

Global School-based Student Health Survey (GSHS)

# 2008 Maldives and Male GSHS Questionnaire

For more information:

[www.cdc.gov/gshs](http://www.cdc.gov/gshs) or  
[www.who.int/chp/gshs/en/](http://www.who.int/chp/gshs/en/)



**2008 MALDIVES AND MALE GLOBAL SCHOOL-BASED STUDENT HEALTH SURVEY**

This survey is about your health and the things you do that may affect your health. Students like you all over your country are doing this survey. Students in many other countries around the world also are doing this survey. The information you give will be used to develop better health programs for young people like yourself.

DO NOT write your name on this survey or the answer sheet. The answers you give will be kept private. No one will know how you answer. Answer the questions based on what you really know or do. There are no right or wrong answers.

Completing the survey is voluntary. Your grade or mark in this class will not be affected whether or not you answer the questions. If you do not want to answer a question, just leave it blank.

Make sure to read every question. Fill in the circles on your answer sheet that match your answer. Use only the pencil you are given. When you are done, do what the person who is giving you the survey says to do.

Here is an example of how to fill in the circles:

Fill in the circles like this  Not like this  or 

Survey

1. Do fish live in water?
  - A. Yes
  - B. No

Answer sheet

1.  (B) (C) (D) (E) (F) (G) (H)

Thank you very much for your help.

1. How old are you?
  - A. 11 years old or younger
  - B. 12 years old
  - C. 13 years old
  - D. 14 years old
  - E. 15 years old
  - F. 16 years old or older
  
2. What is your sex?
  - A. Male
  - B. Female
  
3. In what grade are you?
  - A. Grade 8
  - B. Grade 9
  - C. Grade 10

The next 7 questions ask about your height, weight, and going hungry.

4. How tall are you without your shoes on? ON THE ANSWER SHEET, WRITE YOUR HEIGHT IN THE SHADED BOXES AT THE TOP OF THE GRID. THEN FILL IN THE OVAL BELOW EACH NUMBER.

**Example**

Height (cm)		
1	5	3
0	0	0
	1	1
2	2	2
	3	
	4	4
		5
	6	6
	7	7
	8	8
	9	9
9	I do not know	

5. How much do you weigh without your shoes on? ON THE ANSWER SHEET, WRITE YOUR WEIGHT IN THE SHADED BOXES AT THE TOP OF THE GRID. THEN FILL IN THE OVAL BELOW EACH NUMBER.

**Example**

Weight (kg)		
0	5	2
	0	0
1	1	1
2	2	
	3	3
	4	4
		5
	6	6
	7	7
	8	8
	9	9
9	I do not know	

6. How do you describe your weight?
  - A. Very underweight
  - B. Slightly underweight
  - C. About the right weight
  - D. Slightly overweight
  - E. Very overweight
  
7. Which of the following are you trying to do about your weight?
  - A. I am **not trying to do anything** about my weight
  - B. **Lose** weight
  - C. **Gain** weight
  - D. **Stay** the same weight

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

- A. Yes
- B. No

9. During the past 30 days, did you **eat less food, fewer calories, or foods low in fat** to lose weight or to keep from gaining weight?

- A. Yes
- B. No

10. During the past 30 days, how often did you go hungry because there was not enough food in your home?

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

**The next 2 questions ask about eating breakfast.**

11. During the past 30 days, how often did you eat breakfast?

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

12. What is the **main** reason you do not eat breakfast?

- A. I always eat breakfast
- B. I do not have time for breakfast
- C. I cannot eat early in the morning
- D. There is not always food in my home
- E. Some other reason

**The next 2 questions ask about foods you might eat.**

13. During the past 30 days, how many times per day did you **usually** eat fruit, such as bananas?

- A. I did not eat fruit during the past 30 days
- B. Less than one time per day
- C. 1 time per day
- D. 2 times per day
- E. 3 times per day
- F. 4 times per day
- G. 5 or more times per day

14. During the past 30 days, how many times per day did you **usually** eat vegetables, such as pumpkin?

- A. I did not eat vegetables during the past 30 days
- B. Less than one time per day
- C. 1 time per day
- D. 2 times per day
- E. 3 times per day
- F. 4 times per day
- G. 5 or more times per day

