WISCONSIN 2019 MIDDLE SCHOOL YOUTH RISK BEHAVIOR SURVEY

Note: This is a reference version of the standard middle school survey. Formatting looks different when the survey is taken online.

| 1) How old are you? | | |
|---------------------------|---------------------------|--|
| | ○ 10 years old or younger | |
| | ○ 11 years old | |
| | O 12 years old | |
| | ○ 13 years old | |
| | ○ 14 years old | |
| | ○ 15 years old | |
| | O 16 years old or older | |
| 2) What is your sex? | | |
| | ○ Male | |
| | ○ Female | |
| 3) In what grade are you? | | |
| | ○ 6th grade | |
| | ○ 7th grade | |
| | O 8th grade | |
| | Other | |

| 4) What is your race or ethnicity? (Select one or more responses.) | |
|--|--|
| American Indian or Alaska Native | |
| ☐ Asian | |
| Black or African American | |
| Native Hawaiian or Other Pacific Islander | |
| White | |
| Hispanic or Latino | |
| 5) How often do you wear a seatbelt when riding in a car? | |
| ○ Never | |
| ○ Rarely | |
| ○ Sometimes | |
| O Most of the time | |
| ○ Always | |
| 6) How often do you wear a helmet when riding a bicycle? | |
| O I do not ride a bicycle | |
| O Never wear a helmet | |
| O Sometimes wear a helmet | |
| O Most of the time wear a helmet | |
| O Always wear a helmet | |

| 7) During the past 7 days, on how many days did you: eat breakfast? | |
|--|--|
| ○ 0 days | |
| ◯ 1 day | |
| ○ 2 days | |
| ◯ 3 days | |
| ○ 4 days | |
| ◯ 5 days | |
| ○ 6 days | |
| ○ 7 days | |
| 8) During the past 7 days, on how many days were you: physically active for a total of at least 60 minutes per day? (Add up all the time you spent in any kind of physical activity that increased your heart rate and made you breathe hard some of the time.) | |
| ○ 0 days | |
| ◯ 1 day | |
| O 2 days | |
| ○ 3 days | |
| ○ 4 days | |
| ◯ 5 days | |
| ○ 6 days | |
| ○ 7 days | |
| 9) Do you participate in any school activities, such as sports, band, drama, or clubs? | |
| | |
| ○ Yes | |

| 10) Is there at least one teacher or other adult in your school that you can talk to if you have a problem? | |
|---|--|
| ○ Yes | |
| ○ No | |
| ○ Not sure | |
| 11) Do you agree or disagree: I feel like I belong at this school. | |
| ○ Strongly agree | |
| ○ Agree | |
| O Not sure | |
| ○ Disagree | |
| ○ Strongly disagree | |
| 12) Do you agree or disagree: My teachers really care about me. | |
| ○ Strongly agree | |
| O Agree | |
| O Not sure | |
| ○ Disagree | |
| O Strongly disagree | |

| 13) How often do you feel safe at school? | | |
|---|--|--|
| ○ Never | | |
| ○ Rarely | | |
| ○ Sometimes | | |
| ○ Most of the time | | |
| ○ Always | | |
| Bullying is when 1 or more students tease, threaten, spread rumors about, hit, shove, of hurt another student over and over again. It is not bullying when 2 students of about the same strength or power argue or fight or tease each other in a friendly way. | | |
| 14) Do you agree or disagree: Bullying is a problem at this school. | | |
| ○ Strongly Agree | | |
| ○ Agree | | |
| O Not sure | | |
| ○ Disagree | | |
| ○ Strongly disagree | | |
| The next questions ask you to think about things you may have done or experienced during the past 12 months, or since about this time last year. | | |
| 15) During the past 12 months, have you: ever been bullied on school property? | | |
| ○ Yes | | |
| ○ No | | |
| | | |

| 16) During the past 12 months, have you: ever been electronically bullied? (Count being bullied through texting, Instagram, Facebook, or other social media.) | |
|--|--|
| ○Yes | |
| ○ No | |
| 17) During the past 12 months, how many times have you: carried a weapon on school property? (Count a gun, knife, club, or other weapon.) | |
| O times | |
| O 1 time | |
| O 2 or 3 times | |
| O 4 or 5 times | |
| ○ 6 or more times | |
| 18) During the past 12 months, how many times have you: been in a physical fight on school property? | |
| O times | |
| O 1 time | |
| O 2 or 3 times | |
| O 4 or 5 times | |
| ○ 6 or more times | |
| 19) During the past 12 months, have you: had significant problems with feeling very anxious, nervous, tense, scared, or like something bad was going to happen? | |
| ○ Yes | |
| ○ No | |

