

**Global School-based Student Health Survey (GSHS)  
Core-Expanded Questions for the Alcohol Use Module**

Alcohol Use - Recommended core-expanded questions are shaded grey.	
<p><b>Countries in the Americas Region are encouraged to add this question.</b></p> <p>The next question asks about how often you see alcohol advertisements on videos, magazines, or the internet or at movie theaters, sports events, or music concerts.</p> <p>1. During the past 30 days, how often did you see any alcohol advertisements?</p> <p>a. Never b. Rarely c. Sometimes d. Almost daily e. Daily</p>	<p>2. What type of alcohol do you <b>usually</b> drink? <b>SELECT ONLY ONE RESPONSE.</b></p> <p>a. I do not drink alcohol b. Beer, lager, or stout c. Wine d. Spirits, such as COUNTRY SPECIFIC OPTIONS e. COUNTRY SPECIFIC OPTION f. COUNTRY SPECIFIC OPTION g. Some other type</p>
<p>3. How many of your friends frequently drink 5 or more drinks on one occasion?</p> <p>a. None b. A few c. Some d. Most e. All</p>	<p>Staggering when walking, not being able to speak right, and throwing up are some signs of being really drunk.</p> <p>4. How old were you the <b>first time</b> you drank so much alcohol that you were really drunk?</p> <p>a. I have never drank so much alcohol that I was really drunk 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</p>
<p>Staggering when walking, not being able to speak right, and throwing up are some signs of being really drunk.</p> <p>5. During the past 30 days, how many times did you drink so much alcohol that you were really drunk?</p> <p>a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 or more times</p>	<p>6. During the past 30 days, how many times did you get into trouble with your family or friends, miss school, or get into fights as a result of drinking alcohol?</p> <p>a. 0 times b. 1 or 2 times c. 3 to 9 times d. 10 or more times</p>

<p>7. Which of your parents or guardians drink alcohol?</p> <ul style="list-style-type: none"> <li>a. Neither</li> <li>b. My father or male guardian</li> <li>c. My mother or female guardian</li> <li>d. Both</li> <li>e. I do not know</li> </ul>	<p>8. Where were you the <b>last time</b> you had a drink of alcohol?</p> <ul style="list-style-type: none"> <li>a. I have never had a drink of alcohol</li> <li>b. At home</li> <li>c. At someone else's home</li> <li>d. At school</li> <li>e. Out on the street, in a park, or in some other open area</li> <li>f. At a bar, pub, or disco</li> <li>g. In a restaurant</li> <li>h. Some other place</li> </ul>
<p>9. With whom do you <b>usually</b> drink alcohol?</p> <ul style="list-style-type: none"> <li>a. I do not drink alcohol</li> <li>b. With my friends</li> <li>c. With my family</li> <li>d. With persons I have just met</li> <li>e. I usually drink alone</li> </ul>	<p>10. Are you allowed to drink alcohol at home?</p> <ul style="list-style-type: none"> <li>a. I do not drink alcohol</li> <li>b. Yes</li> <li>c. No</li> </ul>
<p>11. During the past 30 days, did anyone refuse to sell you alcohol because of your age?</p> <ul style="list-style-type: none"> <li>a. I did not try to buy alcohol during the past 30 days</li> <li>b. Yes, someone refused to sell me alcohol because of my age</li> <li>c. No, my age did not keep me from buying alcohol</li> </ul>	<p>12. Do any of your brothers or sisters drink alcohol?</p> <ul style="list-style-type: none"> <li>a. I do not have brothers or sisters</li> <li>b. Yes</li> <li>c. No</li> <li>d. I do not know</li> </ul>
<p>13. How many of your friends drink alcohol?</p> <ul style="list-style-type: none"> <li>a. None</li> <li>b. A few</li> <li>c. Some</li> <li>d. Most</li> <li>e. All</li> </ul>	<p>14. Do your parents or guardians know that you drink alcohol?</p> <ul style="list-style-type: none"> <li>a. I do not drink alcohol</li> <li>b. Yes</li> <li>c. No</li> <li>d. I do not know</li> </ul>
<b>Role of the Media and Advertising</b>	
<p>15. When you watch television, videos, or movies, how often do you see actors drinking alcohol?</p> <ul style="list-style-type: none"> <li>a. I do not watch television, videos, or movies</li> <li>b. Never</li> <li>c. Rarely</li> <li>d. Sometimes</li> <li>e. Most of the time</li> <li>f. Always</li> </ul>	<p>16. When you go to sports events, fairs, concerts, community events, or social gatherings how often do you see advertisements for alcohol?</p> <ul style="list-style-type: none"> <li>a. I do not go to sports events, fairs, concerts, community events, or social gatherings</li> <li>b. Never</li> <li>c. Rarely</li> <li>d. Sometimes</li> <li>e. Most of the time</li> <li>f. Always</li> </ul>

<p>17. During the past 30 days, how many advertisements for alcohol have you seen when you watched television?</p> <p>a. I have not watched television during the past 30 days  b. A lot  c. A few  d. None</p>	<p>18. During the past 30 days, how many advertisements for alcohol have you seen on billboards?</p> <p>a. I have not seen a billboard during the past 30 days  b. A lot  c. A few  d. None</p>
<p>19. During the past 30 days, how many advertisements for alcohol have you seen in newspapers or magazines?</p> <p>a. I have not seen a newspaper or magazine during the past 30 days  b. A lot  c. A few  d. None</p>	<p>20. During the past 30 days, how many advertisements for alcohol have you seen on the internet?</p> <p>a. I have not used the internet during the past 30 days  b. A lot  c. A few  d. None</p>
<p>21. Do you have something, such as a t-shirt, pen, backpack, or other item, with an alcohol brand logo on it?</p> <p>a. Yes  b. No</p>	
<b>Knowledge, Attitudes, Skills, and Sources of Information</b>	
<p>22. If one of your best friends offered you a drink of alcohol, would you drink it?</p> <p>a. Definitely not  b. Probably not  c. Probably yes  d. Definitely yes</p>	<p>23. How difficult do you think it would be for you to get alcohol, such as COUNTRY SPECIFIC EXAMPLES, if you wanted to?</p> <p>a. Impossible  b. Very difficult  c. Fairly difficult  d. Fairly easy  e. Very easy  f. I do not know</p>
<p>24. During this school year, were you taught in any of your classes the problems associated with drinking alcohol?</p> <p>a. Yes  b. No  c. I do not know</p>	<p>25. During this school year, were you taught in any of your classes the effects of alcohol use on decision making?</p> <p>a. Yes  b. No  c. I do not know</p>
<p>26. During this school year, were you taught in any of your classes how to tell someone you did not want to drink alcohol?</p> <p>a. Yes  b. No  c. I do not know</p>	

