2015 Rhode Island
Youth Risk Behavior Survey

This survey is about health behavior. It has been developed so you can
tell us what you do that may affect your health. The information you give
will be used to improve health education for young people like yourself.

DO NOT write your name on this survey. The answers you give will be
kept private. No one will know what you write. Answer the questions
based on what you really do.

Completing the survey is voluntary. Whether or not you answer the
questions will not affect your grade in this class. If you are not
comfortable answering a question, just leave it blank.

The questions that ask about your background will be used only to
describe the types of students completing this survey. The information
will not be used to find out your name. No names will ever be reported.

Make sure to read every question. Fill in the ovals completely. When
you are finished, follow the instructions of the person giving you the
survey.

Thank you very much for your help.
Directions
• Use a #2 pencil only.
• Make dark marks.
• Fill in a response like this: A B ● D.
• If you change your answer, erase your old answer completely.

1. How old are you?
   A. 12 years old or younger
   B. 13 years old
   C. 14 years old
   D. 15 years old
   E. 16 years old
   F. 17 years old
   G. 18 years old or older

2. What is your sex?
   A. Female
   B. Male

3. In what grade are you?
   A. 9th grade
   B. 10th grade
   C. 11th grade
   D. 12th grade
   E. Ungraded or other grade

4. Are you Hispanic or Latino?
   A. Yes
   B. No

5. What is your race? (Select one or more responses.)
   A. American Indian or Alaska Native
   B. Asian
   C. Black or African American
   D. Native Hawaiian or Other Pacific Islander
   E. White

6. How tall are you without your shoes on?
   Directions: Write your height in the shaded blank boxes. Fill in the matching oval below each number.

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   7. How much do you weigh without your shoes on?
   Directions: Write your weight in the shaded blank boxes. Fill in the matching oval below each number.

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   8. Do you have any physical disabilities or long-term health problems? (Long-term means 6 months or more.)
   A. Yes
   B. No
   C. Not sure

2015 Rhode Island HS YRBS
9. Do you have any long-term emotional problems or learning disabilities? (Long-term means 6 months or more.)
   A. Yes
   B. No
   C. Not sure

The next 3 questions ask about safety.

10. How often do you wear a seat belt when riding in a car driven by someone else?
   A. Never
   B. Rarely
   C. Sometimes
   D. Most of the time
   E. Always

11. During the past 30 days, how many times did you ride in a car or other vehicle driven by someone who had been drinking alcohol?
   A. 0 times
   B. 1 time
   C. 2 or 3 times
   D. 4 or 5 times
   E. 6 or more times

12. During the past 30 days, on how many days did you text or e-mail while driving a car or other vehicle?
    A. I did not drive a car or other vehicle during the past 30 days
    B. 0 days
    C. 1 or 2 days
    D. 3 to 5 days
    E. 6 to 9 days
    F. 10 to 19 days
    G. 20 to 29 days
    H. All 30 days

The next 6 questions ask about violence-related behaviors.

13. During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club on school property?
   A. 0 days
   B. 1 day
   C. 2 or 3 days
   D. 4 or 5 days
   E. 6 or more days

14. 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

15. 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

16. Have you ever been physically forced to have sexual intercourse when you did not want to?
    A. Yes
    B. No

17. During the past 12 months, how many times did someone you were dating or going out with physically hurt you on purpose? (Count such things as being hit, slammed into something, or injured with an object or weapon.)
    A. I did not date or go out with anyone during the past 12 months
    B. 0 times
    C. 1 time
    D. 2 or 3 times
    E. 4 or 5 times
    F. 6 or more times
18. During the past 12 months, how many times did someone you were dating or going out with force you to do sexual things that you did not want to do? (Count such things as kissing, touching, or being physically forced to have sexual intercourse.)
   A. I did not date or go out with anyone during the past 12 months
   B. 0 times
   C. 1 time
   D. 2 or 3 times
   E. 4 or 5 times
   F. 6 or more times

The next 4 questions ask about bullying. Bullying is when 1 or more students tease, threaten, spread rumors about, hit, shove, or hurt another student over and over again. It is not bullying when 2 students of about the same strength or power argue or fight or tease each other in a friendly way.

