

# **National Health Interview Survey**

## **Youth Behavior Survey**

### **Field Representatives Booklet**

**National Center for Health Statistics**

Thank you for agreeing to participate in the United States Public Health Service's study of the health activities of young people. This questionnaire will be given to several thousand young people to get a picture of behaviors which are good or bad for their health. Before I begin, please take a few seconds to adjust the VOLUME wheel on the top of the tape player so my voice is loud enough.

Let's begin. Please remember that your answers will be kept confidential and your responses will in no way be identified with you. So that you can answer all of the questions honestly, without worrying about anyone seeing your answers, the questions will be read on this tape.

It is important that you answer each question accurately so that the information you give us will be useful for developing programs to protect the health of young people throughout the U.S.

I will always read the question two times. On some questions, where there are several answers to choose from, I will read the question and the answer choices two times. There will be a short pause after I read each question so that you can mark your answer on the answer sheets. To indicate your answer, make a check mark in the square. Before you check an answer, please look at the question number on the answer sheet to be sure it matches the number of the question that you heard on the tape.

If you have any questions, lose your place, or need help, you can stop the tape by pushing the STOP button on the side of the tape player and ask the interviewer for help. Push the PLAY button to start the tape again.

If you would like more time to think about your answer to a question, push the STOP button on the side of the tape player. When you are ready to begin again, push the PLAY button.

If you need to have a question repeated, push the REWIND button on the side of the tape player for just a few seconds. To start the tape again, push the PLAY button.

Take a moment right now and find these buttons on the side of the tape player.

If you have any questions about how to run the tape player please stop the tape and ask the interviewer for help.

*The first questions ask about some things that may affect health and safety.*

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

- Never
- Rarely
- Sometimes
- Most of the time
- Always

2. During the **past 12 months**, how many *times* did you ride a motorcycle?

- 0 times
- 1 to 10 times
- 11 to 20 times
- 21 to 39 times
- 40 or more times

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

- This question does not apply to me because I have not done this during the past 12 months.*
- Never wore a helmet
- Rarely wore a helmet
- Sometimes wore a helmet
- Most of the time wore a helmet
- Always wore a helmet

4. During the **past 12 months**, how many *times* did you ride a bicycle?

- 0 times
- 1 to 10 times
- 11 to 20 times
- 21 to 39 times
- 40 or more times

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

- This question does not apply to me because I have not done this during the past 12 months.*
- Never wore a helmet
- Rarely wore a helmet
- Sometimes wore a helmet
- Most of the time wore a helmet
- Always wore a helmet

6. During the **past 12 months**, when you went swimming in places such as a pool, lake, or ocean, *how often* was an adult or a lifeguard watching you?

- This question does not apply to me because I did not go during the past 12 months.*
- Never
- Rarely
- Sometimes
- Most of the time
- Always

*These next questions ask about things young people sometimes do that may led to injuries.*

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

- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or 7 times
- 8 or 9 times
- 10 or 11 times
- 12 or more times

8. The **last time** you were in a physical fight, with whom did you fight?

- You have never been in a physical fight
- A total stranger
- A friend or someone you know
- A boyfriend, girlfriend, or date
- A parent, brother, sister, or other family member
- Someone not listed above
- More than one of the persons listed above

9. 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?

- This question does not apply to me because I have not done this during the past 12 months.*
- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

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

- 0 days
- 1 day
- 2 or 3 days
- 4 or 5 days
- 6 or more days

11. During the **past 30 days**, what one kind of weapon did you carry most often?

- You did not carry a weapon during the **past 30 days**
- A handgun
- Other guns, such as a rifle or shotgun
- A knife or razor
- A club, stick, bat, or pipe
- Some other weapon

*The next few questions ask about cigarette smoking and the use of tobacco.*

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

- Yes
- No

13. Do you think you will try cigarette smoking during the **next 12 months**?

- Yes
- No

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

- This question does not apply to me because I have not done this during my life.*
- 8 years old or younger
- 9 or 10 years old
- 11 or 12 years old
- 13 or 14 years old
- 15 or 16 years old
- 17 years or older

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

- Yes
- No

16. **How old** were you when you first started smoking cigarettes regularly? (At least one cigarette every day for 30 days.)

- This question does not apply to me because I have not done this regularly.*
- 8 years old or younger
- 9 or 10 years old
- 11 or 12 years old
- 13 or 14 years old
- 15 or 16 years old
- 17 years or older

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

- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

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

- This question does not apply to me because I have not done this during the past 30 days.*
- Less than 1 cigarette per day*
- 1 cigarette per day
- 2 to 5 cigarettes per day
- 6 to 10 cigarettes per day
- 11 to 20 cigarettes per day
- 21 or more cigarettes per day

19. During the **past 6 months**, did you try to quit smoking cigarettes?

- This question does not apply to me because I was not doing this at all during the past 6 months.*
- Yes
- No