**Global School-based Student Health Survey (GSHS)  
Core-Expanded Questions for the Dietary Behaviours Module**

<b>Dietary Behaviours - Recommended core-expanded questions are shaded grey.</b>	
<p>1. During the past 30 days, how often did you eat breakfast?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>2. How do you describe your weight?</p> <p>a. Very underweight b. Slightly underweight c. About the right weight d. Slightly overweight e. Very overweight</p>
<p>3. Which of the following are you trying to do about your weight?</p> <p>a. I am <b>not trying to do anything</b> about my weight b. <b>Lose</b> weight c. <b>Gain</b> weight d. <b>Stay</b> the same weight</p>	<p>4. During the past 12 months, have you been weighed and measured?</p> <p>a. Yes b. No</p>
<p>5. What is the <b>main</b> reason you do not eat breakfast?</p> <p>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</p>	<p>6. During the past 30 days, did you <b>exercise</b> to lose weight or to keep from gaining weight?</p> <p>a. Yes b. No</p>
<p>7. During the past 30 days, did you <b>take any diet pills, powders, or liquids</b> without a doctor's advice to lose weight or to keep from gaining weight?</p> <p>a. Yes b. No</p>	<p>8. During the past 30 days, did you <b>eat less food, fewer calories, or foods low in fat</b> to lose weight or to keep from gaining weight?</p> <p>a. Yes b. No</p>
<p>9. During the past 30 days, did you <b>go without eating for 24 hours or more</b> (also called fasting) to lose weight or to keep from gaining weight?</p> <p>a. Yes b. No</p>	<p>10. During the past 30 days, did you <b>vomit or take laxatives</b> to lose weight or to keep from gaining weight?</p> <p>a. Yes b. No</p>
<p>11. During the past 30 days, did you <b>exercise</b> to gain weight?</p> <p>a. Yes b. No</p>	<p>12. During the past 30 days, did you <b>eat more food, more calories, or foods high in fat</b> to gain weight?</p> <p>a. Yes b. No</p>
<p>13. During the past 30 days, did you <b>take any pills, powders, or liquids</b> without a doctor's advice to gain weight?</p> <p>a. Yes b. No</p>	<p>14. During the past 30 days, how often did you bring your lunch to school?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>

<p>15. During the past 30 days, how often was breakfast offered to you at school?</p> <ul style="list-style-type: none"> <li>a. Never</li> <li>b. Rarely</li> <li>c. Sometimes</li> <li>d. Most of the time</li> <li>e. Always</li> </ul>	<p>16. During the past 30 days, how often was lunch offered to you at school?</p> <ul style="list-style-type: none"> <li>a. Never</li> <li>b. Rarely</li> <li>c. Sometimes</li> <li>d. Most of the time</li> <li>e. Always</li> </ul>
<p>17. During the past 30 days, how many times <u>per day</u> did you <b>usually</b> drink milk or eat milk products, such as COUNTRY SPECIFIC EXAMPLES?</p> <ul style="list-style-type: none"> <li>a. I did not drink milk or eat milk products during the past 30 days</li> <li>b. Less than one time per day</li> <li>c. 1 time per day</li> <li>d. 2 times per day</li> <li>e. 3 times per day</li> <li>f. 4 times per day</li> <li>g. 5 or more times per day</li> </ul>	<p>18. During the past 30 days, how many times <u>per day</u> did you <b>usually</b> eat salty foods, such as COUNTRY SPECIFIC EXAMPLES OF SALTY FOODS?</p> <ul style="list-style-type: none"> <li>a. I did not eat salty foods</li> <li>b. Less than 1 time per day</li> <li>c. 1 time per day</li> <li>d. 2 times per day</li> <li>e. 3 times per day</li> <li>f. 4 times per day</li> <li>g. 5 or more times per day</li> </ul>
<p>19. During the past 30 days, how many times <u>per day</u> did you <b>usually</b> eat foods high in fat, such as COUNTRY SPECIFIC EXAMPLES OF HIGH FAT FOODS?</p> <ul style="list-style-type: none"> <li>a. I did not eat foods high in fat</li> <li>b. Less than 1 time per day</li> <li>c. 1 time per day</li> <li>d. 2 times per day</li> <li>e. 3 times per day</li> <li>f. 4 times per day</li> <li>g. 5 or more times per day</li> </ul>	<p>20. During the past 30 days, how many times <u>per day</u> did you <b>usually</b> drink fruit juice, such as COUNTRY SPECIFIC EXAMPLES?</p> <ul style="list-style-type: none"> <li>a. I did not drink fruit juice during the past 30 days</li> <li>b. Less than one time per day</li> <li>c. 1 time per day</li> <li>d. 2 times per day</li> <li>e. 3 times per day</li> <li>f. 4 times per day</li> <li>g. 5 or more times per day</li> </ul>
<b>Role of the Media and Advertising</b>	
<p>The next 7 questions ask about how carbonated soft drinks, such as COUNTRY SPECIFIC EXAMPLES (<i>Do not include diet soft drinks</i>) and foods from fast food restaurants, such as COUNTRY SPECIFIC EXAMPLES, are advertised and sold.</p> <p>21. When you watch television, videos, or movies, how often do you see advertisements for carbonated soft drinks or fast foods?</p> <ul style="list-style-type: none"> <li>a. I do not watch television, videos, or movies</li> <li>b. Never</li> <li>c. Rarely</li> <li>d. Sometimes</li> <li>e. Most of the time</li> <li>f. Always</li> </ul>	<p>22. During the past 30 days, how many advertisements for carbonated soft drinks or fast foods did you see when you watched <b>television</b>?</p> <ul style="list-style-type: none"> <li>a. I did not watch television during the past 30 days</li> <li>b. A lot</li> <li>c. A few</li> <li>d. None</li> </ul>

