

Global School-based Student Health Survey (GSHS)

2007 Seychelles GSHS Questionnaire

For more information:

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



2007 SEYCHELLES 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
- G. 17 years old
- H. 18 years old or older

2. What is your sex?

- A. Male
- B. Female

3. In what grade are you?

- A. S1
- B. S2
- C. S3
- D. S4
- E. S5

The next 6 questions ask about your height, weight, going hungry, and where you get your lunch.




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"/>
	<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	

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
	<input type="text" value="0"/>	<input type="text" value="0"/>
<input type="text" value="1"/>	<input type="text" value="1"/>	<input type="text" value="1"/>
<input type="text" value="2"/>	<input type="text" value="2"/>	
	<input type="text" value="3"/>	<input type="text" value="3"/>
	<input type="text" value="4"/>	<input type="text" value="4"/>
		<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	

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, 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

9. Where do you get your lunch most often during school time?

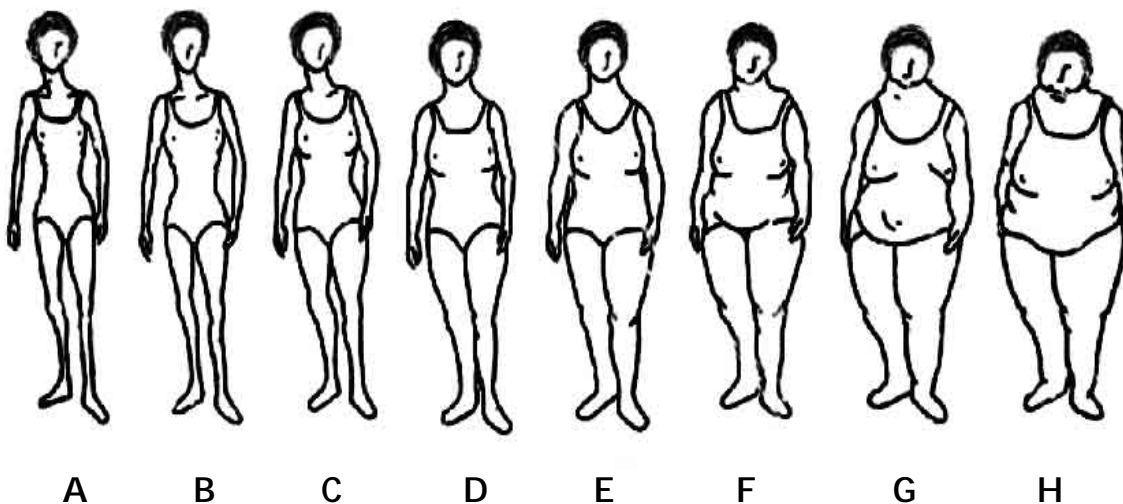
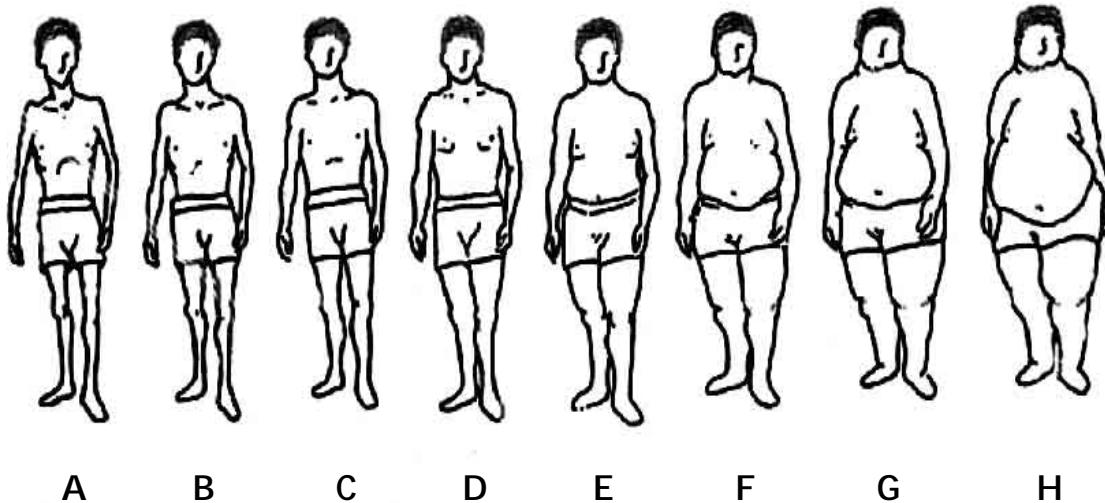
- A. I generally do not take lunch
- B. School meal
- C. Take away bought inside school
- D. Take away bought outside school
- E. Home made food
- F. Snacks from tuck shop such as samosa, kato piman, etc.
- G. Other manner