**The next 2 questions ask about drinking and eating habits.**

15. During the past 30 days, how many times per day did you **usually** drink carbonated soft drinks, such as Coke?

- A. I did not drink carbonated soft drinks during the past 30 days
- B. Less than 1 time per day
- C. 1 time per day
- D. 2 times per day
- E. 3 times per day
- F. 4 times per day
- G. 5 or more times per day

16. During the past 7 days, on how many days did you eat at a fast food restaurant, such as Dine-more?
- A. 0 days
  - B. 1 day
  - C. 2 days
  - D. 3 days
  - E. 4 days
  - F. 5 days
  - G. 6 days
  - H. 7 days

**The next 8 questions ask about personal health activities.**

17. During the past 30 days, how many times per day did you **usually** clean or brush your teeth?
- A. I did not clean or brush my teeth during the past 30 days
  - B. Less than 1 time per day
  - C. 1 time per day
  - D. 2 times per day
  - E. 3 times per day
  - F. 4 or more times per day
18. During the past 30 days, how often did you wash your hands before eating?
- A. Never
  - B. Rarely
  - C. Sometimes
  - D. Most of the time
  - E. Always
19. During the past 30 days, how often did you wash your hands after using the toilet or latrine?
- A. Never
  - B. Rarely
  - C. Sometimes
  - D. Most of the time
  - E. Always

20. During the past 30 days, how often did you wash your hands after using the toilet or latrines **at school**?
- A. Never
  - B. Rarely
  - C. Sometimes
  - D. Most of the time
  - E. Always
21. During the past 30 days, how often did you use the toilets or latrines **at school**?
- A. There are no toilets or latrines at school
  - B. Never
  - C. Rarely
  - D. Sometimes
  - E. Most of the time
  - F. Always
22. Are there separate toilets or latrines for boys and girls **at school**?
- A. There are no toilets or latrines at school
  - B. Yes
  - C. No
23. During the past 30 days, how often did you use soap when washing your hands?
- A. Never
  - B. Rarely
  - C. Sometimes
  - D. Most of the time
  - E. Always
24. During the past 30 days, how often did you use soap when washing your hands **at school**?
- A. I did not wash my hands at school
  - B. Never
  - C. Rarely
  - D. Sometimes
  - E. Most of the time
  - F. Always

**The next 3 questions ask about your source of drinking water.**

25. Is there a source of clean water for drinking **at school**?
- A. Yes
  - B. No
26. Do you bring water from home to drink while you are **at school**?
- A. Yes
  - B. No
27. How often do you drink water from the water source **at school**?
- A. There is not a water source at school
  - B. Never
  - C. Rarely
  - D. Sometimes
  - E. Most of the time
  - F. Always

**The next 2 questions ask about worm infections.**

28. During this school year, were you taught in any of your classes how to avoid worm infections?
- A. Yes
  - B. No
  - C. I do not know
29. During this school year, were you taught any of your classes where to get treatment for a worm infection?
- A. Yes
  - B. No
  - C. I do not know

**The next 2 questions ask about your dental health.**

30. How would you describe the health of your teeth and gums?
- A. Very poor
  - B. Poor
  - C. Average
  - D. Good
  - E. Very good
31. During the past 12 months, how often did you have a tooth ache?
- A. Never
  - B. Rarely
  - C. Sometimes
  - D. Most of the time
  - E. Always

**The next 2 questions ask about physical attacks.**

**A physical attack occurs when one or more people hit or strike someone, or when one or more people hurt another person with a weapon (such as a stick, iron rod, knife, or sword). It is not a physical attack when two students of about the same strength or power choose to fight each other.**

32. During the past 12 months, how many times were you physically attacked?
- 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

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

- A. Yes
- B. No

**The next question asks about physical fights. A physical fight occurs when two or more students of about the same strength or power choose to fight each other.**

34. 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

**The next 5 questions ask about the most serious injury that happened to you during the past 12 months. An injury is serious when it makes you miss at least one full day of usual activities (such as school, sports, or a job) or requires treatment by a doctor or nurse.**