| 20) 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? |
|--|
| ○Yes |
| ○ No |
| 21) During the past 12 months, did you: ever seriously think about killing yourself? |
| ○ Yes |
| ○ No |
| 22) During the past 12 months, did you: ever make a plan about how you would try to kill yourself? |
| ○ Yes |
| ○ No |
| 23) During the past 12 months, did you: ever try to kill yourself? |
| ○ Yes |
| ○ No |
| 24) During the past 12 months, how many times did you: do something to purposely hurt yourself without wanting to die, such as cutting or burning yourself on purpose? |
| O times |
| O 1 time |
| O 2 or 3 times |
| O 4 or 5 times |
| ○ 6 or more times |

| 25) During the past 12 months has: anyone offered, sold, or given you an illegal drug on school property? | |
|--|--|
| ○ Yes | |
| ○ No | |
| 26) During the past 12 months, on how many days have you: used any illegal drug besides marijuana? | |
| ○ 0 days | |
| ○ 1 day | |
| ○ 2 to 3 days | |
| ○ 4 to 5 days | |
| ○ 6 or more days | |
| The next questions ask you to think about things you may have done during the past 30 days, or since about this time last month. | |
| 27) During the past 30 days, on how many days did you: smoke cigarettes? | |
| ○ 0 days | |
| ◯ 1 day | |
| ◯ 2 to 3 days | |
| ○ 4 to 5 days | |
| ○ 6 or more days | |
| | |

| 28) During the past 30 days, on how many days did you: use an electronic vapor product? (Include JUUL, Vuse, MarkTen, and blu e-cigarettes, vapes, vape pens, e-cigars, e-hookahs, hookah pens, and mods.) | |
|--|--|
| ○ O days | |
| ○ 1 day | |
| ○ 2 to 3 days | |
| O 4 to 5 days | |
| ○ 6 or more days | |
| 29) During the past 30 days, on how many days did you: use chewing tobacco, snuff, dip, snu or dissolvable tobacco products, such as Copenhagen, Grizzly, Skoal, or Camel Snus? (Do no count any electronic vapor products.) | |
| ○ 0 days | |
| ○ 1 day | |
| O 2 to 3 days | |
| O 4 to 5 days | |
| ○ 6 or more days | |
| | |

| 30) During the past 30 days, on how many days did you: smoke cigars, cigarillos, or little cigars? |
|--|
| ○ 0 days |
| ○ 1 day |
| O 2 to 3 days |
| ○ 4 to 5 days |
| ○ 6 or more days |
| 31) During the past 30 days, on how many days did you: use marijuana? |
| ○ 0 days |
| ◯ 1 day |
| ○ 2 to 3 days |
| O 4 to 5 days |
| ○ 6 or more days |

| 32) During the past 30 days, on how many days did you: have at least one drink of alcohol? (Do not count having a few sips of wine for religious purposes.) |
|---|
| ○ 0 days |
| ○ 1 day |
| ○ 2 to 3 days |
| ○ 4 to 5 days |
| ○ 6 or more days |
| 33) During the past 30 days, on how many days did you: not go to school because you felt unsafe at school or on your way to or from school? |
| ○ 0 days |
| ○ 1 day |
| O 2 to 3 days |
| ○ 4 to 5 days |
| ○ 6 or more days |
| 34) During the past 30 days, on how many days did you: receive, send, or share nude photos of other sexual images? (Count photos of yourself or of someone else.) |
| ○ 0 days |
| ○ 1 day |
| O 2 to 3 days |
| O 4 to 5 days |
| ○ 6 or more days |
| |

The next questions ask about things that have ever happened during your life.

| 35) During your life, how many times have you: taken an over-the-counter drug to get high? (All "over-the-counter drug" is something that can be bought at a store without a prescription.) |
|--|
| O times |
| O 1 time |
| O 2 to 3 times |
| O 4 to 5 times |
| ○ 6 or more times |
| 36) During your life, how many times have you: taken prescription pain medicine without a doctor's prescription or differently than how a doctor told you to use it? (Count drugs such as codeine, Vicodin, OxyContin, Hydrocodone, and Percocet.) |
| O times |
| O 1 time |
| O 2 to 3 times |
| O 4 to 5 times |
| ○ 6 or more times |
| 37) Have you ever had sexual intercourse? |
| ○ Yes |
| ○ No |
| 38) Has anyone ever forced you to do sexual things when you did not want to? (Count kissing, touching, or sexual intercourse.) |
| ○Yes |
| ○ No |
| O Not sure |

| 41) On an average school day, how much time do you spend on screens for something that is not school work ? (Count time spent playing games, watching TV or videos, texting, or using social media on a smartphone, computer, TV, Xbox, PlayStation, iPad, or other tablet.) | |
|---|--|
| O 0 hours | |
| ○ 1 hour | |
| O 2 hours | |
| O 3 hours | |
| O 4 hours | |
| ○ 5 or more hours | |