19. During the past 12 months, have you ever been bullied on school property?
   A. Yes
   B. No

20. During the past 12 months, have you ever been electronically bullied? (Count being bullied through e-mail, chat rooms, instant messaging, websites, or texting.)
   A. Yes
   B. No

21. During the past 12 months, have you ever been the victim of teasing or name calling because someone thought you were gay, lesbian, or bisexual?
   A. Yes
   B. No

22. During the past 12 months, have you ever bullied someone on school property or electronically bullied someone? (Count bullying through e-mail, chat rooms, instant messaging, websites, or texting.)
   A. Yes
   B. No

The next 6 questions ask about sad feelings and attempted suicide. Sometimes people feel so depressed about the future that they may consider attempting suicide, that is, taking some action to end their own life.

23. 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 some usual activities?
   A. Yes
   B. No

24. During the past 12 months, did you ever seriously consider attempting suicide?
   A. Yes
   B. No

25. During the past 12 months, did you make a plan about how you would attempt suicide?
   A. Yes
   B. No

26. 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

27. If you attempted suicide during the past 12 months, did you ask for help from someone such as a doctor, counselor, or hotline before your attempt?
   A. I did not attempt suicide during the past 12 months
   B. Yes
   C. No

28. If you attempted suicide during the past 12 months, did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?
   A. I did not attempt suicide during the past 12 months
   B. Yes
   C. No
The next 10 questions ask about tobacco use.

29. Have you ever tried cigarette smoking, even one or two puffs?
   A. Yes
   B. No

30. How old were you when you smoked a whole cigarette for the first time?
   A. I have never smoked a whole cigarette
   B. 8 years old or younger
   C. 9 or 10 years old
   D. 11 or 12 years old
   E. 13 or 14 years old
   F. 15 or 16 years old
   G. 17 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 the days you smoked, how many cigarettes did you smoke per day?
   A. I did not smoke cigarettes during the past 30 days
   B. Less than 1 cigarette per day
   C. 1 cigarette per day
   D. 2 to 5 cigarettes per day
   E. 6 to 10 cigarettes per day
   F. 11 to 20 cigarettes per day
   G. More than 20 cigarettes per day

33. During the past 30 days, how did you usually get your own cigarettes? (Select only one response.)
   A. I did not smoke cigarettes during the past 30 days
   B. I bought them in a store such as a convenience store, supermarket, discount store, or gas station
   C. I got them on the Internet
   D. I gave someone else money to buy them for me
   E. I borrowed (or bummed) them from someone else
   F. A person 18 years old or older gave them to me
   G. I took them from a store or family member
   H. I got them some other way

34. When you bought or tried to buy cigarettes in a store during the past 30 days, were you ever asked to show proof of age?
   A. I did not try to buy cigarettes in a store during the past 30 days
   B. Yes, I was asked to show proof of age
   C. No, I was not asked to show proof of age

35. During the past 12 months, did you ever try to quit smoking cigarettes?
   A. I did not smoke during the past 12 months
   B. Yes
   C. No

36. Does anyone who lives with you smoke cigarettes?
   A. Yes
   B. No
37. During the past 30 days, on how many days did you use **chewing tobacco, snuff, or dip**, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen?
   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 how many days did you smoke **cigars, cigarillos, or little cigars**?
   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

41. During the past 30 days, on how many days did you use an electronic vapor product **on school property**?
   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

42. During the past 30 days, how did you **usually** get your own electronic vapor products? (Select only one response.)
   A. I did not use electronic vapor products during the past 30 days  
   B. I bought them in a store such as a convenience store, supermarket, discount store, or gas station  
   C. I got them on the Internet  
   D. I gave someone else money to buy them for me  
   E. I borrowed (or bummed) them from someone else  
   F. A person 18 years old or older gave them to me  
   G. I took them from a store or family member  
   H. I got them some other way

The next 4 questions ask about electronic vapor products, such as blu, NJOY, or Starbuzz. Electronic vapor products include e-cigarettes, e-cigars, e-pipes, vape pipes, vaping pens, e-hookahs, and hookah pens.

39. Have you ever used an electronic vapor product?
   A. Yes  
   B. No

40. During the past 30 days, on how many days did you use an electronic vapor product?
   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 how many days did you use a hookah to smoke 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
44. During the past 30 days, where did you usually use a hookah?
   A. I did not use a hookah during the past 30 days
   B. At my home
   C. At my friend's home
   D. At a hookah bar or lounge
   E. Somewhere else

The next 5 questions ask about drinking alcohol. This includes drinking beer, wine, wine coolers, and liquor such as rum, gin, vodka, or whiskey. For these questions, drinking alcohol does not include drinking a few sips of wine for religious purposes.

