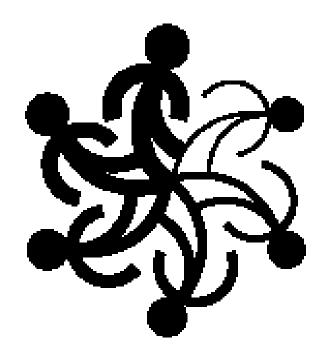


## NATIONAL LONGITUDINAL SURVEY OF CHILDREN & YOUTH

Cycle 4 Survey Instruments 2000-2001 Book 2 - Teacher, Principal & Youth (10-17 year olds)



Catalogue no. 89FOO77XIE, no. 4b

2003

Statistics Canada Human Resources Canada Statistiques Canada Développement des ressources Human Resources

Development Canada humaines



Canadä

For further information on the National Longitudinal Survey of Children and Youth, the contact within Human Resources Development Canada is:

Child, Youth and Social Development Studies Applied Research Branch Human Resources Development Canada Place du Portage-Phase II, 7<sup>th</sup> floor 165 Hôtel de Ville Street Hull, Quebec K1A OJ2

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Client Services Special Surveys Division Tel: (613) 951-7355 OR 1-888-297-7355

Fax: (613) 951-3012 Internet: ssd@statcan.ca

Également disponible en français sous le titre: Enquête longitudinale nationale sur les enfants et les jeunes, Matériel d'enquête pour la collecte des données de 1999-2000 - Cycle 4.

#### Introduction

NLSCY instruments, by which we mean the various questionnaires used to gather information from parents, children and youth, teachers and principals could be divided into 3 groups:

- A- **Electronic questionnaires** loaded on the interviewers' laptops and administered by interviewers to parents and youth using computer-assisted (CAPI or CATI) methods:
  - Household contact information
  - Parent questionnaire
  - Child questionnaire
  - Youth questionnaire
- B- **Paper questionnaires**, self administered:
  - Teacher's questionnaire (single teacher environment)
  - Teacher's questionnaire (multiple teacher environment)
  - Principal's questionnaire
  - Booklet 20 self complete for 10-11 year olds
  - Booklet 21 self complete for 12-13 year olds
  - Booklet 22 self complete for 14-15 year olds
  - Booklet 23 self complete for 16-17 year olds
  - Informed Consent Form
- C- **Other Instruments** to be administered by interviewers:
  - Ages and Stages questionnaires (Parent self report, ages 3 to 71 months)
  - Peabody Picture Vocabulary Test Revised (PPVT R) (Direct Measure, Age 4 to 6 years)
  - Who Am I? (Direct Measure, age 4 and 5 year olds)
  - Number Knowledge (Direct Measure, age 4 and 5 year olds)
  - Math tests (Direct Measure, Grades 2 to 10)
  - Cognitive measure (Direct Measure, ages 16 and 17)

For cycle 4, there are two published documents containing survey instruments: Book 1 contains the electronic questionnaires and Book 2 contains the self-administered paper questionnaires listed in B above. The instruments listed in C above will not be published. Several of them are available from publishers. Please see list at the end of this section

This is Book 2. It includes the teacher, principal and youth paper self-complete questionnaires.

Most of the questions for cycle 4 are similar to those in previous cycles. Some new sections have been added for children under 6 to provide more information on children's early development and related experiences. Because of collection difficulties, the Kindergarten teacher's questionnaire was not used in cycle 4. The Math and Arts teachers' questionnaires were combined into one questionnaire for cycle 4, which was only collected for part of the sample. New questions were added for the 16-17 year olds, including a self-complete questionnaire.

The reader may also wish to refer to the Cycle 1, 2 and 3 documentation, available upon request or on the web:

#### Cycle 1

National Longitudinal Survey of Children: Survey Instruments for 1994-95 Data Collection, Cycle 1

National Longitudinal Survey of Children: Overview of Survey Instruments for 1994-95 Data Collection, Cycle 1

National Longitudinal Survey of Children and Youth: User's Handbook and Microdata Guide is also available

#### Cycle 2

National Longitudinal Survey of Children and Youth: Survey Instruments for 1996-97 Data Collection, Cycle 2

National Longitudinal Survey of Children and Youth: Overview of Survey Instruments for 1996-97 Data Collection, Cycle 2

#### Cycle 3

National Longitudinal Survey of Children and Youth: Cycle 3 Survey Instruments for 1998-99 Book 1-Parents & Child

National Longitudinal Survey of Children and Youth: Cycle 3 Survey Instruments for 1998-99 Book 2- Education, 10-11, 12-13, 14-15 year olds

National Longitudinal Survey of Children and Youth: Overview of Survey Instruments for 1998-99 Data Collection, Cycle 3

These are available on the Statistics Canada website: statcan.ca\Products and Services\Downloadable Publications (free) scroll down to 89-566-XIE for article "The intricate family life courses of Canadian children" and 89F0077XIE and 89F0078XIE for the instruments and overviews.

The Applied Research Branch of Human Resources Development Canada is building up a body of child-related research based on data from NLSCY. These are available on the HRDC web site: http://www.hrdc-drhc.gc.ca/arb/nlscy-elnej

#### **List of the Direct Measures publishers**

#### **PPVT-R** (English):

Leann Velde

American Guidance Service

4201 Woodland Rd.

Circle Pines, Minnesota 55014-0099

Tel.: (651) 287-7242 fax.: (651) 287-7227

#### **EVIP** (French PPVT):

Fredda Olivier, President

Psycan

12-120 West Beaver Creek Rd.

Richmond Hill, Ontario L4B 1L2

Tel.: (905) 731-8795 fax.: (905) 731-5029

<u>mail@psycan.com</u> (email) <u>www.psycan.com</u> (web site)

#### Math Tests (grades 2-10):

David Galati

Canadian Test Centre

85 Citizen Court, Unit # 7

Markham, Ontario L6G 1A8

Tel.: (905) 513-6636 fax.: (905) 513-6639

#### Who Am I?:

Molly De Lemos

DeLemos@acer.edu.au (email)

#### Number Knowledge

Yukari Okamoto

yukari@education.ucsb.edu (email)

#### **Ages and Stages**

Lisa Yurwit, Subsidiary Rights Manager

Brookes Publishing Co. and Health Professions Press

P.O. Box 10624, Baltimore, MD 21285-0624, USA

tel.: (410) 337-9580 fax.: (410) 337-8539

lyurwit@brookespublishing.com

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  - (For a school environment where the child has one teacher for the basic academic subjects)
- 2. Teacher's Questionnaire Document 3
  - (For a school environment where a child/youth has different teachers for the basic academic subjects)
- 3. Principal's Questionnaires- Document 4
- **4. Booklet 20**: Self completed Questionnaire for 10-11 year olds
- **5. Booklet 21:** Self completed Questionnaire for 12-13 year olds
- **6. Booklet 22:** Self completed Questionnaire for 14-15 year olds
- **7. Booklet 23:** Self completed Questionnaire for 16-17 year olds
- 8. Informed Consent Form

Human Resources Development Canada & Statistics Canada



# National Longitudinal Survey of Children and Youth - Cycle 4 Teacher's Questionnaire



	Document 2
Place label here	
	This information is collected under the authority of the <i>Statistics Act</i> (RSC. 1985 c. S19)
	Confidential when completed
	Version française au verso

#### Instructions

The **purpose** of this questionnaire is to gather information on students' school experiences. This complements information about other aspects of students' lives already collected from parents and youth aged 10 and older. The items in this questionnaire relate to a particular student in your class who is identified above. The questionnaire also asks about the student's class, school practices and information about you.

The survey is voluntary. However, to ensure that we have a full picture of this student's development and experiences, we strongly encourage you to complete the questionnaire.

#### **INSTRUCTIONS**

- Please use a blue or a black pen when answering the questions.
- Please mark only one response circle per question unless otherwise indicated.
- Place the questionnaire in the enclosed business reply envelope and mail it directly to us.
- Please return the questionnaire within the next five days.

**YOUR RESPONSES ARE CONFIDENTIAL.** PLEASE DO NOT SHOW YOUR RESPONSES TO ANYONE ELSE – NOT ANOTHER TEACHER, THE PRINCIPAL, THE STUDENT OR HIS/HER PARENTS.

UNDER THE STATISTICS ACT, THE INFORMATION COLLECTED IN THIS QUESTIONNAIRE WILL BE KEPT CONFIDENTIAL.

If you did not receive a business reply envelope or if you have any questions please call 1-888-408-8879.

8-2200-378: 2001-02-13 STC/ECT-180-75020



Statistics Statistique Canada Canada



## **SECTION 1** General Information

01	Is this stude	ent enrolled in any of the following academic programs:
	A <b>program</b> is	a specially designed curriculum.  mmersion program is a program where 25% or more of instruction time is spent in the
	01	Program for hearing or visually impaired students
	02	Program for special needs other than the hearing and visually impaired (e.g., special education, learning difficulties)
	03	Program targeting gifted students (e.g., scientifically advanced programs, enriched, or advanced programs)
	04	French language immersion program
	05	English language immersion program
	06	Other language immersion program
	07	English as a second language (ESL) program
	08	French as a second language (FSL) program
	09	Program targeting the arts (e.g., dance, theatre, music, visual arts etc.)
	10 🔘	Program targeting sports
	11 (	Trade/Vocational program
	12	This student is not enrolled in a program with a specially designed curriculum.
02	What grade	e is this student in?
	01	This student is not assigned to a grade
	02	Junior kindergarten/pre-school (generally 2 years before grade 1)
	03	Senior kindergarten/primary (generally 1 year before grade 1)
	04	Grade 1
	05	Grade 2
	06	Grade 3
	07	Grade 4

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<b>+</b>			

What grade is this student in? - Concluded		
<sup>08</sup> Grade 5		
<sup>09</sup> Grade 6		
<sup>10</sup> Grade 7 OR Secondary 1 (Quebec)		
<sup>11</sup> Grade 8 OR Secondary 2 (Quebec)		
<sup>12</sup> Grade 9 OR Secondary 3 (Quebec)	OR Senior 1 (Manitoba)	
<sup>13</sup> Grade 10 OR Secondary 4 (Quebec)	OR Senior 2 (Manitoba) OR Leve	I I (Newfoundland
Is this student currently repeating his or her gra	ide?	
<sup>01</sup> O Yes		
<sup>02</sup> No		
<sup>03</sup> O I do not know		
(Mark all that apply.)	Student takes this subject	
(Mark all that apply.)	this subject	subject to this student
(Mark all that apply.)  a) English	this subject	subject to this student
	this subject	subject to this student  02   04   04
a) English	this subject  O1 O  O3 O  O5 O	subject to this student
a) English b) French	this subject	subject to this student  02   04   04
a) English b) French c) Mathematics	this subject  O1 O  O3 O  O5 O	subject to this student  02   04   06   06
<ul> <li>a) English</li> <li>b) French</li> <li>c) Mathematics</li> <li>d) Science (e.g. physics, chemistry, biology)</li> </ul>	01 0 03 0 05 0	subject to this student  02  04  06  08
<ul> <li>a) English</li> <li>b) French</li> <li>c) Mathematics</li> <li>d) Science (e.g. physics, chemistry, biology)</li> <li>e) Social Studies (e.g. history, geography)</li> </ul>	01 0 03 0 05 0 07 0 09 0	04 0 06 0 08 0
a) English b) French c) Mathematics d) Science (e.g. physics, chemistry, biology) e) Social Studies (e.g. history, geography) f) Environmental Studies	11 O	04 0 06 0 10 01 12 0 12 0 12 0 12 0 12 0 1
a) English b) French c) Mathematics d) Science (e.g. physics, chemistry, biology) e) Social Studies (e.g. history, geography) f) Environmental Studies g) Music	this subject  01	04 0 06 0 08 0 10 0 14 0
a) English b) French c) Mathematics d) Science (e.g. physics, chemistry, biology) e) Social Studies (e.g. history, geography) f) Environmental Studies g) Music h) Art	this subject  01	subject to this student  02
a) English b) French c) Mathematics d) Science (e.g. physics, chemistry, biology) e) Social Studies (e.g. history, geography) f) Environmental Studies g) Music h) Art i) Physical Education	this subject  01	subject to this student  02
a) English b) French c) Mathematics d) Science (e.g. physics, chemistry, biology) e) Social Studies (e.g. history, geography) f) Environmental Studies g) Music h) Art i) Physical Education j) Informatics/Computer Science	this subject  01	subject to this student  02

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*	*
0.5	

	Yes	No
a) Have a first language other than English or French?	01	02
b) Have a limited knowledge of the main language of instruction that affects his/her classroom performance?	03	04
Since the beginning of school in the fall, approximately how many regulation this student been absent from your class with a valid reason?	ılar school da	ays ha
<sup>01</sup> O Never		
<sup>02</sup> O 1 to 2 days		
<sup>03</sup> O 3 to 5 days		
<sup>04</sup> O 6 to 10 days		
<sup>05</sup> O 11 to 20 days		
<sup>06</sup> More than 20 days		
Since the beginning of school in the fall, approximately how many regulation this student been absent from your class without a valid reason (i.e.,		ys ha
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this student been absent from your class <b>without a valid reason</b> (i.e.,  O1  Never O2  1 to 2 days O3  3 to 5 days O4  6 to 10 days O5  11 to 20 days		ays ha

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		Never	Rarely	Some- times	Often	Always	Dor kno
	Without the materials needed to do his/her schoolwork (e.g. notebooks, paper)?	01	02	03	04	05	06
	Inadequately dressed for the weather conditions?	07	08	09	10	11 (	12
c)	Too tired to do school work?	13	14 🔘	15	16	17 🔘	18
d)	Without a lunch/snacks?	19	20 🔘	21	22 🔾	23	24
e)	Hungry?	25	26	27	28	29	30
<b>t</b> /	110	31	32 🦳	33 🦳			
Do	any of the following limit the kind of ark all that apply.)  One of the following limit the kind of ark all that apply.)  One of the following limit the kind of ark all that apply.)  One of the following limit the kind of ark all that apply.)  One of the following limit the kind of ark all that apply.)  One of the following limit the kind of ark all that apply.)  One of the following limit the kind of ark all that apply.)  One of the following limit the kind of ark all that apply.)  One of the following limit the kind of ark all that apply.)  One of the following limit the kind of ark all that apply.)  One of the following limit the kind of ark all that apply.)  One of the following limit the kind of ark all that apply.)  One of the following limit the kind of ark all that apply.)  One of the following limit the kind of ark all that apply.)  One of the following limit the kind of ark all that apply.)  One of the following limit the kind of ark all that apply.)				ident can	do at scho	36 C
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0	To the best of your knowledge does this student have special skills or talents in any of the
	following areas?

A **special skill or talent** is an aptitude, facility or gift. Interest shown by the student in any of these areas is not, on its own, considered a special skill or talent.

	Yes	No	Don't know
a) Sports or athletics (including dance)	01	02	03
b) Academic work (e.g. numeracy or literacy skills)	04	05	06
c) Arts (e.g., drama, painting etc.)	07	08	09
d) Music	10	11 🔾	12
e) Technical skills (e.g. computer or mechanical skills)	13 🔾	14 🔾	15
f) Interpersonal skills (e.g. leadership skills)	16	17 🔵	18

Since the beginning of school in the fall, has a parent or guardian of this student:

		Yes	No	Contact not needed
a)	Participated in scheduled parent-teacher meetings or discussions in person or on the telephone? (including parent-teacher interviews and meet the teacher events)	01	02	03
b)	Returned an unscheduled or informal call you made to discuss this student's academic performance or behaviour?	04	05	06
c)	Contacted you in writing, by phone, or in any other manner to discuss this student's academic performance or behaviour? (e.g. contact made through e-mail, the student's agenda or planner)	07	08	09
d)	Volunteered in your class/for class activities?	10	11	12

In your opinion, how involved is (are) the parent(s) or guardian(s) in this student's education?

01	Very	involved
----	------	----------

<sup>&</sup>lt;sup>02</sup> O Somewhat involved

Not involved

<sup>1</sup> do not know / no opinion

Several times a week				
Once a week				
O3 A few times a month				
Once every few months				
<sup>05</sup> Never				
Considering your experience, work and active this student's	rities with this stud	dent, how	well do yo	u know
	Very well	Well	Not too well	Not we at all
a) Behaviour?	01	02	03	04
b) Attitude in class?	05	06	07	08
c) Attitude outside of class?	09	10	11 🔘	12 🔾
Looking ahead, how far do you think this stu	dent has the pote	ntial to g	o in school?	?
Could he or she (Mark one only.)				
Codid He of She (Mark one only.)				
Complete some secondary or high scho	ool?			
On Complete some secondary or high school	ol?			
Complete some secondary or high school	ol? ticeship)?	ollege, bus	iness school d	or CEGEP
Complete some secondary or high school Graduate from secondary or high school Learn a trade (e.g., through an apprent Obtain a community college, technical	ol? ticeship)?	ollege, bus	iness school d	or CEGEP

### **SECTION 2** Academic Performance

In your opinion, how important are academic pursuits to this student?

<sup>01</sup> ○ Very important

<sup>02</sup> O Somewhat important

<sup>03</sup> Of little importance

 $^{04}$  O I do not know

In the following subjects, does this student receive **enhanced or extra activities or instruction** at school (e.g. academic, enhanced or enriched) beyond the regular curriculum of the class?

		Yes	No	Don't know
a)	Mathematics	01	02	03
b)	English	04	05	06
c)	French	07	08	09
d)	Science	10	11 🔾	12

Does this student receive **additional or remedial help** at school because he/she is weak in any of the following sujects?

	Yes	No	Don't know
a) Mathematics	01	02	03
b) English	04	05	06
c) French	07	08	09
d) Science	10	11 🔾	12

9	For the following subjects, how would you rate this student's current academic
	achievement?

		Near the top of the class	Above the middle of the class, but not at the top	In the middle of the class	Below the middle of the class, but above the bottom	Near the bottom of the class	I do not teach this subject to this student
<u>a)</u>	Reading	01	02	03	04	05	06
b)	Written work (e.g. spelling, grammar and composition)	07	08	09	10	11 (	12
c)	Mathematics	13	14 🔘	15	16	17 🔾	18
d)	Science	19	20	21	22	23	24
e)	Across all areas of instruction	25	26	27	28	29	

Compared with other classes at the same grade in your school, do you feel that the academic ability of the class you teach this student is:

01 $\bigcirc$	
$\bigcirc$	No other classes at the same grade

$$^{\rm 03}$$
  $\bigcirc$  . Is similar to the other classes

$$^{\rm 04}$$
  $\bigcirc$  Is higher than the other classes

 $<sup>^{02}</sup>$  O Is lower than the other classes

 $<sup>^{\</sup>text{05}}$   $\bigcirc$  Is of a wider range than the other classes

## SECTION 3 Classroom Behaviour and Work Habits

21 How frequent	ly does this student:
-----------------	-----------------------

		Never	Rarely	Some- times	Often	Always
<u>a)</u>	Seem to enjoy most classes?	01	02	03	04	05
b)	Seem bored in most classes?	06	07	08	09	10
c)	Seem comfortable with the level of difficulty of the material you teach?	11 🔾	12	13	14	15

The following statements describe work habits. Please indicate how often this student:

		Never	Rarely	Some- times	Often	Always
a)	Listens attentively	01	02	03	04	05
b)	Completes homework on time	06	07	08	09	10
c)	Completes in-class work on time	11 🔘	12	13	14 🔵	15
d)	Works independently	16	17 🔾	18	19	20
e)	Takes care of materials	21	22	23	24	25
f)	Works neatly and carefully	26	27	28	29	30
g)	Puts a lot of effort into work	31	32	33	34	35
h)	Participates in class	36	37	38	39	40
i)	Finishes things he/she starts	41	42 🔾	43	44 🔾	45
j)	Persists with solving a problem even when things go wrong	46	47	48	49	50
k)	Asks questions when he/she does not understand	51	52	53	54	55

\*

\*

Listed below are various social and personal skills. Please indicate how often this student:

		Never	Rarely	Some- times	Often	Always
a)	Works co-operatively with other students	01	02	03	04	05
b)	Plays co-operatively with other students	06	07	08	09	10
<u>c)</u>	Follows rules/instructions	11 🔾	12	13	14 🔾	15
d)	Makes friends easily	16	17 🔾	18	19	20
e)	Willingly plays with various children (including those who may be left out by others)	21	22	23	24	25
f)	Will invite others to join in a game	26	27	28	29	30
g)	Challenges the teacher in a positive way	31	32	33	34	35
h)	Respects the property of others	36	37	38	39	40 🔵
<u>i)</u>	Demonstrates self-control	41	42 🔾	43 🔾	44 🔘	45
<u>j)</u>	Shows self-confidence	46	47 🔾	48	49	50
k)	Shows creativity	51	52	53	54	55
l)	Demonstrates problem-solving ability	56	57	58	59	60
m)	Shows respect for adults	61	62	63	64	65
n)	Shows respect for other children	66	67	68	69	70
0)	Accepts responsibility for his/her own actions	71	72	73	74	75

*		*
24	How often would you say that this student:	

		Never or not true	Sometimes or somewhat true	Often or Very true	Don't know
a)	Shows sympathy to someone who has made a mistake	01	02	03	04
b)	Cannot sit still or is restless	05	06	07	08
c)	Destroys his/her own things	09	10	11 (	12 🔾
d)	Will try to help someone who has been hurt	13	14 🔘	15	16 🔾
e)	Steals	17 🔾	18	19	20 🔘
f)	Seems to be unhappy or sad	21	22 🔾	23	24 🔘
g)	Gets into many fights	25	26	27	28
h)	Volunteers to help clear up a mess someone else has made	29	30	31	32 🔾
i)	Is easily distracted, has trouble sticking to any activity	33	34	35	36
j)	When mad at someone, tries to get others to dislike that person	37	38	39	40 🔵
k)	Is not as happy as other children	41	42	43	44 🔘
l)	Destroys things belonging to others	45	46	47	48
m)	If there is a quarrel or dispute, will try to stop it	49	50	51	52
n)	Is disobedient at school	53	54	55	56
o)	Cannot concentrate, cannot pay attention for long	57	58	59	60
p)	Is too fearful or nervous	61	62	63	64
q)	When mad at someone, becomes friends with another as revenge	65	66	67	68
r)	Is impulsive, acts without thinking	69	70	71	72

\*

\*

		Never or not true	Sometimes or somewhat true	Often or Very true	Don't know
s)	Tells lies or cheats	73	74	75	76
t)	Offers to help others (friend, brother, sister) who are having difficulty with a task	77 🔾	78	79	80
u)	Is worried	81	82	83	84
v)	Has difficulty waiting for his/her turn in games or groups	85	86	87	88
w)	When someone accidentally hurts him/her, he/she reacts with anger and fighting	89	90	91	92
x)	Tends to do things on his/her own, is rather solitary	93	94	95	96
y)	When mad at someone, says bad things behind the other's back	97	98	99	100
z)	Physically attacks people	101	102	103	104
aa) 	Comforts a child (friend, brother or sister) who is crying or upset	105	106	107	108
bb)	Cries a lot	109	110	111	112
cc)	Vandalizes	113	114	115	116
dd)	Gives up easily	117	118	119	120
ee)	Threatens people	121	122	123	124
ff)	Spontaneously helps to pick up objects which somebody has dropped (e.g. pencils, books)	125	126	127	128
gg)	Appears miserable, unhappy, tearful or distressed	129	130	131	132
hh)	Bullies or is mean to others	133	134	135	136
ii)	When mad at someone, says to others: let's not be with him/her	137	138	139	140

			Never or	Some	times	Often or	Don't
			not true	o	r	Very true	know
				some tru			
jj)	Is nervous, high-strung or tense		141	142 (	$\bigcirc$	143	144
kk)	Kicks or hits other children		145	146 (	$\bigcirc$	147	148
II)	Is inattentive		149	150 (	$\bigcirc$	151	152
mm	n) Cannot settle on anything for more than moments	a few	153	<sup>154</sup> (	$\bigcirc$	155	156
nn)	Has trouble enjoying himself/herself		157	158 (	$\bigcirc$	159	160
00)	Helps other children (friends, brother or swho are feeling sick	sister)	161	162 (	0	163	164
pp)	When mad at someone, tells that person secrets to a third person	- 1		166		167	168
qq)	Helps those who do not do as well as he does	/she	169	170 (	$\bigcirc$	171	172
					often d	oes this sto	
	does	ent in a c	computer I	ab), how		oes this st	udent:
In	your class (including class time spe	ent in a c	computer I	ab), how Some- times	Often	Oes this sto Always (every class)	udent:  Not applicab
In a)	Use basic software (e.g. word-processing or spreadsheet packages)?  Use Internet, e-mail or other communications software?	Never	computer I	ab), how Sometimes	Often	Always (every class)	udent:  Not applicab

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26	How many minutes per week does this student spend using a computer in your class (including class time spent in a computer lab)?
	<sup>01</sup> None
	<sup>02</sup> O 1 to 29 minutes per week
	<sup>03</sup> O 30 to 59 minutes per week
	<sup>04</sup> O 60 minutes or more per week
	<sup>05</sup> O I do not know

dland)

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Ho	w many students are enrolled in this student's class?	
	students	
pro	this student's class, how many students (including this student) have abblems listed below, whether or not the problem has been officially ide ome students may belong to more than one category.)	
a)	A speech, hearing, vision, mobility or other health impairment that affects their learning?	studer
b)	An emotional or behavioural problem?	studer
<u>c)</u>	A learning disability?	studer
	this student's class, how many students (including this student): ome students may <b>belong to</b> more than one category.)	
<u>a)</u>	Are boys?	studer
b)	Are girls?	studer
<u>c)</u>	Have a first language other than English or French?	studer
d)	Have a limited knowledge of the main language of instruction that affects their classroom performance?	studer
<u>e)</u>	Have arrived in Canada within the last year?	studer
Ap	proximately what percentage of instruction time in this class is in?	
a)	English	%
b)	French	%
c)	Other (specify)	%
	TOTAL  Total for a, b and c must equal 100 %	1 0 0 %

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 $\bigstar$ 

Please estimate the percentage of total instruction time when a qualified teaching assistant, (including student teachers) and/or an adult volunteer is available in this student's class.

	Never	1 to 25%	26 to 50%	51 to 75%	More than 75%
		of total	l instructio	nal time	
a) Qualified Teaching Assistant	01	02	03	04	05
b) Adult volunteer	06	07	08	09	10 🔾

In this student's class, the students:

		Never	Rarely	Some- times	Often	Always
a)	Move smoothly from one classroom activity to another	01	02	03	04	05
b)	Are easily distracted by the disruptive behaviour of a few	06	07	08	09	10
<u>c)</u>	Work well together on group activities	11 🔾	12	13	14	15
d)	Misbehave when you are called to the door or must attend to other interruptions	16	17 🔾	18	19	20

\*

\*

The following statements describe various attributes about you and the students in this student's class. Please indicate the extent to which you agree or disagree with each statement.

		Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a)	Many of the students in this class are not capable of mastering the curriculum at their grade	01	02	03	04	05
b)	Classroom activities are affected by difficulties some students have with the language of instruction	06	07	08	09	10
c)	In my classroom, the emphasis is on the development of academic skills	11 (	12	13 (	14 🔘	15
d)	I have a strong effect on the academic achievement of the students I teach	16	17	18	19	20
e)	I feel competent in dealing with students' behavioural problems	21	22	23	24	25
f)	I feel competent in dealing with students' learning problems	26	27	28	29	30
g)	I feel that a student's success at school is determined mainly by his/her home environment	31	32	33	34	35
h)	I have high expectations for the academic success of my students	36	37	38	39	40
i)	I strongly encourage students to achieve their full academic potential	41	42	43	44	45

## **SECTION 5** Teaching Strategies and Homework

Do you teach **reading** to this student's class?

<sup>02</sup> O(No	<b>→</b>	Go to Question 36
<sup>01</sup> ○ Yes		

How often do you use the following strategies to teach **reading** to this class?

		Never	Rarely	Some- times	Often	Always
<u>a)</u>	Teach reading to the class as a whole	01	02	03	04	05
b)	Organize the class into groups with similar reading abilities	06	07	08	09	10
c)	Organize the class into groups with a mixture of reading abilities	11 (	12	13	14	15
d)	Allow students to form their own reading groups	16	17 🔵	18	19	20
e)	Use individualized instruction plans to teach reading	21	22	23	24	25
f)	Other (please specify)	26	27	28	29	30

Do you teach **writing** (composition) to this student's class?

Yes
Y

02 (No	<b>→</b>	Go to Question 37
<i>○</i> (110		OU TO QUESTION OF

How often do you use the following strategies to teach **writing** (composition) to this class?

		Never	Rarely	Some- times	Often	Always
<u>a)</u>	Teach writing to the class as a whole	01	02	03	04	05
b)	Organize the class into groups with similar writing abilities	06	07	08	09	10
c)	Organize the class into groups with a mixture of writing abilities	11 🔾	12	13	14	15
d)	Allow students to form their own writing groups	16	17	18	19	20
e)	Use individualized instruction plans to teach writing	21	22	23	24	25
f)	Other (please specify)	26	27	28	29	30

37	Do you teach mathematics/arithmetic to this student's cla	ass?
----	---	------

01 ()	Yes
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#### How often do you use the following strategies to teach **mathematics** to this class?

		Never	Rarely	Some- times	Often	Always
a)	Teach mathematics to the class as a whole	01	02	03	04 🔘	05
b)	Organize the class into groups with similar mathematics abilities	06	07	08	09	10
c)	Organize the class into groups with a mixture of mathematics abilities	11 (	12 🔵	13	14	15
d)	Allow students to form their own mathematics groups	16	17 🔘	18	19	20
e)	Use individualized instruction plans to teach mathematics	21	22	23	24	25
f)	Other (please specify)	26	27	28	29	30

## On average, how often do you assign homework to this student's class? (Include reading, special projects and classroom work made intentionally long and intended to be completed outside of the classroom.)

5 days a week

 $^{02}$   $\bigcirc$  3 to 4 days a week

 $^{03}$   $\bigcirc$  1 to 2 days a week

<sup>04</sup> C Less than 1 day a week

<sup>05</sup> ○ (Never → Go to next section (Question 41)

39	On the days homework is assigned to this student's class, how much time do you expect
	students to spend on all homework you assign?

)1	$\bigcirc$	Less tha	an 15	minutes	a d	ау
						•

$$^{02}$$
  $\bigcirc$  15 to 30 minutes a day

$$^{03}$$
  $\bigcirc$  31 to 45 minutes a day

$$^{04}$$
  $\bigcirc$  46 to 60 minutes a day

$$^{\text{05}}\bigcirc$$
 More than 60 minutes a day

## For this student's class, how often do you monitor homework that you have assigned by doing any of the following:

		Never	Rarely	Some- times	Often	Always
a)	Keeping a record of who has turned in assignments	01	02	03	04	05
b)	Returning assignments with corrections or grades	06	07	08	09	10
c)	Discussing homework in class	11 )	12 🔾	13	14	15
d)	Having parent(s) or guardian(s) sign a homework book, note or agenda	16	17 🔾	18	19	20
e)	Have students conduct self-, or peer, evaluation	21	22	23	24	25

## **SECTION 6** Perceptions of Your School

Below are a number of statements that may describe the climate of your school. Please indicate the extent to which you agree or disagree with each statement.

		Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a)	The administrative, support and teaching staff work together as a team	01	02	03	04	05
b)	All staff are involved in decision making	06	07	08	09	10
c)	School staff knows what is expected of them in terms of their roles and responsibilities	11	12	13	14	15
d)	Staff clearly understands school policies and procedures	16	17	18	19	20
e)	Teachers have considerable influence on school policies	21	22	23	24	25
f)	Teachers have a strong influence on how resources (e.g. money, staff, instructional materials) are allocated	26	27	28	29	30
g)	Students clearly understand school rules	31	32	33	34	35
h)	The principal and/or vice-principal(s) provide(s) support to teachers	36	37	38	39	40
i)	Teachers receive positive feedback from the principal and/or vice-principal(s)	41	42	43	44 🔾	45
j)	The principal and/or vice-principal(s) circulate in the school to talk with staff	46	47	48	49	50
k)	The principal and/or vice-principal(s) spend(s) time getting to know students	51	52	53	54	55
l) 	The school provides a positive working environment for teachers	56	57	58	59	60
m)	The school provides a positive working environment for students	61	62	63	64	65

\*

Please indicate the extent to which you agree or disagree with the following statements regarding your school's disciplinary policies.

		Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a)	Teachers in this school have reached a consensus about how to discipline students who break rules	01	02	03	04	05
b)	All students who break rules in this school face the same consequences	06	07	08	09	10
c)	Teachers in this school rarely overlook physical aggression among students	11 (	12	13	14	15
d)	Teachers in this school rarely overlook verbal aggression among students	16	17	18	19	20
e)	Teachers feel there is insufficient support within the school for managing disciplinary problems	21	22	23	24	25 🔘

\*

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$\mathbf{x}$

	<sup>01</sup> Female					
	<sup>02</sup> Male					
To	o which age group do you belong?					
	<sup>01</sup> O 20 to 29					
	<sup>02</sup> O 30 to 39					
	<sup>03</sup> O 40 to 49					
	<sup>04</sup> O 50 to 59					
	<sup>05</sup> O 60 or older					
<u>a)</u>	As a teacher?			ye	ear(s)	mo
<u>a)</u>	As a teacher?  As a teacher at the grade level of this student?				ear(s)	
<u> </u>				ye		mo mo
b)	As a teacher at the grade level of this student?	uter (or a	a terminal	ye ye	ear(s)	mo
b)	As a teacher at the grade level of this student?  As a teacher at this school?	uter (or a	a terminal Rarely (1 or 2 times a week)	ye ye	ear(s)	mo mo uter):
b)	As a teacher at the grade level of this student?  As a teacher at this school?  n average, how often do you use a comp	•	Rarely (1 or 2 times a	connected Sometimes (3 or 4 times a	ear(s)  to a comp  Often (5 or 6 times a	mo mo uter):
b) c)	As a teacher at the grade level of this student?  As a teacher at this school?  n average, how often do you use a comp  As a teaching tool for students (inside or outside your classroom but during class time)?	Never	Rarely (1 or 2 times a week)	connected Sometimes (3 or 4 times a week)	ear(s)  to a comp  Often (5 or 6 times a week)	mo uter): Alwa (Dail

*		*
47	Please specify the highest level of education you have attained.	
	<sup>01</sup> O Some course work towards a bachelor's degree	
	O2 A teaching certificate, diploma or license	
	<sup>03</sup> A bachelor's degree	
	<sup>04</sup> A bachelor of Education degree	
	<sup>05</sup> Some post-baccalaureate course work	
	<sup>06</sup> A post-baccalaureate diploma or certificate	
	<sup>07</sup> Some course work towards a master's degree	
	<sup>08</sup> A master's degree	
	<sup>09</sup> O Some course work towards a doctorate	
	<sup>10</sup> A doctorate degree	
	<sup>11</sup> Trade/vocational certification (including journeyperson certification)	
	Other (please specify)	
48	Please indicate your field(s) of study: (Mark all that apply.)	
	English language and/or literature	
	French language and/or literature	
	Mathematics	
	Computer Science/Informatics	
	Science (e.g. physics, chemistry, biology)	
	Trade/vocational	
	<ul> <li>Social Sciences (e.g. history, geography, economics, journalism, family studies)</li> </ul>	
	Environmental Studies	
	Fine Arts	
	Physical Education/Recreation	
	Education	
	Special Education	
	General (no specialization/concentration, e.g. B.A. General)	
	Other (please specify)	

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(Mark all that apply.)  or One class in, or part of, a special education program  or A special education certificate  or A graduate degree in special education  or Other (please specify)  or None of the above  Have you obtained any of the following advanced qualifications in second language instruction? (Mark all that apply.)  or One class in, or part of, a second language program  or A certificate in second language education  or A graduate degree in second language education  or Other (please specify)  or One of the above  Have you obtained advanced qualifications in areas other than your highest level of education, special education or second language education?  or Other (please specify)  or Other (please spe		
One class in, or part of, a special education program  A special education certificate  A graduate degree in special education  Cother (please specify)  None of the above  Have you obtained any of the following advanced qualifications in second language instruction? (Mark all that apply.)  Color class in, or part of, a second language program  A certificate in second language education  A graduate degree in second language education  Cother (please specify)  Color other (please specify)		e you obtained any of the following advanced qualifications in special education?  rk all that apply.)
A special education certificate  Context (please specify)  Context (please specify)  None of the above  Context (please specify)  Conclass in, or part of, a second language program  A certificate in second language education  Context (please specify)		One class in, or part of, a special education program
Other (please specify)  None of the above  Have you obtained any of the following advanced qualifications in second language instruction? (Mark all that apply.)  One class in, or part of, a second language program  A certificate in second language education  A graduate degree in second language education  Other (please specify)  None of the above  Have you obtained advanced qualifications in areas other than your highest level of education, special education or second language education?  Yes (please specify)  No  Statistics Canada is conducting this survey jointly with Human Resources Development Canada and has entered into an agreement with them to share the information. The shared information will not include any names or identifying numbers, must be kept confidential and will be used only for statistical purposes. Do you agree to share the information you have provided with Human Resources Development Canada?		<sup>02</sup> A special education certificate
Have you obtained any of the following advanced qualifications in second language instruction? (Mark all that apply.)  One class in, or part of, a second language program  A certificate in second language education  A graduate degree in second language education  Other (please specify)  None of the above  Have you obtained advanced qualifications in areas other than your highest level of education, special education or second language education?  Yes (please specify)  No  Statistics Canada is conducting this survey jointly with Human Resources Development Canada and has entered into an agreement with them to share the information. The shared information will not include any names or identifying numbers, must be kept confidential and will be used only for statistical purposes. Do you agree to share the information you have provided with Human Resources Development Canada?		<sup>03</sup> A graduate degree in special education
Have you obtained any of the following advanced qualifications in second language instruction? (Mark all that apply.)  One class in, or part of, a second language program  A certificate in second language education  A graduate degree in second language education  Other (please specify)  None of the above  Have you obtained advanced qualifications in areas other than your highest level of education, special education or second language education?  Yes (please specify)  No  Statistics Canada is conducting this survey jointly with Human Resources Development Canada and has entered into an agreement with them to share the information. The shared information will not include any names or identifying numbers, must be kept confidential and will be used only for statistical purposes. Do you agree to share the information you have provided with Human Resources Development Canada?		Other (please specify)
instruction? (Mark all that apply.)  One class in, or part of, a second language program  A certificate in second language education  A graduate degree in second language education  Other (please specify)  None of the above  Have you obtained advanced qualifications in areas other than your highest level of education, special education or second language education?  Yes (please specify)  No  Statistics Canada is conducting this survey jointly with Human Resources Development Canada and has entered into an agreement with them to share the information. The shared information will not include any names or identifying numbers, must be kept confidential and will be used only for statistical purposes. Do you agree to share the information you have provided with Human Resources Development Canada?		None of the above
A certificate in second language education  A graduate degree in second language education  Other (please specify)  None of the above  Have you obtained advanced qualifications in areas other than your highest level of education, special education or second language education?  Yes (please specify)  No  Statistics Canada is conducting this survey jointly with Human Resources Development Canada and has entered into an agreement with them to share the information. The shared information will not include any names or identifying numbers, must be kept confidential and will be used only for statistical purposes. Do you agree to share the information you have provided with Human Resources Development Canada?		, , , , , , , , , , , , , , , , , , , ,
Other (please specify)  None of the above  Have you obtained advanced qualifications in areas other than your highest level of education, special education or second language education?  Yes (please specify)  No  Statistics Canada is conducting this survey jointly with Human Resources Development Canada and has entered into an agreement with them to share the information. The shared information will not include any names or identifying numbers, must be kept confidential and will be used only for statistical purposes. Do you agree to share the information you have provided with Human Resources Development Canada?		One class in, or part of, a second language program
Other (please specify)  None of the above  Have you obtained advanced qualifications in areas other than your highest level of education, special education or second language education?  Yes (please specify)  No  Statistics Canada is conducting this survey jointly with Human Resources Development Canada and has entered into an agreement with them to share the information. The shared information will not include any names or identifying numbers, must be kept confidential and will be used only for statistical purposes. Do you agree to share the information you have provided with Human Resources Development Canada?		<sup>02</sup> A certificate in second language education
Have you obtained advanced qualifications in areas other than your highest level of education, special education or second language education?  Or Or Yes (please specify)  Description No  Statistics Canada is conducting this survey jointly with Human Resources Development Canada and has entered into an agreement with them to share the information. The shared information will not include any names or identifying numbers, must be kept confidential and will be used only for statistical purposes. Do you agree to share the information you have provided with Human Resources Development Canada?		<sup>03</sup> A graduate degree in second language education
Have you obtained advanced qualifications in areas other than your highest level of education, special education or second language education?  Oracle (Please specify)  No  Statistics Canada is conducting this survey jointly with Human Resources Development Canada and has entered into an agreement with them to share the information. The shared information will not include any names or identifying numbers, must be kept confidential and will be used only for statistical purposes. Do you agree to share the information you have provided with Human Resources Development Canada?		Other (please specify)
education, special education or second language education?  Yes (please specify)  No  Statistics Canada is conducting this survey jointly with Human Resources Development Canada and has entered into an agreement with them to share the information. The shared information will not include any names or identifying numbers, must be kept confidential and will be used only for statistical purposes. Do you agree to share the information you have provided with Human Resources Development Canada?		None of the above
Statistics Canada is conducting this survey jointly with Human Resources Development Canada and has entered into an agreement with them to share the information. The shared information will not include any names or identifying numbers, must be kept confidential and will be used only for statistical purposes. Do you agree to share the information you have provided with Human Resources Development Canada?		· · · · · · · · · · · · · · · · · · ·
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Canada and has entered into an agreement with them to share the information. The shared information will not include any names or identifying numbers, must be kept confidential and will be used only for statistical purposes. Do you agree to share the information you have provided with Human Resources Development Canada?		$^{\circ}$
	Cana infor will b	ada and has entered into an agreement with them to share the information. The shared mation will not include any names or identifying numbers, must be kept confidential an se used only for statistical purposes. Do you agree to share the information you have
		<sup>01</sup> Yes
		<sup>02</sup> No

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Human Resources Development Canada & Statistics Canada



# National Longitudinal Survey of Children and Youth - Cycle 4 Teacher's Questionnaire



Place label here

This information is collected under the authority of the Statistics Act (RSC. 1985 c. S19)

Confidential when completed

Version française au verso

#### **Instructions**

The **purpose** of this questionnaire is to gather information on students' school experiences. This complements information about other aspects of students' lives already collected from parents and youth aged 10 and older. The items in this questionnaire relate to a particular student in your class who is identified above. The questionnaire also asks about the student's class, school practices and information about you.

The survey is voluntary. However, to ensure that we have a full picture of this student's development and experiences, we strongly encourage you to complete the questionnaire.

#### **INSTRUCTIONS**

- Please use a blue or a black pen when answering the questions.
- Please mark only one response circle per question unless otherwise indicated.
- Place the questionnaire in the enclosed business reply envelope and mail it directly to us.
- Please return the questionnaire within the next five days.

**YOUR RESPONSES ARE CONFIDENTIAL.** PLEASE DO NOT SHOW YOUR RESPONSES TO ANYONE ELSE – NOT ANOTHER TEACHER, THE PRINCIPAL, THE STUDENT OR HIS/HER PARENTS.

UNDER THE STATISTICS ACT, THE INFORMATION COLLECTED IN THIS QUESTIONNAIRE WILL BE KEPT CONFIDENTIAL.

If you did not receive a business reply envelope or if you have any questions please call 1-888-408-8879.

8-5300-434: 2001-01-30 STC/ECT-180-75020



Statistics Canada Statistique Canada



### SECTION 1 General Information about This Student

01	Is this stude	ent enrolled in any of the following programs:  out apply.)
		a specially designed curriculum. A <b>language immersion program</b> is a program where 25% or action time is spent in the immersion language.
	01	Program for hearing or visually impaired students
	02	Program targeting special needs students other than the hearing and visually impaired (e.g., special education, learning difficulties)
	03	Program targeting gifted students (e.g., scientifically advanced programs, enriched, or advanced programs)
	04	French language immersion program
	05	English language immersion program
	06	Other language immersion program
	07	English as a second language (ESL) program
	08	French as a second language (FSL) program
	09	Program targeting the arts (e.g., dance, theatre, music, visual arts etc.)
	10 🔘	Program targeting sports
	11 (	Trade/vocational program
	12	Alternative program (e.g., programs designed to accommodate students returning to school, pregnant students, etc.)
	13	This student is not enrolled in a program with a specially designed curriculum
02	What grade	e is this student in?
	01	This student is not assigned to a grade
	02	Grade 4
	03	Grade 5
	04	Grade 6
	05	Grade 7 OR Secondary 1 (Quebec)

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<b>—</b>			

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<sup>06</sup> Grade 8 OR Secondary 2 (Quebec)			
Orade 9 OR Secondary 3 (Quebec) OR Senio	or 1 (Manitoba)		
OR Secondary 4 (Quebec) OR Senio	or 2 (Manitoba) OF	R Level I (N	lewfoundland)
<sup>09</sup> Grade 11 OR Secondary 5 (Quebec) OR Senio	or 3 (Manitoba) OF	R Level II (N	Newfoundland)
<sup>10</sup> Grade 12 OR Senio	or 4 (Manitoba) OF	R Level III (	Newfoundland
<sup>11</sup> Grade 13/OAC (Ontario Academic Credits)			
<sup>12</sup> O I do not know			
Does this student:			
		Ye	s No
a) Have a first language other than English or French?		01	02
b) Have a limited knowledge of the main language of instruction th his/her classroom performance?	at affects	03	04
To the best of your knowledge, does this student have s			
following areas?  A <b>special skill or talent</b> is an aptitude, facility or gift. Interest show not, on its own, considered a special skill or talent.	n by the student i	n any of the	ese areas is
following areas?  A <b>special skill or talent</b> is an aptitude, facility or gift. Interest show	-		-
following areas?  A <b>special skill or talent</b> is an aptitude, facility or gift. Interest show	n by the student i	n any of the	ese areas is
following areas?  A <b>special skill or talent</b> is an aptitude, facility or gift. Interest show not, on its own, considered a special skill or talent.	n by the student i	n any of the	ese areas is  Don't know
following areas?  A special skill or talent is an aptitude, facility or gift. Interest show not, on its own, considered a special skill or talent.  a) Sports or athletics (including dance)	Yes	No	Don't know
following areas?  A special skill or talent is an aptitude, facility or gift. Interest show not, on its own, considered a special skill or talent.  a) Sports or athletics (including dance)  b) Academic work (e.g. numeracy or literacy skills)	Yes  Output  O	No  O2  O5  O5	Don't know
following areas?  A special skill or talent is an aptitude, facility or gift. Interest show not, on its own, considered a special skill or talent.  a) Sports or athletics (including dance)  b) Academic work (e.g. numeracy or literacy skills)  c) Arts (e.g., drama, painting etc.)	Yes  Of Or	No 02 05 08 08	Don't know

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	<sup>01</sup> Physical disability or visual or hearing impairment			
	<sup>02</sup> Speech impairment			
	03 C Learning disability			
	<sup>04</sup> Emotional or behavioural problem			
	<sup>05</sup> Mental disability or limitation			
	<sup>06</sup> Home environment/problems at home			
	Other (please specify)			
_				n 6
Do	If the student does not have any of these limitation ones this student receive special help or resources because of the original			
	oes this student receive special help or resources because of the original of the original of the original orig	of this (th		
	oes this student receive special help or resources because	of this (th		
Siı	oes this student receive special help or resources because of the original of the original of the original orig	of this (th	ese) limit	ation(s)?
Siı	pes this student receive special help or resources because of the student receive special help of the student receive speci	of this (th	ese) limit	Contact r

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In your opinion, how involved is (are) the parent(s) of	or guardia	n(s) in thi	s student's	
education?	g	.(•)		
<sup>01</sup> O Very involved				
<sup>02</sup> Somewhat involved				
Not involved				
<sup>04</sup> O I do not know / no opinion				
On average, how much time do you teach this stude	ent a week	ί?		
01 C Less than 30 minutes				
<sup>02</sup> O 30 minutes				
<sup>03</sup> 31 to 45 minutes				
<sup>04</sup> 46 to 60 minutes				
<sup>05</sup> 61 to 75 minutes				
of more than 75 minutes				
How often do you talk to this student outside of ales	<u>^'</u> )			
How often do you talk to this student outside of clas  Once a week  A few times a month  Once every few months  Never				
Several times a week  Once a week  A few times a month  Once every few months	h this stud		-	
Several times a week  Once a week  A few times a month  Once every few months  Never  Considering your experience, work and activities with		dent, how	well do you Not too well	Not v
Several times a week  Once a week  A few times a month  Once every few months  Never  Considering your experience, work and activities with	h this stud		Not too	u know  Not v at a

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c) Attitude outside of class?

Looking ahe	ead, how far do you think this student has the potential to go in school? Could
he or she	
01	Complete some secondary or high school?
	Graduate from secondary or high school?
03	Learn a trade (e.g., through an apprenticeship)?
04	Obtain a community college, technical college, vocational college, business school or CEGEI certificate or diploma?
05	Obtain a university degree?
06	I do not know

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## The Subject(s) You Teach This Student

What subject(s) do you teach this student?

(Mark all that apply.)

Math

Science (e.g. physics, biology, chemistry)

Social Studies (e.g. history, geography)

French

Other subject (please specify)

For the remainder of this survey, you will be asked questions that refer to **one** subject or class you teach this student. If you teach this student in only one class, please select the subject area from the list below. If you teach this student more than one class, please select only **one subject** from the list below to which you will refer in subsequent sections of the survey.

Please identify the subject of the class you teach this student and to which you will refer for the remainder of the survey:

Math

Science (e.g. physics, biology, chemistry)

Social Studies (e.g. history, geography)

English

French

For subsequent sections of the survey, where reference is made to "your class" or "the class" or "the class you teach this student", please refer to the class and subject you have selected here.

Other subject (please specify)

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## **SECTION 2** Academic Performance

In your opinion, how important are academic pursuits to this stu	udent?
--	--------

<sup>01</sup> ○ Very important

Somewhat important

Of little importance

<sup>04</sup> O I do not know

## Compared with other classes at the same grade and level in your school, do you feel that the academic ability of the class you teach this student is:

 $^{\rm 01}$   $\bigcirc$  No other classes at the same grade and level

 $^{\rm 02}$   $\bigcirc$   $\,$  Is lower than the other classes

 $^{03}$  O Is similar to the other classes

 $^{04}$   $\bigcirc$  Is higher than the other classes

 $^{05}$   $\bigcirc$  Is of a wider range than the other classes

## 15 Compared to the other students in the class you teach this student, how would you rate this student's current academic achievement?

 $^{\rm 01}$   $\bigcirc$  Near the top of the class

 $^{\rm 02}$   $\bigcirc$  Above the middle of the class but not at the top

 $^{\tt 03}$   $\bigcirc$  In the middle of the class

Below the middle of the class but above the bottom

Near the bottom of the class

# For the subject you teach this student, does he/she receive **enhanced or extra** activities or instruction beyond the regular curriculum of the class? (e.g. enhanced, advanced or enriched)

<sup>01</sup> Yes

<sup>02</sup>○ No

 $^{03}$  O I do not know

_		

\*

17	For the subject you teach this student, does he/she receive <b>additional or remedial help</b> at school?
	<sup>01</sup> ○ Yes
	<sup>02</sup> O No
	<sup>03</sup> O I do not know

## **SECTION 3** Classroom Behaviour and Work Habits

18	In the last three months approximately how many times has this student been absent from
	your class with a valid reason?

1		$\overline{}$	
	(	)	Neve

 $^{02}$  1 to 2 times

03 O 3 to 5 times

04 O 6 to 10 times

 $^{05}$   $\bigcirc$  More than 10 times

In the last three months approximately how many times has this student been absent from your class **without a valid reason** (i.e., skipped)?

<sup>01</sup> O Never

 $^{02}$  O 1 to 2 times

 $^{03}$   $\bigcirc$  3 to 5 times

<sup>04</sup> O 6 to 10 times

 $^{05}$   $\bigcirc$  More than 10 times

In the last three months, how often has this student arrived in your class:

	Never	Rarely	Some- times	Often	Always	Don't know
<ul> <li>a) Without the materials needed to do his/her schoolwork (e.g. notebooks, paper)?</li> </ul>	01	02	03	04	05	06
b) Too tired to do school work?	07	08	09	10 🔘	11 🔘	12
c) Late?	13	14 🔘	15	16	17 🔾	18

\*

\*

How fr	equently does	this student:
--------	---------------	---------------

		Never	Rarely	Some- times	Often	Always
<u>a)</u>	Seem to enjoy the class you teach?	01	02	03	04	05
<u>b)</u>	Seem bored in the class you teach?	06	07	08	09	10
c)	Seem comfortable with the level of difficulty of the material in the class you teach?	11	12	13	14	15

The following statements describe work habits. Please indicate how often this student:

Never	Rarely	Some- times	Often	Always
01	02	03	04	05
06	07	08	09	10
11	12	13	14	15
16	17 🔾	18	19	20
21	22	23	24	25
26	27	28	29	30
31	32	33	34	35
36	37	38	39	40
41	42	43	44	45
	01	01 02 0 06 07 0 11 12 0 16 17 0 21 22 0 26 27 0 31 32 0 36 37 0	times  01	times       01     02     03     04       06     07     08     09       11     12     13     14       16     17     18     19       21     22     23     24       26     27     28     29       31     32     33     34       36     37     38     39       41     42     43     44

23	Listed below are	various socia	l and personal skills.	Please indicate how	often this student
----	------------------	---------------	------------------------	---------------------	--------------------

		Never	Rarely	Some- times	Often	Always
a)	Works co-operatively with other students	01	02	03	04	05
b)	Follows rules/instructions	06	07	08	09	10
c)	Challenges the teacher in a positive way	11 🔾	12 🔵	13 🔾	14 🔘	15
d)	Respects the property of others	16	17 🔾	18	19	20
e)	Demonstrates self-control	21	22	23	24	25
f)	Shows self-confidence	26	27	28	29	30
g)	Shows creativity	31	32	33	34 🔘	35
h)	Demonstrates problem-solving capacity	36	37 🔾	38	39	40
i)	Shows respect for adults	41	42 🔾	43	44 🔾	45
<u>́</u> ј)	Shows respect for other youth	46	47 🔾	48	49	50
k)	Accepts responsibility for his/her own actions	51	52	53	54	55

In the class you teach this student (including class time spent in a computer lab), how often does this student:

		Never	Rarely	Some- times	Often	Always (every class)	Not appli- cable
a)	Use basic software (e.g. word-processing or spreadsheet packages)?	01	02	03	04	05	06
b)	Use Internet, e-mail or other communications software?	07	08	09	10 🔘	11 (	12
c)	Use self-learning software (e.g. drill and practice software, tutorials, simulations, research, web sites, on-line help)?	13 🔾	14	15	16	17 (	18
d)	Use specialized software (e.g. music, design, data processing, programming)?	19	20	21	22	23	24

×		×
25	How many minutes per week does this student spend using a computer in your class (including class time spent in a computer lab)?	
	<sup>01</sup> None	
	<sup>02</sup> 1 to 29 minutes per week	
	<sup>03</sup> O 30 to 59 minutes per week	
	<sup>04</sup> 60 minutes or more per week	

SE	CTION 4	The Class You Tea	ch this Student			
26	Is the class (Mark all th	you teach this student a: eat apply.)				
	01	Class for special needs other than the healearning difficulties)	aring and visually impaired (e.g., special education,			
	02	Class targeting gifted students (e.g., scient programs)	tifically advanced programs, enriched, or advanced			
	03	French language immersion class				
English language immersion class						
Other language immersion class						
English as a second language (ESL) class						
<sup>07</sup> French as a second language (FSL) class						
27	What grade	e is the class that you teach this stud	lent?			
	01	This class is not assigned a grade				
	02	Grade 4				
	03	Grade 5				
	04 🔘	Grade 6				
	05	Grade 7 OR Secondary 1 (Quebec)				
	06	Grade 8 OR Secondary 2 (Quebec)				
	07	Grade 9 OR Secondary 3 (Quebec)	OR Senior 1 (Manitoba)			
	08	Grade 10 OR Secondary 4 (Quebec)	OR Senior 2 (Manitoba) OR Level I (Newfoundland)			
	09	Grade 11 OR Secondary 5 (Quebec)	OR Senior 3 (Manitoba) OR Level II (Newfoundland)			
	10 🔾	Grade 12	OR Senior 4 (Manitoba) OR Level III (Newfoundland)			
	11 🔾	Grade 13/OAC (Ontario Academic Credits	)			

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	<del>,</del>
Is this student in a split or multi-grade class?	
<sup>01</sup> No, the class includes a single grade or	nly
<sup>02</sup> Yes, the class includes the following gra	ades:
<sup>03</sup> Grade 4	
<sup>04</sup> Grade 5	
<sup>05</sup> Grade 6	
<sup>06</sup> Grade 7 OR Secondary 1 (Quebec)	
<sup>07</sup> Grade 8 OR Secondary 2 (Quebec)	
<sup>08</sup> Grade 9 OR Secondary 3 (Quebec)	OR Senior 1 (Manitoba)
<sup>09</sup> Grade 10 OR Secondary 4 (Quebec)	OR Senior 2 (Manitoba) OR Level I (Newfoundland)
Grade 11 OR Secondary 5 (Quebec)	OR Senior 3 (Manitoba) OR Level II (Newfoundland)
<sup>11</sup> Grade 12	OR Senior 4 (Manitoba) OR Level III (Newfoundland)
<sup>12</sup> Grade 13/OAC (Ontario Academic Cred	lits)
Is the class you teach this student:	
on Ontended to be taken by students planni	ng on university postsecondary education?
Intended to be taken by students planni education?	ng on college, trade or vocational postsecondary
Intended to be taken by students planni high school/secondary school graduatio	ng on entering the labour market following completion of on requirements?
<sup>04</sup> Not applicable	
How is the class you teach this student organ	nized?
<sup>01</sup> Full year (not semestered)	
<sup>02</sup> Two semesters	
<sup>03</sup> Three semesters	
<sup>04</sup> Other	

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<sup>01</sup> ( <sup>02</sup> ( <sup>03</sup> (	he language of instruction for this class?  English  French  Other (please specify)  ny students are enrolled in the class you teach this student?	
<sup>02</sup> (	French Other (please specify)	
03 (	Other (please specify)	
How mai		
How mai	ny students are enrolled in the class you teach this student?	
	students	
the long-	iss you teach this student, how many students (including this stude term problems listed below, whether or not the problem has been of ? (Some students may belong to more than one category.)	•
a) A spec	ech, hearing, vision, mobility or other health impairment that affects their g?	students
b) An em	otional or behavioural problem?	students
c) A learı	ning disability?	students
	iss you teach this student, how many students (including this stude tudents may belong to more than one category.)	ent):
a) Have a	a first language other than English or French?	students
	a limited knowledge of the main language of instruction that affects their normance?	students

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The following statements describe various attributes about you and the students in this student's class. Please indicate the extent to which you agree or disagree with each statement.

c) Work well together on group activities

d) Misbehave when you are called to the door or must attend to other interruptions

		Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a)	Many of the students in this class are not capable of mastering the curriculum at their grade	01	02	03	04	05
b)	Classroom activities are affected by difficulties some students have with the language of instruction	06	07	08	09	10
c)	In my classroom, the emphasis is on the development of academic skill	11 (	12	13	14 🔵	15
d)	I have a strong effect on the academic achievement of the students I teach	16	17 🔘	18	19	20
e)	I feel competent in dealing with students' behavioural problems	21	22	23	24	25
f)	I feel competent in dealing with students' learning problems	26	27	28	29	30
g)	I feel that a student's success at school is determined mainly by his/her home environment	31	32	33	34	35
h)	I have high expectations for the academic success of my students	36	37	38	39	40
i)	I strongly encourage students to achieve their full academic potential	41	42	43	44 🔾	45

#### **SECTION 5 Teaching Strategies and Homework**

How often do you use each of the following strategies to teach the class you teach this student

olddolli.	Never	Rarely	Some- times	Often	Always
a) Teach the class as a whole	01	02	03	04	05
b) Organize the class into groups with similar abilities	06	07	08	09	10
c) Organize the class into groups with a mixture of abilities	11 🔾	12	13 🔾	14 🔘	15
d) Allow students to form their own groups	16	17 🔾	18	19 🔵	20
e) Use individualized instruction plans	21	22	23	24	25
f) Other (please specify)	26	27	28	29	30

38 On average, how often do you assign homework to this student's class? (Include classroom work made intentionally long for completion out of the classroom)

01	5 days a week
$\bigcirc$	J days a week

39 For this student's class, how often do you monitor homework that you have assigned by doing any of the following:

		Never	Rarely	Some- times	Often	Always
a)	Keeping a record of who has turned in assignments	01	02	03	04	05
b)	Returning assignments with corrections or grades	06	07 🔘	08	09	10 🔾
c)	Discussing homework in class	11 🔾	12 🔾	13	14 🔾	15
d)	Having parent(s) or guardian(s) sign a homework book, note or agenda	16	17	18	19	20
e)	Have students conduct self- or peer, evaluations	21	22	23	24	25

 $<sup>^{02}</sup>$   $\bigcirc$  3 to 4 days a week

## **SECTION 6** Perceptions of Your School

Below are a number of statements that may describe the climate of your school. Please indicate the extent to which you agree or disagree with each statement.

		Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a)	The administrative, support and teaching staff work together as a team	01	02	03	04	05
b)	All staff is involved in decision making	06	07	08	09	10
c)	School staff knows what is expected of them in terms of their roles and responsibilities	11	12 🔾	13 (	14	15
d)	Staff clearly understands school policies and procedures	16	17 🔾	18	19	20
e)	Teachers have considerable influence on school policies	21	22	23	24	25
f)	Teachers have a strong influence on how resources (e.g. money, staff, instructional materials) are allocated	26	27 🔘	28	29	30
g)	Students clearly understand school rules	31 🔾	32	33	34	35
h)	The principal and/or vice-principal(s) provide(s) support to teachers	36	37	38	39	40
i)	Teachers receive positive feedback from the principal and/or vice-principal(s)	) 41 (	42	43	44	45
j)	The principal and/or vice-principal(s) circulate in the school to talk with staff	46	47	48	49	50
k)	The principal and/or vice-principal(s) spend(s) time getting to know student	51	52	53	54	55
l)	The school provides a positive working environment for teacher	56	57	58	59	60
m)	The school provides a positive working environment for students	61	62	63	64	65

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Please indicate the extent to which you agree or disagree with the following statements regarding your school's disciplinary policies.

		Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a)	Teachers in this school have reached a consensus about how to discipline students who break rules	01	02	03	04	05
b)	All students who break rules in this school face the same consequences	06	07	08	09	10 🔘
c)	Teachers in this school rarely overlook physical aggression among students	11 🔾	12	13	14	15
d)	Teachers in this school rarely overlook verbal aggression among students	16	17 🔾	18	19	20
e)	Teachers feel there is insufficient support within the school for managing disciplinary problems	21	22	23	24	25

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C	TION 7	Personal Informa					
Y	ou are:						
	<sup>01</sup> Fem	ale					
	<sup>02</sup> Male						
To	o which age g	oup do you belong?					
	<sup>01</sup> O 20 to	29					
	<sup>02</sup> O 30 to	39					
	<sup>03</sup> O 40 to	49					
	<sup>04</sup> O 50 to	59					
	<sup>05</sup> 60 o	r older					
(S	Specify the nur	nber of years and months of	experiend	ce, e.g., 1	year and		7
	As a teacher?	the grade level of this student?	experiend			s)	month
<u>a)</u> <u>b)</u> <u>c)</u>	As a teacher as	the grade level of this student?  this school?  w often do you use a comput			year( year(	s) s)	month month month uter) in
<u>a)</u> <u>b)</u> <u>c)</u>	As a teacher and As a teaching was	the grade level of this student?  this school?  w often do you use a comput	er (or a te	erminal co	year( year( year( punnected to	s) s) s) to a comp	month month month uter) in
a) b) c) th	As a teacher and As a teaching was a teaching to your classroom.  As a learning/p	the grade level of this student?  this school?  w often do you use a computys:	er (or a te	erminal co	year( year( year( onnected to Sometimes	s) s) s) to a comp	month month month  outer) in  Alway (Daily

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*		*
46	Please specify the highest level of education you have attained.	
	Of Some course work towards a bachelor's degree	
	<sup>02</sup> A teaching certificate, diploma or license	
	O3 A bachelor's degree	
	<sup>04</sup> A Bachelor of Education degree	
	<sup>05</sup> Some post-baccalaureate course work	
	<sup>06</sup> A post-baccalaureate diploma or certificate	
	Of Some course work towards a master's degree	
	<sup>08</sup> A master's degree	
	<sup>09</sup> Some course work towards a doctorate	
	<sup>10</sup> A doctorate degree	
	Trade/vocational certification (including journeyperson certification)	
	Other (please specify)	
47	Please indicate your field(s) of study: (Mark all that apply.)	_
	<sup>01</sup> English language and/or literature	
	<sup>02</sup> French language and/or literature	
	<sup>03</sup> Mathematics	
	04 Computer Science/Informatics	
	<sup>05</sup> Science (e.g. physics, chemistry, biology)	
	Of Trade/vocational	
	OSocial Sciences (e.g. history, geography, economics, journalism, family studies)	
	<sup>08</sup> Environmental Studies	
	<sup>09</sup> Fine Arts	
	Physical Education/Recreation	
	Education	
	Special Education	
	General (no specialization/concentration, e.g. B.A. General)	
	Other (please specify)	

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	Have you obtained any of the following advanced qualifications in special education? (Mark all that apply)
	One class in, or part of, a special education program
	O2 A special education certificate
	O3 A graduate degree in special education
	Other (please specify)
	None of the above
_	Have you obtained any of the following advanced qualifications in second language instruction? (Mark all that apply.)
	One class in, or part of, a second language program
	O2 A certificate in second language education
	<sup>03</sup> A graduate degree in second language education
	Other (please specify)
	None of the above
	Have you obtained advanced qualifications in areas other than your highest level of education, special education or second language education?
	<sup>01</sup> Yes (please specify)
	O2 No
	Statistics Canada is conducting this survey jointly with Human Resources Development Canada and has entered into an agreement with them to share the information. The shared information will not include any names or identifying numbers, must be kept confidential and will be used only for statistical purposes. Do you agree to share the information you have provided with Human Resources Development Canada?
	<sup>01</sup> O Yes
	<sup>02</sup> O No

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Human Resources Development Canada & Statistics Canada



# National Longitudinal Survey of Children and Youth - Cycle 4 Principal's Questionnaire



	Document 4
Place label here	
Flace label fiele	This information is collected under the authority of the <i>Statistics Act</i> (RSC. 1985 c. S19)
	Confidential when completed
	Version française au verso

#### Instructions

The **purpose** of this questionnaire is to gather information on children's school experiences. This complements information about other aspects of children's lives already collected from parents and children aged 10 and older. The questionnaire asks about school practices, the availability of resources, and the overall social climate of the school.

The survey is voluntary. However, to ensure that we have a full picture of students' development and experiences, we strongly encourage you to complete the questionnaire.

#### **INSTRUCTIONS**

- Please use a blue or a black pen when answering the questions.
- Please mark only one response circle per question unless otherwise indicated.
- Place the questionnaire in the enclosed business reply envelope and mail it directly to us.
- Please return the questionnaire within the next five days.

**YOUR RESPONSES ARE CONFIDENTIAL.** PLEASE DO NOT SHOW YOUR RESPONSES TO ANYONE ELSE – NOT A TEACHER, THE STUDENTS OR THEIR PARENTS.

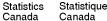
UNDER THE STATISTICS ACT, THE INFORMATION COLLECTED IN THIS QUESTIONNAIRE WILL BE KEPT CONFIDENTIAL.

If you did not receive a business reply envelope or if you have any questions please call 1-888-408-8879.

8-2200-379: 2001-02-19 S

STC/ECT-180-75020







## **SECTION 1** Characteristics of your school

01	What type o	of school is your institution:
	Public schoo	I (funded by a provincial government)
	01	Non-sectarian (no religious affiliation)
	02	Sectarian/separate (with religious affiliation, e.g., Anglican, Roman Catholic, Mennonite, etc.)
	Private school	(charges tuition fees but may also receive some provincial support)
	03	Non-sectarian (no religious affiliation)
		Sectarian with religious affiliation (e.g., private school directed by a religious order or with a mandate to provide religious teaching e.g. Christian, Islamic, Jewish)
02	Is your scho	pol reserved for:
	01	Physically impaired students only
	02	Mentally/emotionally disabled students only
	03	Both of the above
	04	None of the above
03	Please indic	cate the grades taught in your school: at apply.)
	01	Junior kindergarten/pre-school (generally 2 years before grade 1)
	02	Senior kindergarten/primary (generally 1 year before grade 1)
	03	Grade 1
	04	Grade 2
	05	Grade 3
	06	Grade 4
	07	Grade 5
	08	Grade 6

Page 2

	09	Grade 7 OR Secondary 1 (Quebec)	
	10 🔘	Grade 8 OR Secondary 2 (Quebec)	
	11 🔘	Grade 9 OR Secondary 3 (Quebec)	OR Senior 1 (Manitoba)
	12 🔘	Grade 10 OR Secondary 4 (Quebec)	OR Senior 2 (Manitoba) OR Level I (Newfoundland)
	13 🔘	Grade 11 OR Secondary 5 (Quebec)	OR Senior 3 (Manitoba) OR Level II (Newfoundland
	14 🔘	Grade 12	OR Senior 4 (Manitoba) OR Level III (Newfoundland
	15 🔘	Grade 13/OAC (Ontario Academic Credi	ts)
	uage ir		25% or more of instruction time is spent in the
A langu	<b>uage ir</b> sion lan	mmersion program is a program where guage	·
A langu	uage ir	mmersion program is a program where guage  Program for hearing or visually impaired	students
A langu	uage in sion lan	mmersion program is a program where guage  Program for hearing or visually impaired	students
A langu	uage in sion lan	nmersion program is a program where guage  Program for hearing or visually impaired  Program for special needs other than the learning difficulties)	students e hearing and visually impaired (e.g., special education
A langu	uage in sion land	mmersion program is a program where guage  Program for hearing or visually impaired  Program for special needs other than the learning difficulties)  Program targeting gifted students (e.g., s	students e hearing and visually impaired (e.g., special education
A langu	uage in sion land	mmersion program is a program where guage  Program for hearing or visually impaired  Program for special needs other than the learning difficulties)  Program targeting gifted students (e.g., sprograms)	students e hearing and visually impaired (e.g., special education
A langu	uage in sion land	mmersion program is a program where guage  Program for hearing or visually impaired  Program for special needs other than the learning difficulties)  Program targeting gifted students (e.g., sprograms)  French language immersion program	students e hearing and visually impaired (e.g., special education
A langu	uage in sistement of the sistement of th	Program for hearing or visually impaired Program for special needs other than the learning difficulties) Program targeting gifted students (e.g., sprograms) French language immersion program English language immersion program	students  e hearing and visually impaired (e.g., special education scientifically advanced programs, enriched, or advance
A langu	uage in sion land	Program for hearing or visually impaired Program for special needs other than the learning difficulties) Program targeting gifted students (e.g., sprograms) French language immersion program English language immersion program Other language immersion program	students hearing and visually impaired (e.g., special education scientifically advanced programs, enriched, or advance
A langu	01 0 02 0 03 0 05 0 06 0 07 0 07 0 07 0 07 0 07 0 07	Program for hearing or visually impaired Program for special needs other than the learning difficulties) Program targeting gifted students (e.g., sprograms) French language immersion program English language immersion program Other language immersion program English as a second language (ESL) programs	students hearing and visually impaired (e.g., special education scientifically advanced programs, enriched, or advance
A langu	01	Program for hearing or visually impaired Program for special needs other than the learning difficulties) Program targeting gifted students (e.g., sprograms) French language immersion program English language immersion program Other language immersion program English as a second language (ESL) programs	students hearing and visually impaired (e.g., special education scientifically advanced programs, enriched, or advance

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 $^{\text{08}}$   $\bigcirc$  Child care so parents can attend school parent meetings or events

<sup>09</sup> O Parenting education programs

<sup>10</sup> Adult literacy programs

<sup>11</sup> Family literacy programs

Other (please specify)

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\*

	TION 2 The st								
Wł	hat was the total enrollm	ent of you	r schoo	ol at the	beginr	ning of th	nis acad	emic year	?
	stu	dents							
wh	ow many students attend nether or not the problem nome students may belor	n has beer	officia	ally iden	tified?	followir	ng long-t	term proble	ems,
a)	A speech, hearing, vision, m impairment that affects their		ner healt	th					studen
b)	An emotional or behavioural	problem?							studen
<u>c)</u>	A learning disability?								studen
`	Hove a first language other				gory.)		Γ		O#: 1d =
<u>a)</u>	Have a first language other	than English	or Fren		egory.)				
`	ŕ	than English	or Fren		gory.)		[		studen
a) b) c)	Have a first language other to the Have arrived in Canada with	than English nin the last y ing?	or Fren						studen studen studen
a) b) c)	Have a first language other to the Have arrived in Canada with Are from a rural or farm setting.	than English nin the last y ing?	or Fren		6% to 10%	11% to 15%	16% to 20%	More than 20%	studen
a) b) c)	Have a first language other to the Have arrived in Canada with Are from a rural or farm setting.	than English hin the last y ing? hts are: Less than 1%	ear?	3% to	6% to				studen studen

10	Listed below are a number of different disciplinary pro	blems tha	it may occ	cur in a so	chool.
	How often do you have to discipline students because	of the fol	lowing:		
	Never	Rarely	Some-	Often	Δlw:

		Never	Rarely	Some- times	Often	Always
a)	Verbal conflicts among students	01	02	03	04	05
b)	Physical conflicts among students	06	07	08	09	10
c)	Vandalism of school property	11 🔾	12 🔵	13 🔾	14 🔘	15
d)	Theft of student belongings	16 🔾	17 🔾	18	19 🔵	20
e)	Theft of staff belongings	21	22 🔘	23	24	25
f)	Smoking on school property	26	27	28	29	30
g)	Use of drugs on school property (including alcohol and glue)	31	32 🔘	33	34 🔘	35
h)	Verbal abuse of a staff member	36	37 🔾	38	39	40
i)	Physical assault of a staff member	41 🔘	42 🔵	43 🔾	44 🔘	45
j)	Harassment of certain students by groups of students	46	47	48	49	50
k)	Sexual harassment among students	51	52	53	54	55
l)	Conflicts among students of differing racial or ethnic backgrounds	56	57	58	59	60
m)	Students possessing weapons (e.g., pocket knife, gun)	61	62	63	64	65

11 How would you describe the economic background of the students attending your school? Specify the percentage of families in each category.

- a) Family income above \$50,000 per year
- Family income between \$30,000 and \$50,000 per year
- c) Family income \$30,000 per year or below

**TOTAL** Total of a,b,c must add to 100%

 $^{01}$  O I do not know



- 1 0 0

\*

a)	White	
b)	Chinese	
c)	South Asian (e.g. East Indian, Pakistani, Sri Lankan)	
d)	Black	
e)	Filipino	
f)	Latin American	
g)	Southeast Asian (e.g. Cambodian, Indonesian, Laotian, Vietnamese)	
h)	Arab	
i)	West Asian (e.g. Afghan, Iranian)	
j)	Japanese	
k)	Korean	
l)	Native/Aboriginal (e.g. North American Indian, Métis, Inuit/Eskimo)	
m)	Other (please specify)	
	Total	1 0 0

\*

7

		None	1 to 5%	6 to 10%	11 to 15%	16 to 20%	21% or more	No applio
a)	School events (e.g., sports, plays)	01	02	03	04	05	06	07
b)	Fund raising activities	08	09	10	11 🔾	12 🔵	13	14
<u>c)</u>	Field trips	15 🔵	16 🔾	17 🔾	18	19	20	21
d)	Classroom activities	22 🔾	23	24	25 🔾	26	27	28
e)	Supervision of students (e.g., at recess or lunch time)	29	30	31	32	33	34	35
f)	The parent school council/ association or school/parent liaison committee or parent					40 -		42.
	your opinion, how strongly do parents  Strongly support the efforts of the			pport t	he effo	rts of th	ne schoo	ul's staf
In y	your opinion, how strongly do parents	s/guard	ians su				0	
In y	your opinion, how strongly do parents  One of the school's of the school's one of the	s/guard e school's s staff e school's	ians su				0	
In y	your opinion, how strongly do parents  10 Strongly support the efforts of the Support the efforts of the Support some of the efforts of the	s/guard e school's s staff e school's	ians su s staff s staff				0	
In y	your opinion, how strongly do parents  On the strongly support the efforts of the school's support some of the efforts of the school's support some of the efforts of the school's support some some support some support some some support some	s/guard e school's s staff e school's	ians su s staff s staff				0	
ln y	your opinion, how strongly do parents  10 Strongly support the efforts of the school's Support some of the efforts of the Oppose the efforts of the school's Strongly oppose the efforts of the school's Strongly oppose the efforts of the school's Strongly oppose the efforts of the oppose the efforts of the school's Strongly oppose the efforts of the oppose the oppose the efforts of the oppose the efforts of the oppose the oppose the efforts of the oppose the efforts of the oppose the oppose the efforts of the oppose the efforts of the oppose the oppose the efforts of the oppose the opp	s/guard e school's s staff e school's s staff e school's ns well en school nittee?	ians su s staff s staff nough counci	pport t	he effo	rts of th	ne schoo	l's staf
ln y	your opinion, how strongly do parents  or opinion, how active is the parent mmittee or the parent advisory committee.	s/guard e school's s staff e school's s staff e school's ns well en school nittee?	ians su s staff s staff nough counci	pport t	he effo	rts of th	ne schoo	l's staf

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<sup>06</sup> ○ Not at all active

*	*
16	How much influence do these councils, associations, or committees, have on school policies or practices?
	<sup>01</sup> Very strong influence
	O2 Strong influence
	OSome influence
	04 C Little influence
	<sup>05</sup> No influence

SE	C7	FION 3 Teachers and	d School Re	sources	
17	Ple	ease report the current number of fu	ull-time and part-tim	e staff for the follow	ing categories.
			Number of full-time staff	Number of part-time staff	Not available at my school
	<u>a)</u>	Principal	Ш	Ш	01
	b)	Vice-principals / assistant-principals	Ш	Ш	02
	c)	Classroom teachers			03
	d)	Teaching assistants / student assistants / teacher's aides	′		04
	e)	Librarians			05
	f)	Resource teachers (e.g. special ed. teachers, educational therapists, physical educators for special needs students)		1 1 1 1	06
	g)	Guidance counselors			07

Listed below are several types of support services available to some schools. Please indicate if the service is available to your school and if so, whether or not it meets the needs of your students.

		Not available	Available and meets student needs	Available but does not meet student needs
a)	School psychologist	01	02	03
b)	Psychiatrist	04	05	06
c)	Speech and language therapist	07	08	09
d)	Audiologist	10	11 🔘	12
e)	Occupational therapist	13	14 🔘	15
f)	Physical therapist	16	17 🔾	18
g)	Social worker	19	20	21
h)	Community health nurse	22 🔾	23	24
i)	Instructor in Aboriginal peoples' culture	25	26	27
j)	Instructor in cultural awareness	28	29	30
k)	Police officer	31	32	33

Below are a number of different resources that may be available to your school. Please rate the extent to which each resource currently meets the needs of your school. (Please consider resources regardless of whether they were provided by parents, students or the school staff.)

		Does not meet my school's needs	Partially meets my school's needs	Completely meets my school's needs	Not applicable
Hu	ıman resources				
a)	Qualified human resources in teaching (e.g., teachers, teaching assistants / teacher's aides)	01	02	03	04
b)	Access to specialized human resources in computers (e.g., trained computer instructors)	05	06	07	08

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\*

\*

Below are a number of different resources that may be available to your school. Please rate the extent to which each resource currently meets the needs of your school. (Please consider resources regardless of whether they were provided by parents, students or the school staff.) – Concluded

		Does not meet my school's needs	Partially meets my school's needs	Completely meets my school's needs	Not applicable
Sc	hool and classroom resources				
c)	Instructional resources (e.g., curriculum documents, books)	09	10	11 _	12 🔵
d)	Science equipment	13	14	15	16
e)	Equipment for mathematics instruction (e.g., counting blocks, calculators)	17	18	19	20
f)	School supplies (e.g., paper, pencils)	21	22 🔾	23	24
g)	Budget for consumables	25	26	27	28
h)	Special equipment for physically disabled/challenged students	29	30	31	32
i)	Gym equipment (e.g., mats, balls)	33 🔾	34	35	36
Ph	ysical plant				
j)	School buildings	37	38	39	40
k)	Instructional space (e.g., classroom size)	41 🔾	42 🔾	43	44 🔘
I)	Gymnasium	45	46	47 🔾	48
m)	Office space (e.g., for the administration, for teachers)	49	50	51	52
n)	School grounds	53	54	55	56
o)	Heating and lighting	57	58	59	60
p)	Outdoor play equipment	61	62	63	64
Mu	Iti-media resources				
q)	Access to a <b>large area network</b> (e.g., Internet)	65	66	67	68
r)	Access to a <b>local area network</b> (e.g., your LAN system)	69	70	71	72
s)	Computers for course instruction	73	74	75	76
t)	Computer software for course instruction	77 🔾	78	79	80
u)	Audio-visual resources (e.g., VCRs, film projectors)	81	82	83	84

		Numbe
a) Ir	the school altogether?	
b) A	vailable to students?	
c) A	vailable only to teachers?	
d) A	vailable only to administrative staff?	
e) C	onnected to the Internet/World Wide Web?	
f) C	onnected to a local area network (LAN, Intranet)?	

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## **SECTION 4** Perceptions of your school

Below are a number of statements that describe different aspects of schooling. Please indicate how strongly you agree or disagree with each of the following statements.

		Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a)	I find my professional role satisfying	01	02	03	04	05
b)	If I had to do it again, I would remain a teacher rather than become a principal	06	07	08	09	10
c)	I feel good about continuing my career in this school district	11	12	13	14	15
d)	I feel competent in dealing with student's behavioral problems	16	17 🔾	18	19	20
e)	I have a considerable influence on my school's policies	21	22	23	24	25
f)	I have little influence on how money is allocated for school resources at the school	26	27	28	29	30
g)	The emphasis in my school is on the development of academic skills	31	32	33	34	35
h)	I have high expectations for the academic success of students attending this school	36	37 🔾	38	39	40
i)	I try to ensure that students are encouraged to achieve their full academic potential	41	42	43	44	45
j)	I feel students' success at school is determined mainly by their home environments	46	47	48	49	50
k)	I feel sufficient academic resources are available to students and teachers in this school	51	52	53	54	55

**SECTION 5** Personal information 22 You are: Female? → Male? 23 To which age group do you belong? <sup>01</sup> O 20 to 29 30 to 39 ) 40 to 49 ) 50 to 59 ) 60 or older 24 How much experience do you have in the following capacities: (Specify the number of years and months of experience; e.g., 1 year and 5 months.) a) Principal years and months Principal at this school years and months years and months or Vice-principal/assistant principal None Vice-principal/assistant principal at this school years and months or None years and months or None Teacher years and months or Teacher at this school None

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	$\star$
	Please specify the highest level of education you have attained. (Mark all that apply)
	<sup>01</sup> Some course work towards a bachelor's degree
	O2 A teaching certificate
	<sup>03</sup> A bachelor's degree
	<sup>04</sup> A bachelor of education degree
	<sup>05</sup> O Some post-baccalaureate course work
	<sup>06</sup> A post-baccalaureate diploma or certificate
	Of Some course work towards a master's degree
	OB A master's degree
	<sup>09</sup> O Some course work towards a doctorate
	<sup>10</sup> A doctorate
	Other (please specify)
1	provided with Human Resources Development Canada?
	<ul> <li>✓ Yes</li> </ul>
	○ No

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 $\star$ 



## National Longitudinal Survey of Children and Youth

Cycle 4

## **Booklet 20E**

Confidential when completed

Collected under the authority of the Statistics Act, revised statutes of Canada, 1985, Chapter S19.

Aussi disponible en français



## Please read instructions on next page before beginning.

			<u> </u>
A. How was this questionna	ire completed?	B. Did the respondent complete this questionnaire <u>before</u> the interview	?
<sup>1</sup> On the telephone		<sup>1</sup> Yes	
<sup>2</sup> In the household - I	by the respondent	<sup>2</sup> No	
<sup>3</sup> In the household - I	by the interviewer		
	FOR OFFICE	USE ONLY	
Person ID			
Child's First Name			
Assignment No.	Question	nnaire No. D - 4 2 -	

8-5300-396.1: 2000-07-26 STC/ENM-040-75020



## INSTRUCTIONS

This is a survey with questions about you, your family, friends, how you feel and what you like to do. Your answers will help the government to plan programs and services for young people like yourself.

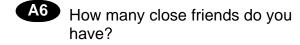
This is not a test and there are no right or wrong answers. Some questions may seem personal and some are about things which not everybody does. Take your time and please be sure to answer each question based on what you really think. You can choose whether or not to fill out this questionnaire. If you need help with any questions, you may ask the interviewer.

When you answer these questions, you can mark your answers like this  $\otimes$  or fill in the circle  $\bullet$ , or write a number in the boxes, as in the examples below. When you write your answers, make sure you press hard with your pencil.

#### **Example 1**

- B1 How do you feel about school?
  - $^{\circ}$  O I like school very much.
  - $^{1}$   $\otimes$  I like school quite a bit.
  - <sup>2</sup> O I like school a bit.
  - $^{\scriptscriptstyle 3}$  O I don't like school very much.
  - $^{\scriptscriptstyle 4}$   $\bigcirc$  I hate school.

#### Example 2



93 O None

OR

0 3 number of close friends



Remember that the KIDS HELP PHONE is available to help you at any time if you feel like you would like to talk to someone about a problem. 1-(800) 668-6868

Statistics Canada will keep your answers PRIVATE.

No one from your home or your school will see what you write.

#### THANK YOU FOR YOUR HELP!

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Please indicate your starting time.

		1
		1
		1
		1
	_	1
		1
	_	1
		1





ease answer the following					
ntements about your friends d others your age.	False	Mostly false	Sometimes true / Sometimes false	Mostly true	Tru
I have many friends.	$^{\circ}\bigcirc$	1 🔘	2 🔾	<sup>3</sup> O	4 (
I get along easily with others my age.	5 🔾	6 O	7 🔾	8 🔾	9 (
Others my age want me to be their friend.	° 🔿	1 🔿	<sup>2</sup> O	<sup>3</sup> O	4 (
Most others my age like me.	5 🔾	6 O	7 🔾	* O	9 🔾
For the rest of this questionnai rust and confide in. They may school.	ire, by "clo be friends t	se friends" hat you hai	, we mean the pong ng out with at sch	eople tha	t you utside
About how many days a week do you of things with <b>close friends</b> outside of schours?	do hool	03	nan once a week a week ys a week ys a week ys a week		
How many close friends do you have?		None	Number o	of close frier	nds
		93	OR		
How many of your close friends do the following:		93	OR L		
	None	93 A few			All
				3	
following:	None		Most		
a. smoke cigarettes?	None	A few	Most <sup>2</sup>		0
a. smoke cigarettes? b. drink alcohol?	None  0 () 4 ()	1 0 5 0	2 <u>6</u>	7	0
a. smoke cigarettes? b. drink alcohol? c. have tried marijuana? d. have tried drugs other than	None  O O  A O  A O  A O  Dave	1 0 5 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	6 0 2 0	3 7 7	0

B

Statistics Canada will keep your answers PRIVATE. No one from your home or your school will see what you write.

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*			*
<b>A9</b>	What is their relationship to you? (Mark everyone you feel you can talk to	01 🔘	Mother
	about yourself or your problems.)	02 🔘	Father
		03 🔘	Stepmother
		04 🔘	Stepfather
		05 🔾	Brother
		06 🔘	Sister
		07 🔘	Grandparent
		08	Other relative
		09	A friend of the family
		10 🔾	Sitter or babysitter
		11 🔘	Parent's boyfriend/girlfriend
		12 🔾	Teacher
		13 🔾	Coach or leader (e.g. Scout, Guide or church leader)
		14 🔘	Other (e.g. family doctor)
A10	During the past 6 months, how well have you gotten along with other young people such as	15 🔵	Very well, no problems
	friends or classmates?	16 🔾	Quite well, hardly any problems
		17 🔾	Pretty well, some problems
		18 🔾	Not too well, many problems
		19 🔵	Not well at all, constant problems
<b>A11</b>	During the past 6 months, how well have you gotten along with your <b>mother</b> , <b>step mother</b> ,	20 🔵	Very well, no problems
	or foster mother? (Answer about the mother you spend the	21 🔾	Quite well, hardly any problems
	most time with.)	22 🔵	Pretty well, some problems
		23 🔵	Not too well, many problems
		24	Not well at all, constant problems
		25 🔾	I am not in touch with my mother
		26	I don't have a mother
			Taon thave a moner
A12	During the past 6 months, how well have you gotten along with your <b>father</b> , <b>step father</b> , or	27	Very well, no problems
	foster father? (Answer about the father you spend the	28 🔾	Quite well, hardly any problems
	most time with.)	29	Pretty well, some problems
		30 🔘	Not too well, many problems
		31	Not well at all, constant problems
		32 🔾	·
		33 🔾	I am not in touch with my father I don't have a father
			r don't have a fame.
A13	During the past 6 months, how well have you gotten along with your <b>brothers</b> and <b>sisters</b> ,	34 🔘	Very well, no problems
	step brothers and sisters, or foster brothers and sisters?	35 🔾	Quite well, hardly any problems
	(Answer about the ones you spend the most time with.)	36	Pretty well, some problems
	most unic with,	37 🔵	Not too well, many problems

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Not well at all, constant problems

I don't have brothers and sisters

I am not in touch with my brothers and sisters

\*





How w	vell do you think you are d	oing in y	/our	0 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	I like school ve I like school qu I like school a I don't like school I hate school Very well Well Average	uite a bit		
How ir	vell do you think you are d	oing in y	our/	2	I like school a I don't like school I hate school Very well Well	bit		
How ir	vell do you think you are d	oing in y	our/	3	I don't like school I hate school Very well Well			
How ir	vell do you think you are d	oing in y	our/	4 O	I hate school  Very well  Well	ool very much		
How ir	vell do you think you are d	oing in y	our/	09 ()	Very well Well			
How ir	vell do you think you are d	oing in y	our/	10 🔾	Well			
How ir do the				0				
How ir do the				11 🔵	Avorago			
How ir do the				_	Average			
How ir				12 🔾	Poorly			
How ir do the				13 🔵	Very poorly			
	mportant is it to you to following in school:		Very important		omewhat mportant	Not very important	Not importan at all	
a. ma	ake friends?		1 🔘		2 🔘	3 🔘	4 🔘	
b. ge	et good grades?		5 🔘		6 🔾	7 🔘	8 🔾	
c. pa	rticipate in extra-curricular tivities?		1 🔘		2 🔘	3 🔘	8 🔘	
d. lea	arn new things?		5 🔿		6 🔘	7 🔿		
How d	do you like the following ots:	I hate it	l dor it very	n't like / much	l like it a little	l like it a lot	l don't take it	
a. Ma	ath	01 🔿	02	<sup>2</sup> O	03 🔘	04 🔘	05	
b. En	nglish	06 🔿	07	Ŏ	08	09	10	
c. Fre	ench	01 🔘	02	20	03	04	05	

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<b>+</b>		
^		

<b>B5</b>	an	ead the following statements d choose the answer that st describes how you feel.	All the time	Most of the time	Some the tir		Rarely	Never
	a.	I feel safe at school.	0 🔾	1 🔘	<sup>2</sup> C	)	3 🔾	4 🔘
	b.	I feel safe on my way to and from school.	5 🔾	e 🔾	<sup>7</sup> C	)	<sup>8</sup> O	9 🔾
	C.	Other young people say mean things to me at school.	° O	1 (	<sup>2</sup> C	)	3 🔘	4 🔿
	d.	I am bullied <b>in</b> school.	5 🔾	6 O	<sup>7</sup> C	)	8 🔘	9 O
	e.	I am bullied on my way <b>to</b> and <b>from</b> school.	° O	1 🔘	<sup>2</sup> C	)	<sup>3</sup> O	4 🔿
	f.	I feel like an outsider (or left out of things) at my school.	5 🔾	6 🔾	7 🔾	)	8 🔘	9 🔾
Abo	out	t my teachers and home	work.					
B6			All the time	Most of the time	Some of the time	Rarely	Never	
	a.	In general my teachers treat me fairly.	00	01	02	03	04	
								Don't need help
	b.	If I need extra help, my teachers give it to me.	05	06	07	08	09	10
								No homework
	C.	I have a place at home to do homework or study.	00	01	02	03	04 🔘	05 🔾
	d.	When my teachers give me homework, I do it.	<sup>06</sup> O	07	08	09	10	No homework
B7		In the next statements,	narents	include au	ardians '	They are	the ones	who live
		with you at home and in	ofluence y	our life.	iai aiai is.	They are	the ones	
			All the time	Most of the time	Some of the time	Rarely	Never	No problems at school
	a.	If I have problems at school, my parents are ready to help.	00 0	01	02	03	04	05
	b.	My parents encourage me to do well at school.	06	07	08	09	10 🔿	
	C.	My parents expect too much o me at school.	f 00	01	02	03	04	

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Choose the answer that best describes how you feel.	False	Mostly false	Sometimes false/ Sometimes true	Mostly true	True
a. In general, I like the way I am.	00 🔘	01 🔵	02	03 🔘	04 🔘
b. Overall I have a lot to be proud of.	05	06 🔾	07	08	09 🔾
c. A lot of things about me are good.	00 🔘	01	02	03	04
d. When I do something, I do it well.	05 🔘	06	07	08	09 🔘
e. I like the way I look.	00 🔘	01	02	03 🔘	04

#### **SECTION D** Feelings and Behaviours







answer that best describes you.	Never or not true	Sometimes or somewhat true	Often o
I show sympathy to (I feel sorry for) someone who has made a mistake.	1 🔾	2 🔾	3
b. I can't sit still, I am restless.	4 🔿	5 🔾	6
c. I destroy my own things.	7 🔾	8 🔾	9 O
d. I try to help someone who has been hurt.	1 🔘	2 🔾	3
e. I steal at home.	4 🔿	5 🔾	6
f. I am unhappy or sad.	7 🔾	8 🔾	°O
g. I get into many fights.	1 🔿	<sup>2</sup> O	3
h. I offer to help clear up a mess someone else has made.	4 🔿	5 🔾	6
I am easily distracted. I have trouble sticking to any activity.	7 🔿	8 🔾	9 O
<ul> <li>j. When I am mad at someone, I try to get others to dislike him/her.</li> </ul>	1 🔘	2 🔾	3 🔾
k. I am not as happy as other people my age.	4 🔿	5 🔾	<sub>6</sub> O
I destroy things belonging to my family or other young people.	7 🔾	8 🔾	9 O
m. If there is an argument, I try to stop it.	1 🔾	<sup>2</sup> O	3
n. I can't concentrate, I can't pay attention.	4 🔿	5 🔾	6
o. I am too fearful or nervous.	7 🔾	8 🔾	9
<ul> <li>P. When I am mad at someone, I become friends with another as revenge.</li> </ul>	1 🔘	<sup>2</sup> O	<sup>3</sup>