<p>23. During the past 30 days, how many advertisements for carbonated soft drinks or fast foods did you see on the <b>internet</b>?</p> <p>a. I did not use the internet during the past 30 days  b. A lot  c. A few  d. None</p>	<p>24. During the past 30 days, how many <b>text messages or mobile phone calls</b> did you get that encouraged you to go to a carbonated soft drink or fast food company website?</p> <p>a. I did not receive text messages or mobile phone calls during the past 30 days  b. A lot  c. A few  d. None</p>
<p>25. Can you buy <b>carbonated soft drinks</b> or get them for free in your school?</p> <p>a. Yes  b. No</p>	<p>26. Can you buy <b>fast foods</b> or get them for free in your school?</p> <p>a. Yes  b. No</p>
<p>27. During the past 30 days, how many advertisements for carbonated soft drinks or fast foods did you see in your school?</p> <p>a. I did not see any advertisements for carbonated soft drinks or fast foods in my school  b. A lot  c. A few  d. None</p>	
<b>Knowledge, Attitudes, Skills, and Sources of Information</b>	
<p>28. During this school year, were you taught in any of your classes the benefits of healthy eating?</p> <p>a. Yes  b. No  c. I do not know</p>	<p>29. During this school year, were you taught in any of your classes the benefits of eating more fruits and vegetables?</p> <p>a. Yes  b. No  c. I do not know</p>
<p>30. During this school year, were you taught in any of your classes how to safely prepare or store food?</p> <p>a. Yes  b. No  c. I do not know</p>	<p>31. During this school year, were you taught in any of your classes healthy ways to gain weight?</p> <p>a. Yes  b. No  c. I do not know</p>
<p>32. During this school year, were you taught in any of your classes healthy ways to lose weight?</p> <p>a. Yes  b. No  c. I do not know</p>	

## Global School-based Student Health Survey (GSHS) Core-Expanded Questions for the Drug Use Module

Recommended core-expanded questions are shaded grey.	
<p>1. Which <b>one</b> of the drugs listed below did you try first? SELECT ONLY ONE RESPONSE.</p> <ul style="list-style-type: none"> <li>a. I have never tried any of these drugs</li> <li>b. Marijuana (also called COUNTRY SPECIFIC SLANG TERMS FOR MARIJUANA) or hashish (also called COUNTRY SPECIFIC SLANG TERMS FOR HASHISH)</li> <li>c. Tranquilisers or sedatives, such as COUNTRY SPECIFIC EXAMPLES OF TRANQUILISERS AND SEDATIVES, without a doctor or nurse telling you to do so</li> <li>d. Amphetamines (also called COUNTRY SPECIFIC SLANG TERMS FOR AMPHETAMINES)</li> <li>e. Methamphetamine (also called COUNTRY SPECIFIC SLANG TERMS FOR METHAMPHETAMINES)</li> <li>f. Crack or other forms of cocaine (also called COUNTRY SPECIFIC SLANG TERMS FOR COCAINE, CRACK, OR FREEBASE FORMS OF COCAINE)</li> <li>g. Solvents or inhalants (also called COUNTRY SPECIFIC SLANG TERMS FOR SOLVENTS OR INHALANTS)</li> <li>h. Some other drug</li> </ul>	<p>2. Which <b>one</b> of the drugs listed below have you used most often? SELECT ONLY ONE RESPONSE.</p> <ul style="list-style-type: none"> <li>a. I have never tried any of these drugs</li> <li>b. Marijuana (also called COUNTRY SPECIFIC SLANG TERMS FOR MARIJUANA) or hashish (also called COUNTRY SPECIFIC SLANG TERMS FOR HASHISH)</li> <li>c. Tranquilisers or sedatives, such as COUNTRY SPECIFIC EXAMPLES OF TRANQUILISERS AND SEDATIVES, without a doctor or nurse telling you to do so</li> <li>d. Amphetamines (also called COUNTRY SPECIFIC SLANG TERMS FOR AMPHETAMINES)</li> <li>e. Methamphetamine (also called COUNTRY SPECIFIC SLANG TERMS FOR METHAMPHETAMINES)</li> <li>f. Crack or other forms of cocaine (also called COUNTRY SPECIFIC SLANG TERMS FOR COCAINE, CRACK, OR FREEBASE FORMS OF COCAINE)</li> <li>g. Solvents or inhalants (also called COUNTRY SPECIFIC SLANG TERMS FOR SOLVENTS OR INHALANTS)</li> <li>h. Some other drug</li> </ul>
<p>3. During the past 12 months, how many times have you used drugs?</p> <ul style="list-style-type: none"> <li>a. 0 times</li> <li>b. 1 or 2 times</li> <li>c. 3 to 9 times</li> <li>d. 10 or more times</li> </ul>	<p>4. During the past 12 months, how many times have you used COUNTRY SPECIFIC OPTION?*</p> <ul style="list-style-type: none"> <li>a. 0 times</li> <li>b. 1 or 2 times</li> <li>c. 3 to 9 times</li> <li>d. 10 or more times</li> </ul> <p>*This question can be written to address any type of drug listed above in Q1 or Q2.</p>