35. During the past 12 months, how many times were you seriously injured?

- 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

36. During the past 12 months, **what were you doing** when the most serious injury happened to you?

- A. I was not seriously injured during the past 12 months
- B. Playing or training for a sport
- C. Walking or running, but not as part of playing or training for a sport
- D. Riding a bicycle or scooter
- E. Riding or driving in a car or other motor vehicle
- F. Doing any paid or unpaid work, including housework, yard work, or cooking
- G. Nothing
- H. Something else

37. During the past 12 months, **what was the major cause** of the most serious injury that happened to you?

- A. I was not seriously injured during the past 12 months
- B. I was in a motor vehicle accident or hit by a motor vehicle
- C. I fell
- D. Something fell on me or hit me
- E. I was fighting with someone
- F. I was attacked, assaulted, or abused by someone
- G. I was in a fire or too near a flame or something hot
- H. Something else caused my injury

38. During the past 12 months, **how** did the most serious injury happen to you?

- A. I was not seriously injured during the past 12 months
- B. I hurt myself by accident
- C. Someone else hurt me by accident
- D. I hurt myself on purpose
- E. Someone else hurt me on purpose

39. During the past 12 months, **what was** the most serious injury that happened to you?
- A. I was not seriously injured during the past 12 months
  - B. I had a broken bone or a dislocated joint
  - C. I had a cut, puncture, or stab wound
  - D. I had a concussion or other head or neck injury, was knocked out, or could not breathe
  - E. I had a gunshot wound
  - F. I had a bad burn
  - G. I lost all or part of a foot, leg, hand, or arm
  - H. Something else happened to me

**The next 2 questions ask about bullying. Bullying occurs when a student or group of students say or do bad and unpleasant things to another student. It is also bullying when a student is teased a lot in an unpleasant way or when a student is left out of things on purpose. It is not bullying when two students of about the same strength or power argue or fight or when teasing is done in a friendly and fun way.**

40. During the past 30 days, on how many days were you bullied?
- 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

41. During the past 30 days, how were you bullied **most often**?
- A. I was not bullied during the past 30 days
  - B. I was hit, kicked, pushed, shoved around, or locked indoors
  - C. I was made fun of because of my race or color
  - D. I was made fun of because of my religion
  - E. I was made fun of with sexual jokes, comments, or gestures
  - F. I was left out of activities on purpose or completely ignored
  - G. I was made fun of because of how my body or face looks
  - H. I was bullied in some other way

**The next 3 questions ask about feeling safe and violence at school.**

42. 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 day
  - E. 6 or more days
43. During the past 30 days, how many times has someone threatened or injured you with a weapon, such as a gun, knife, or club, **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

44. During the past 30 days, how many times has someone stolen or deliberately damaged your property, such as your car, clothing, or books, **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

**The next 9 questions ask about your feelings and friendships.**

45. During the past 12 months, how often have you felt lonely?
- A. Never
  - B. Rarely
  - C. Sometimes
  - D. Most of the time
  - E. Always
46. During the past 12 months, how often have you been so worried about something that you could not sleep at night?
- A. Never
  - B. Rarely
  - C. Sometimes
  - D. Most of the time
  - E. Always
47. During the past 12 months, how often have you been so worried about something that you could not eat or did not have an appetite?
- A. Never
  - B. Rarely
  - C. Sometimes
  - D. Most of the time
  - E. Always

48. During the past 12 months, how often have you had a hard time staying focused on your homework or other things you had to do?
- A. Never
  - B. Rarely
  - C. Sometimes
  - D. Most of the time
  - E. Always
49. 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 your usual activities?
- A. Yes
  - B. No
50. During the past 12 months, did you ever **seriously** consider attempting suicide?
- A. Yes
  - B. No
51. During the past 12 months, did you make a plan about how you would attempt suicide?
- A. Yes
  - B. No
52. How many close friends do you have?
- A. 0
  - B. 1
  - C. 2
  - D. 3 or more
53. During this school year, were you taught any of your classes how to handle stress in healthy ways?
- A. Yes
  - B. No
  - C. I do not know