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Re an	ead the following statements and choose the swer that best describes you.	Never or not true	Sometimes or somewhat true	Often or very true
q.	I am impulsive, I act without thinking.	4 🔿	5 🔾	6
r.	I tell lies or cheat.	<sup>7</sup> O	* O	<sup>9</sup> O
s.	I offer to help other young people (friend, brother or sister) who are having difficulty with a task.	1 ()	<sup>2</sup> O	³O
t	I worry a lot.	4 🔘	5	6
u.	I have difficulty waiting for my turn in games or group activities.	7 🔾	8 🔾	9
v.	When another kid accidentally hurts me, I assume that the other kid meant to do it, and I react with anger and fighting.	1	<sup>2</sup> O	<sup>3</sup>
W.	When I am mad at someone, I say bad things behind his/her back.	4 🔿	5 🔾	6
х.	I physically attack people.	7 🔾	<sup>8</sup> O	9 O
y.	I comfort another young person (friend, brother or sister) who is crying or upset.	1 ()	<sup>2</sup> O	3
z.	I cry a lot.	4 🔿	5 🔿	6
aa.	I vandalize.	7	<sup>8</sup> O	9
bb.	I threaten people.	1	<sup>2</sup> O	3
cc.	I help to pick up things which another young person has dropped.	4 🔾	5 🔾	6
dd.	I bully or am mean to others.	7	8 🔾	9
ee.	I stare into space.	10	<sup>2</sup> O	3
ff.	When I am mad at someone, I say to others: let's not be with him/her.	4 🔘	5 🔾	6 O

(B)

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	A
	•

	wer that best describes you.	Never or not true		netimes or what true	Often or very true
gg.	I am nervous, highstrung or tense.	7 🔿	3	<sup>3</sup> O	9
hh.	I kick or hit other people my age.	1 ()	2	20	<sup>3</sup> O
ii.	When I am playing with others, I invite bystanders to join in a game.	4 🔘	5	· O	<sup>6</sup>
jj.	I steal outside my home.	7 🔾	8	30	9
kk.	I am inattentive, I have difficulty paying attention to someone.	1	2	<sup>2</sup> O	³O
II.	I have trouble enjoying myself.	4 🔿	5	<u> </u>	6
mm.	. I help other people my age (friends, brother o sister) who are feeling sick.	or <sup>7</sup>	8	30	<sup>9</sup> O
nn.	When I am mad at someone, I tell that person secrets to a third person.	1's 1	2	<sup>2</sup> O	³O
00.	I encourage other people my age who cannot do things as well as I can.	4 🔾	5	<u>`</u>	<sup>6</sup> O
Duri time	ing the past 12 months, about how many es	Never	Once or twice	3 or 4 times	5 times or more
		Never			
time	have you stayed out later than your	Never  1  5	twice	times	
a.	have you stayed out later than your parents said you should?  have you stayed out all night without	1 🔾	twice <sup>2</sup>	times	or more
a. b.	have you stayed out later than your parents said you should?  have you stayed out all night without permission?  have you skipped a day of school without	<sup>1</sup> O	2 C	**************************************	* 0
a. b. c.	have you stayed out later than your parents said you should?  have you stayed out all night without permission?  have you skipped a day of school without permission?	<sup>1</sup> O	2 C	**************************************	* 0
a b c d	have you stayed out later than your parents said you should?  have you stayed out all night without permission?  have you skipped a day of school without permission?  have you been drunk?  were you questioned by the police about anything you might have done such as stealing, damaging property or anything	<sup>1</sup> O	fwice  2  6  2  6  6  6  6  6  6  6  6  6  6	**************************************	or more
a. b. c. d. puri	have you stayed out later than your parents said you should?  have you stayed out all night without permission?  have you skipped a day of school without permission?  have you been drunk?  were you questioned by the police about anything you might have done such as stealing, damaging property or anything else?	1 O 5 O 1 O	**************************************	**************************************	* 0

(B)

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**SECTION E** 

My Parent(s)







My m	other						
	most t	of the mother you spend the time with. Is she	01	your biological mother?			
	(IVIAI N	one only.)	02	your adoptive mother?			
			03	your stepmother?			
			04	your foster mother?			
			05	another person?			
			06	OR		<u> </u>	
			(0	I am not in touch with my mother	<b>→</b>	Go to question	on E4
<b>1</b> 2	Thinki	ing of the mother you have ied in the previous question:					
	idoriti.	iou iii iiio pioviouo quosiisiii		A great deal	Some		Very tle/Not at or None
	a. Ho	ow well do you feel that your other understands you?		° ()	1 🔿		2 🔾
	b. Ho	ow much fairness do you ceive from your mother?		3 🔾	4 🔿		5 🔾
	c. Ho	ow much affection do you ceive from your mother?		6 🔾	7 🔿		8 🔘
<b>3</b>	Overa relatio	III, how would you describe your onship with your mother?	1 🔾	Very close			
			<sup>2</sup> O	Somewhat close			
			<sup>3</sup> O	Not very close			
My Fa	ther						
E4	time w	hink of the father you spend the most vith. Is he one only.)	01	your biological father?			
	•		02	your adoptive father?			
			03	your stepfather?			
			04	your foster father?			
			05	another person?			
				OR			
			06O	I am not in touch with my father	<b>→</b>	Go to questic	on E7

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Th ide	inking of the father you have entified in the previous question:				•	1		v	ery
					A gı de	reat al	Some	little	/Not at r None
a.	How well do you feel that your father understands you?				0 (	)	1 (	2	0
b.	How much fairness do you receive from your father?				<sup>3</sup> (	)	4 🔘	5	0
C.	How much affection do you receive from your father?				<sup>6</sup> (	)	7 🔿	8	0
Ov rel	verall, how would you describe your ationship with your father?		5 (	Ve	ery close				
			6 O		mewhat c	lose			
			7 🔿	No	t very clos	se			
SW	er the following questions thi revious questions.	nking of th	e fat	hei	and mo	other ye	ou have	identif	ied ir
Но	ow well do you think your parents								
ge	t along with each other? '		° O	Ve	ery well				
			<sup>1</sup> O		irly well				
			<sup>3</sup> O		t very wel				
			O	No	ot applicab	le			
		Never	Rare	ely	Some- times	Often	Alway s	l don't know	No appl abl
a.	How often do your parents disagree about how to deal with you and your brother(s) and sister(s)?	01	02	)	03	04	05	06	<sup>07</sup> C
b.	How often do your parents get upset with one another, including times when they are mad but don't say much?	080	09	)	10	11 🔘	12	13	14
Fo	r each of the following statements, use ster parents or guardians) in general ha	e the choice the	nat bes	st de	escribes th	ne way yo	our parent	s (or step	paren
	parents	ave acted tow	aru yo	u <b>u</b>	uring the	past 0 II	ionins.		
		Never	Rare	ely	Some	etimes	Often	1 4	Always
a.	smile at me.	5 🔾	6 (	)	7	0	8 🔾		9 🔾
b.	want to know exactly where I am and what I am doing.	0 🔿	1 (	)	2	0	3 🔾		4 🔿
C.	soon forget a rule they have made.	5 ()	6 (	)	7	$\bigcap$	8 🔾		9 (
	may have made.								

d. praise me.

e. let me go out any evening I want.

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0 0

5 🔿

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1 🔿

6 O

2 🔿

<sup>7</sup> O

<sup>3</sup> O

8 🔘

4 🔘

9 🔾

L		
₹		

My pare	ents					
		Never	Rarely	Sometimes	Often	Alway
	me what time to be e when I go out.	0 🔘	1 🔘	2 🔘	3 🔘	4 🔘
g. nag	me about little things.	5 🔘	6 🔾	7 🔘	8 🔘	9 🔾
h. liste	n to my ideas and opinions.	0 🔿	1 🔘	2 🔘	3 🔾	4 🔿
whe	I solve a problem together never we disagree ut something.	5 🔘	6 🔾	7 🔘	8 🔘	9 🔾
j. only	keep rules when it suits them.	0 🔘	1 🔘	2 🔘	3 🔘	4 🔘
k. get a	angry and yell at me.	5 🔘	6 🔾	7 🔘	8 🔾	9 O
I. mak	e sure I know I am appreciated.	0 🔿	1 🔘	2 🔘	3 🔘	4 🔘
m. threa	aten punishment more n than they use it.	5 🔘	6 🔾	7 🔘	8 🔘	9 🔾
n. spea	ak of the good things I do.	0 🔿	1 🔘	2 🔘	3 🔘	4 🔾
o. find	out about my misbehaviour.	5 🔘	6 🔾	7 🔘	8 🔾	9 🔾
p. enfo a rul	rce a rule or do not enforce le depending upon their mood.	0 🔘	1 🔾	2 🔘	3 🔘	4 🔘
q. hit m	ne or threaten to do so.	5 🔘	6 🔾	7 🔘	8 🔾	9 🔾
r. seer	m proud of the things I do.	0 🔘	1 🔘	2 🔘	3 🔘	4 🔾
s. seer muc	m too busy to spend as h time with me as I'd like.	5 🔿	6 🔾	7 🔘	8 🔘	9 🔾
	an interest in where I am g and who I am with.	0 🔿	1 🔵	2 🔘	3 🔘	4 🔾
How ofte	en do your parents decide		Almost never	Sometimes	Often	Alway
a. the t	time you go to bed on knights?		5 🔘	6 🔾	7 🔘	8 🔾
b. the p	people you hang around		1 (	2 🔿	3 🔿	4 🔿

c. how much television you watch?

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5 🔿

8 🔾

<sup>7</sup> O

6 🔾

Boys go to question F4

Fo	r girls only	
F2	Have your breasts begun to grow?	<sup>5</sup> Have not yet started growing
		<sup>6</sup> Have barely started growing
		<sup>7</sup> Breast growth is definitely underway
		<sup>8</sup> O Breast growth seems completed
F3	Have you begun to menstruate (your monthly periods)?	
	policiae).	<sup>1</sup> O Yes
		<sup>2</sup> O No
		Girls go to section G

Fo	boys only	
F4	Have you noticed a deepening of your voice?	<ul> <li>Has not yet started changing</li> <li>Has barely started changing</li> <li>Voice is definitely changing</li> </ul>
<b>F</b> 5	Have you begun to grow hair on your face?	<sup>8</sup> Voice change seems completed
		Has not yet started growing  Has barely started growing  Facial hair growth is definitely underway
		Facial hair growth seems completed

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SECTION G Smoking, Drinking and Drugs







In this section, we would like to ask you some questions about your experiences with smoking, drinking and drugs.

Some of the questions will apply to you even if you have not smoked, had a drink or used drugs.

Please be as honest as you can – your answers are private and Statistics Canada will make sure no one will find out who filled out each questionnaire.

G1	Which of the following best describes your experience with smoking cigarettes:	01 0	I have never smoked  I have only had a few puffs  Go to question G3
		030	I do not smoke anymore → Go to queston G2
		OR	
		I sm	oke
		04	A few times a year
		05	About once or twice a month
		06	About 1-2 days a week
		07	About 3-5 days a week
		08	About 6-7 days a week
<b>G2</b>	If you have smoked one or more cigarettes every day for at least 7 days in a row, how old were you when you first did so?	98 🔾	I have never done this  OR
			I was years old

B

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The next questions are about drinking alcohol.

A drink of alcohol is, for example:

✓ one bottle of beer or

✓ one glass of wine, or

✓ one shot of liquor.







G3	Have you ever had a drink of alcohol?	o¹ Yes, at least one drink → Go to question G4
		02 ☐ I have only had a few sips 03 ☐ No  Go to question G5
G4	How old were you when you first had a drink of alcohol?	I was years old
The	e next questions are about drug use. P	Please answer even if you do not use drugs.
G5	Have you ever tried drugs or sniffed glue or solvents? (Drugs include marijuana, cocaine, acid, or uppers, downers, etc.)	¹ O Yes
		<sup>2</sup> ○ No → Go to section H
<b>G</b> 6	If you have used drugs (marijuana, glue, solvents, cocaine, etc.), how old were you when you first did so?	I was years old

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During the past12 months, how often have you	Never	Less than once a week	1 to 3 times a week	4 or mo times week
<ul> <li>a. played sports or done physical activities WITHOUT a coach or an instructor (e.g. biking, skateboarding, etc.)?</li> </ul>	1 🔘	2 🔘	3 🔘	4 🔿
<ul> <li>b. played sports WITH a coach or instructor, other than in gym class (swimming lessons, baseball, hockey, etc.)?</li> </ul>	5 🔘	6 🔾	7 🔿	8 🔾
c. taken part in dance, gymnastics, karate or other groups or lessons, other than in gym class?	1 🔘	2 🔘	3 🔘	4 🔘
d. taken part in art, drama or music groups, clubs or lessons outside of class?	5 🔘	6 🔾	7 🔘	8 🔘
e. taken part in clubs or groups such as Guides or Scouts, 4-H club, community, church or other religious groups?	1 🚫	2 🔘	3 🔾	4 🔿
f. done a hobby or craft (drawing, model building, etc.)?	5 🔘	6 🔾	7 🔘	8 🔾
g. played computer or video games?	1 🔘	2 🔘	3 🔘	4 🔘
h. done odd jobs (a paper route, babysitting, etc.)?	5 🔘	e 🔾	7 🔘	8 🔾
On average, about how many hours a day do you watch TV or videos?	01 02 03 04 05 06	I don't watch TV Less than one h 1 to 2 hours a da 3 to 4 hours a da 5 to 6 hours a da 7 or more hours	our a day ay ay ay	
How often do you read for fun (not for school)?	07 O 08 O 09 O 11 O 12 O	Every day A few times a w Once a week A few times a m Less than once Almost never	onth	
Do you have access to a computer in your home?	<sup>1</sup> O	Yes No		

\*

r

**SECTION I** 

Help us.

## Thank you very much for helping us. Your comments are important.

About how long did it take you to complete this	
About how long did it take you to complete this questionnaire?	<sup>01</sup> less than 20 minutes
	<sup>02</sup> 20 to 29 minutes
	<sup>03</sup> O 30 to 39 minutes
	<sup>04</sup> O 40 to 49 minutes
	<sup>05</sup> O 50 to 59 minutes
	<sup>06</sup> O 60 minutes or more
When you finish this survey:	Put this questionnaire in the envelope.
	Return it to the interviewer.

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# National Longitudinal Survey of Children and Youth

Cycle 4

## **Booklet 21E**

Confidential when completed

Collected under the authority of the Statistics Act, revised statutes of Canada, 1985, Chapter S19.

Aussi disponible en français



## Please read instructions on next page before beginning.

		₩
A. How was this questionn	aire completed?	B. Did the respondent complete this questionnaire <u>before</u> the interview?
<sup>1</sup> On the telephone		<sup>1</sup> Yes
<sup>2</sup> O In the household -	by the respondent	<sup>2</sup> O No
<sup>3</sup> In the household -	by the interviewer	
	FOR OFFI	CE USE ONLY
Person ID		
Child's First Name		
Assignment No.	Ques	stionnaire No. D - 4 2 -

8-5300-397.1: 2000-07-26 STC/ENM-040-75020



Statistics Canada

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## INSTRUCTIONS

This is a survey with questions about you, your family, friends, how you feel and what you like to do. Your answers will help the government to plan programs and services for young people like yourself.

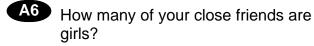
This is not a test and there are no right or wrong answers. Some questions may seem personal and some are about things which not everybody does. Take your time and please be sure to answer each question based on what you really think. You can choose whether or not to fill out this questionnaire. If you need help with any questions, you may ask the interviewer.

When you answer these questions, you can mark your answers like this  $\otimes$  or fill in the circle  $\bullet$ , or write a number in the boxes, as in the examples below. When you write your answers, make sure you press hard with your pencil.

#### **Example 1**

- B1 How do you feel about school?
  - <sup>°</sup>O I like school very much.
  - ¹⊗ I like school quite a bit.
  - <sup>2</sup>O I like school a bit.
  - <sup>3</sup> O I don't like school very much.
  - <sup>4</sup> O I hate school.

#### Example 2



93 O None

OR

0 3 number of girls



Remember that the KIDS HELP PHONE is available to help you at any time if you feel like you would like to talk to someone about a problem. 1-(800) 668-6868

Statistics Canada will keep your answers PRIVATE.

No one from your home or your school will see what you write.

#### THANK YOU FOR YOUR HELP!

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.



Please indicate your starting time.





ase answer the following ements about your friends and ers your age.	False	Mostly false	Sometimes true/ Sometimes false	Mostly true	True
I have many friends.	° O	1 🔿	2 🔾	<sup>3</sup> O	4 🔾
I get along easily with others my age.	5 🔾	e 🔾	7 🔾	8 🔾	9 🔾
Others my age want me to be their friend.	° 🔾	1 🔿	<sup>2</sup> O	3 🔾	4 🔿
Most others my age like me.	5 🔾	6 🔾	7 🔾	8 🔾	9 0
or the rest of this questionnatust and confide in. They may chool.  About how many days a week do you	be friends	s that you	hang out with at	e people t school or	hat yo outsid
About how many days a week do you things with <b>close friends</b> outside of so hours?	chool		ever		
			ss than once a week		
			day a week		
		04 2 -	· 3 days a week		
			5 days a week		
		<sup>06</sup> O 6 -	7 days a week		
How many of your close friends are:					
		None	Numl	ber	
girls?		93 🔘	OR		
boys?		94	OR		
		_			
How often do you share your secrets a private feelings with your close friends	and 3?	0 O All 1	the time		
How often do you share your secrets private feelings with your close friends	and s?	_	the time st of the time		
How often do you share your secrets private feelings with your close friends	and s?	1 ( Mos			
How often do you share your secrets private feelings with your close friends	and s?	1 ( Mos	st of the time		

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 $\star$ 

	ow many of your close ends do the following:	None	A few	Most	All
a.	smoke cigarettes?	° 🔿	1 🔘	2 🔾	3 🔾
b.	drink alcohol?	4 🔘	5 🔾	6 🔾	7 🔿
c.	break the law by stealing, hurting someone or damaging property?	° 🔿	1 🔘	2 🔘	3 🔘
d.	have tried marijuana?	4 🔘	5 🔘	e 🔾	7 🔾
е.	have tried drugs other than marijuana?	° ()	1 🔘	<sup>2</sup> O	3 🔾
an	ther than your close friends, do you ha nyone else in particular you can talk to ourself or your problems?	ave about	<sup>8</sup> ○ Yes →	Go to question	A11
			(9 O No →	Go to question	A12
àb	lark everyone you feel you can talk pout yourself or your problems.)		12 C Teacher  13 Coach or leader)	e ne family	ide or church
	uring the past 6 months, how well have been along with other young people suitends or classmates?	e you uch as	<sup>15</sup> O Very well, no	o problems	

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<sup>19</sup> O Not well at all, constant problems

-		4

A13	During the past 6 months, how well have you gotten along with your mother, step mother, or foster mother?  (Answer about the mother you spend the most time with.)	<ul> <li>Very well, no problems</li> <li>Quite well, hardly any problems</li> <li>Pretty well, some problems</li> <li>Not too well, many problems</li> <li>Not well at all, constant problems</li> <li>I am not in touch with my mother</li> </ul>
		<sup>26</sup> O I don't have a mother
A14	During the past 6 months, how well have you gotten along with your father, step father, or foster father? (Answer about the father you spend the most time with.)	<ul> <li>Very well, no problems</li> <li>Quite well, hardly any problems</li> </ul>
	most unie with.)	<sup>29</sup> O Pretty well, some problems
		Not too well, many problems
		Not well at all, constant problems
		<sup>32</sup> O I am not in touch with my father
		<sup>33</sup> O I don't have a father
A15	During the past 6 months, how well have you gotten along with your brothers and sisters, step brothers and sisters, or foster brothers and sisters?	<sup>34</sup> Very well, no problems
	(Answer about the ones you spend the most time with.)	Quite well, hardly any problems  36 Pretty well, some problems
		Tretty well, some problems
		• Not too well, many problems
		Not well at all, constant problems  39
		40 I don't have brothers and sisters
		T don't have prothers and sisters

B

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B1	How do you feel about school?	
	non do you loor about ostiloor.	<sup>0</sup> O I like school very much
		<sup>1</sup> O I like school quite a bit
		<sup>2</sup> O I like school a bit
		<sup>3</sup> O I don't like school very much
		<sup>4</sup> O I hate school
<b>B2</b>	Are you in the same school that you were in two years ago?	
	two years ago:	<sup>8</sup> O Yes→ Go to question B5
		<sup>9</sup> O No → Go to question B3
<b>B</b> 3	For your most recent change in schools, why did you change schools? (Please mark all that apply.)	I changed from elementary school to middle school or junior high
		<sup>2</sup> O I changed from elementary school to high school
		<sup>3</sup> O I changed from middle school or junior high to high school
		<sup>4</sup> O I moved
		<sup>5</sup> O I was expelled
		<sup>6</sup> Other reason
<b>B4</b>	What did you find hard to get used to about your new school? (Please mark all that apply.)	<sup>01</sup> O I did not find it hard to get used to my new school
	(Flease mark all that apply.)	Organizing homework
		New teachers
		Ohanging classes
		Having to make new friends
		Finding my way around
		Taking the bus to a new school
		<sup>08</sup> Other
<b>B</b> 5	How well do you think you are doing in your school work?	<sup>09</sup> ○ Very well
		<sup>10</sup> O Well
		<sup>11</sup> O Average
		<sup>12</sup> O Poorly
		<sup>13</sup> O Very poorly

B

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	A
7	•

a. make friends? b. get good grades? c. participate in extra- curricular activities? c. participate in extra- curricular activities in extra- curricular activities in extra- curricular activities in extra- curricular activities? c. participate in extra- curricular activities? c. participate in extra- curricular activities in extra- curricular activities? c. participate in extra- curricular activities in extra-	Ho do	w important is it to you to the following in school:	in	Very nportant	Some impo		Not very important	Not important at all
b. get good grades?  c. participate in extra- curricular activities?  d. learn new things?  e. always show up for class on time?  f. express your opinion in class?  g. take part in student council or other similar groups?  how do you like the following subjects:  lihate it very much  a. Math  b. English  c. French  c. French  d. Science  e. Gym/Phys. Ed.  f. Arts (art, music, drama)  how often do you feel like an outsider (or left out of things) at school?  b. How often do you feel like an outsider (or left out of things) at school?  c. Since the beginning of this school year, how many times have you  Since the beginning of this school year, how many times have you  s. Skipped a day of school Will+OUT permission?  Never  Once or twice  a. Science  c. Specification of the second of the school of the specific permission?  Never  Once or twice  a. Science  c. Specification of this school year, how many times have you  Never  Once or twice  a. Science  c. Specification of this school year, how many times have you  All the time  c. Once or twice  a. Skipped a day of school  viiine of school  viiine of this school year, how many times have you  a. Skipped a day of school  viiine of school  viiine of this school year, how many times have you  a. Skipped a day of school  viiine of this school year, how many times have you  a. Skipped a day of school  viiine of this school year, how many times have you  a. Skipped a day of school  viiine of this school year, how many times have you  a. Skipped a day of school  viiine of this school year, how many times have you  a. Skipped a day of school  viiine of this school year, how many times have you  a. Skipped a day of school	a.	make friends?		1 🔘	2 (	$\supset$	3 🔘	4 🔘
d. learn new things?  6. always show up for class on time?  7. a b class on time?  8. always show up for class on time?  9. take part in student council or other similar groups?  9. take part in student council or other similar groups?  1. take part in student council or other similar groups?  1. take part in student council or other similar groups?  1. take part in student council or other similar groups?  1. take part in student council or other similar groups?  1. take part in student council or other similar groups?  1. take part in student council or other similar groups?  1. take part in student council or other similar groups?  1. take part in student council or other similar groups?  1. take part in student council or other similar groups?  2. a council of the time of	b.	get good grades?		5 🔘	6 (	Э	7 🔾	8 🔘
e. allows show up for class on time?  f. express your opinion in class?  g. take part in student council or other similar groups?  How do you like the following subjects:  I hate it like it very much a little it a little i	C.	participate in extra- curricular activities?		1 🔘	2 (	C	3 🔘	4 🔘
for class on time?  f. express your opinion in class?  g. take part in student council or other similar groups?  J. take part in student council or other similar groups.  J. take part in student council or other similar groups.  J. take part in student council or other similar groups.  J. take part in stu	d.	learn new things?		5 🔾	6 (	C	7 🔘	8 🔾
g. take part in student council or other similar groups?  How do you like the following subjects:    I hate   I don't   I like it   I like	e.	always show up for class on time?		1 🔘	2 (	$\supset$	3 🔘	4 🔘
How do you like the following subjects:    how do you like the following subjects:   how do you do y	f.	express your opinion in clas	ss?	5 🔘	6 (	C	7 🔾	8 🔾
subjects:    hate   like it very much   a little   like it   like   li	g.	take part in student council other similar groups?	or	1 🔘	2 (	O	3 🔘	4 🔘
b. English  of O O O O O O O O O O O O O O O O O O O		ow do you like the following bjects:	_	like it				
c. French  of O O O O O O O O O O O O O O O O O O O	a.	Math	01 🔘	02	)	03 🔘	04 🔘	05 🔾
d. Science  of	b.	English	06	07	)	08 🔘	09	10 🔘
e. Gym/Phys. Ed.  of Or	C.	French	01 🔿	02	)	03	04	05
e. Gym/Phys. Ed.  f. Arts (art, music, drama) 06 07 08 09 10 09 10 09 10 09 10 09 10 09 09 09 09 09 09 09 09 09 09 09 09 09	d.	Science	06	07	)	08 🔘	09	10 🔘
How often do you feel like an outsider (or left out of things) at school?    Most of the time	e.	Gym/Phys. Ed.	01 🔘	<sup>02</sup> C	)	03	04	05
Out of things) at school?  All the time  Most of the time  Some of the time  Never  During the past month, how often did you cut or skip a class, WITHOUT permission?  Never  Once or twice  3 or 4 times  4 times  Once or twice  All the time  Once or twice  The school year, how many times have you  Since the beginning of this school year, how many times have you  Since the beginning of school WITHOUT permission?  Never  Once or twice  Since the beginning of this school year, how many times have you  Since the beginning of this school year, how many times have you  Never  Once or twice  The school year, how many times have you  Never  Once or twice  The school year, how many times have you  Since the beginning of this year.	f.		06	07	)	08	09	10 🔘
or skip a class, WITHOUT permission?  Never  Once or twice  or skip a class, WITHOUT permission?  Never  Once or twice  or stimes or more  Since the beginning of this school year, how many times have you  a. skipped a day of school WITHOUT permission?  Never  Once or twice  twice  Stimes or more  or more		ow often do you feel like an o	utsider (or I	2	Mos Son Rare	et of the time		
school year, how many times have you  a. skipped a day of school WITHOUT permission?  Never Once or twice 1 or more 1 or more 2 or more 3 or 4 times 1 or more 2 or more 3 or 4 times 1 or more 3 or 4 times 1 or more 3 or 4 or more 3 or 4 times 1 or more 3 or 4 times 1 or more 3 or more 4 or more 3 or 4 times 1 or more 3 or 4 times 1 or more 4 or more		uring the past month, how often skip a class, WITHOUT per	en <b>did you</b> mission?	02	O Onc	e or twice	)	
5 0 6 0 7 0 8 0	<b>sc</b> l tim	hool year, how many nes have you skipped a day of school	_	1 🔿	twi		times	or more
	b.		ol?	5 🔘	6 (		7 🔿	* 🔾

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Th tea	ne next statements are about achers and homework.				To the second	Δo	
		All the time	Most of the time	Some of the time	Rarely	Never	
a.	In general, my teachers treat me fairly.	00	01	02	03	04	
							Don't need help
b.	If I need extra help, my teachers give it to me.	05	06	07	08	09	10
							No homewor
C.	I have a place at home to do homework or study.	00	01	02	03	04	05
							No homewo
d.	When my teachers give me homework, I do it.	06	07	08	09	10	11 🔘
	In the next statem	ents. p	<sup>5</sup> O	Almost neve		Thev 2	are the
	ones who live with	you at h	ome and	influence	your lif	e.	
		All the time	Most of the time	Some of the time	Rarely	Never	No problen at scho
a.	If I have problems at school, my parents are ready to help.	00 🔾	01 🔾	02	03	04	05
b.	My parents encourage me to do well at school.	06	07	08	09	10	
		00	01	02	03	04	
C.	My parents expect too much of me at school.	<sup>00</sup> O	O				
	My parents expect too much of me at school.  ow far do you hope to go in school ope to complete	<u> </u>	°0	Middle scho	ol/junior high	n	
	of me at school.  ow far do you hope to go in school	<u> </u>	O	Middle school	, .	1	
	of me at school.  ow far do you hope to go in school	<u> </u>	O			1	

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<sup>4</sup> O More than one university degree

I don't know

<sup>6</sup> O Other





Choose the answer that best describes how you feel.			Sometimes		
	False	Mostly false	false/ Sometimes true	Mostly true	True
a. In general, I like the way I am.	00 🔘	01 🔵	02	03 🔘	04
b. Overall I have a lot to be proud of.	05	06 🔘	07 🔘	08 🔘	09
c. A lot of things about me are good.	00 🔘	01 🔿	02	03 🔘	04
d. When I do something, I do it well.	05	06	07	08	09
e. I like the way I look.	00 🔘	01 🔘	02 🔘	03 🔘	04
In general, I am happy with how me in my life now.	w things are for	<sup>2</sup> O D	strongly disagree Disagree Gree Strongly agree		
The next five years look good t	o me.	6 D	etrongly disagree disagree agree etrongly agree		
During the past 12 months, how	w many times did	someone			
say something personal about made you feel extremely uncomfortable?	you that	Never	Once or twice	3 or 4 times	5 time or mor
a. While at school or on a school bus.		01	02	03	04
b. Elsewhere (including at hom	ne).	05 🔵	06	07	08 🔘
threaten to hurt you but not act hurt you?	tually				
a. While at school or on a school bus.		09	10 🔘	11 🔘	12 🔾
b. Elsewhere (including at hom	ne).	13 🔵	14 🔘	15 🔵	16 🔵
physically attack or assault you	ı?				
a. While at school or on a school bus.		17 🔘	18 🔘	19	20 🔾
b. Elsewhere (including at hom	ie).	21 🔘	22 🔘	23 🔘	24 🔘

\*







Read the following statements and choose the answer that best describes you.	Never or not true	Sometimes or somewhat true	Often or very true
I show sympathy to (I feel sorry for) someone who has made a mistake.	1 🔿	2	3
b. I can't sit still, I am restless.	4 🔾	5 🔾	6
c. I destroy my own things.	7	8 🔾	9
d. I try to help someone who has been hurt.	1 ()	<sup>2</sup> O	3 🔾
e. I steal at home.	40	5 🔾	6
f. I am unhappy or sad.	7	8	<sup>9</sup> O
g. I get into many fights.	1 🔾	<sup>2</sup> O	3
h. I offer to help clear up a mess someone else has made.	4 🔾	5 🔾	6
I am easily distracted. I have trouble sticking to any activity.	7	8 🔾	9
j. When I am mad at someone, I try to get others to dislike him/her.	10	<sup>2</sup> O	<sup>3</sup> O
k. I am not as happy as other people my age.	4 🔿	5 🔾	<sub>6</sub>
I destroy things belonging to my family or other young people.	7	8 🔾	9
m. If there is an argument, I try to stop it.	1 ()	2 🔾	3
n. I can't concentrate, I can't pay attention.	4 🔾	5 🔾	6
o. I am too fearful or nervous.	70	8 🔾	9
<ul><li>P. When I am mad at someone,</li><li>I become friends with another as revenge.</li></ul>	1	<sup>2</sup> O	3
q. I am impulsive, I act without thinking.	4 🔾	5	6 O



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**D1** Read the following statements and choose the answer that best describes you. Never **Sometimes** Often or very true not true somewhat true 8  $\bigcirc^{\rm e}$ r. I tell lies or cheat. s. I offer to help other young people (friend, brother or sister) who are having difficulty with a task. <sup>5</sup>O  $^{6}$ t. I worry a lot. I have difficulty waiting for my turn  $^{8}O$  $^{9}$ in games or group activities. v. When another young person accidentally hurts me, I assume that he/she meant to do it, and  $^{2}$ I react with anger and fighting. When I am mad at someone, I say bad things behind his/her back. x. I physically attack people. I comfort another young person (friend, brother or sister) who is crying or upset. z. I cry a lot. aa. I vandalize. I threaten people. I help to pick up things which another young person has dropped. dd. I bully or am mean to others. ee. I stare into space. ff. When I am mad at someone, I say to others: let's not be with him/her. 5 gg. I am nervous, highstrung or tense.