20. During the **past 30 days**, did you use chewing tobacco, such as Redman, Levi Garrett, or Beechnut?

- Yes
- No

21. During the **past 30 days**, did you use snuff, such as Skoal, Skoal Bandits, or Copenhagen?

- Yes
- No

*The following questions ask about drinking alcohol. This includes beer, wine, wine coolers, and liquor such as rum, gin, vodka, or whiskey.*

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

- This question does not apply to me because I have not done this during my life.*
- 8 years old or younger
- 9 or 10 years old
- 11 or 12 years old
- 13 or 14 years old
- 15 or 16 years old
- 17 years or older

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

- This question does not apply to me because I have not done this during my life.*
- 1 or 2 days
- 3 to 9 days
- 10 to 19 days
- 20 to 39 days
- 40 to 99 days
- 100 or more days

24. During the **past 30 days**, on how many *days* did you have at least one drink of alcohol?
- This question does not apply to me because I have not done this during my life.*
  - 0 days
  - 1 or 2 days
  - 3 to 5 days
  - 6 to 9 days
  - 10 to 19 days
  - 20 to 29 days
  - All 30 days
25. During the **past 30 days**, on how many *days* did you have 5 or more drinks of alcohol in a row? (Within a couple of hours)
- This question does not apply to me because I have not done this during my life.*
  - 0 days
  - 1 day
  - 2 days
  - 3 to 5 days
  - 6 to 9 days
  - 10 to 19 days
  - 20 or more days
26. 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?
- 0 times
  - 1 time
  - 2 or 3 times
  - 4 or 5 times
  - 6 or more times
27. During the **past 30 days**, how many *times* did you drive a car or other vehicle when you had been drinking alcohol?
- 0 times
  - 1 time
  - 2 or 3 times
  - 4 or 5 times
  - 6 or more times

*The next questions ask about the use of marijuana, grass, or pot.*

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

- This question does not apply to me because I have never done this during my life.*
- 8 years old or younger
- 9 or 10 years old
- 11 or 12 years old
- 13 or 14 years old
- 15 or 16 years old
- 17 years or older

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

- This question does not apply to me because I have never done this during my life.*
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 to 99 times
- 100 or more times

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

- This question does not apply to me because I have never done this during my life.*
- 0 times
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times

*The next questions ask about drugs which may affect health. These questions may be sensitive but it is important that we get accurate information.*

31. **How old** were you when you tried any form of cocaine, including powder, crack, or freebase, for the first time?

- This question does not apply to me because I have never done this during my life.*
- 8 years old or younger
- 9 or 10 years old
- 11 or 12 years old
- 13 or 14 years old
- 15 or 16 years old
- 17 years or older

32. **During your life**, how many *times* have you used any form of cocaine, including powder, crack, or freebase?

- This question does not apply to me because I have never done this during my life.*
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times

33. **During the past 30 days**, how many *times* did you use any form of cocaine, including powder, crack, or freebase?

- This question does not apply to me because I have never done this during my life.*
- 0 times
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times

34. **During your life, how many *times* have you used the crack or freebase forms of cocaine?**

- This question does not apply to me because I have never done this during my life.*
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times

35. **During your life, how many *times* have you used any other type of illegal drug, such as LSD, PCP, ecstasy, mushrooms, speed, ice, heroin, or pills without a doctor's prescription?**

- 0 times
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times

36. **During your life, how many *times* have you taken steroid pills or shots without a doctor's prescription?**

- 0 times
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times

37. **During your life, have you ever injected (shot up) any illegal drug?**

- Yes
- No

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

- Yes
- No
- Not sure

39. Have you **ever** talked about AIDS or HIV infection with your parents or other adults in your family?

- Yes
- No
- Not sure

40. How much do you think people risk harming themselves by using illegal drugs **occasionally**?

- A lot
- Some
- A little
- Not at all

41. How much do you think people risk harming themselves by using illegal drugs **regularly**?

- A lot
- Some
- A little
- Not at all

*The next few questions ask about your weight.*

42. How do you think of yourself?

- Very underweight
- Slightly underweight
- About the right weight
- Slightly overweight
- Very overweight

43. Which of the following are you trying to do?

- Lose weight
- Gain weight
- Stay the same weight
- You are not trying to do anything about your weight

44. During the **past 7 days**, did you diet to lose weight or to keep from gaining weight?

- Yes
- No

45. During the **past 7 days**, did you exercise to lose weight or to keep from gaining weight?

- Yes
- No

46. During the **past 7 days**, did you use some other method besides dieting or exercising to lose weight or to keep from gaining weight?

- Yes
- No

47. During the **past 7 days**, did you make yourself vomit to lose weight or to keep from gaining weight?

- Yes
- No

48. During the **past 7 days**, did you take diet pills to lose weight or to keep from gaining weight?

- Yes
- No

49. During the **past 7 days**, did you use some other method besides vomiting or taking diet pills to lose weight or to keep from gaining weight?

- Yes
- No

*The following questions ask about **food you ate yesterday**. Think about all meals and snacks you ate yesterday 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.*

50. **Yesterday**, did you drink fruit juice?

- Yes, once only
- Yes, twice or more
- No

51. **Yesterday**, did you eat fruit?

