

Global School-based Student Health Survey (GSHS)

# 2015 Curacao 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/)



## 2015 CURAÇAO 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
  - G. 17 years old
  - H. 18 years old or older
  
2. What is your sex?
  - A. Male
  - B. Female
  
3. In what grade/class/ standard are you?
  - A. GRADE 1
  - B. GRADE 2
  - C. GRADE 3
  - D. GRADE 4
  - E. GRADE 5
  - F. GRADE 6
  
4. What district do you live in?
  - A. Lagun, Flip, Tera Pretu, Fortuna, or Paradijs
  - B. St. Willibrordus, Rancho, Groot Piscadera, Mahaai, or Labadera
  - C. Kanga/Dein, Rosendaal, Wishi, Otrobanda, or Scharloo
  - D. Seru Lora, Zeelandia, Salina, Dominguito, Koraal Partier, or Spaanse water
  - E. I live in another district in Curaçao
  
5. Which adult family members do you live with?
  - A. Both my mother and father
  - B. My mother but not my father
  - C. My father but not my mother
  - D. Other adult family members, but neither my mother nor my father
  - E. I do not live with any adult family members

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

6. 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	

7. 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	

8. During the past 12 months, have you been weighed and measured?
- A. Yes  
B. No
9. How do you describe your weight?
- A. Very underweight  
B. Slightly underweight  
C. About the right weight  
D. Slightly overweight  
E. Very overweight

10. 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

11. 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

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

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

**The next 4 questions ask about what you might eat and drink.**

13. During the past 30 days, how many times per day did you **usually** eat fruit, such as papaya, melon, banana, apples, grape, or pineapple?

- 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 carrots, beans, tomato, cabbage, or 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
15. During the past 30 days, how many times per day did you **usually** drink carbonated soft drinks, such as Coke, Sprite, Fria, Monster, Busta, Red-Bull, Coco Rico, and Malta? (Do **not** include diet soft drinks.)
- A. I did not drink carbonated 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
16. During the past 7 days, on how many days did you eat food from a fast food restaurant, such as McDonalds, KFC, Burger King, Pizza Hut, or Wendy's?
- 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 6 questions ask about cleaning your teeth, the health of your teeth, and washing your hands.**

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. How would you describe the health of your teeth?
- A. Excellent
  - B. Very good
  - C. Good
  - D. Average
  - E. Poor
  - F. Very poor
19. When was the last time you saw a dentist 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. I do not know
20. 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

21. 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

22. 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

**The next question asks 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.**

23. 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

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

24. 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 3 questions ask about serious injuries that happened to you. 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.**

25. 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

26. 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 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 was poisoned or took too much of a drug
  - H. Something else happened to me
27. 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 attacked or abused or was fighting with someone
  - F. I was in a fire or too near a flame or something hot
  - G. I inhaled or swallowed something bad for me
  - H. Something else caused my injury

**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.**

28. 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
29. 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, nationality, 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

**Violence occurs when a person or a group of people attack other people or a group of people with insults, bullying, hits, assault, robbery, or rape. The next 5 questions ask about violence.**

30. Do you belong to any violent group?
- A. Yes
  - B. No
31. Have you ever been forced to have sexual intercourse when you did not want to?
- A. Yes
  - B. No

32. During the past 12 months, did your boyfriend or girlfriend ever hit, slap, or physically hurt you on purpose?
- A. I have not had a boyfriend or girlfriend during the past 12 months
  - B. Yes
  - C. No
33. During the past 12 months, did your parents or guardians ever hit, slap, or physically hurt you on purpose?
- A. Yes
  - B. No
34. During the past 30 days, on how many days did you carry a weapon, such as a gun, knife, club, or brass knuckles?
- A. 0 days
  - B. 1 day
  - C. 2 or 3 days
  - D. 4 or 5 days
  - E. 6 or more days

**The next 2 questions ask about riding in a car or other motor vehicle.**

35. During the past 30 days, how often did you use a seat belt when riding in a car or other motor vehicle driven by someone else?
- A. I did not ride in a motor vehicle driven by someone else
  - B. Never
  - C. Rarely
  - D. Sometimes
  - E. Most of the time
  - F. Always

36. During the past 30 days, how often did you ride in a car or other motor vehicle **driven by someone who had been drinking alcohol**?
- A. I did not ride in motor vehicle driven by someone else
  - B. 0 times
  - C. 1 time
  - D. 2 or 3 times
  - E. 4 or 5 times
  - F. 6 or more times

**The next 7 questions ask about your feelings and friendships.**

37. During the past 12 months, how often have you felt lonely?
- A. Never
  - B. Rarely
  - C. Sometimes
  - D. Most of the time
  - E. Always
38. 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
39. During the past 12 months, did you ever **seriously** consider attempting suicide?
- A. Yes
  - B. No

40. During the past 12 months, did you make a plan about how you would attempt suicide?
- A. Yes
  - B. No
41. During the past 12 months, how many times did you actually attempt suicide?
- A. 0 times
  - B. 1 time
  - C. 2 or 3 times
  - D. 4 or 5 times
  - E. 6 or more times
42. How many close friends do you have?
- A. 0
  - B. 1
  - C. 2
  - D. 3 or more
43. How many adults can you rely on when you have personal problems?
- A. 0
  - B. 1
  - C. 2
  - D. 3 or more

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

44. 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 or 17 years old
  - H. 18 years old or older