<p>5. During the past 30 days, how many times have you used COUNTRY SPECIFIC OPTION?*</p> <ul style="list-style-type: none"> <li>a. 0 times</li> <li>b. 1 or 2 times</li> <li>c. 3 to 9 times</li> <li>d. 10 or more times</li> </ul> <p>*This question can be written to address any type of drug listed above in Q1 or Q2.</p>	<p>6. How old were you when you first used COUNTRY SPECIFIC OPTION?*</p> <ul style="list-style-type: none"> <li>a. I have never used COUNTRY SPECIFIC OPTION</li> <li>b. 7 years old or younger</li> <li>c. 8 or 9 years old</li> <li>d. 10 or 11 years old</li> <li>e. 12 or 13 years old</li> <li>f. 14 or 15 years old</li> <li>g. 16 years old or older</li> </ul> <p>*This question can be written to address any type of drug listed above in Q1 or Q2.</p>
<p>7. How difficult do you think it would be for you to get drugs such as COUNTRY SPECIFIC EXAMPLES if you wanted to?</p> <ul style="list-style-type: none"> <li>a. Impossible</li> <li>b. Very difficult</li> <li>c. Fairly difficult</li> <li>d. Fairly easy</li> <li>e. Very easy</li> <li>f. I do not know</li> </ul>	<p>8. How difficult do you think it would be for you to get COUNTRY SPECIFIC OPTION if you wanted to?*</p> <ul style="list-style-type: none"> <li>a. Impossible</li> <li>b. Very difficult</li> <li>c. Fairly difficult</li> <li>d. Fairly easy</li> <li>e. Very easy</li> <li>f. I do not know</li> </ul> <p>*This question can be written to address any type of drug listed above in Q1 or Q2.</p>
<p>9. During the past 30 days, has anyone offered, sold, or given you a drug, such as COUNTRY SPECIFIC EXAMPLES?</p> <ul style="list-style-type: none"> <li>a. Yes</li> <li>b. No</li> </ul>	<p>10. During your life, how many times have you used a needle to inject any illegal drug into your body?</p> <ul style="list-style-type: none"> <li>a. 0 times</li> <li>b. 1 or 2 times</li> <li>c. 3 to 9 times</li> <li>d. 10 or more times</li> </ul>
<p>11. During your life, how many times have you shared needles or syringes used to inject any drug into your body?</p> <ul style="list-style-type: none"> <li>a. 0 times</li> <li>b. 1 or 2 times</li> <li>c. 3 to 9 times</li> <li>d. 10 or more times</li> </ul>	<p>12. During this school year, were you taught in any of your classes the problems associated with using drugs, such as COUNTRY SPECIFIC EXAMPLES?</p> <ul style="list-style-type: none"> <li>a. Yes</li> <li>b. No</li> <li>c. I do not know</li> </ul>

**Global School-based Student Health Survey (GSHS)  
Core-Expanded Questions for the Hygiene Module**

Hygiene - Recommended core-expanded questions are shaded grey.	
<p>1. Is there a source of clean water for drinking <b>at school</b>?</p> <p>a. Yes b. No</p>	<p>2. During the past 30 days, how did you <b>usually</b> wash your hands before eating?</p> <p>a. I did not wash my hands before eating during the past 30 days b. In a dish of water used by others c. In a dish of water used only by me d. Under running water e. Some other way</p>
<p>3. During the past 30 days, how did you <b>usually</b> wash your hands before eating <b>at school</b>?</p> <p>a. I did not wash my hands before eating at school b. In a dish of water used by others c. In a dish of water used only by me d. Under running water e. Some other way</p>	<p>4. During the past 30 days, how often did you wash your hands before eating <b>at school</b>?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>5. During the past 30 days, how often did you wash your hands after using the toilet or latrines <b>at school</b>?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>6. During the past 30 days, how often did you use soap when washing your hands <b>at school</b>?</p> <p>a. I did not wash my hands at school b. Never c. Rarely d. Sometimes e. Most of the time f. Always</p>
<p>7. Is there a place for you to wash your hands after using the toilet or latrine <b>at school</b>?</p> <p>a. There are no toilets or latrines at school b. Yes c. No</p>	<p>8. Is there a place for you to wash your hands before eating <b>at school</b>?</p> <p>a. Yes b. No</p>
<p>9. Do you bring water from home to drink while you are <b>at school</b>?</p> <p>a. Yes b. No</p>	<p>10. How often do you drink water from the water source <b>at school</b>?</p> <p>a. There is not a water source at school b. Never c. Rarely d. Sometimes e. Most of the time f. Always</p>

<p>11. During the past 30 days, how often did you use the toilets or latrines <b>at school</b>?</p> <p>a. There are no toilets or latrines at school  b. Never  c. Rarely  d. Sometimes  e. Most of the time  f. Always</p>	<p>12. Are there separate toilets or latrines for boys and girls <b>at school</b>?</p> <p>a. There are no toilets or latrines at school  b. Yes  c. No</p>
<p>13. Are the toilets or latrines safe <b>at school</b>?</p> <p>a. There are no toilets or latrines at school  b. Yes  c. No</p>	<p>14. Are the toilets or latrines clean <b>at school</b>?</p> <p>a. There are no toilets or latrines at school  b. Yes  c. No</p>
<p>15. Are the toilets or latrines easy to get to <b>at school</b>?</p> <p>a. There are no toilets or latrines at school  b. Yes  c. No</p>	<p>16. Are the toilets or latrines private <b>at school</b>?</p> <p>a. There are no toilets or latrines at school  b. Yes  c. No</p>
<b>Oral Health</b>	
<p>17. How would you describe the health of your teeth?</p> <p>a. Excellent  b. Very good  c. Good  d. Average  e. Poor  f. Very poor</p>	<p>18. How would you describe the health of your gums?</p> <p>a. Excellent  b. Very good  c. Good  d. Average  e. Poor  f. Very poor</p>
<p>19. During the past 12 months, did a tooth ache cause you to miss classes or school?</p> <p>a. Yes  b. No</p>	<p>20. During the past 12 months, how often did you have a tooth ache or feel discomfort because of your teeth?</p> <p>a. Never  b. Rarely  c. Sometimes  d. Most of the time  e. Always</p>
<p>21. Do you use toothpaste that contains fluoride?</p> <p>a. Yes  b. No  c. I do not know</p>	<p>22. When was the last time you saw a dentist for a check-up, exam, teeth cleaning, or other dental work?</p> <p>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</p>