45. During your life, on how many days have you had at least one drink of alcohol?
   A. 0 days
   B. 1 or 2 days
   C. 3 to 9 days
   D. 10 to 19 days
   E. 20 to 39 days
   F. 40 to 99 days
   G. 100 or more days

46. 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. 8 years old or younger
   C. 9 or 10 years old
   D. 11 or 12 years old
   E. 13 or 14 years old
   F. 15 or 16 years old
   G. 17 years old or older

47. During the past 30 days, on how many days did you have at least one drink of 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

48. During the past 30 days, on how many days did you have 5 or more drinks of alcohol in a row, that is, within a couple of hours?
   A. 0 days
   B. 1 day
   C. 2 days
   D. 3 to 5 days
   E. 6 to 9 days
   F. 10 to 19 days
   G. 20 or more days

49. During the past 30 days, how did you usually get the alcohol you drank?
   A. I did not drink alcohol during the past 30 days
   B. I bought it in a store such as a liquor store, convenience store, supermarket, discount store, or gas station
   C. I bought it at a restaurant, bar, or club
   D. I bought it at a public event such as a concert or sporting event
   E. I gave someone else money to buy it for me
   F. Someone gave it to me
   G. I took it from a store or family member
   H. I got it some other way

The next 3 questions ask about marijuana use. Marijuana also is called weed, grass, or pot.

50. During your life, how many times have you used marijuana?
   A. 0 times
   B. 1 or 2 times
   C. 3 to 9 times
   D. 10 to 19 times
   E. 20 to 39 times
   F. 40 to 99 times
   G. 100 or more times
51. How old were you when you tried marijuana for the first time?
   A. I have never tried marijuana
   B. 8 years old or younger
   C. 9 or 10 years old
   D. 11 or 12 years old
   E. 13 or 14 years old
   F. 15 or 16 years old
   G. 17 years old or older

52. During the past 30 days, how many times did you use marijuana?
   A. 0 times
   B. 1 or 2 times
   C. 3 to 9 times
   D. 10 to 19 times
   E. 20 to 39 times
   F. 40 or more times

The next 10 questions ask about other drugs.

53. During your life, how many times have you used any form of cocaine, including powder, crack, or freebase?
   A. 0 times
   B. 1 or 2 times
   C. 3 to 9 times
   D. 10 to 19 times
   E. 20 to 39 times
   F. 40 or more times

54. During your life, how many times have you sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high?
   A. 0 times
   B. 1 or 2 times
   C. 3 to 9 times
   D. 10 to 19 times
   E. 20 to 39 times
   F. 40 or more times

55. During your life, how many times have you used heroin (also called smack, junk, or China White)?
   A. 0 times
   B. 1 or 2 times
   C. 3 to 9 times
   D. 10 to 19 times
   E. 20 to 39 times
   F. 40 or more times

56. During your life, how many times have you used ecstasy (also called MDMA)?
   A. 0 times
   B. 1 or 2 times
   C. 3 to 9 times
   D. 10 to 19 times
   E. 20 to 39 times
   F. 40 or more times

57. During your life, how many times have you used synthetic marijuana (also called K2, Spice, fake weed, King Kong, Yucatan Fire, Skunk, or Moon Rocks)?
   A. 0 times
   B. 1 or 2 times
   C. 3 to 9 times
   D. 10 to 19 times
   E. 20 to 39 times
   F. 40 or more times

58. During your life, how many times have you taken steroid pills or shots without a doctor's prescription?
   A. 0 times
   B. 1 or 2 times
   C. 3 to 9 times
   D. 10 to 19 times
   E. 20 to 39 times
   F. 40 or more times

59. During your life, how many times have you taken a prescription drug (such as OxyContin, Percocet, Vicodin, codeine, Adderall, Ritalin, or Xanax) without a doctor's prescription?
   A. 0 times
   B. 1 or 2 times
   C. 3 to 9 times
   D. 10 to 19 times
   E. 20 to 39 times
   F. 40 or more times
60. During the past 30 days, how many times did you take a **prescription drug** (such as OxyContin, Percocet, Vicodin, codeine, Adderall, Ritalin, or Xanax) without a doctor's prescription?
A. 0 times
B. 1 or 2 times
C. 3 to 9 times
D. 10 to 19 times
E. 20 to 39 times
F. 40 or more times

