

Global School-based Student Health Survey (GSHS)

2007 Angola GSHS Questionnaire

For more information:

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



2007 ANGOLA 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 grade are you?

- A. 6
 - B. 7
 - C. 8
 - D. 9
 - E. 10

The next 7 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"/>
	<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 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	

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. 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

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

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

9. 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

10. During the past 30 days, how often was breakfast offered to you at school?

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

The next 2 questions ask about foods you might eat.

11. During the past 30 days, how many times per day did you **usually** eat fruit, such as oranges, banana, tangerine, apple, avocado, mango, fig, passion fruit, or papaya?

- 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

12. During the past 30 days, how many times per day did you **usually** eat vegetables, such as spring greens, cabbage, lettuce, gimboa leaves, quiabo vegetable, cassava leaves, sweet potato leaves, or pumpkin leaves?

- 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 7 questions ask about personal health activities.

13. 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

14. 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

15. 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

16. Do you have toilets or latrines at school?

- A. Yes
- B. No

17. During the past 30 days, how often did you use the toilets or latrines at school?

- A. There are no toilets or latrines at school
- B. Never
- C. Rarely
- D. Sometimes
- E. Most of the time
- F. Always

18. 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

19. 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 2 questions ask about toothaches and dental care.

20. During the past 12 months, how often did you have a tooth ache?
- A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always
21. 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

The next question asks about clean drinking water.

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

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 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.

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

25. 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

The next 4 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.

26. 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

27. 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

28. 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

29. 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

The next 2 questions ask about weapons.

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

- 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 30 days, on how many times has someone threatened or injured you with a weapon, such as a gun or knife 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

The next question asks about stolen or damaged property.

32. During the past 30 days, how many times has someone stolen or deliberately damaged your property, such as your motorcycle, bicycle, 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

The next 2 questions ask about feeling safe, and wearing a helmet when riding a bicycle.

33. 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 days
- E. 6 or more days

34. During the past 30 days, on how often did you wear a helmet when riding a bicycle?

- A. I did not ride a bicycle
- B. Never
- C. Rarely
- D. Sometimes
- E. Most of the time

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, 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
37. During the past 12 months, how often have you had a hard time staying focused on your homework or other things you had to do?
- 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 wanted to use alcohol or drugs to feel better?
- 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. How many close friends do you have?

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

41. 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.

42. 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

43. 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

44. During the past 30 days, on how many days did you use any other form of tobacco, such as moist snuff, dry snuff, Papes, roll-your-own, or chewing tobacco?

- 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

45. 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

46. 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

47. 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 bottled, tinned or canned beer, wine, whisky, some kind of brandy, Kimbombo yeast drink, Palm wine, Kaporoto, or Kapuka yeast drink. Drinking alcohol does not include drinking a few sips of wine for religious purposes.

48. 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

49. 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

50. 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

51. With whom do you usually drink alcohol?

- A. I do not drink alcohol
- B. With my friends
- C. With my family
- D. With persons I have just met
- E. I usually drink alone

52. 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

53. 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

The next 3 questions ask about media, alcohol representatives, and what you were taught in school.

54. When you watch television, read magazines, how often do you see or read advertisements for alcohol?

- A. A lot
- B. A few
- C. None

55. Has an alcohol company representative ever offered you a free drink of alcohol?

- A. Yes
- B. No

56. During this school year, were you taught in any of your classes where to get help to stop drinking alcohol?

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

The next 2 questions ask about drugs.

57. During your life, how many times have you used drugs, such as Liamba, diazepam or valium without prescription, crack or cocaine, or fuel?

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

58. How old were you when you tried drugs for the first time?

- A. I have never tried 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

The next 7 questions ask about sexual intercourse.

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

- A. Yes
- B. No

60. 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 or older

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

- 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 method of birth control?

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

63. During the past 12 months, how often did you or your partner use a condom?

- A. I have never had sexual intercourse
- B. I have had sexual intercourse, but not during the past 12 months
- C. Never
- D. Rarely
- E. Sometimes
- F. Most of the time
- G. Always

64. Have you ever been told by a doctor or nurse that you had a sexually transmitted infection, such as HIV, AIDS, Gonorrhea, or Syphilis?

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

65. Did you drink alcohol or use other drugs before you had sexual intercourse the **last time**?

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

The next 6 questions ask about HIV infection or AIDS.

66. Can people protect themselves from HIV infection or AIDS by having one uninfected partner?

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

67. Can a healthy-looking person be infected with HIV?

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

68. 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

69. During this school year, were you taught in any of your classes where to get tested for HIV infection or AIDS?

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

70. Have you ever been tested for HIV infection or AIDS?

- A. Yes
- B. No

71. Can people protect themselves from HIV infection or AIDS by using a condom correctly every time they have sexual intercourse?

- 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, volleyball, swimming, footing, workouts, and aerobics.

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

72. 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

73. 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.

74. 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 relaxing?
- 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.

75. 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
76. 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 question asks about what you learned in school.

77. 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

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

78. 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
79. 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
80. 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

81. 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

82. 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