**The next 6 questions ask about cigarette and other tobacco use.**

54. How old were you when you first tried a cigarette?

- A. I have never smoked cigarettes
- B. 7 years old or younger
- C. 8 or 9 years old
- D. 10 or 11 years old
- E. 12 or 13 years old
- F. 14 or 15 years old
- G. 16 years old or older

55. 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

56. During the past 30 days, on how many days did you use any other form of tobacco, such as chewing tobacco leaves?

- 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

57. During the past 12 months, have you ever tried to stop smoking cigarettes?

- A. I have never smoked cigarettes
- B. I did not smoke cigarettes during the past 12 months
- C. Yes
- D. No

58. During the past 7 days, on how many days have people smoked in your presence?

- A. 0 days
- B. 1 or 2 days
- C. 3 or 4 days
- D. 5 or 6 days
- E. All 7 days

59. Which of your parents or guardians use any form of tobacco?

- A. Neither
- B. My father or male guardian
- C. My mother or female guardian
- D. Both
- E. I do not know

**The next 9 questions ask about drinking alcohol.**

60. How old were you when you had your first drink of alcohol?

- A. I have never had a drink of alcohol
- B. 7 years old or younger
- C. 8 or 9 years old
- D. 10 or 11 years old
- E. 12 or 13 years old
- F. 14 or 15 years old
- G. 16 years old or older

61. Where were you the **first time** you had a drink of alcohol?

- A. I have never had a drink of alcohol
- B. At home
- C. At someone else's home
- D. At school
- E. Out on the street, in a park, or in some other open area
- F. At a bar, pub, or disco
- G. In a restaurant
- H. Some other place

62. During the past 30 days, on how many days did you have at least one drink containing 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

63. During the past 30 days, on the days you drank alcohol, how many drinks did you **usually** drink per day?

- A. I did not drink alcohol during the past 30 days
- B. Less than one drink
- C. 1 drink
- D. 2 drinks
- E. 3 drinks
- F. 4 drinks
- G. 5 or more drinks

64. During the past 30 days, how did you **usually** get the alcohol you drank? **SELECT ONLY ONE RESPONSE.**

- A. I did not drink alcohol during the past 30 days
- B. I bought it in a store, shop, or from a street vendor
- C. I gave someone else money to buy it for me
- D. I got it from my friends
- E. I got it from home
- F. I stole it
- G. I made it myself
- H. I got it some other way

65. Where were you the **last time** you had a drink of alcohol?

- A. I have never had a drink of alcohol
- B. At home
- C. At someone else's home
- D. At school
- E. Out on the street, in a park, or in some other open area
- F. At a bar, pub, or disco
- G. In a restaurant
- H. Some other place

66. During your life, how many times did you drink so much alcohol that you were really drunk?

- A. 0 times
- B. 1 or 2 times
- C. 3 to 9 times
- D. 10 or more times

67. During your life, how many times have you ever had a hang-over, felt sick, got into trouble with your family or friends, missed school, or got into fights, as a result of drinking alcohol?

- A. 0 times
- B. 1 or 2 times
- C. 3 to 9 times
- D. 10 or more times

68. Which of your parents or guardians drink alcohol?

- A. Neither
- B. My father or male guardian
- C. My mother or female guardian
- D. Both
- E. I do not know

**The next 6 questions ask about drugs, such as marijuana, cocaine, or heroine.**

69. During your life, how many times have you used drugs?

- A. 0 times
- B. 1 or 2 times
- C. 3 to 9 times
- D. 10 or more times

70. How old were you when you tried drugs, for the first time?

- A. I have never tried drugs
- B. 7 years old or younger
- C. 8 or 9 years old
- D. 10 or 11 years old
- E. 12 or 13 years old
- F. 14 or 15 years old
- G. 16 years old or older