61. The last time you took a **prescription drug** without a doctor's prescription, how did you get it?
A. I have never taken a prescription drug without a doctor's prescription
B. I got it from a friend or a relative
C. I took it from a friend or a relative without asking
D. I bought it at school
E. I bought it outside of school
F. I got it from the internet or online
G. I got it from some other source

62. During the past 30 days, how many times did you take an **over-the-counter drug** to get high?
A. 0 times
B. 1 or 2 times
C. 3 to 9 times
D. 10 to 19 times
E. 20 to 39 times
F. 40 or more times

63. Have you ever had sexual intercourse?
A. Yes
B. No

64. 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

65. 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

66. During the past 3 months, with how many people did you have sexual intercourse?
A. I have never had sexual intercourse
B. I have had sexual intercourse, but not during the past 3 months
C. 1 person
D. 2 people
E. 3 people
F. 4 people
G. 5 people
H. 6 or more people

67. 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
68. The last time you had sexual intercourse, what one method did you or your partner use to prevent pregnancy? (Select only one response.)
   A. I have never had sexual intercourse
   B. No method was used to prevent pregnancy
   C. Birth control pills
   D. Condoms
   E. An IUD (such as Mirena or ParaGard) or implant (such as Implanon or Nexplanon)
   F. A shot (such as Depo-Provera), patch (such as Ortho Evra), or birth control ring (such as NuvaRing)
   G. Withdrawal or some other method
   H. Not sure

69. During your life, with whom have you had sexual contact?
   A. I have never had sexual contact
   B. Females
   C. Males
   D. Females and males

70. Which of the following best describes you?
   A. Heterosexual (straight)
   B. Gay or lesbian
   C. Bisexual
   D. Not sure

The next 4 questions ask about body weight.

71. How do you describe your weight?
   A. Very underweight
   B. Slightly underweight
   C. About the right weight
   D. Slightly overweight
   E. Very overweight

72. Which of the following are you trying to do about your weight?
   A. Lose weight
   B. Gain weight
   C. Stay the same weight
   D. I am not trying to do anything about my weight

73. During the past 30 days, did you exercise to lose weight or to keep from gaining weight?
   A. Yes
   B. No

74. During your last check-up, did your doctor or nurse discuss how to maintain a healthy weight?
   A. I have never had a check-up
   B. Yes
   C. No
   D. Not sure

The next 8 questions ask about food you ate or drank during the past 7 days. Think about all the meals and snacks you had from the time you got up until you went to bed. Be sure to include food you ate at home, at school, at restaurants, or anywhere else.

75. During the past 7 days, how many times did you drink 100% fruit juices such as orange juice, apple juice, or grape juice? (Do not count punch, Kool-Aid, sports drinks, or other fruit-flavored drinks.)
   A. I did not drink 100% fruit juice during the past 7 days
   B. 1 to 3 times during the past 7 days
   C. 4 to 6 times during the past 7 days
   D. 1 time per day
   E. 2 times per day
   F. 3 times per day
   G. 4 or more times per day

76. During the past 7 days, how many times did you eat fruit? (Do not count fruit juice.)
   A. I did not eat fruit during the past 7 days
   B. 1 to 3 times during the past 7 days
   C. 4 to 6 times during the past 7 days
   D. 1 time per day
   E. 2 times per day
   F. 3 times per day
   G. 4 or more times per day
77. During the past 7 days, how many times did you eat green salad?
A. I did not eat green salad during the past 7 days
B. 1 to 3 times during the past 7 days
C. 4 to 6 times during the past 7 days
D. 1 time per day
E. 2 times per day
F. 3 times per day
G. 4 or more times per day

78. During the past 7 days, how many times did you eat potatoes? (Do not count french fries, fried potatoes, or potato chips.)
A. I did not eat potatoes during the past 7 days
B. 1 to 3 times during the past 7 days
C. 4 to 6 times during the past 7 days
D. 1 time per day
E. 2 times per day
F. 3 times per day
G. 4 or more times per day

79. During the past 7 days, how many times did you eat carrots?
A. I did not eat carrots during the past 7 days
B. 1 to 3 times during the past 7 days
C. 4 to 6 times during the past 7 days
D. 1 time per day
E. 2 times per day
F. 3 times per day
G. 4 or more times per day

