

2025

Montana Youth Risk Behavior Survey



High School



Montana Office of Public Instruction
Elsie Arntzen, Superintendent

2025 Montana High School 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. What is your race and/or ethnicity? **(Select one or more responses.)**
 - A. American Indian or Alaska Native
 - B. Asian
 - C. Black or African American
 - D. Hispanic or Latino
 - E. Middle Eastern or North African
 - F. Native Hawaiian or Pacific Islander
 - G. White

5. 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.

Example

Height	
Feet	Inches
5	7
③	⑩
④	①
●	②
⑥	③
⑦	④
	⑤
	⑥
	●
	⑧
	⑨
	⑩
	⑪

6. 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.

Example

Weight Pounds		
1	5	2
⑩	⑩	⑩
●	①	①
②	②	●
③	③	③
	④	④
	●	⑤
	⑥	⑥
	⑦	⑦
	⑧	⑧
	⑨	⑨

The next 7 questions ask about safety.

7. 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

8. 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

9. During the past 30 days, how many times did you **ride** in a car or other vehicle **driven by someone who had been using marijuana** (also called pot or weed)?
 - A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or more times

10. How often do you wear a seat belt when **driving** a car?
 - A. I do not drive a car
 - B. Never
 - C. Rarely
 - D. Sometimes
 - E. Most of the time
 - F. Always

11. During the past 30 days, how many times did you **drive** a car or other vehicle **when you had been drinking alcohol**?
- I did not drive a car or other vehicle during the past 30 days
 - I drove a car or other vehicle, but not when I had been drinking alcohol
 - 1 time
 - 2 or 3 times
 - 4 or 5 times
 - 6 or more times
12. During the past 30 days, how many times did you **drive** a car or other vehicle **when you had been using marijuana** (also called pot or weed)?
- I did not drive a car or other vehicle during the past 30 days
 - I drove a car or other vehicle, but not when I had been using marijuana
 - 1 time
 - 2 or 3 times
 - 4 or 5 times
 - 6 or more times
13. During the past 30 days, on how many days did you **text or e-mail** while **driving** a car or other vehicle?
- I did not drive a car or other vehicle during the past 30 days
 - I drove a car or other vehicle, but did not text or e-mail while driving
 - 1 or 2 days
 - 3 to 5 days
 - 6 to 9 days
 - 10 to 19 days
 - 20 to 29 days
 - All 30 days

The next 10 questions ask about violence-related behaviors and experiences.

14. During the past 30 days, on how many days did you carry a **weapon** such as a gun, knife, or club **on school property**?
- 0 days
 - 1 day
 - 2 or 3 days
 - 4 or 5 days
 - 6 or more days
15. **During the past 12 months**, on how many days did you carry a **gun**? (Do **not** count the days when you carried a gun only for hunting or for a sport, such as target shooting.)
- 0 days
 - 1 day
 - 2 or 3 days
 - 4 or 5 days
 - 6 or more days

16. 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?
- 0 days
 - 1 day
 - 2 or 3 days
 - 4 or 5 days
 - 6 or more days
17. During the past 12 months, how many times has someone threatened or injured you with a **weapon** such as a gun, knife, or club **on school property**?
- 0 times
 - 1 time
 - 2 or 3 times
 - 4 or 5 times
 - 6 or 7 times
 - 8 or 9 times
 - 10 or 11 times
 - 12 or more times
18. During the past 12 months, how many times were you in a **physical fight**?
- 0 times
 - 1 time
 - 2 or 3 times
 - 4 or 5 times
 - 6 or 7 times
 - 8 or 9 times
 - 10 or 11 times
 - 12 or more times
19. During the past 12 months, how many times were you in a **physical fight on school property**?
- 0 times
 - 1 time
 - 2 or 3 times
 - 4 or 5 times
 - 6 or 7 times
 - 8 or 9 times
 - 10 or 11 times
 - 12 or more times
20. Have you ever been physically forced to have sexual intercourse when you did not want to?
- Yes
 - No
21. During the past 12 months, how many times did **anyone** 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.)
- 0 times
 - 1 time
 - 2 or 3 times
 - 4 or 5 times
 - 6 or more times

22. 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
23. 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

The next question asks about times that you felt you were treated badly or unfairly.

24. During your life, how often have you felt that you were treated badly or unfairly **in school** because of your race or ethnicity?
- A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always

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.