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¹O

hh. I kick or hit other people my age.

 $^{3}$ 

 $^{2}$ O

		Never or not true	Sometimes or somewhat true	Often or very true
ii.	When I am playing with others, I invite bystanders to join in a game.	4 🔾	5 🔾	6
jj.	I steal outside my home.	7 🔾	8	9
kk.	I am inattentive, I have difficulty paying attention to someone.	1 🔿	<sup>2</sup> O	<sup>3</sup>
II.	I have trouble enjoying myself.	4 🔾	5 🔾	6
nm.	I help other people my age (friends, brother or sister) who are feeling sick.	7	8 🔾	9 O
nn.	When I am mad at someone, I tell that person's secrets to a third person.	1 ()	<sup>2</sup> O	3
ne f	I encourage other people my age who cannot do things as well as I can.  Collowing questions are about suicer, but please answer them as we	ide. Some of	them might be hard	for you t
e f swarn eme	who cannot do things as well as I can.	II as you can Juestions you k to your fam	them might be hard. These questions of might have. If you for	will help u: eel like yo
e f swarn eme ed sou	who cannot do things as well as I can.  following questions are about suicier, but please answer them as we about young people.  ember to ask your interviewer any comport, we encourage you to tall	Il as you can questions you k to your fambewer.	them might be hard. These questions of might have. If you filly doctor or nurse, ithin the last year	will help u: eel like yo
e f swarn eme ed sou	who cannot do things as well as I can.  following questions are about suicier, but please answer them as we about young people.  ember to ask your interviewer any comport, we encourage you to tall arces provided to you by the interviewer anyone in your school committed	Il as you can questions you k to your fambewer.	them might be hard. These questions of might have. If you filly doctor or nurse, within the last year ago	will help u: eel like yo
e f swarn eme ed sou	who cannot do things as well as I can.  Collowing questions are about suice, but please answer them as we about young people.  Ember to ask your interviewer any consupport, we encourage you to talk urces provided to you by the interviewer anyone in your school committed ide?	Il as you can questions you k to your famewer.	them might be hard. These questions of might have. If you filly doctor or nurse, within the last year more than a year ago	will help u: eel like yo
ne f iswarn eme ed sou Hass	who cannot do things as well as I can.  following questions are about suicier, but please answer them as we about young people.  ember to ask your interviewer any comport, we encourage you to tall arces provided to you by the interviewer anyone in your school committed	Juestions you k to your famewer.  O Yes, w O Yes, m O Yes, m O Yes, m O Yes, m	them might be hard. These questions of might have. If you filly doctor or nurse, within the last year ago over know	will help u: eel like yo
e f swarn eme ed sou Has	who cannot do things as well as I can.  Collowing questions are about suice, but please answer them as we about young people.  Ember to ask your interviewer any consupport, we encourage you to talk arces provided to you by the interviewer anyone in your school committed ide?  anyone that you have personally known	Juestions you k to your famewer.  O Yes, w O Yes, m O Yes, m O Yes, m O Yes, m	them might be hard. These questions of might have. If you filly doctor or nurse, within the last year ago over than a year ago wer than a year ago over	will help u: eel like yo

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<b>D5</b> Du dic	uring the past 12 months, how many times d you attempt suicide?	4 O O	ever/ one  Go to  nce ore than once	question D7	,
pa tre he	you attempted suicide during the list 12 months, did you have to be leated by a doctor, nurse or other lealth professional (for a physical lury or counselling)?	6 O Y	es o		
D7 Du	uring the past 12 months, about ow many times	Never	Once or twice	3 or 4 times	5 times or more
a. 	. have you stayed out later than your parents said you should?	1 🔿	<sup>2</sup> O	<sup>3</sup> O	4
b.	. have you stayed out all night without permission?	5 🔾	6	7	*
c.	. were you questioned by the police about anything that they thought you did?	1 ()	2	3	4
d.	. were you questioned by a security guard, a teacher or a principal about anything that they thought you did such as stealing, damaging property or anything else?	5 🔾	е <u>О</u>	7	<sup>8</sup> O
e.	. have you run away from home?	1 🔿	2	<sup>3</sup>	4
f.	have you stolen something from a store or school?	5 🔾	<sub>6</sub> O	7	8
g. 	. have you taken money from your parents without their permission?	1 (	<sup>2</sup> O	<sup>3</sup> O	4
h. 	. have you broken into, or snuck into, a house or building with the idea of stealing something?	5 🔾	<sub>6</sub> O	<sup>7</sup> O	8
i.	. have you used or bought or tried to sell something you knew was stolen?	10	<sup>2</sup> O	³O	4
j.	. have you damaged or destroyed anything that didn't belong to you (for example, damaged a bicycle, car, school furniture, broken windows or written graffiti)?	5 🔾	6	7 🔾	80
k. 	. have you fought with someone to the point where they needed care for their injuries (for example, because they were bleeding, or had broken bones)?	1 🔿	<sup>2</sup> O	³O	4

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<u> </u>	
X	

I. have you been in a fight where you hit someone with something other than your hands (for example, a stick, club, knife, or rock)?  II. have you carried a knife for the purpose of defending yourself or using it in a fight?  II. have you carried a gun other than for hunting or target shooting?  II. have you carried any other weapon such as a stick or a club?  II. have you threatened someone in order to get their money or things?  II. have you be been done or the purpose of defending yourself or using it in a fight?  II. have you be carried any other weapon such as a stick or a club?  II. have you threatened someone in order to get their money or things?  II. have you bought, or gotten drugs from someone for your own use, or for someone else?  II. have you attempted to touch the private parts of another person's body (while knowing that they would probably object to this)?  II. have you tried to force someone into having sex with you?  II. have you tried to force someone into having sex with you?  II. have you tried to force someone into having sex with you?  II. have you tried to force someone into having sex with you?  II. have you set fire on purpose to a building, a car, or something else not belonging to you?  II. have you set fire on purpose to a building, a car, or something else not belonging to you?  II. have you set fire on purpose to a building, a car, or something else not belonging to you?  II. have you set fire on purpose to a building, a car, or something else not belonging to you?  II. Wes someone, damaging property, etc.?	During the past 12 months, about how many times				<b>-</b>
hit someone with something other than your hands (for example, a stick, club, knife, or rock)?  m. have you carried a knife for the purpose of defending yourself or using it in a fight?  1 2 3 4 6 7 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9		Never	Once or twice	3 or 4 times	5 times or more
purpose of defending yourself or using it in a fight?  n. have you carried a gun other than for hunting or target shooting?  o. have you carried any other weapon such as a stick or a club?  p. have you threatened someone in order to get their money or things?  g. have you sold any drugs?  g. have you sold any drugs?  g. have you bought, or gotten drugs from someone for your own use, or for someone else?  s. have you attempted to touch the private parts of another person's body (while knowing that they would probably object to this)?  t. have you tried to force someone into having sex with you?  s. have you taken a car, motorbike, or motorboat without permission?  v. have you set fire on purpose to a building, a car, or something else not belonging to you?  During the past 12 months, were you part of a gang that broke the law by stealing, hurting someone, damaging property, etc.?	hit someone with something other than your hands (for example,	5 🔾	6	7	80
for hunting or target shooting?  O. have you carried any other weapon such as a stick or a club?  P. have you threatened someone in order to get their money or things?  G. have you sold any drugs?  F. have you bought, or gotten drugs from someone for your own use, or for someone else?  S. have you attempted to touch the private parts of another person's body (while knowing that they would probably object to this)?  G. have you tried to force someone into having sex with you?  I. have you taken a car, motorbike, or motorboat without permission?  I. have you taken a car, motorbike, or motorboat without permission?  I. have you set fire on purpose to a building, a car, or something else not belonging to you?  F. have you part of a gang that broke the law by stealing, hurting someone, damaging property, etc.?	purpose of defending yourself	1 🔾	<sup>2</sup> O	³O	4
p. have you threatened someone in order to get their money or things?  q. have you sold any drugs?  1 2 3 4 4 6 7 8 6 7 8 6 7 8 8 6 7 8 8 7 8 8 8 8 8	n. have you carried a gun other than for hunting or target shooting?	5 🔾	6 🔾	7	*
q. have you sold any drugs?  1 2 3 4 4 7 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	have you carried any other weapon such as a stick or a club?	1 🔘	<sup>2</sup> O	³O	4
r. have you bought, or gotten drugs from someone for your own use, or for someone else?  S. have you attempted to touch the private parts of another person's body (while knowing that they would probably object to this)?  1 2 3 4  1 4 2  1 2 3 4  1 2 3 4  1 2 3 4  1 2 3 5 4  1 2 3 5 5 6  1 3 5 6 7 7 8  1 5 6 7 7 8  1 5 7 8 7 8  1 5 7 8 7 8  1 5 8 7 8 7 8  1 5 8 7 8 7 8  1 5 8 7 8 7 8  1 5 8 7 8 8  1 5 8 7 8 8  1 5 8 7 8 8  1 5 8 7 8 8  1 5 8 7 8 8  1 5 8 7 8 8  1 5 8 7 8 8  1 5 8 7 8 8  1 5 8 7 8 8  1 5 8 7 8 8  1 5 8 7 8 8  1 5 8 8  1 5 8 8 7 8 8  1 5 8 8  1 5 8 8 8  1 5 8 8 8  1 5 8 8 8  1 5 8 8 8  1 5 8 8 8  1 5 8 8  1 5 8 8 8  1 5 8 8 8  1 5 8 8	p. have you threatened someone in order to get their money or things?	5 🔾	<sub>6</sub> O	7	8
someone for your own use, or for someone else?  5 6 7 8  s. have you attempted to touch the private parts of another person's body (while knowing that they would probably object to this)?  1 2 3 4  t. have you tried to force someone into having sex with you?  5 6 7 8  u. have you taken a car, motorbike, or motorboat without permission?  1 2 3 4  v. have you set fire on purpose to a building, a car, or something else not belonging to you?  5 6 7 8  During the past 12 months, were you part of a gang that broke the law by stealing, hurting someone, damaging property, etc.?	q. have you sold any drugs?	1 🔾	<sup>2</sup> O	<sup>3</sup> O	4
private parts of another person's body (while knowing that they would probably object to this)?  1 2 3 4 4 5 5 6 7 8 5 6 7 8 5 6 7 8 5 6 7 7 8 6 7 7 8 7 8 7 8 7 8 7 8 7 8 7 8	someone for your own use, or for	5 🔾	6	7	80
u. have you taken a car, motorbike, or motorboat without permission?  v. have you set fire on purpose to a building, a car, or something else not belonging to you?  During the past 12 months, were you part of a gang that broke the law by stealing, hurting someone, damaging property, etc.?	private parts of another person's body (while knowing that they	1 🔾	<sup>2</sup> O	3	4
v. have you set fire on purpose to a building, a car, or something else not belonging to you?  During the past 12 months, were you part of a gang that broke the law by stealing, hurting someone, damaging property, etc.?	t. have you tried to force someone into having sex with you?	5 🔾	<sub>6</sub> O	<sup>7</sup> O	80
building, a car, or something else not belonging to you?  5  6  7  8  During the past 12 months, were you part of a gang that broke the law by stealing, hurting someone, damaging property, etc.?	u. have you taken a car, motorbike, or motorboat without permission?	¹ ()	<sup>2</sup> O	³O	4
gang that broke the law by stealing, hurting Yes someone, damaging property, etc.?	building, a car, or something else	5 🔾	6	7	*
	gang that broke the law by stealing, hurting	-			
		<sup>2</sup> No	)		

(B)

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#### **Activities**







		•			
During the past 12 often have you	months, how	Never	Less than once a week	1 to 3 times a week	4 or mor times a week
a. played sports activities <b>WIT</b> an instructor ( boarding, etc.	HOUT a coach or e.g. biking, skate-	1 🔘	2 🔘	3 🔘	4 🔘
instructor, oth	WITH a coach or er than in gym class? ssons, baseball, hockey,	5 🔘	e 🔾	7 🔿	* O
c. taken part in o karate or othe other than in o	dance, gymnastics, er groups or lessons, gym class?	1 🔘	<sup>2</sup> O	3 О	4 🔘
d. taken part in a groups, clubs of class?	art, drama or music or lessons, outside	5 🔾	e 🔾	7 🔘	* 🔾
as Guides or	clubs or groups such Scouts, 4-H club, nurch or other ps?	1 🔘	<sup>2</sup> O	3 🔾	4 🔿
f. done a hobby model building	or craft (drawing, g, etc.)?	5 🔘	e 🔾	7 🔘	8 🔾
In any of your acti responsibilities, su leader, captain, se	vities, do you have special uch as team ecretary, etc.?	¹ Yes	3		
How often do you (not for school)?	read for fun	08 A 09 O	very day few times a weel once a week few times a mon ess than once a r	ith	



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E4	During the past 12 months, have you volunteered or helped without pay	1 🔿	Doing activities at school (yearbook committee, school patrol, student council, etc.)
	by (Mark all that apply.)	<sup>2</sup> O	Supporting a cause (food bank, environmental group, etc.)
		<sup>3</sup> ()	Fund raising (a charity, school trips, etc.)
		4 🔿	Helping in your community (hospital volunteering, work in a community organization, etc.)
		5 🔾	Helping neighbours or relatives (cutting grass, babysitting or shovelling snow for a neighbour, etc.)
		6 🔾	Doing another volunteer activity (without pay)
		<sup>7</sup> O	I have not done any of these activities without pay. → Go to question E6
<b>E</b>	During the past 12 months, how often have you volunteered or helped without pay?	01	Everyday
	,	02	A few times a week
		03	Once a week
		04	A few times a month
		05	Less than once a month
<b>E</b> 6	On average, about how many hours a	01	I don't watch TV or videos
	day do you watch TV or videos?	02	Less than 1 hour a day
		03	1 to 2 hours a day
		04	·
		05	3 to 4 hours a day
		0	5 to 6 hours a day
		<sup>06</sup> O	7 or more hours a day
<b>3</b>	Do you have access to a computer <b>in your home</b> ?	1 🔿	Yes
		$^{2}\bigcirc$	No
E8	Do you have access to the Internet in your home?	3	Yes
	none:	4	No
	On average, how much time in a day do you spend at home looking after	01	I don't have a brother or sister
	a younger brother or sister while your parents are not home?	02	I don't spend any time at home looking after a younger brother or sister while my parents are not home
		03	Less than 1 hour a day
		04	1 to 2 hours a day
		05	3 to 4 hours a day
		06	5 to 6 hours a day
_		07	7 or more hours a day
	On average, how much time in a day do you spend alone at home while nobody else is home?	080	I don't spend time alone while nobody else is home
		09	Less than 1 hour a day
		10	1 to 2 hours a day
		11	3 to 4 hours a day
		12	5 to 6 hours a day
		13	7 or more hours a day

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**SECTION F** 







In this section, we would like to ask you some questions about your experiences with smoking, drinking and drugs.

Some of the questions will apply to you even if you have not smoked, had a drink or used drugs.

Which of the following best describes your experience with smoking cigarettes:	01 ☐ I have never smoked  Go to question F4
	03 ☐ I do not smoke anymore → Go to question F:
	OR
	I smoke
	<sup>04</sup> A few times a year
	<sup>05</sup> About once or twice a month
	Of About 1-2 days a week
	OF About 3-5 days a week
	OB About 6-7 days a week
On the days that you smoke, about how many cigarettes do you usually smoke?	number of cigarettes
If you have smoked one or more cigarettes every day for at least 7 days in a row, how old were you when you first did so?	98 O I have never done this
	OR
	I was years old

(B)

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The next questions are about drinking alco A drink of alcohol is, for example: ✓ one bottle of beer or ✓ one glass of wine or ✓ one shot of liquor.	ohol.
Which of the following best describes your experience with drinking alcohol:	01 ☐ I have never had a drink of alcohol  02 ☐ I have only had a few sips  Go to question F9
	<sup>03</sup> O I only tried once or twice (at least one drink)
	I do not drink alcohol anymore
	OR
	I drink (at least one drink)
	<sup>05</sup> O A few times a year
	Of About once or twice a month
	<sup>07</sup> O About 1-2 days a week
	OB About 3-5 days a week
	<sup>09</sup>
How old were you when you first had a drink of alcohol?	I was years old.
Have you ever been drunk?	¹O Yes
	<sup>2</sup> ○ No → Go to question F9
How old were you when you were drunk for the first time?	I was years old.
During the past 12 months, how often have you been drunk?	<sup>01</sup> Never
	<sup>02</sup> A few times
	<sup>03</sup> About once or twice a month
	<sup>04</sup> About 1-2 days a week
	<sup>05</sup> About 3-5 days a week
	Of About 6-7 days a week

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Which of the following best describes your experience with using marijuana and cannabis products (also known as a joint, pot, grass or hash) during the past 12 months?			1 have never done it  1 have done it, but not during the past 12 months  1 have done it, but not during the past 12 months  1 have used marijuana  1 have used marijuana  1 have used marijuana  1 have used marijuana  2 have times  4 have used marijuana  A few times  4 have used marijuana  A few times  A have used marijuana  A have used marijuana  A few times  A have used marijuana				
exp	ich best describes your erience with the following drugs ing the past 12 months:	I have	I have done it,				
		done it	but not during the past 12 months	1 to 2 times	3 to 5 times	6 to 9 times	10 time or mor
a.	Hallucinogens like LSD/acid, magic mushrooms	01	02	03	04	05	06
b.	Glue or solvents	07	08	09	10	11	12
c.	Drugs without a prescription or advice from a doctor: downers, uppers, tranquilizers, ritalin, etc.	<sup>13</sup>	14	15	16	17 🔾	18
d.	Other drugs like crack, cocaine, heroin, speed or	19	20 🔾	21	22 🔾	23	24

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<b></b>
<b>*</b>

FID	Hov follo	w old were you when you did the owing drugs for the first time?	I have never done it		I first did it when I was
	a.	Marijuana and cannabis products	01 🔘	OR	years
	b.	Hallucinogens like LSD/acid, magic mushrooms	02	OR	years
	C.	Glue or solvents	03	OR	years
	d.	Drugs without a prescription or advice from a doctor: downers, uppers, tranquilizers, ritalin, etc.	04	OR	years
	e.	Other drugs like crack, cocaine, heroin, speed or ecstasy, etc.	05 🔾	OR	years

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### SECTION G My Parent(s)







mother				
Think of the mother you spend the most time with. Is she	01 🔘	your biological mother?		
(Mark only one.)	02 🔘	your adoptive mother?		
	03 🔘	your stepmother?		
	04 🔘	your foster mother?		
	05	another person?		
		OR		
	(06 O	I am not in touch with my mother	→ Go	to estion G4
Thinking of the mother you have identified in the previous questions:				
		A great deal	Some	Very little/ Not at all or none
A. How well do you feel that your mother understands you?		٥	1 🔿	2
b. How much fairness do you receive from your mother?		3 🔾	4 🔿	5
c. How much affection do you receive from your mother?		e 🔾	7 🔿	8 🔾
Overall, how would you describe your relationship with your mother?	1 ()	Very close		
Totalion inp will your mount.	2 (	Somewhat close		
	3 🔾	Not very close		
	0	Not very diose		



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					,
ly F	ather				
64	Now think of the father you spend the most time with. Is he	01 🔘	your biological father?		
	(Mark only one.)	02 🔘	your adoptive father?		
		03 🔘	your stepfather?		
		04 🔘	your foster father?		
		05 🔘	another person?		
			OR		
		06 O	I am not in touch with my father	→ Go que	to estion G7
<b>65</b>	Thinking about the father you have identified in the previous question:		A great deal	Some	Very little/ Not at all or none
	How well do you feel that your father understands you?		° 🔿	1 ()	2
	b. How much fairness do you receive from your father?		3 🔾	4 🔿	5 🔾
	c. How much affection do you receive from your father?		6 🔾	7	8 🔾
66	Overall, how would you describe your relationship with your father?	1 🔿	Very close		
			Somewhat close		
		³ O	Not very close		
Ans pre	swer the following questions thinking o	f the fatl	ner and mother you h	ave iden	tified in th
7	How well do you think your parents get along with each other?	° ()	Very well		
		1 🔾	Fairly well		
		2			
			Not very well		

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|--|

G8			Never	Rarely	Sometimes	Often	Always	l don't know	Not applicable
	a.	How often do your parents disagree about how to deal with you and your brother(s) and sister(s)?	01	02	03	04	05	06	07
	b.	How often do your parents get upset with one another, including times when they are mad but don't say much?	08	090	10	11 🔾	12	13	14
<b>G</b> 9	For fost	each of the following sta er parents or guardians)	atements, us in general	se the cho	oice that best de d towards you	escribes the	ne way your p e past 6 mon	arents (or st <b>ths</b> .	epparents,
	Му	parents		Nev	er Rare	ly Sc	metimes	Often	Always
_	a.	smile at me.		5	) <sup>6</sup> C	)	<sup>7</sup> O	8	9 🔾
_	b.	want to know exactly wand what I am doing.	here I am	° (	) ¹C	)	<sup>2</sup> O	<sup>3</sup> O	4 🔾
_	C.	soon forget a rule they made.	have	5	) <sub>6</sub> C	)	<sup>7</sup> O	<sup>8</sup> O	9
_	d.	praise me.		°C	) ¹C	)	2 🔾	<sup>3</sup> O	4 🔾
_	e.	let me go out any even	ing I want.	5 (	6	)	<sup>7</sup> O	8	9 O
_	f.	tell me what time to be when I go out.	home	°C	) ¹C	)	2	<sup>3</sup> O	4 🔾
_	g.	nag me about little thin	gs.	5	6 C	)	7 🔿	8	9 O
_	h.	listen to my ideas and o	opinions.	0	) ¹C	)	2 🔾	<sup>3</sup> O	4 🔾
_	i.	and I solve a problem to whenever we disagree something.	ogether about	5	6 (	)	<sup>7</sup> O	8 🔾	9 🔾
_	j.	only keep rules when it them.	suits	°C	) 1C	)	2 🔾	<sup>3</sup> O	4 🔾
_	k.	get angry and yell at m	е.	5	6 C	)	7 🔿	8 🔾	9 O
_	l.	make sure I know I am appreciated.		0	) 1	)	<sup>2</sup> O	<sup>3</sup> O	4 🔾
_	m.	threaten punishment m often than they use it.	ore	5	) °C	)	7 🔿	8 🔾	9 🔾
_	n.	speak of the good thing	ıs I do.	٥	) ¹C	)	2 🔾	<sup>3</sup> O	4 🔾
_	0.	find out about my misbehaviour.		5	6 (	)	7 🔿	8 🔾	9 🔾
_	p.	enforce a rule or do no rule depending upon th		°(	) 1	)	2 🔾	3 🔾	4 🔾
_	q.	hit me or threaten to do	) SO.	5	6 C	)	7 🔿	8 🔾	9 🔾
_	r.	seem proud of the thing	gs I do.	°(	1 C	)	2	<sup>3</sup> O	4 🔾
	S.	seem too busy to spendas much time with me as I'd like.	d 	5	6 (	)	<sup>7</sup> O	8 🔾	9
_	t.	take an interest in whei I am going and who I a		°(	) 1C	)	2	<sup>3</sup> O	4

\*

Almost never	Sometimes	Often	Always
5 🔾	6	7	80
1	<sup>2</sup> O	<sup>3</sup> O	4
5 🔾	<sup>6</sup> O	<sup>7</sup>	<sup>8</sup> O
	never  5	5 6 0	5 6 7 7 1 2 3 3 0

\*

### SECTION H Health





	In general, would you say your health is	1 (	excellen	t?		
	nealtris	<sup>2</sup> (	overy goo	od?		
		<sup>3</sup> (	good?			
		4 (	fair?			
		<sup>5</sup> (	O poor?			
<b>H</b> 2	How tall are you? (Please estimate if you are not sure)	6		Feet <sup>7</sup>	Inche	es
		8	OR	9		
			Metro	e	Centimet	res
<b>H</b> 3	How much do you weigh? (Please estimate if you are	1		Pounds		
	not sure)		OR			
		2		Kilogram	S	
Yo	ung people sometimes experienc	e health pro	oblems tha	t may or m	ay not be r	elated to
str wil	ess, and may affect other areas i I help build a picture of your gene	in their life. Fral health.	Your answ	vers to the	following q	uestions
H4	During the past 6 months, how often					
	have you had or felt the following?	Seldom or never	About once a month	About once a week	More than once a	Most days
			monu	110011		
	a. Headache	5 (		<sup>7</sup> ()	week <sup>8</sup>	<sup>9</sup> ()
	a. Headache.		6 O	7 🔾	*	9 🔾
	<ul><li>a. Headache.</li><li>b. Stomach ache.</li></ul>	<sup>5</sup> O		7 🗪		9 0
				7 🔾	*	<sup>9</sup> O
	b. Stomach ache.	°O		<sup>7</sup> O	<sup>8</sup> O	9 O 4 O 4 O
<b>H</b> 5	<ul><li>b. Stomach ache.</li><li>c. Backache.</li></ul>	°O 5O	6 O	<sup>7</sup> O	<sup>8</sup> O	9 O
H5	<ul><li>b. Stomach ache.</li><li>c. Backache.</li><li>d. Difficulties in getting to sleep.</li></ul> How often do you use a seat belt when	°O 5O	6 O  1 O  6 O  1 O  Always	<sup>7</sup> O	<sup>8</sup> O	9 O 4 O 4 O
H5	<ul><li>b. Stomach ache.</li><li>c. Backache.</li><li>d. Difficulties in getting to sleep.</li></ul> How often do you use a seat belt when	°O 5O	6 O  1 O  6 O  1 O  Always  Often	<sup>7</sup> O	<sup>8</sup> O	9 O 4 O 4 O — — — — — — — — — — — — — — —
H5	<ul><li>b. Stomach ache.</li><li>c. Backache.</li><li>d. Difficulties in getting to sleep.</li></ul> How often do you use a seat belt when	°O 5O	6 O  1 O  6 O  1 O  Always  Often  Sometime	7 O 2 O 2 O 2 O 2 O 2 O 2 O 2 O 2 O 2 O	<sup>8</sup> O	9 O 4 O 4 O O O O O O O O O O O O O O O
<b>H</b> 5	<ul><li>b. Stomach ache.</li><li>c. Backache.</li><li>d. Difficulties in getting to sleep.</li></ul> How often do you use a seat belt when	°O 5O	6 O  1 O  6 O  1 O  Always  Often  Sometime  Seldom of	<sup>7</sup> O <sup>2</sup> O <sup>2</sup> O  es	* O	4 O 9 O 4 O O O O O O O O O O O O O O O
H5	<ul><li>b. Stomach ache.</li><li>c. Backache.</li><li>d. Difficulties in getting to sleep.</li></ul> How often do you use a seat belt when	°O 5O	6 O  1 O  6 O  1 O  Always  Often  Sometime  Seldom of	7 O 2 O 2 O 2 O 2 O 2 O 2 O 2 O 2 O 2 O	* O	4 O 9 O 4 O O O O O O O O O O O O O O O
H5	<ul><li>b. Stomach ache.</li><li>c. Backache.</li><li>d. Difficulties in getting to sleep.</li></ul> How often do you use a seat belt when	°O 5O	6 O  1 O  6 O  1 O  Always  Often  Sometime  Seldom of	<sup>7</sup> O <sup>2</sup> O <sup>2</sup> O  es	* O	4 O 9 O 4 O O O O O O O O O O O O O O O
	b. Stomach ache.  c. Backache.  d. Difficulties in getting to sleep.  How often do you use a seat belt when you ride in a car?  How often do you wear a helmet when	°O 5O	6 O  1 O  6 O  1 O  Always  Often  Sometime  Seldom of  Usually the	<sup>7</sup> O <sup>2</sup> O <sup>2</sup> O  es	* O	4 O 9 O 4 O O O O O O O O O O O O O O O
	b. Stomach ache.  c. Backache.  d. Difficulties in getting to sleep.  How often do you use a seat belt when you ride in a car?  How often do you wear a helmet when	°O 5O	6 O  1 O  6 O  1 O  Always  Often  Seldom of Usually the Ohors  Always	<sup>7</sup> O <sup>2</sup> O <sup>7</sup> O <sup>2</sup> O  es  or never  here is no seat	* O	4 O 9 O 4 O O O O O O O O O O O O O O O
	b. Stomach ache.  c. Backache.  d. Difficulties in getting to sleep.  How often do you use a seat belt when you ride in a car?  How often do you wear a helmet when	°O 5O	6 O  1 O  6 O  1 O  Always  Often  Seldom of Usually the Ohom of Colors  Always  Often	<sup>7</sup> O <sup>2</sup> O <sup>7</sup> O <sup>2</sup> O  es  or never  nere is no seat	* O	4 O 9 O 4 O O O O O O O O O O O O O O O

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During a school week (Monday to Friday), how many days do you normally eat breakfast?	<sup>5</sup> O Never
out broaklast.	<sup>6</sup> O 1 or 2 days
	<sup>7</sup> O 3 or 4 days
	<sup>8</sup> O Every school day
Would you say you are	<sup>1</sup> Trying to lose weight?
	<sup>2</sup> Trying to gain weight?
	<sup>3</sup> Trying to stay the same weight?
	Not trying to do anything about your weight
Puberty  We know that the following questions miganswering them as well as you can. Chan	ght be difficult, but would appreciate you ges in young people's bodies can affect many
different aspects of their lives.	
Would you say that your body hair ("body hair" means underarm and pubic hair) has begun to grow?	<sup>1</sup> Has not yet started growing
	<sup>2</sup> Has barely started growing
	<sup>3</sup> Growth of body hair is definitely underway
	- Cremmer weak, man to deminion, and contract
	Growth of body hair seems completed

For girls only	
H10 Have your breasts begun to grow?	<sup>5</sup> O Have not yet started growing
	<sup>6</sup> O Have barely started growing
	<sup>7</sup> O Breast growth is definitely underway
	<sup>8</sup> O Breast growth seems completed
Have you begun to menstruate (your monthly periods)?	¹O Yes
	<sup>2</sup> O No
	Girls go to question H14

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L		<b>.</b>
<b>T</b>		<b>*</b>

For	boys only	
<b>(1)</b>	Have you noticed a deepening of your voice?	Has not yet started changing  Has barely started changing  Voice is definitely changing  Voice change seems completed
<b>H13</b>	Have you begun to grow hair on your face?	Has not yet started growing  Has barely started growing  Facial hair growth is definitely underway  Facial hair growth seems completed

Dating	
How old were you when you had your first boyfriend/girlfriend?	93 ○ I've never had a boyfriend/girlfriend → Go to section  OR  I was  years old
Do you have a boyfriend/girlfriend right now?	<sup>1</sup> ○ Yes → Go to question H16 <sup>2</sup> ○ No → Go to question H17
Outside of school hours, about how many days a week do you see your boyfriend/girlfriend?	O5 Never  O6 Less than once a week
	One day a week  One day a week  One day a week  One day a week
	<sup>10</sup> 6 or 7 days a week

How often have you had the following experiences with a boyfriend/girlfriend?	Never	Once	A few times	Often
a. Kissing.	1	2	<sup>3</sup> O	4
b. Petting above the waist.	5 🔾	<sub>6</sub> O	7	80
c. Petting below the waist.	1	2	³O	4
d. Sexual intercourse (going all the	e way).	6	7	*

## Work and Money







wo	nce September, on average, ho any hours per week have you rked <b>for pay</b> ?	w		<sup>2</sup> O 1 to <sup>3</sup> O 5 to <sup>4</sup> O 10 to	ve not worked 4 hours a we 9 hours a we o 14 hours a	eek week	nber
<b>Las</b> did	et week, how much money you receive from	No money	\$1 - \$10	\$11 - \$20	\$21 - \$30	\$31 - \$40	More than \$40
a.	your parents?	01	02	03	04	05	06
b.	working for employer(s)?	07	08	09	10 🔿	11 🔿	<sup>12</sup> C
C.	doing odd jobs (babysitting, delivering flyers, etc.)?	13	14 🔘	15 🔾	16	17 🔾	18
d.	other sources (gifts from relatives, etc.)?	19	20 🔾	21	22	23	24

N J Help us.