- Yes, once only
- Yes, twice or more
- No

52. **Yesterday**, did you eat green salad?

- Yes, once only
- Yes, twice or more
- No

53. **Yesterday**, did you eat cooked vegetables?

- Yes, once only
- Yes, twice or more
- No

54. **Yesterday**, did you eat hamburger, hot dogs, or sausage?

- Yes, once only
- Yes, twice or more
- No

55. **Yesterday**, did you eat french fries or potato chips?

- Yes, once only
- Yes, twice or more
- No

56. **Yesterday**, did you eat cookies, doughnuts, pie, or cake?

- Yes, once only
- Yes, twice or more
- No

*The next questions ask about physical activities that you did in the past 7 days.*

57. On how many of the past 7 days did you do stretching exercises, such as toe touching, knee bending or leg stretching?

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days
- 6 days
- 7 days

58. 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?

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days
- 6 days
- 7 days

59. On how many of the past 7 days did you do any house cleaning or yard work for at least 30 minutes at a time?

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days
- 6 days
- 7 days

60. On how many of the past 7 days did you walk or bicycle for at least 30 minutes at a time? Include walking or bicycling to or from school or work.

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days
- 6 days
- 7 days

61. On how many of the past 7 days did you play baseball, softball, or frisbee?

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days
- 6 days
- 7 days

62. On how many of the past 7 days did you play basketball, football, or soccer?

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days
- 6 days
- 7 days

63. On how many of the past 7 days did you roller skate, ice skate, ski, or skateboard?

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days
- 6 days
- 7 days

64. On how many of the past 7 days did you run, jog, or swim for exercise?

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days
- 6 days
- 7 days

65. On how many of the past 7 days did you play tennis, racquetball, or squash?

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days
- 6 days
- 7 days

66. On how many of the past 7 days did you do aerobics or dance?

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days
- 6 days
- 7 days

67. On how many of the past 7 days did you exercise or take part in sports that made you sweat and breathe hard, such as basketball, jogging, fast dancing, swimming laps, tennis, fast bicycling, or other aerobic activities?

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days
- 6 days
- 7 days

68. Are you now either going to school or on vacation from school?

- Yes, I am currently going to school
- Yes, I go to school, but I am on vacation
- No, I am not now going to school

*Today many young people and adults are spending the night wherever they can find a place to sleep. The next questions ask about places like this where you may have spent the night in the past 12 months.*

69. During the **past 12 months**, did you spend *at least one night* in a youth or adult shelter?

- Yes
- No

70. During the **past 12 months**, did you spend *at least one night* in a public place, like a train or bus station, a restaurant, or an office building?

- Yes
- No

71. During the **past 12 months**, did you spend *at least one night* in an abandoned building?

- Yes
- No

72. During the **past 12 months**, did you spend *at least one night* in a car, truck, or van?

- Yes
- No

73. During the **past 12 months**, did you spend *at least one night* outside in a park, on the street, under a bridge or overhang, or on a roof top?

- Yes
- No

74. During the **past 12 months**, did you go home with someone you did not know because you needed a place to stay?

- Yes
- No

75. During the **past 12 months**, did you spend *at least one night* in the subway, or other public place underground?

- Yes
- No

76. During the **past 12 months**, have you stayed out overnight without permission?

- I do NOT need permission to do this
- Yes, I have done this
- No, I have not done this

77. During the **past 12 months**, about how many nights have you stayed out without permission?

- I do NOT need permission to do this
- None
- 1 night
- 2 to 6 nights
- 7 or more nights

*If you are 12 or 13 years old,  
please stop and tell the interviewer you are done.*

*If you are 14 years of age or older, please continue.*

*The next questions ask about sexual relations you may have had.*

78. Have you ever had sexual intercourse?

- Yes
- No

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

- This question does not apply to me because I have never done this during my life.*
- 11 years old or younger
- 12 years old
- 13 years old
- 14 years old
- 15 years old
- 16 years old
- 17 years or older

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

- This question does not apply to me because I have never done this during my life.*
- 1 person
- 2 people
- 3 people
- 4 people
- 5 people
- 6 or more people

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

- This question does not apply to me because I have never done this during my life.*
- None
- 1 person
- 2 people
- 3 people
- 4 people
- 5 people
- 6 or more people

*The next questions ask about the last time you had sexual intercourse.*

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

*This question does not apply to me because I have never done this during my life.*

Yes

No

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

*This question does not apply to me because I have never done this during my life.*

Yes

No

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

You have never had sexual intercourse

No method was used to prevent pregnancy

Birth control pills

Condoms

Withdrawal

Some other method

Not sure

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

0 times

1 time

2 or more times

Not sure

86. Have you **ever** been told by a doctor or nurse that you had a sexually transmitted disease? (Genital herpes, genital warts, chlamydia, syphilis, AIDS, or HIV infection)

Yes

No

*These are all the questions we have.*

*Thanks very much for your cooperation in answering these questions.*

*Please stop and tell the interviewer you are done.*