

Global School-based Student Health Survey (GSHS)

# 2008 Sri Lanka 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 SRI LANKA 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.        

Thank you very much for your help.

- How old are you?
  - 11 years old or younger
  - 12 years old
  - 13 years old
  - 14 years old
  - 15 years old
  - 16 years old or older

- What is your sex?
  - Male
  - Female

- In what grade are you?
  - Grade 8
  - Grade 9
  - Grade 10

The next 5 questions ask about your height, weight, eating breakfast, and going hungry.

- 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
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input checked="" type="radio"/>
	<input type="radio"/>	<input type="radio"/>
	<input checked="" type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	I do not know	

- 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
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>
	<input checked="" type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	I do not know	

- During the past 30 days, how often did you eat breakfast?
  - Never
  - Rarely
  - Sometimes
  - Most of the time
  - Always

- During the past 30 days, what is the **main** reason you did not eat breakfast?
  - I always ate breakfast
  - I do not have enough time for breakfast
  - I could not eat early in the morning
  - There was not always food in my home
  - I did not like the foodstuffs available
  - I was interested in maintaining my body shape
  - Some other reason

8. 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 8 questions ask about foods you might eat.**

9. During the past 30 days, how many times per day did you **usually** eat fruit, such as banana, mango, papaw, pineapple, avocado, or guava?
- 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
10. During the past 30 days, how many times per day did you **usually** eat vegetables, such as green leafy vegetables, pumpkin, bitter melon, drumsticks, okra, carrots, ladyfingers, beans, brinjals, or beetroot?
- 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

11. During the past 30 days, how many times per day did you **usually** eat food with animal proteins, such as fish, meat, eggs, dried fish, or sprats?
- A. I did not eat food with animal proteins 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
12. During the past 30 days, how many times per day did you **usually** eat yams or cereals, such as Rice, Kurakkan, Meneri, or Corn?
- A. I did not eat yams or cereals 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
13. During the past 30 days, how many times per day did you **usually** eat pulses, such as dhal, mung, soya, or cowpea?
- A. I did not eat pulses 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** drink soft drinks, such as Coke, Cream Soda, or fruit drinks with high sugar?

- A. I did not drink soft drinks 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

15. During the past 30 days, how many times per day did you **usually** eat processed foods, such as pastries, rolls, cutlets, patties, sausage buns, pizza, or potato chips?

- A. I did not eat processed foods 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

16. During the past 7 days, how many times per day did you **usually** eat high starch foods, such as buns, pastries, or biscuits and high sugar foods such as toffee or chocolate in between your 3 main meals?

- A. I did not eat high starch or high sugar foods during the past 7 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 a day
- G. 5 or more times per day

**The next 4 questions ask about oral health.**

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. When was the last time you saw a dentist or visited a dental clinic for a check-up, exam, teeth cleaning, or other dental work?

- A. During the past 12 months
- B. Between 12 and 24 months ago
- C. More than 24 months ago
- D. Never
- E. Not sure

19. 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

20. During the past 12 months how often did you get embarrassed at school due to an oral health problem such as crooked teeth or bad breath?

- 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, knife, or gun). It is not a physical attack when two students of about the same strength or power choose to fight each other.**

21. 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
22. During the past 12 months, who attacked you most often?
- A. I was not physically attacked during the past 12 months
  - B. Mother or father
  - C. Brothers or sisters
  - D. Other relatives
  - E. Teachers
  - F. School mates
  - G. Someone else

**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.**

23. 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.**

24. 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

25. 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, scooter, or cart
- 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

26. 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

27. 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

28. 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 3 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.**

29. 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

30. 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

31. If you were bullied, who would you tell?

- A. Mother or father
- B. Brothers or sisters
- C. Other relatives
- D. Teachers
- E. School mates
- F. Someone else
- G. Not sure

**The next 6 questions ask about your feelings and friendships.**

32. During the past 12 months, how often have you felt lonely?
- A. Never
  - B. Rarely
  - C. Sometimes
  - D. Most of the time
  - E. Always

33. 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

34. 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

35. During the past 12 months, did you ever **seriously** consider attempting suicide?
- A. Yes
  - B. No

36. During the past 12 months, did you make a plan about how you would attempt suicide?
- A. Yes
  - B. No

37. How many close friends do you have?
- A. 0
  - B. 1
  - C. 2
  - D. 3 or more

**The next question asks about Life Skills.**

38. If someone on a crowded bus or train pushed against you or touched you on purpose, what would you do first?
- A. Wait and see if it happens again
  - B. Move or change your position without saying anything
  - C. Ask the person kindly not to push against or touch you
  - D. Announce loudly that someone is pushing against or touching you
  - E. Hit or push back the person who is pushing against or touching you

**The next 6 questions ask about smoking.**

39. If one of your best friends offered you a cigarette, would you smoke it?
- A. Definitely not
  - B. Probably not
  - C. Probably yes
  - D. Definitely yes
40. Do you think smoking cigarettes is harmful to your health?
- A. Definitely not
  - B. Probably not
  - C. Probably yes
  - D. Definitely yes
41. Once someone has started smoking, do you think it would be difficult to quit?
- A. Definitely not
  - B. Probably not
  - C. Probably yes
  - D. Definitely yes

42. When you see a man smoking, what do you think of him? SELECT ONLY ONE RESPONSE.
- A. Lacks confidence
  - B. Stupid
  - C. Loser
  - D. Successful
  - E. Intelligent
  - F. Macho
43. When you see a woman smoking, what do you think of her? SELECT ONLY ONE RESPONSE.
- A. Lacks confidence
  - B. Stupid
  - C. Loser
  - D. Successful
  - E. Intelligent
  - F. Sophisticated
44. Do you think that smoking cigarettes makes you gain or lose weight?
- A. Gain weight
  - B. Lose weight
  - C. No difference

**The next 4 questions ask about HIV and AIDS.**

45. Have you ever heard of HIV infection or the disease called AIDS?
- A. Yes
  - B. No
46. 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

47. 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

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

- A. Yes
- B. No

**The next 2 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 COUNTRY SPECIFIC EXAMPLES.**

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

49. 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

50. 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

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

51. 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 reading books and papers, studying, playing carom or chess?

- 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 3 questions ask about going to and coming home from school.**

52. 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

53. 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

54. How do you travel to school most often?

- A. On foot
- B. By bus
- C. By van
- D. By train
- E. Some other way

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

55. 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

56. 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

57. 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

58. 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

59. 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