# Thank you very much for helping us. Your comments are important.

<b>J</b>	About how long did it take you to complete this questionnaire?	01 O 02 O 03 O 04 O 05 O 06 O	less than 20 minutes 20 to 29 minutes 30 to 39 minutes 40 to 49 minutes 50 to 59 minutes 60 minutes or more

When you finish this survey:	$\geq \leq$	Put this questionnaire in the envelope
------------------------------	-------------	--

Return it to the Interviewer.



# National Longitudinal Survey of Children and Youth

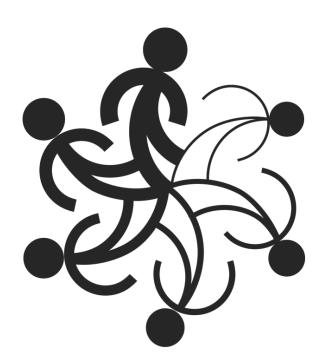
Cycle 4

# **Booklet 22E**

Confidential when completed

Collected under the authority of the Statistics Act, revised statutes of Canada, 1985, Chapter S19.

Aussi disponible en français



# Please read instructions on next page before beginning.

			3
A. How was this questionn	aire completed?	B. Did the respondent complete this questionnaire <u>before</u> the interview?	
<sup>1</sup> On the telephone		¹ O Yes	
<sup>2</sup> In the household -	by the respondent	<sup>2</sup> O No	
<sup>3</sup> In the household -	by the interviewer		
	FOR OFFICE	USE ONLY	
Person ID			
Child's First Name			
Assignment No.	Question	nnaire No. D - 4 2 -	

8-5300-398.1: 2000-07-26 STC/HLD-040-75020



Statistics Canada

s Statistique Canada



# INSTRUCTIONS

This is a survey with questions about you, your family, friends, how you feel and what you like to do. Your answers will help the government to plan programs and services for young people like yourself.

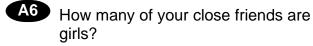
This is not a test and there are no right or wrong answers. Some questions may seem personal and some are about things which not everybody does. Take your time and please be sure to answer each question based on what you really think. You can choose whether or not to fill out this questionnaire. If you need help with any questions, you may ask the interviewer.

When you answer these questions, you can mark your answers like this  $\otimes$  or fill in the circle  $\bullet$ , or write a number in the boxes, as in the examples below. When you write your answers, make sure you press hard with your pencil.

#### **Example 1**

- B1 How do you feel about school?
  - $^{\circ}$  O I like school very much.
  - ¹⊗ I like school quite a bit.
  - <sup>2</sup>O I like school a bit.
  - <sup>3</sup> O I don't like school very much.
  - <sup>4</sup> O I hate school.

#### Example 2



93 O None

OR

0 3 number of girls



Remember that the KIDS HELP PHONE is available to help you at any time if you feel like you would like to talk to someone about a problem. 1-(800) 668-6868

Statistics Canada will keep your answers PRIVATE.

No one from your home or your school will see what you write.

## THANK YOU FOR YOUR HELP!

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4	



Please indicate your starting time.

	-	





	TION A Fr	iends and Family	,				
stat	ase answer the a ements about y ers your age.	following our friends and					
•	ore year age.		False	Mostly false	Sometimes true/ Sometimes false	Mostly true	True
A1	I have many fri	ends.	° O	1 🔾	2 🔾	<sup>3</sup> O	4 🔾
<b>A2</b>	I get along eas age.	ily with others my	5 🔾	6 🔾	7 🔾	8 🔾	9 🔾
<b>A3</b>	Others my age their friend.	want me to be	° 🔿	1 🔿	2 🔾	3 🔾	4 🔾
<b>A4</b>	Most others my	/ age like me.	5 🔾	6 🔾	7 🔿	8 🔾	9 🔾
Fo	r the rest of t	this questionnair	e by "clos	e friends"	, we mean the pe	onle that y	you trust
					ut with at school		
A5	I feel that my <b>cl</b> am.	ose friends really kno	ow who I	°O Fa	lse		
				<sup>1</sup> O Mo	ostly false		
				<sup>2</sup> O So	metimes false/Sometir	nes true	
				<sup>3</sup> O Mo	ostly true		
				<sup>4</sup> O Tru	Je		
A6	About how man things with <b>clos</b> hours?	y days a week do you e friends outside of s	do chool	<sup>01</sup> O Ne	ver		
	nours:			<sup>02</sup> O Les	ss than once a week		
				<sup>03</sup> O 1 c	lay a week		
				<sup>04</sup> O 2-3	days a week		
				<sup>05</sup> O 4-5	days a week		
				<sup>06</sup> O 6-7	days a week		
	How many of yo	our close friends are:					
				None	Numb	er	
A7	girls?			93	OR		

Statistics Canada will keep your answers PRIVATE. No one from your home or your school will see what you write.

Ho pri	ow often do you share your secrets and ivate feelings with your close friends?	2 🔿	Most of the time Some of the time Rarely		
Ho frie	ow many of your close ends do the following:	None	A few	Most	All
a.	smoke cigarettes?	0 🔾	1 🔘	<sup>2</sup> O	<sup>3</sup> O
b.	drink alcohol?	4 🔿	5 🔾	e O	<sup>7</sup> O
C.	break the law by stealing, hurting someone, or damaging property?	° O	1 🔿	<sup>2</sup> ()	<sup>3</sup> O
d.	have tried marijuana?	4 🔿	5 🔾	e O	<sup>7</sup> O
е.	have tried drugs other than marijuana?	° ()	1 🔘	<sup>2</sup> O	<sup>3</sup> O
a. b.	e following:  worked for an employer or at odd jobs  cut or skipped a day at school without permission?	° O	<sup>5</sup> O	<sup>6</sup> O	<sup>7</sup> O
— С.	been suspended from school?	4 🔘	5 🔾	e O	7 🔾
d.	dropped out of school for more than one week?	° O	1 🔿	<sup>2</sup> O	3 🔾
sta be sit	or each of the following atements, mark the circle that est corresponds to your tuation with <b>your close</b> iends.	Rarely or Never	Some of the Time	Most of the Time	All the Time
a.	My close friends push me to succeed and to do interesting things that I would not do by myself.	4 🔿	5 🔾	<sub>6</sub> O	7
b.	When I make a decision, I take my close friends' opinion into account.	°O	10	<sup>2</sup> O	³ O

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A13	Other than your close friends, do you have anyone else in particular you can talk to about yourself or your problems?	(8 O	Yes → Go to question A14
		( <sup>9</sup> O	No → Go to Section A15
A14	What is their relationship to you? (Mark everyone you feel you can talk to about yourself or your problems.)	01	Mother Father Stepmother Stepfather Brother Sister Grandparent Other relative A friend of the family Parent's boyfriend/girlfriend Teacher/Counsellor at school Coach or leader (e.g. Scout, Guide or church leader) Other (e.g. family doctor)
A15	Overall, how would you describe your relationship with your brother(s) and sister(s) (include step or foster siblings)?	14 \( \) 15 \( \) 16 \( \) 17 \( \) 18 \( \)	Very close Somewhat close Not very close I am not in touch with my brother(s) and sister(s) I don't have brothers and sisters

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BI	How do you feel about school?	<sup>0</sup> O I like school very much
		<sup>1</sup> O I like school quite a bit
		<sup>2</sup> O I like school a bit
		<sup>3</sup> O I don't like school very much
		<sup>4</sup> O I hate school
<b>B2</b>	Are you in the same school that you were in	
	two years ago?	<sup>8</sup> O Yes → Go to question B5
		<sup>9</sup> O No → Go to question B3
В3	For your most recent change in schools, why did you change schools? (Please mark all that apply.)	I changed from elementary school to middle school or junior high
		<sup>2</sup> O I changed from elementary school to high school
		<sup>3</sup> O I changed from middle school or junior high to high school
		<sup>4</sup> O I moved
		<sup>5</sup> O I was expelled
		<sup>6</sup> Other reason
<b>B4</b>	What did you find hard to get used to about your new school?	<sup>01</sup> O I did not find it hard to get used to my new school
	(Please mark all that apply.)	Organizing homework
		<sup>03</sup> O New teachers
		<sup>04</sup> O Changing classes
		<sup>05</sup> O Having to make new friends
		<sup>06</sup> O Finding my way around
		<sup>07</sup> O Taking the bus to a new school
		Other
<b>B</b> 5	How well do you think you are doing in your school work?	<sup>09</sup> ○ Very well
		<sup>10</sup> O Well
		11 O Average
		12 O Poorly
		<sup>13</sup> O Very poorly

A
*

How important is it to you to do the following in school:		Very important		ewhat ortant	Not very important	Not importa at all
a. make friends?		1 ()	2 (	0	<sup>3</sup> O	4 🔿
b. get good grades?		5 🔘	6 (	0	<sup>7</sup> O	8 🔾
c. participate in extra-curricu activities?	lar	1 🔘	<sup>2</sup> (	0	<sup>3</sup> O	4 🔘
d. learn new things?		5 🔘	<sup>6</sup> (	0	7 🔾	* O
e. always show up for class	on time?	1 ()	2 (	0	<sup>3</sup> O	4 🔘
f. express your opinion in cl	ass?	5 🔾	6 (	0	7 🔾	8 🔾
g. take part in student counc similar groups?	il or other	1 🔘	2 (	0	<sup>3</sup> O	4 🔘
h. hand in assignments on ti	me	5 🔿	6 (	0	7 🔾	8 🔾
How do you like the following subjects:	I hate	l don't it very muci	y	l like it a little	l like it a lot	I don't take it
a. Math	01 🔘	02	)	03	04	05
b. English	06	07	)	08	09	10 🔘
c. French	01 🔘	02	)	03	04	05 🔘
d. Science	06 🔾	07	)	08	09 🔘	10 🔘
e. Gym/Phys. Ed.	01 🔘	02	)	03	04 🔘	05 🔘
f. Arts (art, music, drama)	06 🔾	07	)	08 🔘	09	10 🔘
How much school spirit does have?	your sch	ool <sub>0</sub>	O Alm	nost all stud	ents have a lo	t of school spirit
		1	O Mos	st students	have a lot of so	chool spirit
		2	O Sor	ne students	s have a lot of s	school spirit
		3	O Ver	y few stude	ents have a lot	of school spirit
How much school spirit do yo	ou have?	01	Оад	reat deal		
		02	O sor	ne		
		03	O Ver	y little		
		04	O Nor	ne		

\*

How often do yo of things) at your	u feel like an outside school?	er (or left out	<sup>1</sup> O M <sup>2</sup> O S <sup>3</sup> O R	Il the time lost of the time ome of the time arely ever	e	
you taken part ir	ths, how often have the following ctivities (other than		Never	Less than once a week	1 to 3 times a week	4 or more times a week
WIŤHOÚT a	ts or done physical a coach or an instruction during recess)?	activities ctor	01	02	03	04
b. Played spor other than f (e.g., school	rts WITH a coach or or gym class I teams)?	instructor,	05	06	07 🔘	08
c. Taken part or other gro than in gyn	in dance, gymnastic ups or lessons, othe n class?	s, karate er	09	10 🔘	11 🔾	12 🔘
d. Taken part clubs or les	in art, drama or mus sons, outside of clas	ic groups, ss?	01	02	03	04
e. Taken part as yearbool or student o	in a school club or g c club, photography ouncil?	roup such club	05 🔿	06	<sup>07</sup> O	08
During the past r	month, how often <b>dic</b> WITHOUT permissio	d you cut on?	02	lever		
			<sup>03</sup> O 3	or 4 times times or more		
Since the begin school year, ho times have you.	w many	Never		nce or wice	3 or 4 times	5 times or more
a. skipped a da WITHOUT pe	y of school ermission?	1 ()	2		<sup>3</sup> O	4 🔘
b. been suspen	ded from school?	5 (	6	· ( )	7 🔾	8 🔾

(B)

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*								*
B14	Have you ever do than a week?	ropped out of sch	ool for more	(°1 C	) Yes <b>→ (</b>	So to ques	stion B15	
				(02 C	) <sub>No</sub> → (	So to ques	stion B16	
B15	The last time you long was it for?	ı dropped out of s	chool, how	1 C	) Less than a	a month		
				<sup>2</sup> C	) 1-3 months	3		
				4	4-6 months			
					) More than	6 months		
B16	The next statement homework.	ents are about tea	achers and					
			All the time	Most of the time	Some of the time	Rarely	Never	
	a. In general m me fairly.	y teachers treat	00	01	02	03	04	
								Don't need extra help
	b. If I need extr teachers give	a help, my e it to me.	05	06	07	08	09	<sup>10</sup> O
								No homework
	c. I have a place homework o	ce at home to do r study.	00	01	02	03	04	05
								No homework
	d. When my tea homework, I	achers give me do it.	06	07	080	09	10 🔘	11 🔾
<u> </u>	How often do you class?	u talk to a teacher	outside of	° 🔾	Every day			
				1 🔾	A few times	s a week		
				2 🔾	Once a we	ek		
				3 🔾	A few times	s a month		
				4 🔾	Less than	once a month	١	
				5 🔾	Never			

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★

		All the time	Most of the time	Some of the time	Rarely	Never	No probler at scho
_	a. If I have problems at school, my parents are ready to help.	00 🔾	01 🔘	02	03	04	05
	b. My parents encourage me to do well at school.	06	07	08	09	10 🔿	
	c. My parents expect too much of me at school.	00	01	02	03	04	
l to	How far do you hope to go in school complete	ol? I hope	0 🔾	Middle scho	ol/junior high		
			1 🔾	High school			
			<sup>2</sup> O	College or C	EGEP		
			<sup>3</sup> O	A university	degree		
			4 🔾	More than o	ne university	degree	
			5 🔾	I don't know			
			6 🔾	Other			

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### **SECTION C**





	describes how you feel.	False	Mostly false	Sometimes false/ Sometimes true	Mostly true	True
	In general, I like the way I am.	<sup>00</sup> O	01 🔘	02 🔾	03	04
	Overall I have a lot to be proud of.	05	06	07 🔾	08	09
	A lot of things about me are good.	00 🔘	01	02	03	04
	When I do something, I do it well.	05	06	07	08	09
	I like the way I look.	00 🔘	01	02	03	04
)	In general, I am happy with how thir me in my life now.	ngs are for	1 O 2 O 3 O 4 O	Strongly disagree Disagree Agree Strongly agree		
	The next five years look good to me		<sup>5</sup> O	Strongly disagree Disagree Agree Strongly agree		
	The following is a series of events the may directly affect youths. Have you personally ever been through any of these events?	J		Yes		No <sup>2</sup> C
a _	a. A painful break-up with your boy	friend/girlfriend	d.			-0
b	o. A serious problem in school.			<sup>3</sup> O		4 🔿
С	c. A pregnancy or an abortion.			1 🔾		2 🔿
d	d. The death of someone close to y	ou.		³ ()		4 🔿
	e. Another difficult event; specify:			1		2 ()

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		<b>.</b>
		<b>X</b>

<b>C</b> 5	During the p have you pe treated unfai	ast 12 months, rsonally been irly because of	Yes	No		l don't know	
			01	02		03	
	a. your sex	x/gender?			)		
	b. your rac	e, skin colour, or ethnic group?	04	05	)	06	
	c. your rel	gion?	01	<sup>02</sup> C	)	03	
	d. another	reason?	04	05	)	06	
	During the p	ast 12 months, how many times did	I someone				
C6	say somethi made you fe uncomfortab	ng personal about you that el extremely le?	Never	Once or twice	3 or 4 times	5 times or more	
	a. While at s	chool or on a school bus.	01	02	03	04	
	b. Elsewhere	e (including at home).	05 🔘	06	07	08	
<b>C</b> 7	threaten to h hurt you?	ourt you but not actually					
	a. While at s	chool or on a school bus.	09	10 🔾	11 🔘	12	
	b. Elsewhere	e (including at home).	13 🔘	14 🔘	15 🔘	16	
<b>C</b> 8	physically at	tack or assault you?					
	a. While at s	chool or on a school bus.	17 🔾	18 🔾	19	20	
	b. Elsewhere	e (including at home).	21 🔘	22 🔘	23 🔘	24	

**SECTION D** Feelings and Behaviours







answer that best describes you.	Never or not true	Sometimes or somewhat true	Often or very true
I show sympathy to (I feel sorry for) someone who has made a mistake.	1 🔿	<sup>2</sup> O	<sup>3</sup>
b. I can't sit still, I am restless.	4	5	e 🔾
c. I destroy my own things.	7	8 🔾	9
d. I try to help someone who has been hurt.	1	2	³O
e. I steal at home.	4 🔘	5	<sub>6</sub> O
f. I am unhappy or sad.	7	<sup>8</sup> O	9
g. I get into many fights.	1	<sup>2</sup> O	3
h. I offer to help clear up a mess someone else has made.	4 🔿	5 🔾	60
I am easily distracted. I have trouble sticking to any activity.	<sup>7</sup> O	8 🔾	9
<ul><li>j. When I am mad at someone, I try to get others to dislike him/her.</li></ul>	1	<sup>2</sup> O	<sup>3</sup>
k. I am not as happy as other people my age.	4 🔿	5	<sup>6</sup> O
<ol> <li>I destroy things belonging to my family or other young people.</li> </ol>	<sup>7</sup> O	8 🔾	9 O
m. If there is an argument, I try to stop it.	1	<sup>2</sup> O	<sup>3</sup>
n. I can't concentrate, I can't pay attention.	4 🔘	5	<sub>e</sub> O
o. I am too fearful or nervous.	7	80	<sup>9</sup> O
<ul> <li>When I am mad at someone, I become friends with another as revenge.</li> </ul>	1 ()	<sup>2</sup> O	³O
q. I am impulsive, I act without thinking.	4 🔿	5	6
r. I tell lies or cheat.	7	<sup>8</sup> O	9
s. I offer to help other young people (friend, brother or sister) who are having difficulty with a task.	<sup>1</sup> ()	<sup>2</sup> ()	³ ()

Statistics Canada will keep your answers PRIVATE. No one from your home or your school will see what you write.

<b>+</b>		
^		

Read the following statements and choose the answer that best describes you.		Never or not true	Sometimes or somewhat true	Often o very tru	
t.	I worry a lot.	4 🔿	5	<sub>6</sub> O	
u.	I have difficulty waiting for my turn in games or group activities.	7 🔾	8 🔾	90	
V.	When another kid accidentally hurts me, I assume that the other kid meant to do it, and I react with anger and fighting.	10	<sup>2</sup> O	3	
w.	When I am mad at someone, I say bad things behind his/her back.	4 🔿	5 🔾	<sup>6</sup> O	
x.	I physically attack people.	7 🔾	8 🔾	90	
y.	I comfort another young person (friend, brother or sister) who is crying or upset.	1 🔿	<sup>2</sup> O	<sup>3</sup> O	
Z.	I cry a lot.	4 🔘	5 🔾	6	
aa.	I vandalize.	7	8 🔾	<sup>9</sup> O	
bb.	I threaten people.	1 ()	<sup>2</sup> O	3	
cc.	I help to pick up things which another young person has dropped.	4 🔿	5	6	
dd.	I bully or am mean to others.	<sup>7</sup> O	<sup>8</sup> O	<sup>9</sup> O	
ee.	I stare into space.	1 🔿	<sup>2</sup> O	<sup>3</sup> O	
ff.	When I am mad at someone, I say to others: let's not be with him/her.	4 🔿	5	6	
gg.	I am nervous, highstrung or tense.	7	<sup>8</sup> O	<sup>9</sup> O	
hh.	I kick or hit other people my age.	1 ()	<sup>2</sup> O	<sup>3</sup> O	
ii.	When I am playing with others, I invite bystanders to join in a game.	4 🔿	5	6	
jj.	I steal outside my home.	7	8 🔾	°	
kk.	I am inattentive, I have difficulty paying attention to someone.	1 🔿	<sup>2</sup> O	<sup>3</sup> O	
II.	I have trouble enjoying myself.	4 🔿	5	6	
mm.	I help other people my age (friends, brother or sister) who are feeling sick.	<sup>7</sup> O	8 🔾	<sup>9</sup> O	
nn.	When I am mad at someone, I tell that person's secrets to a third person.	1 🔿	2	3	
00.	I encourage other people my age who cannot do things as well as I can.	4 🔿	5	6	

*		7
		,

The following questions are about suicide. Some of them might be hard for you to answer, but please answer them as well as you can. These questions will help us learn about young people.

Remember to ask your interviewer any questions you might have. If you feel like you need support, we encourage you to talk to your family doctor or nurse, or use the resources provided to you by the interviewer.

or use the resources provided to you	by the inter	viewer.		
Has anyone in your school committed suicide?	° O ,	Yes, within the la	ast year	
	1 0	Yes, more than a	a year ago	
	<sup>2</sup> O 1	No, never		
	³ O 1	don't know		
Has anyone that you have personally known committed suicide?	4 🔘 🕥	Yes, within the la	ast year	
	5 🔘 🕥	Yes, more than a	a year ago	
	e 🔘 1	No, never		
	<sup>7</sup> О 1	don't know		
During the past 12 months, did you <b>seriously</b> consider attempting suicide?	1 🔿	Yes		
	<sup>2</sup> O	No → Go t	o question	<b>D7</b>
During the past 12 months, how many times did you attempt suicide?	4 0	Once	to question	n D7
		More than once		
If you attempted suicide during the past 12 months, did you have to be treated by a doctor, nurse or other health professional (for a physical injury or counselling)?	7 🔿	Yes No		
During the past 12 months, about how many times	Never	Once or twice	3 or 4 times	5 times or more
a. have you stayed out later than your parents said you should?	1	² ()	<sup>3</sup>	4
b. have you stayed out all night without permission?	5	<sup>6</sup> O	7	<sup>8</sup> O

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\*

	ring the past 12 months, about w many times	Never	Once or twice	3 or 4 times	5 times o more
d.	were you questioned by a security guard, a teacher or a principal about anything that they thought you did such as stealing, damaging property or anything else?	5 🔾	е́ О	7	8
e.	have you run away from home?	10	<sup>2</sup> O	3	4
f.	have you stolen something from a store or school?	5 🔾	6	7	80
g.	have you taken money from your parents without their permission?	1 ()	2	3	40
h.	have you broken into, or snuck into, a house or building with the idea of stealing something?	5 🔾	6 O	7	*
i.	have you used or bought or tried to sell something you knew was stolen?	1 ()	<sup>2</sup> O	³O	4
j.	have you damaged or destroyed anything that didn't belong to you (for example, damaged a bicycle, car, school furniture, broken windows or written graffiti)?	5 🔾	е <u>О</u>	7	8
k.	have you fought with someone to the point where they needed care for their injuries (for example, because they were bleeding, or had broken bones)?	10	<sup>2</sup> O	<sup>3</sup>	4 🔾
l.	have you been in a fight where you hit someone with something other than your hands (for example, a stick, club, knife, or rock)?	5 🔿	6 O	<sup>7</sup> O	*
m.	have you carried a knife for the purpose of defending yourself or using it in a fight?	1 ()	<sup>2</sup> O	³O	4
n.	have you carried a gun other than for hunting or target shooting?	5	6	7	80
0.	have you carried any other weapon such as a stick or a club?	1	2	<sup>3</sup>	4
p.	have you threatened someone in order to get their money or things?	5	<sub>6</sub> O	7	80
p.	have you threatened someone in order to get their money or things?	5	<sub>e</sub> O	7	8
q.	have you sold any drugs?	1	<sup>2</sup>	<sup>3</sup>	4
r.	have you bought, or gotten drugs from someone for your own use, or for someone else?	5 🔾	е <u>О</u>	<sup>7</sup> O	*O

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	A
	•

<b>07</b>		the past 12 months, about how any times	Never	Once or twice	3 or 4 times	5 times or more
	S.	have you attempted to touch the private parts of another person's body (while knowing that they would probably object to this)?	1 🔿	2 🔾	3	4
	t.	have you tried to force someone into having sex with you?	5	<sup>6</sup> О	7	*
	u.	have you taken a car, motorbike, or motorboat without permission?	1	<sup>2</sup> O	³O	4
	V.	have you set fire on purpose to a building, a car, or something else not belonging to you?	5 🔾	<sub>6</sub> O	7	*O
D8	ga	uring the past 12 months, were you part of a ng that broke the law by stealing, hurting meone, damaging property, etc.?	¹O Yes			







a. played sports or done physical activities WITHOUT a coach or an instructor (e.g. biking, skateboarding, etc.?  b. played sports WITH a coach or instructor (swimming lessons, baseball, hockey, etc.)?  c. taken part in dance, gymnastics, karate or other groups or lessons (always organized outside of school)?  d. taken part in art, drama or music groups, clubs or lessons (again outside of school)?  e. taken part in clubs or groups such as Guides or Scouts, 4-H club, community, church or other religious groups?  f. done a hobby or craft (drawing, model building, etc.)?  In any of your activities, at school or outside school, do you have special responsibilities such as team leader, captain, secretary, etc.?  Excluding for school or for work, how often do you.  Several	OUTSIDE OF SCHOOL, during the past 12 months, how often have you						
b. played sports WITH a coach or instructor (e.g. 1 2 3 4 C c)  b. played sports WITH a coach or instructor (swimming lessons, baseball, hockey, etc.)? 5 6 7 6 C c. taken part in dance, gymnastics, karate or other groups or lessons (always organized outside of school)? 5 6 7 6 C c. taken part in art, drama or music groups, clubs or lessons (again outside of school)? 5 7 6 C c. taken part in elubs or groups such as Guides or Scouts, 4-H club, community, church or other religious groups? 5 7 6 7 7 7 7 8 7 8 7 7 7 8 7 8 7 8 7 8 9 7 7 9 8 7 9 8 9 9 9 9				Never	once a	times a	
c. taken part in dance, gymnastics, karate or other groups or lessons (always organized outside of school)?  d. taken part in art, drama or music groups, clubs or lessons (again outside of school)?  e. taken part in loubs or groups such as Guides or Scouts, 4-H club, community, church or other religious groups?  f. done a hobby or craft (drawing, model building, etc.)?  In any of your activities, at school or outside school, do you have special responsibilities such as team leader, captain, secretary, etc.?  Excluding for school or for work, how often do you  Daily Weekly Monthly Several times a year  Never a use a public library?  Do to the do you have special responsibilities such as team leader, captain, secretary, etc.?  Do to the do you  Do to the do you have special responsibilities such as team leader, captain, secretary, etc.?  Do to the do you  Do to the do you have special responsibilities such as team leader, captain, secretary, etc.?  Do to the do you  Never year  Never yea	a.	WITHOUT a coach or an instructor (e.g.	s g.	1 🔿	2 🔘	3 🔘	4 🔘
other groups or lessons (always organized outside of school)?  d. taken part in art, drama or music groups, clubs or lessons (again outside of school)?  e. taken part in clubs or groups such as Guides or Scouts, 4-H club, community, church or other religious groups?  f. done a hobby or craft (drawing, model building, etc.)?  In any of your activities, at school or outside school, do you have special responsibilities such as team leader, captain, secretary, etc.?  Excluding for school or for work, how often do you  Daily Weekly Monthly Several times a year  Neveral a. use a public library?  of the control of th	b.	played sports <b>WITH</b> a coach or instruct (swimming lessons, baseball, hockey,	tor etc.)?	5 🔘	e 🔘	7 🔾	8 🔾
e. taken part in clubs or groups such as Guides or Scouts, 4-H club, community, church or other religious groups?  f. done a hobby or craft (drawing, model building, etc.)?  In any of your activities, at school or outside school, do you have special responsibilities such as team leader, captain, secretary, etc.?  Excluding for school or for work, how often do you  Daily Weekly Monthly Several times a year  Neveral times a year  1	C.	other groups or lessons (always organi	e or ized	1 ()	<sup>2</sup> O	3 🔘	4 🔿
Guides or Scouts, 4-H club, community, church or other religious groups?  f. done a hobby or craft (drawing, model building, etc.)?  In any of your activities, at school or outside school, do you have special responsibilities such as team leader, captain, secretary, etc.?  Excluding for school or for work, how often do you  Daily Weekly Monthly Several times a year  Neveral times a year	d.	taken part in art, drama or music group clubs or lessons (again outside of scho	os, ool)?	5 🔿	e O	7 🔘	8 0
In any of your activities, at school or outside school, do you have special responsibilities such as team leader, captain, secretary, etc.?  Excluding for school or for work, how often do you  Daily Weekly Monthly times a year  Never year  a. use a public library?  1	e.	Guides or Scouts, 4-H club, community	/,	1 ()	2 🔿	3 🔾	4 🔿
school, do you have special responsibilities such as team leader, captain, secretary, etc.?    Yes	f.	done a hobby or craft (drawing, model building, etc.)?		5 🔿	e O	7 🔘	8 🔘
how often do you  Daily Weekly Monthly times a year  a. use a public library?  10 02 03 04 05 05 05 05 05 05 05 05 05 05 05 05 05	sch	nool, do you have special responsibilities	3	2 🙃			
a. use a public library?  D. O.	Exc	cluding for school or for work, w often do you	Daily	Weekl	y Monthly	times a	Never
c. read newspapers or magazines? 11 12 13 14 15 15 16 17 18 18 19 20 10	a.	use a public library?	01	02	03	04	05
magazines?	b.	write letters, poetry, stories, journals, etc.?	06	07	08	09	10
	C.		11 🔘	12	13	14	15
	d.	read books?	16 🔘	17	18	19	20

F

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E	During the past 12 months, have you volunteered or helped without pay by	1 🔿	Supporting a course (food bank, environmental group, etc.)
	(Mark all that apply.)	2 🔾	Fund raising (a charity, school trips, etc.)
		<sup>3</sup> O	Helping in your community (hospital volunteering, work in a community organization, etc.)
		4 🔿	Helping neighbours or relatives (cutting grass, babysitting or shovelling snow for a neighbour, etc.)
		5 🔿	Doing another volunteer activity (without pay)
		(6 O	I have not done any of these activities without pay → Go to E6
<b>E</b>	During the past 12 months, how often have	01	
	you volunteered or helped without pay?	$\cup$	Everyday
		02	A few times a week
		$\circ$	Once a week
		04	A few times a month
			Less than once a month
<b>E</b> 6	On average, about how many hours a day do you watch TV or videos?	01	I don't watch TV or videos
	you water i'v or videos.	02	Less than 1 hour a day
		03	1 or 2 hours a day
		04	3 or 4 hours a day
		05	5 or 6 hours a day
		06	7 or more hours a day
	Do you have access to a computer <b>in your home</b> ?	1	Yes
		2	No
			INO
<b>E8</b>	Do you have access to the Internet in your home?	3 🔿	
		10	Yes
		Ť	No
<b>E</b> 9	On average, how much time in a day do you spend looking after a younger brother or sister	01	I don't have a brother or sister
	while your parents are not at home?	02	I don't spend time alone while no one else is home
		03	Less than 1 hour a day
		04	1 to 2 hours a day
		05	3 to 4 hours a day
		06	5 to 6 hours a day
		07	7 or more hours a day

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\*

#### **SECTION F** Smoking, Drinking and Drugs







In this section, we would like to ask you some questions about your experiences with smoking, drinking and drugs.