80. During the past 7 days, how many times did you eat other vegetables? (Do not count green salad, potatoes, or carrots.)
A. I did not eat other vegetables during the past 7 days
B. 1 to 3 times during the past 7 days
C. 4 to 6 times during the past 7 days
D. 1 time per day
E. 2 times per day
F. 3 times per day
G. 4 or more times per day

81. During the past 7 days, how many times did you drink a can, bottle, or glass of soda or pop, such as Coke, Pepsi, or Sprite? (Do not count diet soda or diet pop.)
A. I did not drink soda or pop during the past 7 days
B. 1 to 3 times during the past 7 days
C. 4 to 6 times during the past 7 days
D. 1 time per day
E. 2 times per day
F. 3 times per day
G. 4 or more times per day

82. During the past 7 days, on how many days did you eat breakfast?
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 5 questions ask about physical activity.

83. 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 that increased your heart rate and made you breathe hard some of the time.)
A. 0 days
B. 1 day
C. 2 days
D. 3 days
E. 4 days
F. 5 days
G. 6 days
H. 7 days
84. On an average school day, how many hours do you watch TV?
   A. I do not watch TV on an average school day
   B. Less than 1 hour per day
   C. 1 hour per day
   D. 2 hours per day
   E. 3 hours per day
   F. 4 hours per day
   G. 5 or more hours per day

85. On an average school day, how many hours do you play video or computer games or use a computer for something that is not school work? (Count time spent on things such as Xbox, PlayStation, an iPod, an iPad or other tablet, a smartphone, YouTube, Facebook or other social networking tools, and the Internet.)
   A. I do not play video or computer games or use a computer for something that is not school work
   B. Less than 1 hour per day
   C. 1 hour per day
   D. 2 hours per day
   E. 3 hours per day
   F. 4 hours per day
   G. 5 or more hours per day

86. In an average week when you are in school, on how many days do you go to physical education (PE) classes?
   A. 0 days
   B. 1 day
   C. 2 days
   D. 3 days
   E. 4 days
   F. 5 days

87. In an average week, on how many days does an adult in your household do a physical activity or play sports with you?
   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 3 questions ask about your teeth and mouth.

88. 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. Not sure

89. During the past 12 months, how many times have your teeth or mouth been painful or sore?
   A. 0 times
   B. 1 time
   C. 2 or 3 times
   D. 4 or 5 times
   E. 6 or more times

90. During the past 12 months, how often were you self-conscious or embarrassed because of your teeth or mouth?
   A. Never
   B. Rarely
   C. Sometimes
   D. Most of the time
   E. Always

The next 9 questions ask about other health-related topics.

91. Have you ever been tested for HIV, the virus that causes AIDS? (Do not count tests done if you donated blood.)
   A. Yes
   B. No
   C. Not sure

92. When was the last time you saw a doctor or nurse for a check-up or physical exam when you were not sick or injured?
   A. During the past 12 months
   B. Between 12 and 24 months ago
   C. More than 24 months ago
   D. Never
   E. Not sure
93. Have you ever had the HPV vaccine, a vaccine to prevent human papillomavirus or HPV infection (also called the cervical cancer vaccine, HPV shot, or GARDASIL)?
   A. Yes
   B. No
   C. Not sure

94. Have you ever been taught in school about the benefits of not having sexual intercourse to prevent pregnancy and sexually transmitted diseases (STDs)?
   A. Yes
   B. No
   C. Not sure

95. Have you ever been taught about AIDS or HIV infection in school?
   A. Yes
   B. No
   C. Not sure

96. Have you ever been taught in school about birth control methods?
   A. Yes
   B. No
   C. Not sure

97. Is there at least one teacher or other adult in your school that you can talk to if you have a problem?
   A. Yes
   B. No
   C. Not sure

98. During the past 12 months, how would you describe your grades in school?
   A. Mostly A's
   B. Mostly B's
   C. Mostly C's
   D. Mostly D's
   E. Mostly F's
   F. None of these grades
   G. Not sure

99. How long have you lived in the United States?
   A. Less than 1 year
   B. 1 to 3 years
   C. 4 to 6 years
   D. More than 6 years but not my whole life
   E. I have always lived in the United States

This is the end of the survey.
Thank you very much for your help.