week</th>
<th>Hardly ever</th>
<th>Don’t have a mother</th>
</tr>
</thead>
</table>

17. How often do you quarrel with your father?

<table>
<thead>
<tr>
<th>YPARGF</th>
<th>Most days</th>
<th>More than once a week</th>
<th>Less than once a week</th>
<th>Hardly ever</th>
<th>Don’t have a father</th>
</tr>
</thead>
</table>
18 How often do you talk to your mother, about things that matter to you?

Most days
More than once a week
Less than once a week
Hardly ever
Don’t have a mother

19 How often do you talk to your father, about things that matter to you?

Most days
More than once a week
Less than once a week
Hardly ever
Don’t have a father

20 Do you have a step-mother or father, or someone like this, living at home with you?

Yes ➔ 21
No ➔ 22

21 How would you rate your relationship with your step-mother or father, or other person like this?

Very good
Good
Fair
Poor
Very poor
Now for some questions about how you see yourself as a person. For each item, please put an “x” in the box for Not True, Somewhat True or Certainly True. It would help us if you answered all items as best you can even if you aren’t absolutely certain. Please give your answers on the basis of how things have been for you over the last six months.

I try to be nice to other people. I care about their feelings

I am restless, I cannot stay still for long

I get a lot of headaches, stomach-aches or sickness

I usually share with others (food, games, pens, etc.)

I get very angry and often lose my temper

I am usually on my own. I generally play alone or keep to myself

I usually do as I am told

I worry a lot

I am helpful if someone is hurt, upset or feeling ill

I am constantly fidgeting or squirming

I have one good friend or more

I fight a lot. I can make other people do what I want

I am often unhappy, down-hearted or tearful

Other people my age generally like me

I am easily distracted, I find it difficult to concentrate

I am nervous in new situations. I easily lose confidence

I am kind to young children

I am often accused of lying or cheating

Other children or young people pick on me or bully me

I often volunteer to help others (parents, teachers, children)

I think before I do things

I take things that are not mine from home, school or elsewhere

I get on better with adults than with people my own age

I have many fears, I am easily scared

I finish the work I’m doing
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 put an “x” in 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.

27 How much do you worry that you might be a victim of a crime?

YPHMRK

Yes
No

28 How safe would you feel walking alone in this area after dark?

YPFLRMRK

Very safe
Fairly safe
A bit unsafe
Very unsafe

29 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.

YPFHRVE

Write in number of evenings you do homework

24 Overall, do you like living in this neighbourhood?

YPRLKBRD

Yes
No

25 How much do you worry that you might be a victim of a crime?

YPFMRRA

A big worry
A bit of a worry
An occasional doubt
Not a worry at all

26 How safe would you feel walking alone in this area after dark?

YPFRMRB

Very safe
Fairly safe
A bit unsafe
Very unsafe
The next questions are about school and what you want to happen in the future.

34 How important do you think it is for you to do well in your GCSE exams or National Qualifications (if you live in Scotland)?

- Very important
- Important
- Not very important
- Not at all important

YPACVWELL

35 The age young people must stay in education or training differs somewhat across the UK. What would you most like to do when you have completed your final GCSE / National Qualification year at around age 16?

- Get a full-time job
- Stay at school or college to do A levels/Highers
- Get an apprenticeship
- Do some other form of training
- Do something else
- Don’t know

YPHMKWHO

30 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

YPHMKHRS

31 And how many hours do you usually spend doing homework on the weekend during term-time?

Write in the number of hours

YPHMKWE

32 Does anyone here at home help you with your homework, even if it’s only occasionally?

Yes
No

YPHMKHLP

33 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

YPHMKWHO1
YPHMKWHO2
YPHMKWHO3
YPHMKWHO4
YPHMKWHO5
YPHMKWHO6
36 Would you like to go on to do further full-time education at a college or University after you finish school?

Yes ☐
No ☐
Don’t know ☐

YP2UNI

37 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?

Yes ☐
No ☐

YPTRUANT

38 My parents are interested in how I do at school.

Always or nearly always ☐
Sometimes ☐
Hardly ever ☐
Never ☐
Not sure ☐

YPPARSCH

39 My parents come to school parents evenings.

Always or nearly always ☐
Sometimes ☐
Hardly ever ☐
Never ☐
Not sure ☐

YPAREVE

40 How often do other pupils at your school misbehave or cause trouble in your classes?

In most or all of your classes ☐
Less often but in more than half of your classes ☐
In about half your classes ☐
Now and then ☐
This is not a problem at all ☐

YPOTRMISB
Now some questions about bullying at school.

### How often do you get physically bullied at school, for example getting hit, pushed around or threatened, or having belongings stolen?

<table>
<thead>
<tr>
<th>YPFRPULLI</th>
<th>Never</th>
<th>Not much (1–3 times in the last 6 months)</th>
<th>Quite a lot (more than 4 times in the last 6 months)</th>
<th>A lot (a few times every week)</th>
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</table>

### And how often would you say you yourself misbehave or cause trouble in your classes?

<table>
<thead>
<tr>
<th>YPMISBSCH</th>
<th>In most or all of your classes</th>
<th>Less often but in more than half of your classes</th>
<th>In about half your classes</th>
<th>Now and then</th>
<th>This is not a problem at all</th>
</tr>
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### How often do you get bullied in other ways at school such as getting called names, getting left out of games, or having nasty stories spread about you on purpose?

<table>
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<th>YPFROBULLY</th>
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### Do you physically bully other children at school by hitting or pushing them around, threatening them or stealing their things?