<p>23. During the past 12 months, how many times did you go to the dentist?</p> <p>a. 0 times b. 1 time c. 2 times d. 3 times e. 4 times f. 5 or more times</p>	<p>24. What was the main reason for your last visit to the dentist?</p> <p>a. I have never been to the dentist b. Something was wrong with my teeth or gums c. For follow-up treatment from an earlier visit d. For a check-up or exam e. I do not know</p>
<p>25. Which of the following do you use most often to clean your teeth or gums?</p> <p>a. Toothbrush b. Wooden toothpicks c. Plastic toothpicks d. Dental floss or thread e. Charcoal f. Chew stick or COUNTRY SPECIFIC OPTION g. Something else</p>	<p>26. Do you have difficulty biting hard foods?</p> <p>a. Yes b. No</p>
<p>27. Are you satisfied with the appearance of your teeth?</p> <p>a. Yes b. No</p>	<p>28. Do you have difficulty chewing?</p> <p>a. Yes b. No</p>
<p>29. Do you avoid smiling or laughing because of how your teeth look?</p> <p>a. Yes b. No</p>	<p>30. Do other students in your school make fun of your teeth?</p> <p>a. Yes b. No</p>
<p>31. How many cavities have you had in your permanent teeth?</p> <p>a. 0 cavities b. 1 cavity c. 2 or 3 cavities d. 4 or 5 cavities e. 6 or more cavities f. I do not know</p>	
<b>Knowledge, Attitudes, Skills, and Sources of Information</b>	
<p>32. During this school year, were you taught in any of your classes the importance of hand washing?</p> <p>a. Yes b. No c. I do not know</p>	<p>33. During this school year, were you taught in any of your classes the importance of cleaning or brushing your teeth?</p> <p>a. Yes b. No c. I do not know</p>
<p>34. During this school year, were you taught in any of your classes where to get treatment for a worm infection?</p> <p>a. Yes b. No c. I do not know</p>	<p>35. During this school year, were you taught in any of your classes how to avoid worm infections?</p> <p>a. Yes b. No c. I do not know</p>

**Global School-based Student Health Survey (GSHS)  
Core-Expanded Questions for the Mental Health Module**

Mental Health - Recommended core-expanded questions are shaded grey.	
<p>1. During the past 12 months, how often have you been so worried about something that you wanted to use alcohol or other drugs to feel better?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>2. During the past 12 months, how often have you been so worried about something that you could not eat or did not feel hungry?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>3. 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?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>4. 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?</p> <p>a. <b>I did not attempt suicide</b> during the past 12 months b. Yes c. No</p>
Knowledge, Attitudes, Skills, and Sources of Information	
<p>5. During this school year, were you taught in any of your classes how to manage anger?</p> <p>a. Yes b. No c. I do not know</p>	<p>6. During this school year, were you taught in any of your classes signs of depression and suicidal behavior?</p> <p>a. Yes b. No c. I do not know</p>
<p>7. During this school year, were you taught in any of your classes what to do if a friend is thinking about suicide?</p> <p>a. Yes b. No c. I do not know</p>	<p>8. During this school year, were you taught in any of your classes how to handle stress in healthy ways?</p> <p>a. Yes b. No c. I do not know</p>

**Global School-based Student Health Survey (GSHS)  
Core-Expanded Questions for the Physical Activity Module**

<b>Physical Activity - Recommended core-expanded questions are shaded grey.</b>	
<p>1. During the past 12 months, on how many sports teams did you play?</p> <p>a. 0 teams b. 1 team c. 2 teams d. 3 or more teams</p>	<p>2. During the past 7 days, on how many days did you do exercises to strengthen or tone your muscles, such as push-ups, sit-ups, or weight lifting?</p> <p>a. 0 days b. 1 day c. 2 days d. 3 days e. 4 days f. 5 days g. 6 days h. 7 days</p>
<p>3. During the past 7 days, on how many days did you do stretching exercises, such as toe touching, knee bending, or leg stretching?</p> <p>a. 0 days b. 1 day c. 2 days d. 3 days e. 4 days f. 5 days g. 6 days h. 7 days</p>	<p>4. On an average school night, how many hours of sleep do you get?</p> <p>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</p>
<b>Knowledge, Attitudes, Skills, and Sources of Information</b>	
<p>5. During this school year, were you taught in any of your classes how to develop a physical fitness plan for yourself?</p> <p>a. Yes b. No c. I do not know</p>	<p>6. During this school year, were you taught in any of your classes about preventing injury during physical activity?</p> <p>a. Yes b. No c. I do not know</p>
<p>7. During this school year, were you taught in any of your classes the benefits of physical activity?</p> <p>a. Yes b. No c. I do not know</p>	<p>8. During this school year, were you taught in any of your classes about opportunities for physical activity in your community?</p> <p>a. Yes b. No c. I do not know</p>