Some of the questions will apply to you even if you have not smoked, had a drink or used drugs.

Please be as honest as you can - your answers are private and Statistics Canada will make sure no one will find out who filled out each questionnaire.

<b>(i)</b>	Which of the following best describes your experience with smoking cigarettes:	01 O 02 O	I have never smoked  I have only had a few puffs  Go to question F4  I do not smoke anymore → Go to question F3
			OR
			I smoke
		04 🔘	A few times a year
		05 🔾	About once or twice a month
		06	About 1-2 days a week
		07 🔿	About 3-5 days a week
		08	About 6-7 days a week
<b>(2</b> )	On the days that you smoke, about how many cigarettes do you usually smoke?		number of cigarettes
F3	If you have smoked one or more cigarettes every day for at least 7 days in a row, how old were you when you did so?	98	I have never done this
	, ,		OR
			I was years old

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**★** 

The next questions are about drinking alcohol. A drink of alcohol is, for example: One bottle of beer or One glass of wine or One shot of liquor. F4 Which of the following best describes your experience with drinking alcohol: I have never had a drink of alcohol Go to 02 0 question F9 I have only had a few sips <sup>03</sup> O I only tried once or twice (at least one drink) I do not drink alcohol anymore OR I drink (at least one drink)... <sup>05</sup> A few times a year Of About once or twice a month About 1-2 days a week About 3-5 days a week <sup>09</sup> About 6-7 days a week E5 How old were you when you first had a drink of I was years old. alcohol? F6 Have you ever been drunk? O Yes → Go to question F9 No **F7** How old were you when you were drunk for years old. Lwas the first time? F8 During the past 12 months, how often have <sup>01</sup> O Never you been drunk? O2 A few times O3 About once or twice a month About 1-2 days a week About 3-5 days a week About 6-7 days a week

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Whi	ich of the following best describer experience with using marijua	01	I have never	done it			
and a jo	ind cannabis products (also known as joint, pot, grass or hash) during the ast 12 months?		02 🔾		12 month		
pás			O		I have done it, but not during the past 12 months		
			OR				
				During the pused mariju		ths, I have	
		03 🔾	A few times				
		04 🔘	About once of	or twice a mo	nth		
			05	About 1-2 da	ys a week		
			06	About 3-5 da	ys a week		
		07	About 6-7 da	ys a week			
Which best describes your experience with the following drugs during the past 12		I have done it, but not	During t	he past 12 m	onths I have	ve used it	
II	nonths:	done it	during the past 12 months	1 or 2 times	3 to 5 times	6 to 9 times	10 time
a.	Hallucinogens like LSD/acid, magic mushrooms	01	02	03	04	05	06
b.	Glue or solvents	07	08	09	10 🔾	11 🔿	12 🔾
C.	Drugs without a prescription or advice from a doctor: downers, uppers, tranquilizers, ritalin, etc.	13	14 🔘	15	<sup>16</sup> O	17 🔾	18 🔾
d.	Other drugs like crack, cocaine, heroin, speed or ecstasy, etc.	19	20 🔾	21	22	23	24 🔾
<b>/ou</b> Hov	cocaine, heroin, speed or ecstasy, etc.  have never tried any of the world were you when you did the	the above	0	TO SECTI	ON G.		
IOIIC	owing drugs for the first time?			I have n done		I first did i was	
a.	Marijuana and cannabis produ	cts		01 🔘	OR		yea
b.	Hallucinogens like LSD/acid, n	nagic mush	rooms	02	OR		yeai old
c.	Glue or solvents			03 🔘	OR		year old
d.	Drugs without a prescription or doctor: downers, upprs, tranqu	advice fro	m a lin, etc.	04 🔘	OR		yeaı old
	Other drugs like crakc, cocaine						year

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T							
mother							
Think of the mother you spend the most time with. Is she	<sup>01</sup> O your biological m	other?					
(Mark one only.)	<sup>02</sup> your adoptive mother?						
	<sup>03</sup> your stepmother	?					
	04 your foster moth	<sup>04</sup> your foster mother?					
	05 another person?						
	OR						
	06 I am not in touch with my mother		tion G4				
Thinking of the mother you have identified in the previous questions:	A great deal	Some	Very little/ Not at all of none				
A. How well do you feel that your mother understands you?	° 🔾	1 ()	2				
b. How much fairness do you receive from your mother?	³ ()	4 🔿	5				
c. How much affection do you receive from your mother?	e 🔾	7	8 🔾				
Overall, how would you describe your relationship with your mother?	<sup>1</sup> O Very close						
	<sup>2</sup> O Somewhat close						
	<sup>3</sup> Not very close						

Father				
Now think of the father you spermost time with. Is he	k of the father you spend the e with. Is he	<sup>01</sup> O your biologica	I father?	
(Mark or	ne only.)	<sup>02</sup> your adoptive	father?	
		<sup>03</sup> your stepfathe	er?	
		<sup>04</sup> your foster fat	her?	
		<sup>05</sup> another perso	n?	
		OR		
		06 I am not in too with my father		tion G7
Thinking identified	about the father you have in the previous question:	A great deal	Some	Very little Not at all of none
a. How unde	well do you feel that your father erstands you?	°O	1	<sup>2</sup> O
	much fairness do you receive your father?	<sup>3</sup> 🔾	4 🔘	5 🔾
c. How from	much affection do you receive your father?	<sup>6</sup> O	7 🔾	8
Overall, I	now would you describe your hip with your father?	<sup>1</sup> O Very close		
		<sup>2</sup> Somewhat clo	ese	
		<sup>3</sup> Not very close	)	
nswer th	e following questions thinking us questions.	g of the father and mo	ther you have	e identified i
	do you think your parents get along	<sup>0</sup> O Very well		
		<sup>1</sup> O Fairly well		
		<sup>2</sup> Not very well		
		<sup>3</sup> Not applicable	•	

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<b>★</b>	*
Y	*

	Never	Rarely	Some- times	Often	Always	l don't know	Not applicable
<ul> <li>a. How often do your parents disag about how to deal with you or yo brother(s) or sister(s)?</li> </ul>	ree ur <sub>01</sub>	02	03	04	05	06	07
b. How often do your parents get up with one another, including times when they are mad but don't say much?	3	09	10	11	12	13	14
For each of the following statements, foster parents or guardians) in genera	use the choice al have acted t	e that bes	st describe	es the way the past 6	your pare	nts (or ste	epparents,
My parents	Never	F	Rarely	Sometim	ies O	ften	Always
a. smile at me.	5		<sup>6</sup> O	7	8		9 🔾
b. want to know exactly where I am and what I am doing.	0		1	2	3		4 🔿
c. soon forget a rule they have made	de. <sup>5</sup> O		<sup>6</sup> O	7	8		<sup>9</sup> O
d. praise me.	°O		1	<sup>2</sup> O	3	0	4 🔿
e. let me go out any evening I want	5 O		<sup>6</sup> O	7	8	0	9 O
f. tell me what time to be home wh go out.	en I °O		1	2 🔾	3	0	4 🔿
g. nag me about little things.	5 🔾		<sup>6</sup> О	7	8	0	9 🔾
h. listen to my ideas and opinions.	°O		10	<sup>2</sup> O	3	0	4 🔿
<ul> <li>i. and I solve a problem together whenever we disagree about something.</li> </ul>	5 🔾		<sup>6</sup> O	7	3	·O	°O_
j. only keep rules when it suits the	m. °O		1	2 🔿	3	·O	4 🔘
k. get angry and yell at me.	5 🔾		<sup>6</sup> O	7 🔾	8	°O	9 O
make sure I know I am apprecial	ted. °O		10	2 🔾	3	°O	4 🔿
m. threaten punishment more often they use it.	than 5		<sup>6</sup> O	7 🔿	8	·O	9
n. speak of the good things I do.	°O		10	<sup>2</sup> O	3	°O	4 🔿
find out about my misbehaviour.	5 🔿		<sup>6</sup> O	7	3	°O	9
<ul> <li>enforce a rule or do not enforce rule depending upon their mood.</li> </ul>			10	2	3	°O	4 🔿
q. hit me or threaten to do so.	5 🔾		<sup>6</sup> О	7	3	°O	9 🔾
r. seem proud of the things I do.	0		10	2	3	°O	4 🔿
s. seem too busy to spend as much time with me as I'd like.	n 5		<sup>6</sup> O	7	8	3	<sup>9</sup>
t. take an interest in where I am go and who I am with.	oing °O		10	2 🔾	3	°O	4 🔿

### SECTION H Health





					<u> </u>	
	In general, would you say your health is	1				
		2 .	excellent			
		3	very goo	d?		
		4	good?			
		5	fair?			
<b>1</b>			O poor?			
<b>H</b> 2	How tall are you? (Please estimate if you are not sure.)	6		Feet <sup>7</sup>	Inche	es
			OR			
		8	Metre	9	Centimetro	es
H3	How much do you weigh? (Please estimate if you are not sure.)	1		Pounds		
	, ,		OR	Founds		
		2				
				Kilogram		
Yo st	oung people sometimes experience ress, and may affect other areas in	e health pro their life.	oblems that Your answ	may or ma ers to the fo	ny not be rel Ollowina au	lated to ` estions
	Il help build a picture of your gene				<b>5</b> .	
HA	During the past 6 months, how often have you had or felt the following?		About	About	More	
	nave you had or locally local time forming.	Seldom or never	once a month	once a week	than once a	Most days
					week	
	a. Headache.	5 🔾	<sub>6</sub> $\bigcirc$	7	8	9
	b. Stomach ache.	$^{\circ}$	1	2	3	4 🔿
	b. Stofflach ache.	5.0		7.0		
	c. Backache.	<sup>5</sup> O	, O	<sup>7</sup> O	*0	°O
	d. Difficulties in getting to sleep.	$^{\circ}\bigcirc$	1		<sup>3</sup> O	4 🔾
H5	During a school week (Monday to Friday), how many days do you normally	5	O Never			
	eat breakfast?	6	0 1 or 2 day	ys a wook		
		7				
		8	^			
			C Every sch	ool day		
<b>H6</b>	Would you say you are	1	Trying to	lose weight?		
		2		gain weight?		
		3			woight?	
		4	•	stay the same	_	
			Not trying	to do anything	g about your we	eight

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*	*
Puberty	
We know that the following questions might answering them as well as you can. Chang different aspects of their lives.	tht be difficult, but would appreciate you ages in young people's bodies can affect many
Would you say that your body hair ("body hair" means underarm and pubic hair) has begun to grow?	Has not yet started growing  Has barely started growing  Growth of body hair is definitely underway  Growth of body hair seems completed  Boys go to question H10
For girls only	
H8 Have your breasts begun to grow?  H9 If you have begun to menstruate (your monthly	Freast growth is definitely underway  Breast growth seems completed  I was
periods), at what age did you start?	years and months old.  OR  99  Have not yet started  Girls go to question H12
For boys only	
H10 Have you noticed a deepening of your voice?	Fig. 6  Has not yet started changing  Has barely started changing  Voice is definitely changing  Voice change seems completed

*	*
H11 Have you begun to grow hair on your face?	<sup>1</sup> Has not yet started growing
	<sup>2</sup> O Has barely started growing
	<sup>3</sup> Facial hair growth is definitely underway
	<sup>4</sup> O Facial hair growth seems completed

Dating	
H12 How old were you when you had your first boyfriend/girlfriend?	OR  I was  Or to question H17  I was years old
Do you have a boyfriend/girlfriend right now?	¹○ Yes → Go to question H14  ²○ No → Go to question H16
H14 How long have you been dating him/her?	O1 Less than 1 month O2 1 to 5 months
	03 6 months to a year 04 Over a year
Outside of school hours, about how many days a week do you see your boyfriend/girlfriend?	Never  Less than once a week  One day a week  One day a week  A or 5 days a week  onumber of the state of the

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None in the past 12 months
<sup>12</sup> O 1
<sup>13</sup> O 2 or 3
<sup>14</sup> O 4 or 5
<sup>15</sup> O 6 or more
ware la constant and the land of the land
nsual sexual experiences. We know that out would appreciate you answering them o better understand the concerns of youth
will make sure no one will find out who fil
<sup>8</sup> O Yes → Go to question H18
<sup>9</sup> O No → Go to section I
I was years old
He or she was years ol
OR
99 I don't know
¹O Yes
<sup>2</sup> O No
<u> </u>
³ O Yes
<sup>3</sup> O Yes <sup>4</sup> O No

SECTION I

**Work and Money** 







Often, young people earn money by doing odd jobs such as babysitting, mowing lawns and raking leaves, or by having more regular jobs for employers (part-time or full-time), such as helper or cook in a restaurant. Most times, they get paid for that work but sometimes they work without pay. The following questions are about all types of work, paid or unpaid.

Wor	k d	uring this School Year					
		nce the beginning of this school year, have you	ou done				
	a.	for pay for an employer (e.g., at a store or restaurant)?			Yes	<b>No</b>	
	b.	for pay at odd jobs (babysitting, mowing					-
		a neighbour's lawn or delivering flyers)?			03 🔾	04 🔘	_
	C.	at your family's farm or business (with or without pay)?			05 🔾	06 🔾	_
	d.	without pay (e.g., CO-OP Program)?			07 🔾	08	-
If y	ou	have not worked since the beginning	of this s	school yea	ar → Go to qu	estion I8	
2	La	st week, did you do any work			Yes	No	
	a.	for pay for an employer (e.g., at a store or restaurant)?			<sup>09</sup> O	10 0	
	b.	for pay at odd jobs (babysitting, mowing a neighbour's lawn or delivering flyers)?			11 🔘	12 🔾	_
	с.	at your family's farm or business (with or without pay)?			13 🔘	14 🔘	
	d.	without pay (e.g., CO-OP Program)?			15 🔾	16 🔾	
lf v	~	district week at all leat work.	<del>(</del>	<del>'</del>			
	ou	did not work at all last week → Go	to quest	ion ib			
3	mo	ink of the job at which you worked the ost time last week: what type of work were u doing? (Mark one only.)	1 🔘	Working in a	restaurant or fast f	ood outlet, etc.	
			2 🔾	Working in a store, gas st	a store (convenience ation, clothing or sh	e store, grocery loe store, etc.)	
			3 🔾	Working in a construction	nother type of servi , hospital, office, are	ce (e.g. ena, etc.)	
			4 🔘	Doing odd jo neighbour's	obs (babysitting, mo lawn or delivering fl	wing a yers), etc.)	
			5 🔾	Working at r	ny family's business	s or farm	
			e 🔾	Other type o	f work. Specify:		I
							<b>]</b>



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				None		Number of	hours
a.	Monday to Friday?			96	OR		
b.	Saturday and Sunday?			97	OR		
At	this job, approximately how	much did you	make last w	eek? (Answer  DR  OR  OR	3	oer hour	
				<sup>5</sup> O I wor	ked but did r ey last week	not make any	
No usi	ow think <b>of all the jobs you c</b> ually work?		e school we			-	ally do
		None		Number of h	ours -		work
a.	Monday to Friday?	95	OR			OR 96	0
b.	Saturday and Sunday?	97	OR			OR <sup>98</sup>	0
Dc scl	pes this work cause you to sto hool work than you would like	udy less or do e?	less	<sup>4</sup> O Yes,	, a great deal , somewhat le not at all less not go to sch	ess	
Do sci	pes this work cause you to sto hool work than you would like	udy less or do e?	less	Yes.  Yes.  No,	, somewhat le	ess	
scl	st week, how much money du receive from	<b>9?</b>	\$1 to 20	Yes.  Yes.  No,	, somewhat le	ess	
ey Las	hool work than you would like	id <b>No</b>		Yes.  Yes.  No,  I do	, somewhat less	ess s nool anymore	
ey Las you	st week, how much money dureceive from	id No money	\$1 to 20	Yes.  4 Yes.  5 No,  6 I do	, somewhat less not go to sch	ess nool anymore \$61 to 100	%1 06 (
ey Las you a. b.	st week, how much money du receive from your parents?	id No money  01	\$1 to 20	Yes.  4 Yes.  5 No,  6 O I do  \$21 to 40	somewhat less not go to sch	\$61 to 100	

\*

see on Marile	
This past summer, did you do any work	Yes No
a. for pay for an employer (e.g. at a store or restaurant)?	<sup>12</sup> O <sup>13</sup> O
<ul> <li>for pay at odd jobs (e.g. babysitting, mowing a neighbour's lawn or delivering fly</li> </ul>	yers)? 14 O 15 O
c. at your family's farm or business (with or without pay)?	<sup>16</sup> O <sup>17</sup> O
d. without pay (e.g., CO-OP program)?	<sup>18</sup> O <sup>19</sup> O
ou did not work last summer → Go	to section J
Think of all the jobs you had this past summer; what types of work did you do? (Mark all that apply)	Working in a restaurant or fast food outlet, e  Working in a store (grocery or convenience store, clothing or shoe store, etc.)  Working in a gas station  Working in a camp  Working in another type of service (e.g. hospoffice, arena, etc.)  Working in construction, landscaping or painting  Doing odd jobs (cutting grass, house-sitting, babysitting, delivery flyers, newspapers, running errands, etc.)  Working at my family business or farm  Other type of work. Specify:
Thinking of all the jobs you had this past su only 1 hour per week)?	ummer, how many weeks did you work (even if you worked weeks
	OR  93 O I did not work last summer
In a average week, how many hours did you w	
	hours
	OR

Please indicate your ending time to complete this questionnaire.



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**SECTION J** 

Help us.

Thank you very much for helping us. Your comments are important.

1	About how long did it take you to complete this questionnaire?	01	less than 20 minutes
	questionnaire?	02	20 to 29 minutes
		03	30 to 39 minutes
		04	40 to 49 minutes
		04	50 to 59 minutes
		$^{04}$	60 minutes or more
_			

When	you	finish	this	survey:
------	-----	--------	------	---------

$\times$	

put this questionnaire in the envelope.



return it to the interviewer.



# National Longitudinal Survey of Children and Youth

Cycle 4

## **Booklet 23E**

Confidential when completed

Collected under the authority of the Statistics Act, revised statutes of Canada, 1985, Chapter S19.

Aussi disponible en français



## Please read instructions on next page before beginning.

		(4)
naire completed?	B. Did the respondent complete this questionnaire <u>before</u> the interview?	
	<sup>1</sup> Yes	
- by the respondent	<sup>2</sup> No	
- by the interviewer		
FOR OFFICE	USE ONLY	
Questio	onnaire No. D - 4 2 -	
	- by the respondent - by the interviewer  FOR OFFICE	questionnaire before the interview?  1 Yes  - by the respondent  2 No

8-5300-399.1: 2000-07-26 STC/ENM-040-75020



Statistics Canada

stics Statistique ida Canada



## INSTRUCTIONS

This is a survey with questions about you, your family, friends, how you feel and what you like to do. Your answers will help the government to plan programs and services for young people like yourself.

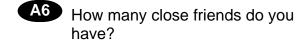
This is not a test and there are no right or wrong answers. Some questions may seem personal and some are about things which not everybody does. Take your time and please be sure to answer each question based on what you really think. You can choose whether or not to fill out this questionnaire. If you need help with any questions, you may ask the interviewer.

When you answer these questions, you can mark your answers like this  $\otimes$  or fill in the circle  $\bullet$ , or write a number in the boxes, as in the examples below. When you write your answers, make sure you press hard with your pencil.

#### **Example 1**

- B1 How do you feel about school?
  - $^{\circ}$  O I like school very much.
  - $^{1}$   $\otimes$  I like school quite a bit.
  - <sup>2</sup> O I like school a bit.
  - $^{\scriptscriptstyle 3}$  O I don't like school very much.
  - $^{\scriptscriptstyle 4}$   $\bigcirc$  I hate school.

#### Example 2



93 O None

OR

0 3 number of close friends



Remember that the KIDS HELP PHONE is available to help you at any time if you feel like you would like to talk to someone about a problem. 1-(800) 668-6868

Statistics Canada will keep your answers PRIVATE.

No one from your home or your school will see what you write.

## THANK YOU FOR YOUR HELP!

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<del>k</del>



Please indicate your starting time.

-		
-		
		J





ECTIO	ON A	Friends and Family							
statem		the following out your friends r age.	False	Most fals		ometimes fa		Mostly true	True
1	have mar	ny friends.	$^{\circ}\bigcirc$	1 C	)	2 🔿		<sup>3</sup> O	4 🔘
	get along ny age.	easily with others	5 🔾	е C	)	7 🔾		<sup>8</sup> O	90
3 O fr	Others my riend.	age want me to be their	$^{\circ}$	¹ C	)	<sup>2</sup> O		<sup>3</sup> O	4 🔿
4 <sub>M</sub>	∕lost other	s my age like me.	5 ○	e С	)	7 🔿		<sup>8</sup> O	<sup>9</sup> O
trus	the restand c	st of this questionnair onfide in. They may b	e, by "clo e friends	ose frien that you	ids", w i hang	e mean t out with a	he pe at sch	eople tha	it you utside
5 I fo		ny <b>close friends</b> really know	who I	1 O M 2 O S 3 O M	alse lostly fals ometime lostly true	s false/Som	etimes	true	
thi	bout how iings with ours?	many days a week do you do close friends outside of sch	ool	02 O Lo 03 O 1 04 O 24 05 O 4	ever ess than day a we -3 days a -5 days a	week week	k		
Ho	ow many	of your close friends are:		None		Nu	mber	¬	
<b>)</b>	.male?			93	OF	₹ <u>L</u>			
	.female?			94	OF	R L			
9 Ho	ow often orivate feel	do you share your secrets an ings with your close friends?	d	<sup>1</sup> O M <sup>2</sup> O S <sup>3</sup> O R	Il the time lost of the ome of the arely lever	e time			

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How many of your close friends do the				
following:	None	A few	Most	All
a. Smoke cigarettes?	0 🔾	1 🔘	2 🔿	3 🔾
b. Drink alcohol?	4 🔘	5 🔾	6 🔾	7 🔾
c. Break the law by stealing, hurting someone or damaging property?	° ()	1 🔘	2 🔘	3 🔾
d. Have tried marijuana?	4 🔘	5 🔘	6 🔘	7 🔘
e. Have tried drugs other than marijuana?	° ()	1 🔘	2 🔘	3 🔾
Since September 1st, how many of y	our			
close friends have done the following:	None	A few	Most	AII
Worked for an employer or at odd jobs?	4 🔘	5 🔾	e 🔾	7 🔘
b. Cut or skipped a day at school without permission?	° ()	1 🔘	2 🔘	3 🔾
c. Been suspended from school?	4 🔘	5 🔘	e 🔾	7 🔘
d. Dropped out of school for more than one week?	° ()	1 🔘	2 🔘	3 🔾
For each of the following statements, recircle that corresponds to your situation your close friends.				
	Rarely or Never	Some of the time	Most of the time	All the
My close friends push me to succeed and to do interesting things that I would not do by myself.	4 (	5 ()	6 ( <u>)</u>	7 ()
b. When I make a decision, I				
take my close friends' opinion into account.	0 🔿	1 🔘	2 🔘	3 🔾
c. My close friends push me to do foolish or stupid things.	4 🔘	5 🔾	e 🔾	7 🔘
Other than your close friends, do you lanyone else in particular you can talk				
yourself or your problems?	.5 4.041	(8 O Voc > G	o to question A	14
yourself of your problems.		1 es 7 G	o to question A	14

(B)

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\*

A14	What is their relationship to you?	01 🔘	Mother
	(Mark everyone you feel you can talk to about yourself or your problems.)	02 🔿	Father
	accur, con your production,	03 🔘	Stepmother
		04 🔘	Stepfather
		05 🔘	Brother
		06 🔘	Sister
		07 🔘	Grandparent
		08 🔘	Other relative
		09	A friend of the family
		10 🔿	Parent's boyfriend/girlfriend
		<sup>11</sup> O	Teacher / counsellor at school
		12 🔘	Coach or leader (e.g. sports coach or spiritual leader)
		13	Other (eg., family doctor):
			(-g , , , , , , , ,
A15	Overall, how would you describe your	14 ( )	Very close
	relationship with your brother(s) and sister(s) (include step or foster siblings)?	15 🔾	Very close Somewhat close
		16 (	Not very close
		17 🔾	
			I am not in touch with my brother(s) and sister(s)
		18 🔾	I don't have brothers and sisters





	noose the answer that best escribes how you feel.	False	Mostly false	Sometimes false/ Sometimes true	Mostly true	Tru
a.	In general, I like the way I am.	00 🔘	01	02 🔵	03 🔾	04
b.	Overall I have a lot to be proud of.	05 🔘	06 🔾	07	08	09
С.	A lot of things about me are good.	00 🔾	01	02 🔘	03	04
d.	When I do something, I do it well.	05 🔵	06	07 🚫	08 🔘	09
е.	I like the way I look.	00 🔘	01	02	03 🔵	04
In me	general, I am happy with how the in my life now.	nings are for	1 0	Strongly disagree Disagree		
			3			
			4	Agree Strongly agree		
Th	ne next five years look good to n	ne.	5 🔾	Strongly disagree		
			6	Disagree		
			7	Agree		
			8	Strongly agree		
dir be	ne following is a series of events rectly affect youths. Have you peen through any of these events to years?	ersonally				
LVV	o years:				Yes	No
а.	A painful break-up with your be	oyfriend/girlfriend.			1 🔿	2 🔿
b.	A serious problem in school or	r at work.			3 🔾	4 🔘
C.	A pregnancy or an abortion.				1 🔿	2 🔘
d.	The death of someone close to	o you.			3 🔾	4 🔘
е.	The divorce or separation of ye	our parents.			1 🔵	2 🔾
	Another difficult event; specify				3 🔿	4



•
_

<b>B</b> 5	During the past 12 months, have you personally been treated unfairly because of				
			Yes	No	l don't know
	a. your sex/gender?		01	02	03
	b. your race, skin colour, or ethnic group?		04 🔘	05 🔵	06
	c. your religion?		01	02 🔾	03
	d. another reason?		04	05	06
<b>B</b> 6	How often do you feel like an outsider (or left out of things) at your school?	01 🔘	All the time		
	(If you no longer go to school, please refer	02 🔘	Most of the time		
	to the last time you were in school)	03 🔘	Some of the time		
		04 🔘	Rarely		
		05 🔾	Never		
В7	During the past 12 months, how many times did someone	Never	Once or twice	3 or 4 times	5 times or more
	a. say something personal about you that made you feel extremely uncomfortable?	° ()	1 🔘	2 🔾	3 🔾
	b. threaten to hurt you but not actually hurt you?	4 🔘	5 🔾	6 🔾	7 🔿
	c. physically attack or assault you?	° 🔿	1 🔘	2 🔿	3 🔾
B8	How often do you see adults in your house physically fighting, hitting or otherwise trying to	1 🔵	Often		
	hurt each other?	2	Sometimes		
		3 O	Seldom		
		4	Never		
В9	How often do you watch television shows or movies that have a lot of violence in them?	1 🔾	000		
		20	Often		
		3	Sometimes		
		4 🔾	Seldom Never		

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### **SECTION C** Feelings and Behaviours







The next questions are about your feelings. Read the following statements and choose the answer that best describes you.

during the <b>past week</b> (7 days)?	Rarely or none of the time (less than 1 day)	Some or little of the time ( 1 to 2 days)	Occasion- ally or a moderate amount of the time (3 to 4 days)	Most of all of the time (5 7 days
I did not feel like eating; my appetite was poor.	1	<sup>2</sup> O	<sup>3</sup> O	4
b. I felt I could not shake off the blues even with help from my family or friends.	5 🔘	6 🔾	7	8
c. I had trouble keeping my mind on what I was doing.	1	2 🔾	<sup>3</sup> O	4
d. I felt depressed.	5 🔾	<sub>6</sub> O	7	8
e. I felt that everything I did was an effort.	1 🔾	<sup>2</sup> O	<sup>3</sup> O	4
f. I felt hopeful about the future.	5	6 🔾	7	<sup>8</sup> O
g. My sleep was restless.	1 🔿	2 🔾	<sup>3</sup> O	4 🔿
h. I was happy.	5	<sub>6</sub> O	7	8
i. I felt lonely.	10	<sup>2</sup> O	<sup>3</sup> O	4
j. I enjoyed life.	5 🔾	6 🔾	7	8
k. I had crying spells.	1 🔿	<sup>2</sup> O	<sup>3</sup> 🔾	4
I. I felt people disliked me.	5 🔾	6 O	7 🔾	8
e following questions are about suic swer, but please answer them as wellout young people. If you feel like you nily doctor or nurse.  Has anyone in your school committed suicide?	l as you can, u need suppo	them might I These questort, we encount  (es, within the last	tions will help rage you to tall	ı to us learn k to youl

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	as anyone that you have personally known ommitted suicide?	5 O	Yes, within the las Yes, more than a y No, never don't know	•	
	uring the past 12 months, did you <b>seriously</b> onsider attempting suicide?	1 ()	Yes No <b>→ Go to</b> (	question C7	
D di	uring the past 12 months, how many times id you attempt suicide?	5 🔿	Never/none → Once More than once	Go to que	estion C7
m de	you attempted suicide during the past 12 nonths, did you have to be treated by a octor, nurse or other health professional (for physical injury or counselling)?	6 O	Yes No		
e a eas ake D tir	next questions are about your behavior newer that best describes you.  se be as honest as you can – your anse sure no one will find out who filled out uring the past 12 months, about how many mes  have you stayed out later than your parents said you should?	swers are	private and S		
b.	have you stayed out all night without permission?	5 🔘	<sub>6</sub> 🔾	7	8 🔾
С.	were you questioned by the police about anything they thought you did?	10	2	³O	40
d.	were questioned by a security guard, a teacher or principal about anything that they thought you did such as stealing, damaging property or anything else?	5 🔾	6	7	8
e.	have you run away from home?	1	<sup>2</sup> O	<sup>3</sup> O	4

(B)

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During the past 12 months, about how many times		0	0 - 4	F 41
	Never	Once or twice	3 or 4 times	5 times or more
g. have you taken money from your parents without their permission?	1 🔿	2 🔾	3 <b>O</b>	4 🔾
h. have you broken into, or snuck into, a house or building with the idea of stealing something?	5 🔾	6 🔾	7 🔾	8 🔾
<ul> <li>have you used or bought or tried to sell something you knew was stolen?</li> </ul>	1 🔘	2 🔘	3 🔾	4 🔿
j. have you damaged or destroyed anything that didn't belong to you (for example, damaged a bicycle, car, school furniture, broken windows or written graffiti)?	5 🔾	6 🔾	7 🔿	8 🔾
k. have you fought with someone to the point where they needed care for their injuries (for example, because they were bleeding, or had broken bones)?	1 🔿	<sup>2</sup> 🔘	3 🔾	4 🔘
I. have you been in a fight where you hit someone with something other than your hands (for example, a stick, club, knife, or rock)?	5 🔾	e 🔾	7 🔿	8 🔾
m. have you attacked someone with the idea of seriously hurting him/her?	1 🔘	2 🔘	3 🔾	4 🔘
n. have you carried a knife for the purpose of defending yourself or using it in a fight?	5 0	6 🔘	7 🔾	8 🔾
have you carried a gun other than for hunting or target shooting?	1 (	2 🔿	3 🔾	4 🔘
have you carried any other weapon such as a stick or a club?	5 🔘	6 🔾	7 🔾	8 🔾
q. have you threatened someone in order to get their money or things?	1 🔘	2 🔘	3 🔾	4 🔘
r. have you sold any drugs?	5 🔾	e 🔾	7 🔿	8 🔾
s. have you bought, or gotten drugs from someone for your own use, or for someone else?	1 🔿	2 🔘	3 🔾	4 🔘
t. have you attempted to touch the private parts of another person's body knowing that they would probably object to this?	5 🔾	6 🔾	7 🔿	8 🔾
have you tried to force someone into having sex with you?	1 (	2 🔘	3 🔾	4 🔘
V. have you taken a car, motorbike or motorboat without permission?	5 🔘	e 🔾	7 🔿	8 🔾
w. have you set fire on purpose to a building, a car, or something else not belonging to you?	1 🔾	2 🔘	3 🔾	4 🔘
In the past 12 months, were you part of a gar that broke the law by stealing, hurting	ng ¹O y	es		
someone, damaging property, etc.?	<sup>2</sup> O N	0		

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\*

**SECTION D** 

**Smoking, Drinking and Drugs** 







In this section, we would like to ask you some questions about your experiences with smoking, drinking, and drugs.