25. During the past 12 months, have you ever been bullied **on school property**?
- A. Yes
 - B. No
26. During the past 12 months, have you ever been **electronically** bullied? (Count being bullied through texting, Instagram, Facebook, or other social media.)
- A. Yes
 - B. No
27. 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

28. During the past 12 months, have you ever bullied someone when you were **not on school property**, such as on your way to or from school or wherever you spend your free time?
- A. Yes
 - B. No

The next question asks about hurting yourself on purpose.

29. During the past 12 months, how many times did you do something to purposely hurt yourself without wanting to die, such as cutting or burning yourself on purpose?
- A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or more times

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.

30. 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
31. During the past 12 months, did you ever **seriously** consider attempting suicide?
- A. Yes
 - B. No
32. During the past 12 months, did you make a plan about how you would attempt suicide?
- A. Yes
 - B. No
33. 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
34. **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

35. **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

The next 2 questions ask about cigarette smoking.

36. How old were you when you first smoked a cigarette, even one or two puffs?
- A. I have never smoked a cigarette, not even one or two puffs
 - 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
37. 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

The next 5 questions ask about electronic vapor products, such as JUUL, Vuse, NJOY, Elf Bar, or Esco Bars. Electronic vapor products include e-cigarettes, vapes, mods, e-cigs, e-hookahs, or vape pens.

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

40. During the past 30 days, how did you **usually** get your electronic vapor products? (Select only **one** response.)
- A. I did not use any electronic vapor products during the past 30 days
 - B. I got or bought them from a friend, family member, or someone else
 - C. I bought them myself in a vape shop or tobacco shop
 - D. I bought them myself in a convenience store, supermarket, discount store, or gas station
 - E. I bought them myself at a mall or shopping center kiosk or stand
 - F. I bought them myself on the Internet, such as from a product website, vape store website, or other website like eBay, Amazon, Facebook Marketplace, or Craigslist
 - G. I took them from a store or another person
 - H. I got them in some other way
41. What is the **main** reason you have used electronic vapor products? (Select only **one** response.)
- A. I have never used an electronic vapor product
 - B. Friend or family member used them
 - C. To get a high or buzz from nicotine
 - D. I was feeling anxious, stressed, or depressed
 - E. I was curious about them
 - F. They are less harmful than other forms of tobacco
 - G. They are available in flavors, such as mint, candy, fruit, or chocolate
 - H. I used them for some other reason
42. During the past 30 days, on how many days did you use an electronic vapor product **to vape marijuana** (also called pot or weed), including THC, THC concentrates, hash oil, or waxes?
- 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

The next 2 questions ask about nicotine pouches, such as ZYN, on!, Velo, or Rogue. These small, flavored pouches are filled with a nicotine-containing powder. Users place nicotine pouches in their mouth and do not need to spit. Nicotine pouches are different from other smokeless tobacco products such as snus, dip, or chewing tobacco, because they do not contain any tobacco leaf. Do not count other forms of smokeless tobacco, such as chewing tobacco, snuff, dip, snus, or dissolvable tobacco when answering these questions.

43. Have you ever used a nicotine pouch, even one or two times?
- A. Yes
 - B. No
44. During the past 30 days, on how many days did you use a nicotine pouch?
- 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

The next 2 questions ask about other tobacco products.

45. During the past 30 days, on how many days did you use **chewing tobacco, snuff, dip, snus, or dissolvable tobacco products**, such as Copenhagen, Grizzly, Skoal, Camel Snus? (Do **not** count any electronic vapor products.)
- 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
46. During the past 30 days, on how many days did you smoke **cigars, cigarillos, or little cigars**, such as Swisher Sweets, Middleton's (including Black & Mild), or Backwoods?
- 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

The next question asks about all tobacco products. Please consider cigarettes, electronic vapor products, smokeless tobacco (chewing tobacco, snuff, dip, snus, or dissolvable tobacco products), cigars (including little cigars or cigarillos), shisha or hookah tobacco, pipe tobacco, heated tobacco products, and nicotine pouches when answering this question.

47. During the past 12 months, did you ever try to **quit** using **all** tobacco products?
- A. I did not use cigarettes, electronic vapor products, smokeless tobacco, cigars, shisha or hookah tobacco, pipe tobacco, heated tobacco products, or nicotine pouches during the past 12 months
 - B. Yes
 - C. No

The next 4 questions ask about drinking alcohol. This includes drinking beer, wine, flavored alcoholic beverages, 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.

