

Global School-based Student Health Survey (GSHS)

2013 El Salvador GSHS Questionnaire

For more information:

www.cdc.gov/gshs or
www.who.int/chp/gshs/en/



2013 EL SALVADOR 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. 7th grade
 - B. 8th grade
 - C. 9th grade

The next 3 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
<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"/>
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	<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	

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
		
		
		
		
		
		
		
		
		
		
	I do not know	

6. 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 6 questions ask about what you might eat and drink.

7. During the past 30 days, how many times per day did you **usually** eat fruit, such as mango, piña, guayaba, naranja, guineo, jocotes, sandía, and melon?
- 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
8. During the past 30 days, how many times per day did you **usually** eat vegetables, such as guisquil, pipián, papa, zanahoria, ejotes, guicoy, ayote, chipilin, yerba mora, espinaca, lechuga, and repollo?
- 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
9. During the past 30 days, how many times per day did you **usually** drink carbonated soft drinks, such as Coca cola, Uva, Fanta, Tropical, Gengibre or Pepsi? (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

10. During the past 30 days, how many times per day did you **usually** drink water?

- A. I did not drink water 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 7 days, on how many days did you eat food from a fast food restaurant, such as MacDonald, Pizza Hut, Mr. Donut, Pollo Campero, Pollo Campestre, Pollo Real, Papa John's, Wendy's Biggest, Burger King, Subway, or Choris?

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

12. During the past 30 days, did you **take any diet pills, powders, or liquids** without a doctor's advice to lose weight or to keep from gaining weight?

- A. Yes
- B. No

The next question asks about your physical appearance.

13. During the past 12 months, how did you feel about you physical appearance?

- A. I was not worried about my appearance
- B. I was a little worried about my appearance
- C. I was very worried about my appearance

The next 6 questions ask about cleaning your teeth and washing your hands.

14. 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

15. During the past 12 months, how often did you have a tooth ache or feel discomfort because of your teeth?

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

16. 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

17. 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

18. 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

19. 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.

20. 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.

21. 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 4 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.

22. 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

23. 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
24. 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
25. During the past 12 months, **where** did the most serious injury that happened to you occur?
- A. I was not seriously injured during the past 12 months
 - B. At home
 - C. At school
 - D. At work
 - E. On a playing field or court or in a gymnasium
 - F. On or near a road
 - G. In a park
 - H. Somewhere else

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.

26. 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
27. 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

28. During the past 12 months, how many times did you bully someone?

- 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

29. 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

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

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

31. During the past 12 months, did your boyfriend or girlfriend ever hit, slap, or cause you physical injuries on purpose?

- A. I did not have a boyfriend or girlfriend during the past 12 months
- B. Yes
- C. No

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

- A. Yes
- B. No

33. During your life, did anyone force you to do something such as getting undressed, touching or letting you touch private parts, kissing, hugging, or any other type of sexual behavior against your will?

- A. Yes
- B. No

34. Do you know anybody your own age that has been sexually harassed or abused?

- A. Yes
- B. No
- C. Not sure

The next 7 questions ask about your feelings and friendships.

35. During the past 12 months, how often have you felt lonely?

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

36. 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

37. During the past 12 months, did you ever **seriously** consider attempting suicide?

- A. Yes
- B. No

38. During the past 12 months, did you make a plan about how you would attempt suicide?

- A. Yes
- B. No

39. 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

40. How many close friends do you have?

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

The next 10 questions ask about drinking alcohol. This includes drinking beer, wine, chaparro, espiritu de caña, rum, whiskey, aguardiente, tick tac, la trenzuda, or chicha. 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.

41. 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 years old or older

42. 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

43. 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

44. 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.

45. 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

46. 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

47. What type of alcohol do you **usually** drink? **SELECT ONLY ONE RESPONSE.**

- A. I do not drink alcohol
- B. Beer
- C. Wine
- D. Spirits, such as vodka, rum, whiskey
- E. National spirits such as aguardiente, tick tac, la trezuda, chaparro, or chicha.

48. 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

49. How difficult do you think it would be for you to get alcohol, such as **beer, wine, chaparro, espiritu de caña, rum, whiskey, aguardiente, tick tac, la trezuda, or chicha**, if you wanted to?

- A. Impossible
- B. Very difficult
- C. Fairly difficult
- D. Fairly easy
- E. Very easy
- F. I do not know

50. What is the main reason you drink alcohol?

- A. I do not drink alcohol
- B. Worries or stress
- C. Anger
- D. Curiosity
- E. Peer pressure
- F. Because it is at home
- G. Because you received it as a gift
- H. Some other reason

The next 6 questions ask about drug use. This includes using marijuana, amphetamines, cocaine, inhalants, éxtasis, and pega

51. 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 years old or older

52. During your life, what drug have you used most often? SELECT ONLY ONE RESPONSE.

- A. I have never used drugs
- B. Marijuana
- C. Amphetamines or methamphetamines
- D. Cocaine
- E. Crack
- F. Pega
- G. Extasis
- H. Some other drug

53. During the last 30 days, how many times have you used that drug?

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

54. 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

55. How difficult do you think it would be for you to get any drug if you wanted to?

- A. Impossible
- B. Very difficult
- C. Fairly difficult
- D. Fairly easy
- E. Very easy
- F. I do not know

56. What is the main reason you use drugs?

- A. I do not use drugs
- B. Worries or stress
- C. Anger
- D. Curiosity
- E. Peer pressure
- F. Because it is home
- G. Because you received it as a gift
- H. Some other reason

The next 7 questions ask about sexual intercourse.

57. Have you ever had sexual intercourse?

- A. Yes
- B. No

58. 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 year old or older

59. What is the main reason you have had sexual intercourse?

- A. I have never had sexual intercourse
- B. Curiosity
- C. Peer pressure
- D. I needed money or gifts
- E. Love
- F. I was threatened
- G. I had used alcohol or drugs
- H. Some other reason

60. 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

61. The **last time** you had sexual intercourse, did you or your partner use a condom or preservativo, capucha

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

62. 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

63. **If** you wanted to get a condom (or preservativo or capucha) how would you most likely get it?

- A. I would get it from a vending machine
- B. I would get it in a store or shop or from a street vendor
- C. I would get it from a pharmacy, clinic, or hospital
- D. I would give someone else money to buy it for me
- E. I would ask a friend
- F. I would get it some other way
- G. I do not know

The next 5 questions ask about sexually transmitted infections.

64. Have you ever heard of HIV infection or AIDS?

- A. Yes
- B. No

65. 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
66. 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
67. Have you ever been told by a doctor or nurse that you had a sexually transmitted infection, such as HIV, AIDS, gonorrhea, or chancro blando?
- A. Yes
 - B. No
 - C. I do not know
68. Have you ever been tested for HIV infection or AIDS?
- A. Yes
 - B. No

The next 4 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, jogging, volley ball, tennis, table tennis, and badminton.

69. 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
70. 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
71. 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

72. 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 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 chatting, playing with the cell phone, talking on the phone, using an IPAD or tablet.

- 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 9 questions ask about your experiences at school and at home.

74. 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

75. 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

76. 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

77. 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

78. 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

79. 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
80. During the past 30 days, how often did your parents or guardians show you affection?
- 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 praise you?
- A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always
82. During the past 30 days, how often did your parents or guardians not respect you as a person (for example, not let you talk or favour someone else more than you)?
- A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always