**Global School-based Student Health Survey (GSHS)  
Core-Expanded Questions for the Protective Factors Module**

<p><b>PAHO countries are encouraged to add this question.</b></p> <p>1. Do you think of yourself as a religious or spiritual person?</p> <p>a. Yes b. No</p>	
<b>Connection to Parents</b>	
<p>2. During the past 30 days, how often did your parents or guardians comfort you?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>3. During the past 30 days, how often did your parents or guardians respect your sense of freedom?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>4. During the past 30 days, how often did your parents or guardians support and encourage you?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>5. During the past 30 days, how often did your parents or guardians understand you?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>6. During the past 30 days, how often did your parents or guardians give you attention and listen to you?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>7. During the past 30 days, how often did your parents or guardians have open communication with you?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>8. During the past 30 days, how often did your parents or guardians show you affection?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>9. During the past 30 days, how often did your parents or guardians spend time with you?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>

<p>10. During the past 30 days, how often did your parents or guardians praise you?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>11. During the past 30 days, how often did your parents or guardians give you advice and guidance?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>12. During the past 30 days, how often did your parents or guardians provide for your necessities?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>13. During the past 30 days, how often did your parents or guardians buy you things?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>14. During the past 30 days, how often did your parents or guardians give you money?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	
<b>Parental Disrespect of Individuality/Worth</b>	
<p>15. During the past 30 days, how often did your parents or guardians ridicule you or put you down (for example, say you were stupid or useless)?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>16. During the past 30 days, how often did your parents or guardians expect too much of you (for example, to do better in school or be a better person)?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>17. During the past 30 days, how often did your parents or guardians embarrass you in public or in front of your friends?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>18. During the past 30 days, how often did your parents or guardians unfairly compare you to someone else (such as to your brother or sister or to themselves)?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>

<p>19. During the past 30 days, how often did your parents or guardians not respect you as a person (for example, not let you talk or favour someone else more than you)?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>20. During the past 30 days, how often did your parents or guardians ignore you (for example, walk away from you or not pay attention to you)?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>21. During the past 30 days, how often did your parents or guardians try to make you feel guilty for something you had done or something they thought you should do?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	
<b>Parent Monitoring and Knowledge of Friends and Activities</b>	
<p>22. During the past 30 days, how often did your parents or guardians <b>try to know</b> who your friends were?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>23. During the past 30 days, how often did your parents or guardians <b>really know</b> who your friends were?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>24. During the past 30 days, how often did your parents or guardians <b>try to know</b> where you went at night?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>25. During the past 30 days, how often did your parents or guardians <b>really know</b> where you went at night?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>
<p>26. During the past 30 days, how often did your parents or guardians <b>try to know</b> how you spent your money?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>	<p>27. During the past 30 days, how often did your parents or guardians <b>really know</b> how you spent your money?</p> <p>a. Never b. Rarely c. Sometimes d. Most of the time e. Always</p>

<p>28. During the past 30 days, how often did your parents or guardians <b>try to know</b> where you were most afternoons after school?</p> <ul style="list-style-type: none"><li>a. Never</li><li>b. Rarely</li><li>c. Sometimes</li><li>d. Most of the time</li><li>e. Always</li></ul>	<p>29. During the past 30 days, how often did your parents or guardians <b>really know</b> where you were most afternoons after school?</p> <ul style="list-style-type: none"><li>a. Never</li><li>b. Rarely</li><li>c. Sometimes</li><li>d. Most of the time</li><li>e. Always</li></ul>
<p>30. During the past 30 days, how often did your parents or guardians <b>try to know</b> what you did with your free time?</p> <ul style="list-style-type: none"><li>a. Never</li><li>b. Rarely</li><li>c. Sometimes</li><li>d. Most of the time</li><li>e. Always</li></ul>	

**Global School-based Student Health Survey (GSHS)  
Core-Expanded Questions for the Module on Sexual Behaviours that Contribute  
to HIV Infection, Other STI, and Unintended Pregnancy**

Sexual Behaviors - Recommended core-expanded questions are shaded grey.	
<p><b>PAHO countries are encouraged to add this question.</b></p> <p>6. If you wanted to get a condom or [COUNTRY SPECIFIC SLANG TERM FOR CONDOM], how would you most likely get it?</p> <ul style="list-style-type: none"> <li>a. I would get it from a vending machine</li> <li>b. I would get it in a store or shop or from a street vendor</li> <li>c. I would get it from a pharmacy, clinic, or hospital</li> <li>d. I would give someone else money to buy it for me</li> <li>e. COUNTRY SPECIFIC OPTION</li> <li>f. I would get it some other way</li> <li>g. I do not know</li> </ul>	<p>2. Did you drink alcohol or use other drugs before you had sexual intercourse the <b>last time</b>?</p> <ul style="list-style-type: none"> <li>a. I have never had sexual intercourse</li> <li>b. Yes</li> <li>c. No</li> </ul>
<p>3. The <b>first time</b> you had sexual intercourse, did you or your partner use a condom or [COUNTRY SPECIFIC SLANG TERM FOR CONDOM]?</p> <ul style="list-style-type: none"> <li>a. I have never had sexual intercourse</li> <li>b. Yes</li> <li>c. No</li> </ul>	<p>4. The <b>first time</b> you had sexual intercourse, did you or your partner use any other method of birth control or protection, such as withdrawal, rhythm (safe time), birth control pills, or any other method to prevent pregnancy?</p> <ul style="list-style-type: none"> <li>a. I have never had sexual intercourse</li> <li>b. Yes</li> <li>c. No</li> </ul>
<p>5. How often do you or your partner use a condom or [COUNTRY SPECIFIC SLANG TERM FOR CONDOM] when you have sexual intercourse?</p> <ul style="list-style-type: none"> <li>a. I have never had sexual intercourse</li> <li>b. Never</li> <li>c. Rarely</li> <li>d. Sometimes</li> <li>e. Most of the time</li> <li>f. Always</li> </ul>	<p>6. During the past 12 months, how many times did you have sexual intercourse?</p> <ul style="list-style-type: none"> <li>a. 0 times</li> <li>b. 1 time</li> <li>c. 2 or 3 times</li> <li>d. 4 to 9 times</li> <li>e. 10 to 29 times</li> <li>f. 30 or more times</li> </ul>
<p>7. With whom have you had sexual intercourse?</p> <ul style="list-style-type: none"> <li>a. I have never had sexual intercourse</li> <li>b. Females only</li> <li>c. Males only</li> <li>d. Both females and males</li> </ul>	<p>8. What is the <b>main</b> reason you have <u>not</u> had sexual intercourse?</p> <ul style="list-style-type: none"> <li>a. I have had sexual intercourse</li> <li>b. I want to wait until I am older</li> <li>c. I want to wait until I am married</li> <li>d. I do not want to risk getting pregnant</li> <li>e. I do not want to risk getting a sexually transmitted infection, such as HIV or AIDS</li> <li>f. I have not had a chance to have sex or met anyone that I wanted to have sex with</li> <li>g. It is against my religious values</li> <li>h. Some other reason</li> </ul>

