

Global School-based Student Health Survey (GSHS)

# 2007 Jordan 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/)



## 2007 JORDAN 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 class are you?

- A. 7th
- B. 8th
- C. 9th
- D. 10th
- E. 11th

The next 7 questions ask about your height and weight.

























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"/>
	<input type="text" value="3"/>	<input checked="" type="radio"/>
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	<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	

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. 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 this school year, were you taught in any of your classes healthy ways to **gain** weight?

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

10. During this school year, were you taught in any of your classes healthy ways to **lose** weight?

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

**The next 3 questions ask about meals you might have eaten.**

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

13. 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 5 questions ask about foods you might eat.**

14. During the past 30 days, how many times per day did you **usually** eat fruit, such as apples, bananas, or citrus fruits?
  - 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
15. During the past 30 days, how many times per day did you **usually** eat vegetables, such as tomato, cucumber, spinach, or eggplant?
  - 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
16. During the past 30 days, how many times per day did you **usually** drink milk or eat milk products, such as yogurt, cheddar cheese, or cream cheese?
  - A. I did not drink milk or eat milk products 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** drink carbonated soft drinks, such as Coke, Pepsi, Coca Cola, 7- Up, or Fanta?
  - 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
18. During the past 7 days, on how many days did you eat at a fast food restaurant, such as McDonalds, Boston Fried Chicken, or Burger King?
  - 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.**

19. During this school year, were you taught in any of your classes the benefits of eating more fruits and vegetables?
  - A. Yes
  - B. No
  - C. I do not know
20. During this school year, were you taught in any of your classes the benefits of drinking more milk?
  - A. Yes
  - B. No
  - C. I do not know

**The next 9 questions ask about cleaning your teeth and washing your hands.**

21. 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
22. 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
23. During the past 30 days, how did you **usually** wash your hands before eating?
- A. I did not wash my hands before eating during the past 30 days
  - B. In a dish of water used by others
  - C. In a dish of water used only by me
  - D. Under running water
  - E. Some other way
24. Is there a place for you to wash your hands before eating at school?
- A. Yes
  - B. No
25. During the past 30 days, how often did you wash your hands before eating at school?
- A. Never
  - B. Rarely
  - C. Sometimes
  - D. Most of the time
  - E. Always

26. 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
27. Are the toilets or latrines clean at school?
- A. Yes
  - B. No
28. 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
29. 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

**The next 3 questions ask about clean drinking water.**

30. Is there a source of clean water for drinking at school?
- A. Yes
  - B. No

31. 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

32. Do you bring water from home to drink while you are at school?

- A. Yes
- B. No

**The next question asks about worm infections.**

33. During this school year, were you taught how to avoid worm infections?

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

**The next 5 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.**

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

35. During the past 12 months, how many times were you physically attacked by a teacher?

- 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, how many times were you verbally abused by a teacher?

- 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

37. During the past 12 months, how many times were you physically attacked by an adult family member?

- 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, 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

The next 3 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.

39. 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
40. During the past 12 months, how many times were you in a physical fight **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
41. 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.

42. 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
43. 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, skate, or animals
  - 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

44. 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

45. 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

46. 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 question asks about what you have learned.**

47. 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

**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.**

48. 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

49. 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 5 questions ask about personal safety.**

50. During the past 30 days, on how many days did you not go to school because you felt you would be unsafe 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
51. During the past 30 days, on how many days did you not go to school because you felt you would be unsafe at school?
- A. 0 days
  - B. 1 day
  - C. 2 or 3 days
  - D. 4 or 5 days
  - E. 6 or more days

52. 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
53. 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
54. 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

**The next 9 questions ask about your feelings and friendships and what you have learned in school.**

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

56. 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

57. 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

58. 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

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

- A. Yes
- B. No

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

- A. Yes
- B. No

61. How many close friends do you have?

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

62. During this school year, were you taught in any of your classes how to manage anger?

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

63. During this school year, were you taught in 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.**

64. 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

65. 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

66. During the past 30 days, on how many days did you use any other form of tobacco, such as Argela or pipe?
- 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
67. 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
68. 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
69. 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 4 questions ask about HIV infection or the disease called AIDS.**

70. Have you ever heard of HIV infection or the disease called AIDS?
- A. Yes
  - B. No
71. 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
72. 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
73. Can people protect themselves from HIV infection by not having sexual intercourse?
- A. Yes
  - B. No
  - C. I do not know

The next 6 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, jumping rope, aerobics, and carateh.

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

74. 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

75. 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

76. 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

77. 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

78. 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

79. During this school year, were taught in any of your classes about opportunities for physical activity in your community?

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

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

80. 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 Atari, Play Station, playing cards, playing chess, or reading stories?
- 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.**

81. 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
82. 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.**

83. 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
84. 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
85. 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
86. 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

87. 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