| | 12) How many school nights a week do you use technology between midnight and 5AM? (Count time spent playing games, watching videos, texting, or using social media on a smartphone, computer, Xbox, PlayStation, iPad, or other tablet.) |
|---|---|
| | O school nights |
| | O 1 school night |
| | O 2 school nights |
| | O 3 school nights |
| | O 4 school nights |
| | ○ 5 school nights |
| | The next questions ask about your life right now. 13) How often do you go hungry because there is not enough food in your home? |
| | O Never |
| | ○ Rarely |
| | ○ Sometimes |
| | O Most of the time |
| | ○ Always |
| 4 | 14) How often do you feel safe and secure in your neighborhood? |
| | ○ Never |
| | ○ Rarely |
| | ○ Sometimes |
| | O Most of the time |
| | ○ Always |
| | |

| 45) When you feel sad, empty, hopeless, angry, or anxious, how often do you get the kind of help you need? | |
|--|--|
| O I do not feel sad, empty, hopeless, angry, or anxious | |
| ○ Never | |
| ○ Rarely | |
| ○ Sometimes | |
| O Most of the time | |
| ○ Always | |
| 46) When you feel sad, empty, hopeless, angry, or anxious, with whom would you most likely talk about it? | |
| O I do not feel sad, empty, hopeless, angry, or anxious | |
| O Parent or other adult family member | |
| Teacher or other adult in this school | |
| Other adult | |
| ○ Friend | |
| ○ Sibling | |
| O Not sure | |

| 47) Besides your parents, how many adults would you feel comfortable seeking help from if you had an important question affecting your life? | |
|--|--|
| ○ 0 adults | |
| ○ 1 adult | |
| ○ 2 adults | |
| ○ 3 adults | |
| ○ 4 adults | |
| ○ 5 or more adults | |
| 48) Do you agree or disagree: My family gives me help and support when I need it. | |
| O Strongly agree | |
| O Agree | |
| O Not sure | |
| ○ Disagree | |
| O Strongly disagree | |
| 49) How would you describe your grades in school during the past 12 months? | |
| O Mostly A's | |
| O Mostly B's | |
| O Mostly C's | |
| O Mostly D's | |
| O Mostly F's | |
| O None of these grades | |
| O Not sure | |

OPTIONAL MODULE 4: SCHOOL CLIMATE

This module draws from questions on the Department of Education School Climate Survey and the Safe and Supportive Schools (S3) cluster of Wisconsin's previous Online YRBS system. The Safe and Supportive Schools cluster was used extensively in the previous Online YRBS system. This module draws on topics or questions not already covered in the standard YRBS surveys. Some of the questions have been modified slightly for clarity.

The next questions ask whether you agree or disagree with the statement.

| [Q1] Violence is a problem at this school. |
|---|
| O Strongly agree |
| ○ Agree |
| O Not Sure |
| O Disagree |
| O Strongly disagree |
| [Q2] The things I'm learning in school are important to me. |
| ○ Strongly agree |
| ○ Agree |
| O Not Sure |
| O Disagree |
| O Strongly disagree |
| |

| [Q3] There are lots of chances for students in my school to talk with a teacher one-on-one. |
|---|
| ○ Strongly agree |
| ○ Agree |
| O Not Sure |
| O Disagree |
| ○ Strongly disagree |
| [Q4] Students at this school get teased or picked on for being different. |
| ○ Strongly agree |
| ○ Agree |
| O Not Sure |
| O Disagree |
| ○ Strongly disagree |
| [Q5] There are lots of chances to be part of class discussions or activities. |
| ○ Strongly agree |
| ○ Agree |
| O Not Sure |
| ○ Disagree |
| ○ Strongly disagree |
| |

| [Q6] There are lots of chances for students at this school to get involved in sports, clubs, and other activities outside of class. |
|---|
| ○ Strongly agree |
| ○ Agree |
| O Not Sure |
| ○ Disagree |
| ○ Strongly disagree |
| [Q7] My teacher(s) notices when I am doing a good job and lets me know about it. |
| ○ Strongly agree |
| ○ Agree |
| O Not Sure |
| ○ Disagree |
| ○ Strongly disagree |
| [Q8] This school feels friendly and welcoming. |
| ○ Strongly agree |
| ○ Agree |
| O Not Sure |
| O Disagree |
| ○ Strongly disagree |
| |

| [Q9] Staff at this school enforce the rules for student behavior. |
|---|
| ○ Strongly agree |
| ○ Agree |
| O Not Sure |
| O Disagree |
| ○ Strongly disagree |
| [Q10] My teachers expect me to do my best all the time. |
| O Strongly agree |
| ○ Agree |
| O Not Sure |
| ○ Disagree |
| O Strongly disagree |
| |

END OF THE SCHOOL CLIMATE OPTIONAL MODULE