71. Which one of the drugs listed below have you used most often? **SELECT ONLY ONE RESPONSE.**

- A. I have never tried any of these drugs
- B. Marijuana (also called Ganja or Fai) or hashish (also called Theyo)
- C. Tranquilisers or sedatives, such as Tabs, without a doctor or nurse telling you to do so
- D. Amphetamines and methamphetamine (also called crystal ice)
- E. Crack or other forms of cocaine
- F. Solvents or inhalants (also called Thinaru, Dunlop, or Cola water)
- G. Heroine or brown sugar( also called hakuru)
- H. Some other drug

72. During your life, how many times have you shared needles or syringes used to inject any drug into your body?

- A. 0 times
- B. 1 or 2 times
- C. 3 to 5 times
- D. 6 to 9 times
- E. 10 to 19 times
- F. 20 to 39 times
- G. 40 or more times

73. During the past 30 days, has anyone offered, sold, or given you a drug?

- A. Yes
- B. No

74. During the past 30 days, have you offered, sold, or given a drug to someone else?

- A. Yes
- B. No

**The next 6 questions ask about HIV infection and AIDS.**

75. Have you ever heard of HIV infection or the disease called AIDS?

- A. Yes
- B. No

76. During this school year, were you taught in any of your classes about HIV infection or AIDS?

- A. Yes
- B. No
- C. I do not know

77. During this school year, were you taught in any of your classes how to avoid HIV infection or AIDS?

- A. Yes
- B. No
- C. I do not know

78. Can people protect themselves from HIV infection or AIDS by not having sexual intercourse?

- A. Yes
- B. No
- C. I do not know

79. Do you know how to tell someone you do not want to have sexual intercourse with them?

- A. Yes
- B. No
- C. I do not know

80. Have you ever talked about HIV infection or AIDS with your parents or guardians?

- A. Yes
- B. No

**The next 5 questions ask about physical activity. Physical activity is any activity that increases your heart rate and makes you get out of breath some of the time. Physical activity can be done in sports, playing with friends, or walking to school. Some examples of physical activity are running, fast walking, biking, dancing, football, and swimming.**

ADD UP ALL THE TIME YOU SPEND IN PHYSICAL ACTIVITY EACH DAY. DO **NOT** INCLUDE YOUR PHYSICAL EDUCATION OR GYM CLASS.

81. During the past **7 days**, on how many days were you physically active for a total of at least 60 minutes per day?

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

82. During a **typical or usual** week, on how many days are you physically active for a total of at least 60 minutes per day?

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

83. During the past 7 days, on how many 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

84. During the past 7 days, on how many days did you do stretching exercises, such as toe touching, knee bending, or leg stretching?

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

85. During the past 12 months, on how many sports team did you play?

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

**The next question asks about the time you spend mostly sitting when you are not in school or doing homework.**

86. How much time do you spend during a **typical or usual** day sitting and watching television, playing computer games, talking with friends, or doing other sitting activities, such as chatting through the internet or browsing?

- A. Less than 1 hour per day
- B. 1 to 2 hours per day
- C. 3 to 4 hours per day
- D. 5 to 6 hours per day
- E. 7 to 8 hours per day
- F. More than 8 hours per day

**The next 2 questions ask about going to and coming home from school.**

87. During the past 7 days, on how many days did you walk or ride a bicycle to and from school?

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

88. During the past 7 days, how long did it **usually** take for you to get to and from school each day?  
**ADD UP THE TIME YOU SPEND GOING TO AND COMING HOME FROM SCHOOL.**

- A. Less than 10 minutes per day
- B. 10 to 19 minutes per day
- C. 20 to 29 minutes per day
- D. 30 to 39 minutes per day
- E. 40 to 49 minutes per day
- F. 50 to 59 minutes per day
- G. 60 or more minutes per day

**The next 5 questions ask about your experiences at school and at home.**

89. During the past 30 days, on how many days did you miss classes or school without permission?

- A. 0 days
- B. 1 or 2 days
- C. 3 to 5 days
- D. 6 to 9 days
- E. 10 or more days

90. During the past 30 days, how often were most of the students in your school kind and helpful?

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

91. During the past 30 days, how often did your parents or guardians check to see if your homework was done?

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

92. During the past 30 days, how often did your parents or guardians understand your problems and worries?

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

93. During the past 30 days, how often did your parents or guardians **really** know what you were doing with your free time?

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