<table>
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<th>YPFRPBULLY</th>
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### How often do you bully children in other ways at school such as calling them names, leaving them out of games or spreading nasty stories about them on purpose?

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</table>

### Here are some questions about money and any work you may do.

### Which of the following describes what you usually do with your money?

<table>
<thead>
<tr>
<th>YPSAVE</th>
<th>I save up to buy things I want</th>
<th>I save money and try not to spend it</th>
<th>I spend money as soon as I get it</th>
<th>I generally do not have pocket money</th>
</tr>
</thead>
</table>

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22 23
47. How much money did you receive last week to spend on yourself? Please include pocket money and any allowance you get. But if you have a job, do not include money you earned.

YPPKMP Write in number of £ [ ] and pence [ ]

48. Did you do any paid work last week?

YPWKLW  Yes [ ] 49  No [ ] 51

49. How many hours paid work did you do last week? If you have more than one job please write in the total hours worked at all of them.

YPWHRS Write in hours [ ]

50. What was your total pay last week? If you earned money from more than one job, please write in the total you earned from all of them.

YPPAY Write in number of £ [ ] and pence [ ]

The next questions are about taking care of others

51. Some people your age may have to look after other people. This could be a brother or sister, a relative or someone else who is disabled or sick. Is there anyone like this who lives here with you that you have to look after on a regular basis?

YPCARE  Yes – in this household [ ] 52  No [ ] 55

52. Who do you look after? Please add an ‘x’ for all that apply.

Mother/Father [ ] YPCAWHO1

Grandfather/Grandmother [ ] YPCAWHO2

Brother/Sister [ ] YPCAWHO3

Another adult relative [ ] YPCAWHO4

Another adult who is not a relative [ ] YPCAWHO5

Another child relative [ ] YPCAWHO6

Another child who is not a relative [ ] YPCAWHO7

53. About how many hours a week would you say that you usually spend looking after or doing things for them?

YPCAHRS Write in hours [ ]

54. How often do you have to miss school to do this?

YPCASCH Never [ ]

Once a week or more often [ ]

Once or twice a month [ ]

Here are a few questions about health, nutrition and exercise.

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

YPSRHLTH Excellent [ ]

Very good [ ]

Good [ ]

Fair [ ]

Poor [ ]

YPCARE
56 Do you have a long-term health problem or disability that limits your day-to-day activities? By long term we mean anything that has lasted, or is expected to last, at least 3 months.

YPPLTDIS
- Yes, limited a lot
- Yes, limited a little
- No

57 How many days a week do you usually eat breakfast?

YPBREAKFST
- Everyday
- 4-6 days
- 1-3 days
- Never or hardly ever

58 How many days in a usual week do you eat fast food such as McDonalds, Burger King, KFC or other take-aways like that?

YPFFDWK
- Every day, or nearly every day
- About once a week
- Every now and then
- Never or hardly ever

59 How many days in a usual week do you eat crisps or sweets or have fizzy drinks such as Coke or lemonade?

YPJFD
- Every day, or nearly every day
- About once a week
- Every now and then
- Never or hardly ever

60 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.

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

61 Do you think that you are...

YPHLWTR
- About the right weight
- Underweight
- Slightly overweight
- Very overweight
- Don’t know
62. Do you ever diet or try to lose weight?
- Yes, all the time
- Yes, some of the time
- No, never

63. What type of exercise do you do, including things like cycling or walking to school, or what sports do you play? Please put an “x” in 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

64. 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

65. 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

66. Do you ever smoke cigarettes at all? Please do not include electronic cigarettes (e-cigarettes).
- Yes
- No
Please read the statements below and add an ‘x’ beside the statement that describes you best.

67. Have smoked only once or twice
   - 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

68. Have you ever used e-cigarettes?
   - I have never used e-cigarettes
   - I have only tried using e-cigarettes once or twice
   - I used e-cigarettes in the past, but never use them now
   - I sometimes use e-cigarettes, but less than once a month
   - I use e-cigarettes at least once a month, but less than once a week
   - I use e-cigarettes at least once a week

69. Do you have any friends who drink alcohol regularly, that is at least once a week?
   - Yes
   - No

70. Have you ever had an alcoholic drink? That is a whole drink, not just a sip.
   - Yes
   - No

71. And would you say that you drink regularly, that is at least once a week?
   - Yes
   - No

72. 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

Just to remind you, all your answers are confidential and will not be seen by anyone in your household.

YPSMOFRQ
YPEVRESMO
YPFRALCO
YPREGALCO
YPDKLM
Which of the following groups do you think you belong to?

**White**
- British
- English
- Scottish
- Welsh
- Northern Irish
- Irish
- Gypsy or Irish Traveller
- Any other White Background

**Mixed**
- White and Black Caribbean
- White and Black African
- White and Asian
- Any other mixed background

**Asian or Asian British**
- Indian
- Pakistani
- Bangladeshi
- Chinese
- Any other Asian background

**Black / African / Caribbean / Black British**
- Caribbean
- African
- Any other Black background

**Other**
- Arab
- Any other ethnic group
If you could vote for a political party, which one would you vote for?

Conservatives
Labour
Liberal Democrat
Scottish National Party
Plaid Cymru
Green Party
UK Independence Party
British National Party
Other party
None

How interested are you in politics?

Very interested
Fairly interested
Not interested

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:

TNS UK Ltd, Buckingham House
Desborough Road, High Wycombe
Buckinghamshire HP11 2PR