<p>9. Have you ever been told by a doctor or nurse that you had a sexually transmitted infection, such as HIV, AIDS, or [COUNTRY SPECIFIC OPTIONS]?</p> <p>a. Yes b. No c. I do not know</p>	<p>10. Have you ever been tested for HIV infection or AIDS?</p> <p>a. Yes b. No</p>
<p>11. How many times have you been pregnant or gotten someone pregnant?</p> <p>a. 0 times b. 1 time c. 2 or more times d. I do not know</p>	<p>12. If you wanted to get birth control, how would you most likely get it?</p> <p>a. I would get it from a vending machine b. I would get it in a store or shop or from a street vendor c. I would get it from a pharmacy, clinic, or hospital d. I would give someone else money to buy it for me e. I would borrow it from someone else f. COUNTRY SPECIFIC OPTION g. I would get it some other way h. I do not know</p>
<b>Knowledge, Attitudes, Skills, and Sources of Information</b>	
<p>13. Have you ever heard of HIV infection or AIDS?</p> <p>a. Yes b. No</p>	<p>14. Can a pregnant woman with HIV infection or AIDS infect her unborn child?</p> <p>a. Yes b. No c. I do not know</p>
<p>15. Can people protect themselves from HIV infection or AIDS by using a condom or [COUNTRY SPECIFIC SLANG TERM FOR CONDOM] correctly every time they have sexual intercourse?</p> <p>a. Yes b. No c. I do not know</p>	<p>16. Can people get HIV infection or AIDS from mosquito bites?</p> <p>a. Yes b. No c. I do not know</p>
<p>17. Can people get HIV infection or AIDS by sharing a meal with someone who is infected?</p> <p>a. Yes b. No c. I do not know</p>	<p>18. Can people protect themselves from HIV infection or AIDS by having one uninfected faithful partner?</p> <p>a. Yes b. No c. I do not know</p>
<p>19. Can a healthy-looking person be infected with HIV?</p> <p>a. Yes b. No c. I do not know</p>	<p>20. Do you know how to tell someone you do not want to have sexual intercourse with them <b>unless</b> a condom or [COUNTRY SPECIFIC SLANG TERM FOR CONDOM] is used?</p> <p>a. Yes b. No c. I do not know</p>

<p>21. Do you know how to tell someone you do not want to have sexual intercourse with them?</p> <p>a. Yes b. No c. I do not know</p>	<p>22. Can a woman with HIV infection or AIDS infect her newborn child while breastfeeding?</p> <p>a. Yes b. No c. I do not know</p>
<p>23. Have you ever talked about HIV infection or AIDS with your parents or guardians?</p> <p>a. Yes b. No</p>	<p>24. During this school year, were you taught in any of your classes how to use a condom or [COUNTRY SPECIFIC SLANG TERM FOR CONDOM]?</p> <p>a. Yes b. No c. I do not know</p>
<p>25. During this school year, were you taught in any of your classes how to avoid HIV infection or AIDS?</p> <p>a. Yes b. No c. I do not know</p>	<p>26. During this school year, were you taught in any of your classes the benefits of <b>not</b> having sexual intercourse?</p> <p>a. Yes b. No c. I do not know</p>
<p>27. During this school year, were you taught in any of your classes where to get tested for HIV infection or AIDS?</p> <p>a. Yes b. No c. I do not know</p>	<p>28. During this school year, were you taught in any of your classes about the effectiveness of condoms or [COUNTRY SPECIFIC SLANG TERM FOR CONDOMS]?</p> <p>a. Yes b. No c. I do not know</p>
<p>29. During this school year, were you taught in any of your classes how to tell someone you do not want to have sexual intercourse with them?</p> <p>a. Yes b. No c. I do not know</p>	<p>30. During this school year, were you taught in any of your classes how to tell someone you do not want to have sexual intercourse <b>unless</b> a condom or [COUNTRY SPECIFIC SLANG TERM FOR CONDOM] is used?</p> <p>a. Yes b. No c. I do not know</p>
<p>31. During this school year, were you taught in any of your classes the importance of being kind and supportive to persons with HIV infection or AIDS?</p> <p>a. Yes b. No c. I do not know</p>	<p>32. During this school year, were you taught in any of your classes the signs and symptoms of HIV infection or AIDS?</p> <p>a. Yes b. No c. I do not know</p>
<p>33. During this school year, were you taught in any of your classes where to get treatment for HIV infection or AIDS?</p> <p>a. Yes b. No c. I do not know</p>	

## Global School-based Student Health Survey (GSHS) Core-Expanded Questions for the Tobacco Use Module

See the latest version of the Global Youth Tobacco Survey (GYTS) questionnaire for additional questions on tobacco use.