45. 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
46. During the past 30 days, on how many days did you use any tobacco products other than cigarettes, such as cigars, cigarillos, or electronic 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
47. 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
48. 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

49. 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 6 questions ask about drinking alcohol. This includes drinking beer, wine, rum, whisky, vodka, shooters, breezers, and liquors such as blue Curaçao and pisang ambon. Drinking alcohol does not include drinking a few sips of wine for religious purposes. A “drink” is a glass of wine, a bottle of beer, a small glass of liquor, or a mixed drink.**

50. How old were you when you had your first drink of alcohol other than a few sips?
- A. I have never had a drink of alcohol other than a few sips
  - 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 or 17 years old
  - H. 18 years old or older
51. 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

52. 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
53. 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 my family
  - F. I stole it or got it without permission
  - G. I got it some other way

**Staggering when walking, not being able to speak right, and throwing up are some signs of being really drunk.**

54. 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

55. During your life, how many times have you 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

**The next 5 questions ask about drug use. This includes using marijuana, cocaine, inhalants, ecstasy, and base.**

56. How old were you when you first used drugs?

- A. I have never used 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 or 17 years old
- H. 18 years old or older

57. During your life, how many times have you used marijuana (also called weed, pot, cannabis, ganja, or grass)?

- A. 0 times
- B. 1 or 2 times
- C. 3 to 9 times
- D. 10 to 19 times
- E. 20 or more times

58. During the past 30 days, how many times have you used marijuana (also called weed, pot, cannabis, ganja, or grass)?

- A. 0 times
- B. 1 or 2 times
- C. 3 to 9 times
- D. 10 to 19 times
- E. 20 or more times

59. During your life, how many times have you used methamphetamine, cocaine, or XTC (also called speed, base, rock, crack, and uppers)?

- A. 0 times
- B. 1 or 2 times
- C. 3 to 9 times
- D. 10 to 19 times
- E. 20 or more times

60. During your life, how many times have you got into trouble with your family or friends, missed school, or got into fights, as a result of using drugs?

- A. 0 times
- B. 1 or 2 times
- C. 3 to 9 times
- D. 10 to 19 times
- E. 20 or more times

**The next 9 questions ask about sexual intercourse.**

61. Have you ever had sexual intercourse?

- A. Yes
- B. No

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

- A. I have never had sexual intercourse
- B. 11 years old or younger
- C. 12 years old
- D. 13 years old
- E. 14 years old
- F. 15 years old
- G. 16 or 17 years old
- H. 18 year old or older

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

- A. I have never had sexual intercourse
- B. 1 person
- C. 2 people
- D. 3 people
- E. 4 people
- F. 5 people
- G. 6 or more people

64. What is the **main** reason you have not had sexual intercourse?

- A. I have had sexual intercourse
- B. I want to wait until I am older
- C. I want to wait until I am married
- D. I do not want to risk getting pregnant
- E. I do not want to risk getting a sexually transmitted infection, such as HIV or AIDS
- F. I have not had a chance to have sex or met anyone that I wanted to have sex with
- G. It is against my religious values
- H. Some other reason

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

- A. I have never had sexual intercourse
- B. Yes
- C. No

66. The **last time** you had sexual intercourse, did you or your partner use any other method of birth control, such as withdrawal, rhythm (safe time), birth control pills, or any other method to prevent pregnancy?

- A. I have never had sexual intercourse
- B. Yes
- C. No
- D. I do not know

67. What is the **main** method you use to prevent pregnancy?

- A. I have never had sexual intercourse
- B. I use effective birth control, such as condoms, birth control pills, or an intra-uterine device to prevent pregnancy
- C. I use other methods of birth control, such as the withdrawal method or rhythm (safe time)
- D. I use the morning after pill
- E. I do not try to prevent pregnancy, but if pregnancy occurs I would opt for abortion
- F. I do not try to prevent pregnancy because I would like to have a child
- G. Some other method

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

- A. 0 times
- B. 1 time
- C. 2 or more times
- D. I do not know

69. During your life, have you ever had sexual intercourse in exchange for something, such as a phone, jewelry, or money?

- A. I have never had sexual intercourse
- B. Yes
- C. No

**The next 3 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, swimming, baseball, and cross-fit.**

70. 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 EACH 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

71. During the past 7 days, on how many days did you walk or ride a bicycle to or 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

72. During this school year, on how many days did you go to physical education (PE) class each week?

- A. 0 days
- B. 1 day
- C. 2 days
- D. 3 days
- E. 4 days
- F. 5 or more days

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

73. 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 playing domino?

- 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 question asks about your sleep.**

74. On an average school night, how many hours of sleep do you get?

- A. 4 or less hours
- B. 5 hours
- C. 6 hours
- D. 7 hours
- E. 8 hours
- F. 9 hours
- G. 10 or more hours

**The next 8 questions ask about your experiences at school and at home.**

75. 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
76. 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
77. 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
78. 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

79. 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
80. During the past 30 days, how often did your parents or guardians go through your things without your approval?
- A. Never
  - B. Rarely
  - C. Sometimes
  - D. Most of the time
  - E. Always
81. During the past 30 days, how often did your parents or guardians provide for your necessities?
- A. Never
  - B. Rarely
  - C. Sometimes
  - D. Most of the time
  - E. Always
82. Do you think of yourself as a religious or spiritual person?
- A. Yes
  - B. No

**The next 3 questions ask about HIV infection or AIDS.**

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

84. 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

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

- A. Yes
- B. No