Some of the questions will apply to you even if you have not smoked, had a drink or used drugs.

Please be as honest as you can – your answers are private and Statistics Canada will make sure no one will find out who filled out each questionnaire.

<b>D1</b>	Which of the following best describes your	
	Which of the following best describes your experience with smoking cigarettes:	
		<sup>01</sup> O I have never smoked
		<sup>02</sup> ☐ I only tried once or twice → Go to question D3
		<sup>03</sup> O I do not smoke anymore
		OR
		Lamata
		I smoke
		<sup>04</sup> O A few times a year
		05 About once or twice a month
		About once or twice a month
		06
		About 1-2 days a week
		07
		About 3-5 days a week
		08
		About 6-7 days a week
<b>D2</b>	On the days that you smake about how many	
	On the days that you smoke, about how many cigarettes do you usually smoke?	
		Number of cigarettes



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## The next questions are about drinking alcohol. A drink of alcohol is, for example:

- ✓ One bottle of beer or✓ One glass of wine or✓ One shot of liquor.







<b>D3</b>	Which of the following best describes your experience with drinking alcohol:	010	I have never had a drink of alcohol  → Go to question D5
		02O	I have only had a few sips
		03	I only tried once or twice (at least one drink)
		04	I do not drink alcohol anymore
		OR	
		I drir	nk (at least one drink)
		05	A few times a year
		$\bigcirc^{06}$	About once or twice a month
		07	About 1-2 days a week
		$\bigcirc^{80}$	About 3-5 days a week
		09	About 6-7 days a week
D4	During the past 12 months, how often have you been drunk?	01	Never
		02	A few times
		03	About once or twice a month
		04	About 1-2 days a week
		05	About 3-5 days a week
		06	About 6-7 days a week
The	e next questions are about drug use. Plea	ase ans	swer even if you do not use drugs.
<b>D5</b>	Which of the following best describes your experience with using marijuana	01	I have never done it
	and cannabis products (also known as a joint, pot, grass or hash) during the past 12 months?	02	I have done it, but not during the past 12 months
		OR	
			ng the past 12 months, I have used ijuana
		03	A few times
		04	About once or twice a month
		05	About 1-2 days a week
		$\bigcirc^{06}$	About 3-5 days a week
		07	About 6-7 days a week

Statistics Canada will keep your answers PRIVATE. No one from your home or your school will see what you write.

exp	nich best describes your perience with the following drugs ring the past 12 months:						
		I have never	I have done it,	During the past 12 months I have used it			
		done it	in the past 12 months	1 or 2 times	3 to 5 times	6 to 9 times	10 times or more
a.	Hallucinogens like LSD/acid, magic mushroom	01	02	03	04	05	06
b.	Glue or solvents	07	08	09	10	11	120
C.	Drugs without a prescription or advice from a doctor: downers, uppers, tranquilizers, ritalin, etc.	13	14	15	16	17	18
d.	Other drugs like crack, cocaine, heroin, speed or ecstasy, etc.	19	20	21	22	23	24
hav car	ve you operated a motorized vehice, motorcycle, boat) after you have	le (eg.	<sup>2</sup> On	ce or twice			
hav the	ve you been a passenger in a vehi driver has been drinking alcohol	y times cle when or taking	6 ○ On	ce or twice			
	a.  b.  Du have driif	<ul> <li>a. Hallucinogens like LSD/acid, magic mushroom</li> <li>b. Glue or solvents</li> <li>c. Drugs without a prescription or advice from a doctor: downers, uppers, tranquilizers, ritalin, etc.</li> <li>d. Other drugs like crack, cocaine, heroin, speed or ecstasy, etc.</li> <li>During the past 12 months, how man have you operated a motorized vehic car, motorcycle, boat) after you have drinking alcohol or doing drugs?</li> <li>During the past 12 months, how man have you operated a motorized vehic car, motorcycle, boat) after you have drinking alcohol or doing drugs?</li> </ul>	a. Hallucinogens like LSD/acid, magic mushroom  b. Glue or solvents  or or or advice from a doctor: downers, uppers, tranquilizers, ritalin, etc.  or or ecstasy, etc.  or or or ecstasy, etc.  or o	experience with the following drugs during the past 12 months:  I have never done it  LSD/acid, magic mushroom  Drugs without a prescription or advice from a doctor: downers, uppers, tranquilizers, ritalin, etc.  Drugs like crack, cocaine, heroin, speed or ecstasy, etc.  During the past 12 months, how many times have you operated a motorized vehicle (eg. car, motorcycle, boat) after you have been drinking alcohol or doing drugs?  During the past 12 months, how many times have you been a passenger in a vehicle when the driver has been drinking alcohol or taking drugs?  I have never done it but not but not but not in the past 12 months  or 2  Ossociate, heroin, speed or ecstasy, etc.  I have never done it but not but not in the past 12  ossociate, heroin speed or estasy.  14  Ossociate, heroin speed or ecstasy, etc.  I have never done it but not but not in the past 14  ossociate, heroin speed or estasy.  14  Ossociate, heroin speed or ecstasy.  15  Ossociate, heroin speed or ecstasy.  16  Ossociate, heroin speed or ecstasy.  17  Ossociate, heroin speed or ecstasy.  18  Ossociate, heroin speed or ecstasy.  19  Ossociate, heroin speed or ecstasy.  19  Ossociate, heroin speed or ecstasy.  10  Ne ecstasy.  10  Ne ecstasy.  11  Ossociate, heroin speed or ecstasy.  11  Ossociate, heroin speed or ecstasy.  12  Ossociate, heroin speed or ecstasy.  14  Ossociate, heroin speed or ecstasy.  14  Ossociate, heroin speed or ecstasy.  15  Ossociate, heroin speed or ecstasy.  16  Ossociate, heroin speed or ecstasy.  16  Ossociate, heroin speed or ecstasy.  17  Ossociate, heroin speed or ecstasy.  19  Ossociate, heroin speed or ecstasy.  14  Ossociate, heroin speed or ecstasy.  14  Ossociate, heroin speed or ecstasy.  14  Ossociate, heroin speed or ecstasy.  15  Ossociate, heroin speed or ecstasy.  16  Ossociate, heroin speed or ecstasy.  17  Ossociate, heroin speed or ecstasy.  19  Ossociate, heroin speed or ecstasy.  14  Ossociate, heroin speed or ecstasy.  15  Ossociate, heroin speed or ecstasy.  16  Ossociate, heroin speed or	experience with the following drugs during the past 12 months:    I have never done it	experience with the following drugs during the past 12 months:    I have never done it, but not in the past 12 months   I have tone it, but not in the past 12 months   I have tone it, but not in the past 12 months   I have tone it, but not in the past 12 months   I have tone it in the past 12 months   I have tone it in the past 12 months   I have tone it in the past 12 months   I have tone it in the past 12 months   I have tone it in the past 12 months   I have tone it in the past 12 months   I have tone past I2 months   I have tone	experience with the following drugs during the past 12 months:    I have never done it but not in the past 12 months I have done it, but not in the past 12 months I have done it. But not not in the past 12 months I have done it. But not not in the past 12 months I have done it. But not not in the past 12 months I have done it. But not not in the past 12 months I have done it. But not not in the past 12 months I have done it. But not not in the past 12 months I have done it. But not not not not in the past 12 months I have done in the done it. But not not not not not not not not not no

My Parent(s)







Thi inv	ink of the mother you are most rolved with. Is this a		02 A	Biological moded on the Biological model of the Biolog	ner?		
			<sup>05</sup> O A	nother perso	on (a mother f	igure)?	
			C	OR .			
				am not in too	ıch with	Go to ques	tion E6
Thi ide	inking of the mother you have entified in the previous question:			A gre dea	eat Sc		Very little/Not at all or None
а.	How well do you feel that your mother understands you?			° C	1 (	)	2 🔿
b.	How much fairness do you receive from your mother?			<sup>3</sup> C	4 (	)	5 🔘
C.	How much affection do you receive from your mother?			e C	7 (	)	8 🔘
Ov rela	rerall, how would you describe your ationship with your mother?		² () S	ery close  Somewhat clo			
Tel foll	Il us how often per week you do the lowing activities with your mother:	Never	Less that once a week	n 1 or 2 days	3 or 4 days	5 or 6 days	Everyday
a.	Eat a meal together?	01	02	03	04	05	06
b.	Have a discussion together?	07	08	09	10	11	12

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		Never	Rarely	Sometimes	Often	Alway
a.	We make up easily when we have a fight.	° 🔿	1 🔿	2 🔘	3 🔘	4 🔘
b.	We disagree and fight.	5 🔘	6 🔾	7 🔘	8 🔘	9 O
C.	We bug each other or get on each other's nerves.	° 🔿	1 🔘	2 🔘	3 🔘	4 🔘
d.	We yell at each other.	5 🔘	e 🔾	7 🔘	8 🔘	9 O
e.	When we argue we stay angry for a very long time.	0 🔘	1 🔘	2 🔘	3 🔘	4 🔘
f.	When we disagree, we refuse to talk to each other.	5 🔾	e 🔾	7 🔘	8 🔘	9 🔾
g.	When we disagree, one of us stomps out of the room, or house, or yard.	° ()	1 🔘	2 🔘	3 🔘	4 🔘
h.	When we disagree about something, we solve problems together.	5 🔘	6 🔾	7 🔘	8 🔘	9 🔾
i.	When we disagree about something, I give in just to end the argument.	° 🔿	1 🔘	2 🔘	3 🔘	4 🔘
j.	When we disagree, another person comes in to settle things or find a solution.	5 🔘	e 🔾	7 🔘	8 🔾	a 🔘
Th	nink of the father you are most volved with. Is this a		<ul> <li>O2 Ado</li> <li>O3 Step</li> <li>O4 Fost</li> </ul>	ogical father ptive father o-father ter father ther person		
				not in touch my father	→ Go to ques	tion E11

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							*
<b>3</b>	Th ide	inking of the father you have entified in the previous question:			A great deal	Some	Very little/Not at
	a.	How well do you feel that your father understands you?			0 🔾	1 🔘	all or None
	b.	How much fairness do you receive from your father?			3 🔘	4 🔘	5 🔘
	C.	How much affection do you receive from your father?			6 🔾	7 🔾	8 🔾
<b>E8</b>	Ov rela	rerall, how would you describe your ationship with your father?		<sup>6</sup> O Son	y close newhat close very close		
<b>E</b> 9	Te foll	Il us how often per week you do the lowing activities with your father:	Never	Less than once a week	1 or 2 days		5 or 6 Everyday days
	a.	Eat a meal together?	01	02	03	04	05 06 0
	b.	Have a discussion together?	07	08	09	10	11 12
10	Pe <b>yo</b>	ople often disagree with each other.  u and your father do the following the	The follow hings.	ing sentences of	describe disag	greements. Te	ell us how often
			Never	Rarely	Sometime	es Often	Always
	a.	We make up easily when we have a fight.	° 🔿	1 🔘	2 🔿	3 🔘	4 🔘
	b.	We disagree and fight.	5 🔘	6 🔾	7 🔾	8 🔘	9 🔾
	C.	We bug each other or get on each other's nerves.	° 🔿	1 🔘	2 🔘	3 🔾	4 🔘
	d.	We yell at each other.	5 🔘	6 🔾	7 🔾	8 🔾	9 🔾
	e.	When we argue we stay angry for a very long time.	0 🔿	1 🔘	2 🔾	3 🔾	4 🔘
	f.	When we disagree, we refuse to talk to each other.	5 🔘	e 🔾	7 🔘	8 🔘	9 🔾
	g.	When we disagree, one of us stomps out of the room, or house, or yard.	° ()	1 ()	2 🔾	³ <b>(</b> )	4 🔘

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2 🔿

3 🔘

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		Never	Rarely	Sometimes	Often	Alwa
h.	When we disagree about something, we solve problems together.	5 🔘	6 🔾	7 🔘	8 🔘	9 O
i.	When we disagree about something, I give in just to end the argument.	° 🔿	1 🔘	2 🔘	3 🔘	4 🔾
j.	When we disagree, another person comes in to settle things or find a solution.	5 🔿	6 🔾	7 🔘	8 🔾	9 🔾
sta <b>m</b> e	ninking about the mother and father atements, use the choice that besonths.  y parent(s)	t describes t	the way they		rd you <b>durir</b>	ng the pa
		Never	Rarely	Sometimes	Often	Alwa
a.	Tell me what time to be home when I go out.	0 🔘	1 🔘	2 🔘	3 🔘	4 🔘
b.	Take an interest in where I am going and who I am with.	5 🔘	e 🔾	7 🔘	8 🔾	9 🔾
C.	Ask me to leave a note or call to let them know where I am going	. ° O	1 🔵	2 🔿	3 🔘	4 🔘
d.	Let me know how to get in touch with them when they are not at home.	5 🔾	6 🔾	7 🔘	8 🔾	9 <u>C</u>
Ho ge	ow well do you think your parents et along with each other?		<sup>1</sup> O Fair <sup>2</sup> O Not	/ well ly well very well applicable		
ab	ow often do your parents disagree bout how to deal with you and your other(s) and sister(s)?		04 Ofte	ely netimes n		

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How often do your parents get upset with one another, including times when they are mad but don't say much?  Sometimes different situations or circumstant next few questions are about one of these situations.		Never Rarely Sometimes Often Always I don't know Not applicable
Sometimes different situations or circumstan	10 0 11 0 12 0 13 0 13 0 10 ces a	Sometimes Often Always I don't know Not applicable
	11 0 12 0 13 0 13 0 10 10 10 10 10 10 10 10 10 10 10 10 1	Often Always I don't know Not applicable
	12 O 13 O 13 O 15 O 15 O 15 O 15 O 15 O 15	Always I don't know Not applicable
	13 O	I don't know  Not applicable
	nces a	Not applicable
		rise which may affect family life. The
		rise which may affect family life. The
	uatio	
Have you ever experienced being hungry because there was no food in	1 0	Yes
the house or money to buy food?	<sup>2</sup> O	No → Go to Section F
The star has the accuracy of the star of t		
How often has this occurred?	<sup>3</sup> O	More often than end of each month
	4 🔿	Regularly, end of the month
	5 🔿	Every few months
	<sup>6</sup> O	Occasionally, not a regular occurrence
How do you or your family cope when this happens?	000	My parent/guardian skips meals or eats less
(Mark all that apply)	01	I skip meals or eat less
	02	I make sure that others in the house eat before I do
	03	Cut down on variety of foods usually eaten
	04	Seek help from relatives
	05	Seek help from friends
	06	Seek help from social worker/government office
	07	Seek help from food bank (emergency food program)
	$\bigcirc^{80}$	Use school meal program
	09	Other

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Adolescence is a time when there are many changes to your body. In this section, we would like to know more about these changes.

Please answer this section as honestly as possible and remember, Statistics Canada will keep your answers confidential.

	How tall are you? (Please estimate if you are not sure)	Feet Inches  OR  Metres  Centimetres
	How much do you weigh? (Please estimate if you are not sure)	Pounds OR  Kilograms
<b>(3)</b>	Would you say that your body hair ("body hair" means underarm and pubic hair) has begun to grow?	Has not yet started growing  Has barely started growing  Growth of body hair is definitely underway  Growth of body hair seems completed
	or young women only:	
<b>F</b> 4	Have your breasts begun to grow?	Have not yet started growing  Have barely started growing  Breast growth is definitely underway  Breast growth seems completed
<b>F</b> 5	If you have begun to menstruate (your monthly periods), at what age did you start?	I was years and months
		OR
		99 ○ Have not yet started → Go to Question F8
⇒F	For young men only:	
F6	Have you noticed a deepening of your voice?	<ul> <li>Has not yet started changing</li> <li>Has barely started changing</li> <li>Voice is definitely changing</li> <li>Voice change seems completed</li> </ul>

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Have you begun to grow hair on your face?	1 (	Has not yet started growin	g
	<sup>2</sup> (	Has barely started growing	J
	<sup>3</sup> (	Facial hair is definitely und	erway
	4 (	Facial hair growth seems of	completed
For young men and young women:			
Would you say you are	5 🔾	Trying to lose weight?	
	<sub>e</sub> O	Trying to gain weight?	Go to → question F10
	7	Trying to stay the same weight?	
	(8O	Not trying to do anything about your weight	Go to Section G
During the past 7 days, did you do any of the f	ollowing		
things to lose weight or stay the same weight?		Yes	No
a. Dieted (ate less or differently)?		01 🔘	02
b. Exercised (to burn calories or fat)?		03 🔘	04
c. Took diet pills (i.e. Dexatrim)?		05 🔘	06
d. Smoked?		07	08
e. Other? Specify:		09 🔾	10 🔾
During the past 7 days, did you do any of the f	ollowing		
things in order to gain weight or muscle?		Yes	No
a. Ate more food or took food supplements?		01 🔘	02
		03 🔘	04
b. Lifted weights or exercised to build muscle	?		
<ul><li>b. Lifted weights or exercised to build muscle</li><li>c. Used steroids?</li></ul>	?	05 🔾	06
<u> </u>		<u> </u>	06 🔾

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CTION	N G Dating	
How	old were you when you had your first riend/girlfriend?	
БОУТ	nona/grimona.	l've never had a boyfriend/girlfriend     boyfriend/girlfriend/girlfriend     boyfriend/girl
		OR
		I was years
		, was years
how	u have a boyfriend/girlfriend right now, long have you been going out with her?	01 ☐ I do not currently have a boyfriend/girlfriend → Go to question (
		02 Less than 1 month
		<sup>03</sup> O 1 to 5 months
		<sup>04</sup> O 6 months to a year
		05 Over a year
Outs	side of school or work hours, about how by days a week do you see your	<sup>06</sup> Never
boyf	riend/girlfriend?	<sup>07</sup> O Less than once a week
		<sup>08</sup> O 1 day a week
		<sup>09</sup> O 2 or 3 days a week
		<sup>10</sup> O 4 or 5 days a week
		<sup>11</sup> O 6 or 7 days a week
		O of r days a week
	ng the past 12 months, how many riends/girlfriends have you had?	<sup>12</sup> O None
		<sup>13</sup> O 1
		<sup>14</sup> 2 or 3
		<sup>15</sup> 4 or 5
		<sup>16</sup> O 6 or more
ease		sensual sexual experiences. We know that the e, but would appreciate you answering them as we to better understand the concerns of youth you have sure no one will find out who filled
	e you ever had consensual sexual course?	<sup>8</sup> ○ Yes → Go to question G7
		<sup>9</sup> O No
Wha	at is the <b>MAIN</b> reason you have decided to have sexual intercourse?	O1 Against my religion or my values
(Mai	rk one only)	<ul> <li>I am afraid of the consequences (eg. pregnancy, my parents might find out, disease, etc.)</li> </ul>
		<sup>03</sup> O I'm not ready for it
		<ul> <li>I'm not ready for it</li> <li>I am not with the right person</li> </ul>

⇒ If you have never had sexual intercourse go to Section H.

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G7	Are you currently sexually active (still having sex)?	<sup>8</sup> ○ Yes → Go to question G9
		<sup>9</sup> No
G8	What is the <b>MAIN</b> reason you are not currently sexually active?	<sup>01</sup> Against my religion or my values
	(Mark one only)	I am afraid of the consequences (eg. pregnancy, my parents might find out, disease etc.)
		<sup>03</sup> O I'm not ready for it
		<sup>04</sup> O I haven't met the right person
		<sup>05</sup> O Other
G9	How old were you when you first had consensual sexual intercourse?	I was years old
G10	How old was the partner with whom you first had consensual sexual intercourse?	He or she was years old
		OR
		<sup>99</sup> O I don't know
<b>G11</b>	Did you or your partner use a condom the last time you had consensual sexual intercourse?	<sup>8</sup> Yes
		<sup>9</sup> No
<b>G1</b> 2	What kind of birth control or protection have you and/or your partner used most often?	01 (
	(Mark all that apply)	Condoms (rubbers)
		Dirth control pills
		<ul><li>Birth control injection (i.e. Depo-Provera, "the shot")</li></ul>
		<sup>04</sup> Withdrawal (pull-out)
		Description ("the morning after pill")
		<sup>06</sup> Some other method
		<sup>07</sup> Not sure
		<sup>08</sup> O None

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<b>G13</b>	If there are times when you do not use birth control, what is the <b>MAIN</b> reason for not using		
	it?	09	Sex is unexpected (no time to prepare)
	(Mark one only)	10	I don't think I (or she) will get pregnant
		11	I want (she wants) to get pregnant
		12 0	My partner does not want to use birth control
		13	It's my partner's problem, not mine
		14 🔾	Birth control reduces the pleasure
		15 🔾	I can't afford to get birth control
		16	Birth control is morally wrong
		17	I am too embarrassed to get/use birth control
		18	Other (specify:)
			OB
		40.	OR
		19	We always use birth control

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**SECTION H** Decision Making

In the next section, there is a number of statements about beliefs, attitudes, and/or ways of

dealing with issues. Use them to describe yourself. There are no right or wrong answers. Use the 1 to 5 point scale to indicate the degree to which you think each statement is uncharacteristic (1) or characteristic (5) of yourself. For instance, if the statement is not like you at all, give it a 1, if it is very much like you, give it a 5.

		1 Not like me at all	2	3	4	5 Very mucl like me
1.	l've spent a great deal of time thinking seriously about what I should do with my life.	° ()	1 🚫	2 🔿	3 🔘	4 🔾
2.	I'm not really sure what I'm doing about school; I guess things will work themselves out.	5 🔿	e 🔾	7 🔘	° ()	9 🔾
	I've more-or-less always operated according to the values with which I was brought up.	° 🔿	1 (	<sup>2</sup> 🔘	3 <b>O</b>	4 🔘
	I've spent a good deal of time reading and talking to others about religious ideas.	5 🔘	6 🔾	7 🔿	8 🔾	9 🔾
	When I discuss an issue with someone, I try to assume their point of view and see the problem from their perspective.	° ()	1 🔘	2 🔘	3 🔾	4 🔘
6.	It doesn't pay to worry about values in advance; I decide things as they happen.	5 🔘	6 🔾	7 🔘	8 🔾	9 🔾
7.	I've always had purpose in my life; I was brought up to know what to strive for.	o 🔘	1 🚫	2 🔘	3 🔘	4 🔘
8.	Many times,by not concerning myself with personal problems, they work themselves out.	5 🔘	6 🔾	7 🔘	8 🔘	9 🔾
9.	I've spent a lot of time reading and trying to make some sense out of political issues.	0 🔘	1 🚫	2 🔿	3 🔘	4 🔘
10.	I'm not really thinking about my future now; it's still a long way off.	5 🔘	e 🔾	7 🔿	8 🔘	9 O
11.	I've spent a lot of time and talked to a lot of people trying to develop a set of values that make sense to me.	° ()	1 (	2 ()	3 🕥	4 🔿

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		1	2	3	4	5
		Not like me at all				Very much like me
12.	Regarding religion, I've always known what I believe and don't believe; I never really had any serious doubts.	5 🔘	6 🔾	7 🔘	8 🔘	9 🔾
13.	I know that I am going to college/university and what I am going to major in.	° ()	1 🔘	2 🔘	3 <b>O</b>	4 🔘
14.	I think it's better to have a hirm set of beliefs than to be open-minded.	5 🔘	6 O	7 🔘	8 🔘	9 🔾
15.	When I have to make a decision, I try to wait as long as possible in order to see what will happen.	° ()	1 ()	2 🔿	3 🔘	4 🔘
16.	When I have a personal problem, I try to analyze the situation in order to understand it.	5 🔘	e 🔾	7 🔿	8 🔘	9 🔾
17.	I find it's best to seek out advice from professionals (e.g., clergy, doctors, lawyers) when I have problems.	° 🔿	1 🔾	2 🔘	3 🔘	4 🔘
18.	It's best for me not to take life too seriously; I just try to enjoy it.	5 🔘	e 🔾	7 🔘	8 🔘	9 🔾
19.	I think it's better to use one set of values consistently all the time, rather than change them in different situations.	° 🔿	1 (	2 🔿	3 🔘	4 🔘
20.	I try not to think about or deal with problems for as long as I can.	5 🔘	6 🔘	7 🔘	8 🔘	9 🔾
21.	I find that personal problems often turn out to be interesting challenges.	° ()	1 🚫	2 🔿	3 🔘	4 🔘
22.	I try to avoid personal situations that will require me to think a lot and deal with them on my own.	5 🔘	6 🔾	7 🔘	8 🔵	9 🔾
23.	Once I know the correct way to handle a problem, I prefer to stick with it.	° 🔿	1 🚫	2 🔿	3 🔘	4 🔘
24.	When I have to make a decision, I like to spend a lot of time thinking about my options.	5 🔘	6 🔘	7 🔿	8 🔘	9 🔾
25.	I prefer to deal with situations the way that other people expect me to.	° 🔿	1 (	2 🔿	3 🔘	4 🔘

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		1 Not like me at all	2	3	4	5 Very muc like me
26.	I like to have the responsibility for handling problems in my life that require me to think on my own.	5 🔘	e 🔾	7 🔘	8 🔾	9 O
27.	Sometimes I refuse to believe a problem will happen, and things manage to work themselves out.	° ()	1 (	2 🔘	3 O	4 🔘
28.	When making important decisions I like to have as much information as possible.	5 🔿	e 🔾	7 🔿	8 🔾	9 O
29.	When I know a situation is going to cause me stress, I try to avoid it.	° ()	1 (	2 🔘	3 <b>O</b>	4 🔘
30.	I find it's best for me to rely on the advice of close friends or relatives when I have a problem.	5 🔿	6 🔾	7 🔘	8 🔘	<sup>9</sup> 🔾

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**SECTION I** 

Help us.

# Thank you very much for helping us. Your comments are important.

About how long did it take you to complete this questionnaire?	01	less than 20 minutes
	02	20 to 29 minutes
	03	30 to 39 minutes
	04	40 to 49 minutes
	05	50 to 59 minutes
	06	60 minutes or more

When you finish this survey: Put this questionnaire in the envelope.

Return it to the interviewer.



## **Informed Consent**

National Longitudinal Survey of Children and Youth Cycle 4

## Consentement éclairé

Enquête longitudinale nationale sur les enfants et les jeunes

Cycle 4

Confidential when completed

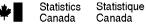
Confidential une fois rempli

Sequence No. N° de séquence

To be completed by intervie	wer - A etre rempii par i intervieweur					
Person ID. N° de la personne						
Assignment No. N° de tâche						
Date (Month-day-year) Date (Mois-jour-année)						
Child's First Name Prénom de l'enfant						
Child's Surname Nom de famille de l'enfant						
Parent/Legal Guardian's Full Name Nom du parent ou du tuteur légal	First name / Prénom					
	Last name / Nom de famille					
Consent to Contact Teacher(s) Consentement à communiquer avec le(s) professeur(s)	Yes / Oui No / Non N/A – S/O					
Consent to Administer Math and Read Consentement à administrer le test de de lecture						
6 Consent obtained over the telephone – Consentement obtenu au téléphone						
To be signed by parent or legal guardian - À faire signer par le parent ou le tuteur légal						
I understand that this is a voluntary survey and that the information my child's teacher provides will be kept strictly confidential under the Statistics Act. This means that my name and my child's name will not be associated in any way with the results of the survey.  Je comprends que la participation à cette enquête est volontaire et que les renseignements fournis par le professeur de mon enfant resteront strictement confidentiels en vertu de la Loi sur la Statistique. Cela veut dire que mon nom et le nom de mon enfant ne seront reliés d'aucune façon aux résultats de l'enquête.						
<u>X</u>						
Signature	Signature of Parent or Legal Guardian – Signature du parent ou du tuteur légal					

7-5030-429: 2000-09-11

STC/HLD-040-75020 SQC/ENM-040-75020 White: Regional Office Blanche: Bureau régional Pink: Regional Office (#2) Rose : Bureau régional (#2) Yellow: Parent Jaune : Parent





#### Informed Consent Form

I understand that this consent form is part of the **National Longitudinal Survey of Children and Youth**. Statistics Canada is carrying out this national study on behalf of Human Resources Development Canada.

I understand that this survey is voluntary and that any information that Statistics Canada collects from me, my child and my child's teacher will remain strictly confidential under the **Statistics Act**.

#### Formulaire de consentement éclairé

Je comprends que ce formulaire fait partie de l'Enquête longitudinale nationale sur les enfants et les jeunes. Statistique Canada mène cette enquête au nom de Développement des ressources humaines Canada.

Je comprends que la participation à cette enquête est volontaire et que tous les renseignements obtenus par Statistique Canada de moi, de mon enfant et du professeur de mon enfant resteront strictement confidentiels en vertu de la *Loi sur la statistique*.

## What is the National Longitudinal Survey of Children and Youth?

The National Longitudinal Survey of Children and Youth has been developed jointly by Statistics Canada and Human Resources Development Canada. The purpose of the survey is to collect information that will help us understand the factors affecting the development of children in Canada. These findings will improve the prospects and conditions for all children.

## Qu'est-ce que l'Enquête nationale longitudinale sur les enfants et les jeunes?

L'Enquête longitudinale nationale sur les enfants et les jeunes a été élaborée conjointement par Statistique Canada et par Développement des ressources humaines Canada. Son but est de recueillir des renseignements qui nous aideront à mieux comprendre les facteurs qui influencent le développement des enfants au Canada. Ces connaissances serviront à élaborer des programmes efficaces qui amélioreront les possibilités d'avenir de tous les enfants.

#### Why does my child's teacher need to be contacted?

Children spend much of their time at school. Your child's teacher will provide us with valuable information regarding your child's school experiences.

#### Pourquoi le professeur de mon enfant doit-il être contacté?

Les enfants passent une grande partie de leur temps à l'école. Le professeur de votre enfant fournira d'importants renseignements se rapportant à la vie de votre enfant à l'école.

#### What does my consent mean?

Your consent to contact the teacher means that your child's teacher will receive a questionnaire that will ask questions about your child's school achievement and behaviour, and about his/her classroom.

Your consent to the test means that your child's principal will be asked to give your child a short test in math and reading skills.

#### Qu'est-ce que mon consentement veut dire?

Par votre consentement à communiquer avec le professeur, vous acceptez que le professeur de votre enfant reçoive un questionnaire portant sur le rendement scolaire de votre enfant, sur son comportement à l'école et sur sa classe.

Par votre consentement au test, vous acceptez que l'on demande au directeur de l'école de votre enfant de lui administrer un court test de mathématiques et de lecture.

## What happens to the survey information I have provided if I do not consent?

The information you have provided in the interview is very valuable on its own. It will still permit important research to be conducted and influence future policies and programs.

## Que se passe-t-il si je décide de ne pas signer le formulaire de consentement éclairé?

Les renseignements que vous avez déjà fournis lors de l'interview sont très importants. Ils permettront quand même de faire d'importantes recherches et d'influencer les politiques et les programmes futurs.