10. Chose the figure that best reflects how you think you look?

- A. Drawing A
- B. Drawing B
- C. Drawing C
- D. Drawing D
- E. Drawing E
- F. Drawing F
- G. Drawing G
- H. Drawing H

11. Choose your ideal figure (how you would like to look)?

- A. Drawing A
- B. Drawing B
- C. Drawing C
- D. Drawing D
- E. Drawing E
- F. Drawing F
- G. Drawing G
- H. Drawing H



The next 2 questions ask about foods you might eat.

12. During the past 30 days, how many times per day did you **usually** eat fruit, such as apples, oranges, banana, avocado, mango, papay, zanmalak, friser, karanbol, or any other local or imported 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
13. During the past 30 days, how many times per day did you **usually** eat vegetables, such as carrots, lettuce, tomato, cabbage, cucumber, kreson, bred, zariko, or any other local or imported vegetables?
- 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

The next 5 questions ask about drinks or beverages you might consume.

14. On average, how many glasses or small bottles (3 dl) of carbonated soft drinks do you drink, such as Coke, Fanta, Sprite, Bitter Lemon, Cocktail, Pepsi, Mirenda, Yacinthe lemonade, or any similar sweetened drink? (Do not include water, fresh or packet fruit juice, or milk)
- A. I do not drink carbonated soft drinks
 - B. 1-2 small bottles or glasses per week but not every day
 - C. Several bottles or glasses per week but not every day
 - D. 1 small bottle or glass per day (on most days of the week)
 - E. 2 small bottles or glasses per day (on most days of the week)
 - F. 3 small bottles or glasses per day (on most days of the week)
 - G. 4 small bottles or glasses per day (on most days of the week)
 - H. 5 small bottles or glasses per day or more (on most days of the week)
15. When you wish to drink a soft drink, what would you choose usually?
- A. Diet Coke
 - B. Regular Coke
 - C. I prefer other types of soft drinks (Sprite, Bitter Lemon, lemonade, Yacinthe lemonade, etc.)
 - D. I rarely drink any soft drink

16. On average, how many glasses or small packets of fruit juice do you drink? (Do not include soft drinks or milk)
- A. I do not drink fruit juice
 - B. 1-2 small packets or glasses of fruit juice per week but not every day
 - C. Several small packets or glasses of fruit juice per week but not every day
 - D. 1 small packets or glass of fruit juice per day (on most days of the week)
 - E. 2 small packets or glasses of fruit juice per day (on most days of the week)
 - F. 3 small packets or glasses of fruit juice per day (on most days of the week)
 - G. 4 small packets or glasses of fruit juice per day (on most days of the week)
 - H. 5 small packets or glasses of fruit juice per day or more (on most days of the week)
17. On average, how many glasses or small bottles of water do you drink? (do not include soft drinks or milk)
- A. I do not drink water
 - B. 1-2 glasses of water per week but not every day
 - C. Several glasses of water per week but not every day
 - D. 1 glass of water per day (on most days of the week)
 - E. 2 small glasses of water per day (on most days of the week)
 - F. 3 glasses of water per day (on most days of the week)
 - G. 4 glasses of water per day (on most days of the week)
 - H. 5 glasses of water per day or more (on most days of the week)

18. On average, how many cups (tas) of tea do you drink? (Do not include water, soft drinks, or milk)
- A. I do not drink tea
 - B. 1-2 cups of tea per week but not every day
 - C. Several cups of tea per week but not every day
 - D. 1 cup of tea per day (on most days of the week)
 - E. 2 cups of tea per day (on most days of the week)
 - F. 3 cups of tea per day (on most days of the week)
 - G. 4 cups of tea per day (on most days of the week)
 - H. 5 cups of tea per day or more (on most days of the week)

The next 2 questions ask about the benefits of healthy eating and benefits of eating more fruits and vegetables.

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

21. 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
22. During the past 30 days, how often were you bullied by students?
- A. I was never bullied
 - B. I was bullied a few times
 - C. I was bullied several times
 - D. I was bullied very often
23. 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 6 questions ask about your feelings and friendships. The term “suicide” means trying to kill yourself.