<b>PAHO countries are encouraged to add the following 2 questions.</b>	
1. At any time during the next 12 months, do you think you will smoke a cigarette?  a. Definitely not b. Probably not c. Probably yes d. Definitely yes	2. If one of your best friends offered you a cigarette, would you smoke it?  a. Definitely not b. Probably not c. Probably yes d. Definitely yes

**Global School-based Student Health Survey (GSHS)  
Core-Expanded Questions for the Violence and Unintentional Injury Module**

<b>Violence - Recommended core-expanded questions are shaded grey.</b>	
<p><b>PAHO countries are encouraged to add this question.</b></p> <p>Violence occurs when a person or a group of people attack other people or a group of people with insults, bullying, hits, assault, robbery, or rape.</p> <p>1. Do you belong to any violent group?</p> <p style="margin-left: 20px;">a. Yes b. No</p>	<p>2. Have you ever been forced to have sexual intercourse when you did not want to?</p> <p style="margin-left: 20px;">a. Yes b. No</p>
<p>3. During the past 12 months, <b>where</b> did the most serious injury that happened to you occur?</p> <p style="margin-left: 20px;">a. I was not seriously injured during the past 12 months b. At home c. At school d. At work e. On a playing field or court or in a gymnasium f. On or near a road g. In a park h. Somewhere else</p>	<p>4. During the past 30 days, on how many days did you carry a weapon, such as a gun, knife, club or COUNTRY SPECIFIC OPTIONS?</p> <p style="margin-left: 20px;">a. 0 days b. 1 day c. 2 or 3 days d. 4 or 5 days e. 6 or more days</p>
<p>5. During the past 30 days, on how many days did you carry a weapon, such as a gun, knife, club or COUNTRY SPECIFIC OPTIONS, <b>on school property</b>?</p> <p style="margin-left: 20px;">a. 0 days b. 1 day c. 2 or 3 days d. 4 or 5 days e. 6 or more days</p>	<p>6. During the past 12 months, did your boyfriend or girlfriend ever hit, slap, or physically hurt you on purpose?</p> <p style="margin-left: 20px;">a. I have not had a boyfriend or girlfriend during the past 12 months b. Yes c. No</p>
<p>7. During the past 30 days, on how many days did you <b>not</b> go to school because you felt you would be unsafe at school or on your way to or from school?</p> <p style="margin-left: 20px;">a. 0 days b. 1 day c. 2 or 3 days d. 4 or 5 day e. 6 or more days</p>	<p>8. During the past 30 days, on how many days did you carry <b>a gun</b>?</p> <p style="margin-left: 20px;">a. 0 days b. 1 day c. 2 or 3 days d. 4 or 5 days e. 6 or more days</p>

<p>9. During the past 30 days, how many times has someone threatened or injured you with a weapon, such as a gun, knife, or club, <b>on school property</b>?</p> <p>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</p>	<p>10. During the past 30 days, how many times has someone stolen or deliberately damaged your property, such as your bike, clothing, or books, <b>on school property</b>?</p> <p>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</p>
<p>11. During the past 12 months, how many times were you in a physical fight in which you were injured and had to be treated by a doctor or nurse or missed your usual activities?</p> <p>a. 0 times  b. 1 time  c. 2 or 3 times  d. 4 or 5 times  e. 6 or more times</p>	<p>12. During the past 12 months, how many times were you in a physical fight <b>on school property</b>?</p> <p>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</p>
<p>13. During the past 12 months, did your teacher ever hit, slap, or physically hurt you on purpose?</p> <p>a. Yes  b. No</p>	
<b>Unintentional Injury</b>	
<b>PAHO countries are encouraged to add this question.</b>	
<p>14. During the past 30 days, how often did you use a seat belt when riding in a car or other motor vehicle driven by someone else?</p> <p>a. I did not ride in a motor vehicle driven by someone else  b. Never  c. Rarely  d. Sometimes  e. Most of the time  f. Always</p>	<p>15. During the past 30 days, how often did you ride in a car or other motor vehicle <b>driven by someone who had been drinking alcohol</b>?</p> <p>a. I did not ride in motor vehicle driven by someone else  b. 0 times  c. 1 time  d. 2 or 3 times  e. 4 or 5 times  f. 6 or more times</p>
<p>16. During the past 30 days, how often did you use a seat belt when driving a car or other motor vehicle?</p> <p>a. I did not drive a motor vehicle  b. Never  c. Rarely  d. Sometimes  e. Most of the time  f. Always</p>	<p>17. During the past 30 days, how often did you wear a helmet when riding a bicycle?</p> <p>a. I did not ride a bicycle  b. Never  c. Rarely  d. Sometimes  e. Most of the time  f. Always</p>

<p>18. During the past 30 days, how many times did you drive a car or other motor vehicle <b>when you had been drinking alcohol</b>?</p> <p>a. I did not drive a motor vehicle  b. 0 times  c. 1 time  d. 2 or 3 times  e. 4 or 5 times  f. 6 or more times</p>	
<b>Knowledge, Attitudes, Skills, and Sources of Information</b>	
<p>19. During this school year, were you taught in any of your classes how to avoid or prevent motor vehicle accidents?</p> <p>a. Yes  b. No  c. I do not know</p>	<p>20. During this school year, were you taught in any of your classes how to avoid or prevent other types of accidents, such as fires or poisonings?</p> <p>a. Yes  b. No  c. I do not know</p>
<p>21. During this school year, were you taught in any of your classes what to do if someone is trying to force you to have sexual intercourse?</p> <p>a. Yes  b. No  c. I do not know</p>	<p>22. During this school year, were you taught in any of your classes how to avoid physical fights and violence?</p> <p>a. Yes  b. No  c. I do not know</p>
<p>23. During this school year, were you taught in any of your classes how to give first aid?</p> <p>a. Yes  b. No  c. I do not know</p>	<p>24. During this school year, were you taught in any of your classes how to avoid being bullied?</p> <p>a. Yes  b. No  c. I do not know</p>