48. 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
49. 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
50. During the past 30 days, what is the largest number of alcoholic drinks you had in a row, that is, within a couple of hours?
- A. I did not drink alcohol during the past 30 days
 - B. 1 or 2 drinks
 - C. 3 drinks
 - D. 4 drinks
 - E. 5 drinks
 - F. 6 or 7 drinks
 - G. 8 or 9 drinks
 - H. 10 or more drinks

51. 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 pot or weed. For these questions, do not count CBD-only or hemp products, which come from the same plant as marijuana, but do not cause a high when used alone.

52. 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
53. 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
54. 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 8 questions ask about other drugs.

55. 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

56. 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
57. 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
58. During your life, how many times have you used **methamphetamines** (also called speed, crystal meth, crank, ice, or meth)?
- 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 used **ecstasy** (also called MDMA or Molly)?
- 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 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
61. During the past 12 months, has anyone offered, sold, or given you an illegal drug **on school property**?
- A. Yes
 - B. No
62. During your life, how many times have you used a needle to inject any **illegal** drug into your body?
- A. 0 times
 - B. 1 time
 - C. 2 or more times

The next question asks about fentanyl. Fentanyl is a pain medicine that can be sold as powder, pills, or blotter paper. It can also be mixed with other drugs, such as heroin.

63. During your life, how many times have you used fentanyl 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

The next 5 questions ask about sexual behavior.

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 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
66. Did you drink alcohol or use drugs before you had sexual intercourse the **last time**?
- A. I have never had sexual intercourse
 - B. Yes
 - C. No
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 with an opposite-sex partner, what **one** method did you or your partner use to **prevent pregnancy**? (Select only **one** response.)
- A. I have never had sexual intercourse with an opposite-sex partner
 - B. No method was used to prevent pregnancy
 - C. Birth control pills (Do **not** count emergency contraception such as Plan B or the "morning after" pill.)
 - 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

The next 2 questions ask about body weight.

69. How do **you** describe your weight?
- A. Very underweight
 - B. Slightly underweight
 - C. About the right weight
 - D. Slightly overweight
 - E. Very overweight
70. 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

The next 7 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.

71. 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

72. 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

73. 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

74. 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

75. 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

76. 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

77. 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 2 questions ask about physical activity.

78. 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

79. 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

The next question asks about concussions. A concussion is when a blow or jolt to the head causes problems such as headaches, dizziness, being dazed or confused, difficulty remembering or concentrating, vomiting, blurred vision, or being knocked out.

80. During the past 12 months, how many times did you have a concussion **from playing a sport or being physically active**?
- A. 0 times
 - B. 1 time
 - C. 2 times
 - D. 3 times
 - E. 4 or more times

The next question asks about social media, such as Instagram, TikTok, Snapchat, and X (formerly known as Twitter).

81. How often do you use social media?
- A. I do not use social media
 - B. A few times a month
 - C. About once a week
 - D. A few times a week
 - E. About once a day
 - F. Several times a day
 - G. About once an hour
 - H. More than once an hour

The next 10 questions ask about other health-related topics.

82. 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
83. During the past 30 days, how often was your mental health not good? (Poor mental health includes stress, anxiety, and depression.)
- A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always
84. During the past 12 months, when you have felt sad, empty, hopeless, angry, or anxious, how often did you get the kind of help you needed?
- A. I did not need help with any of these emotions during the past 12 months
 - B. Never
 - C. Rarely
 - D. Sometimes
 - E. Most of the time
 - F. Always
85. Has a doctor or nurse ever told you that you have asthma?
- A. Yes
 - B. No
 - C. Not sure
86. During the past 12 months, did you receive help from a resource teacher, speech therapist, or other special education teacher at school?
- A. Yes
 - B. No

87. On an average school night, how many hours of sleep do you get?
- A. 4 or less hours
 - B. 5 hours
 - C. 6 hours
 - D. 7 hours
 - E. 8 hours
 - F. 9 hours
 - G. 10 or more hours
88. During the past 12 months, where did you usually sleep?
- A. In my parent's or guardian's home
 - B. In the home of a friend, family member, or other person because I had to leave my home or my parent or guardian cannot afford housing
 - C. In a shelter or emergency housing
 - D. In a motel or hotel
 - E. In a car, park, campground, or other public place
 - F. I do not have a usual place to sleep
 - G. Somewhere else
89. During the past 30 days, did you ever sleep away from your parents or guardians because you were kicked out, ran away, or were abandoned?
- A. Yes
 - B. No
90. In an average week when you are in school, on how many days do you take part in organized afterschool, evening, or weekend activities (other than sports teams) such as school clubs; community center groups; cultural activities; music, art, or dance lessons; church groups; or other supervised activities?
- A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days
 - G. 6 days
 - H. 7 days
91. 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

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