24. During the past 12 months, how often have you felt lonely?
- A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always
25. 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
26. 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
27. During the past 12 months, did you ever **seriously** consider attempting suicide?
- A. Yes
 - B. No
28. During the past 12 months, did you make a plan about how you would attempt suicide?
- A. Yes
 - B. No

29. How many close friends do you have?

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

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

30. 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

31. 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

32. During the past 30 days, on how many days did you use any other form of tobacco, such as snuff (sike)?

- 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

33. 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

34. 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

35. 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 8 questions ask about drinking alcohol. This includes drinking beer, Guinness, wine, spirits (whiskey, rum, vodka, takamaka, or tropical), vermouth, porto, martini, liquors, baka, kalu, or lapire. Drinking alcohol does not include drinking a few sips of wine for religious purposes.

36. 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 17 years old
- H. 18 years old or older

37. 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

38. 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

39. What type of alcohol do you prefer to drink?
(Select only one answer)

- A. I do not drink alcohol
- B. Beer or Guinness
- C. Wine
- D. Imported spirits, such as whiskey, rum, vodka, or Old Brown Cherry
- E. Locally made spirits such as Tropical, Takamaka, Smironoff, Black ice, or Island Magic
- F. Baka, kalu, or lapire
- G. Liquor such as brandy, martini, porto, or vermouth, or Irish Cream
- H. Other type

40. 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 home
- F. I stole it
- G. I made it myself
- H. I got it some other way

41. 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

42. During your life, how many times have you ever had a hang-over, felt sick, 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

43. During this school year, were you taught in any of your classes of the dangers of alcohol use?

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

The next question asks about drugs.

44. During your life, how many times have you used drugs, such as marijuana, cannabis or hashish, lapay, steam, stuff, joint, or tyalas? (do not include heroine, cocaine, or ecstasy)

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

45. During the past 30 days, how many times have you used drugs, such as marijuana, cannabis or hashish, lapay, steam, stuff, joint, or tyalas? (do not include heroine, cocaine, or ecstasy)

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

46. Have you ever tried cocaine, heroine, lapoud, sache, nof, or ecstasy?

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

The next 5 questions ask about sexual intercourse. This includes vaginal intercourse (when a man puts his penis into a woman's vagina) and anal intercourse (when a man puts his penis into his partner's anus).

47. Have you ever had sexual intercourse?

- A. Yes
- B. No

48. 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 years old
- H. 17 years old or older

49. 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

50. During the past 12 months, have you had sexual intercourse?

- A. Yes
- B. No

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

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

The next question asks about learning how to avoid HIV infection or AIDS.

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

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, basketball, and swimming.

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

53. 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

54. 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.

55. 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 watching DVD videos?

- 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 hours per day or week you watch TV or videos, or play computer games.

56. How many hours per DAY do you usually watch TV or videos on week days?

- A. Not at all
- B. Less than 1 hour per day
- C. ½ to 1 hour per day
- D. 1 to 2 hours per day
- E. 2-3 hours per day
- F. 4-5 hours per day
- G. 6 hours or more per day

57. How many hours per DAY do you usually watch TV or videos on week ends?

- A. Not at all
- B. Less than 1 hour per day
- C. ½ to 1 hour per day
- D. 1 to 2 hours per day
- E. 2-3 hours per day
- F. 4-5 hours per day
- G. 6 hours or more per day

58. How many hours per WEEK do you usually play computer games? (e.g. on your television, computer, Game Boy, X-box, Nintendo, or Playstation)

- A. Not at all
- B. Less than 1 hour per week
- C. 1 to 3 hours per week
- D. 4 to 6 hours per week
- E. 7 to 9 hours per week
- F. 10 hours or more per week

The next 2 questions ask about going to and coming home from school.

59. 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

60. 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 4 questions ask about physical education, playing on sports teams, benefits of physical activity, and extra curricular activities.

61. 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

62. During the past 12 months, on how many sports teams did you play outside of school hours?

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

63. During this school year, were you taught in any of your classes of the benefits of physical activity?

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

64. Did you take part in any extra curricular activities that was related to physical activity such as basketball, football, hiking, swimming, or dancing?

- A. I did not take part in any extra curricular activities
- B. I took part in extra curricular activities, but not related to physical activity
- C. I took part in extra curricular activities related to physical activity

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

65. 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

66. 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

67. 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

68. 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

69. 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

The next question asks about pocket money.

70. How much pocket money do you get every day on average?

- A. I do not receive any pocket money
- B. Less than 5 rupees per day
- C. 5 - 9 rupees per day
- D. 10 - 14 rupees per day
- E. 15 – 19 rupees per day
- F. 20 – 25 rupees per day
- G. More than 25 rupees per day