

Global School-based Student Health Survey (GSHS)

# 2005 Oman GSHS Questionnaire

For more information:

[www.cdc.gov/gshs](http://www.cdc.gov/gshs) or  
[www.who.int/school\\_youth\\_health/gshs](http://www.who.int/school_youth_health/gshs)



## **2005 OMAN 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.

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 you?

- A. Seventh
- B. Eighth
- C. Ninth
- D. Tenth

4. How many brothers and sisters do you have?

- A. Zero
- B. One
- C. Two
- D. Three
- E. Four or more

5. What is your father doing?

- A. He isn't working
- B. Laborer
- C. Employee
- D. Private work
- E. Dead
- F. Retired

6. What is your mother doing?

- A. Housewife
- B. Laborer
- C. Employee
- D. Private work
- E. Dead
- F. Retired

**The next 5 questions ask about your height and weight.**

7. 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="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
<input checked="" type="radio"/>	<input type="text" value="1"/>	<input type="text" value="1"/>
<input type="text" value="2"/>	<input type="text" value="2"/>	<input type="text" value="2"/>
	<input type="text" value="3"/>	<input checked="" type="radio"/>
	<input type="text" value="4"/>	<input type="text" value="4"/>
	<input checked="" type="radio"/>	<input type="text" value="5"/>
	<input type="text" value="6"/>	<input type="text" value="6"/>
	<input type="text" value="7"/>	<input type="text" value="7"/>
	<input type="text" value="8"/>	<input type="text" value="8"/>
	<input type="text" value="9"/>	<input type="text" value="9"/>
<input type="text" value="9"/>	I do not know	

8. 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	

9. During the past 12 months, have you been weighed and measured?
- A. Yes  
B. No
10. How do you describe your weight?
- A. Very underweight  
B. Slightly underweight  
C. About the right weight  
D. Slightly overweight  
E. Very overweight
11. 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

**The next 4 questions ask about meals you might have eaten.**

12. 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
13. During the past 30 days, how often did you eat breakfast?
- A. Never  
B. Rarely  
C. Sometimes  
D. Most of the time  
E. Always
14. 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
15. During the past 30 days, how often did you eat snacks at school?
- A. Never  
B. Rarely  
C. Sometimes  
D. Most of the time  
E. Always

**The next 5 questions ask about foods you might eat.**

16. During the past 30 days, how many times per day did you **usually** eat fruit, such as dates, apples, or oranges?
- 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
17. During the past 30 days, how many times per day did you **usually** eat vegetables, such as tomatoes, potatoes, or carrots?
- 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
18. During the past 30 days, how many times per day did you usually drink carbonated soft drinks, such as Coke, Pepsi, cola, or Dew Mountain?
- 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

19. During the past 30 days, how many times per day did you usually drink tea or coffee?

- A. I did not drink tea or coffee 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

20. During the past 7 days, on how many days did you eat at a fast food restaurant, such as McDonalds?

- 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 2 questions ask about what you have learned.**

21. During this school year, were you taught in any of your classes the benefits of healthy eating?

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

22. During this school year, were you taught in any of your classes how to safely prepare or store foods?

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

**The next 9 questions ask about personal health activities.**

23. 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
24. 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
25. 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
26. Are the toilets safe at school?
- A. There are no toilets at school
  - B. Yes
  - C. No
27. Are the toilets clean at school?
- A. There are no toilets at school
  - B. Yes
  - C. No

28. Are the toilets enough at school?
- A. Yes
  - B. No
  - C. I do not know
29. 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
30. During this school year, were you taught in any of your classes the importance of hand washing?
- A. Yes
  - B. No
  - C. I do not know
31. Is the school health clinic in the school clean and well-organized?
- A. There is no clinic at school
  - B. Yes
  - C. No

**The next 2 questions ask about drinking water.**

32. Is there a source of clean water for drinking at school?
- A. Yes
  - B. No
  - C. Sometimes
33. Do you bring water from home to drink while you are at school?
- A. Yes
  - B. No
  - C. Sometimes

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.

34. 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 2 questions ask about physical fights. A physical fight occurs when two or more students of about the same strength or power choose to fight each other.

35. 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
36. During this school year, were you taught in any of your classes how to avoid physical fights and violence?
- A. Yes
  - B. No
  - C. I do not know

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.

37. 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
38. 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

39. 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

40. 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

41. 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 5 questions ask about personal safety.**

42. 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

43. During this school year, were you taught in any of your classes how to avoid or prevent motor vehicle accidents?

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

44. During this school year, were you taught in any of your classes how to avoid or prevent other types of accidents, such as fires or poisonings?

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

45. During this school year, were you taught in any of your classes first aid skills in case of an injury to yourself or someone else?

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

46. In your home, is there a first aid box?

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



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.

47. 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

48. 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. Do not select this response option
- D. Do not select this response option
- 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

49. During this school year, were you taught in any of your classes how to avoid being bullied?

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

The next 6 questions ask about HIV or the disease called AIDS.

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

- A. Yes
- B. No

51. 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

52. 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

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

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

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

- A. Yes
- B. No

55. During this school year, were you taught in any of your classes how to deal with an HIV patient?

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

**The next 9 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.**

56. 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
57. 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
58. During this school year, on how many days did you go to physical education class each week?
- A. 0 days
  - B. 1 day
  - C. 2 days
  - D. 3 days
  - E. 4 days
  - F. 5 or more days
59. During the past 12 months, on how many sports teams did you play?
- A. 0 teams
  - B. 1 team
  - C. 2 teams
  - D. 3 or more teams
60. During the past 12 months, did you practice physical activity outside the school?
- A. Never
  - B. Rarely
  - C. Sometimes
  - D. Most of the time
  - E. Always
61. During this school year, were you taught in any of your classes the benefits of physical activity?
- A. Yes
  - B. No
  - C. I do not know

62. 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
63. During the past 7 days, how many days did you walk for at least half an hour?
- A. 0 days
  - B. 1 day
  - C. 2 days
  - D. 3 days
  - E. 4 days
  - F. 5 days
  - G. 6 days
  - H. 7 days
64. During physical activity, do you follow the safety rules such as wearing special shoes or playing in special places?
- A. Never
  - B. Rarely
  - C. Sometimes
  - D. Most of the time
  - E. Always

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

65. 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?
- 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.**

66. 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
67. 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.**

68. 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

69. 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

70. 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

71. 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

72. 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