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

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

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

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

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

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

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

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

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

4. How do you describe yourself? (Select one or more responses.)
   A. American Indian or Alaska Native
   B. Asian
   C. Black or African American
   D. Hispanic or Latino
   E. Native Hawaiian or Other Pacific Islander
   F. White

5. How do you describe your health in general?
   A. Excellent
   B. Very good
   C. Good
   D. Fair
   E. Poor

6. How tall are you without your shoes on?

   Directions: Write your height in the shaded blank boxes. Fill in the matching oval below each number.

   Example

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7. How much do you weigh without your shoes on?

Directions: Write your weight in the shaded blank boxes. Fill in the matching oval below each number.

**Example**

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8. How often do the people in your home speak a language other than English?
   A. Never
   B. Rarely
   C. Sometimes
   D. Most of the time
   E. Always

The next 4 questions ask about personal safety.

9. **When you rode a bicycle** during the past 12 months, how often did you wear a helmet?
   A. I did not ride a bicycle during the past 12 months
   B. Never wore a helmet
   C. Rarely wore a helmet
   D. Sometimes wore a helmet
   E. Most of the time wore a helmet
   F. Always wore a helmet

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

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

12. During the past 30 days, how many times did you **drive** a car or other vehicle **when you had been drinking alcohol**?
    A. 0 times
    B. 1 time
    C. 2 or 3 times
    D. 4 or 5 times
    E. 6 or more times
The next 12 questions ask about violence-related behaviors.

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

14. During the past 30 days, on how many days did you carry a gun?
   A. 0 days
   B. 1 day
   C. 2 or 3 days
   D. 4 or 5 days
   E. 6 or more days

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

16. During the past 30 days, on how many days did you not go to school because you felt you would be unsafe at school or on your way to or from school?
   A. 0 days
   B. 1 day
   C. 2 or 3 days
   D. 4 or 5 days
   E. 6 or more days

17. During the past 12 months, how many times has someone threatened or injured you with a weapon such as a gun, knife, or club on school property?
   A. 0 times
   B. 1 time
   C. 2 or 3 times
   D. 4 or 5 times
   E. 6 or 7 times
   F. 8 or 9 times
   G. 10 or 11 times
   H. 12 or more times

18. During the past 12 months, how many times has someone stolen or deliberately damaged your property such as your car, clothing, or books on school property?
   A. 0 times
   B. 1 time
   C. 2 or 3 times
   D. 4 or 5 times
   E. 6 or 7 times
   F. 8 or 9 times
   G. 10 or 11 times
   H. 12 or more times

19. During the past 12 months, how many times were you in a physical fight?
   A. 0 times
   B. 1 time
   C. 2 or 3 times
   D. 4 or 5 times
   E. 6 or 7 times
   F. 8 or 9 times
   G. 10 or 11 times
   H. 12 or more times
20. During the past 12 months, how many times were you in a physical fight in which you were injured and had to be treated by a doctor or nurse?
   A. 0 times
   B. 1 time
   C. 2 or 3 times
   D. 4 or 5 times
   E. 6 or more times

21. During the past 12 months, how many times were you in a physical fight on school property?
   A. 0 times
   B. 1 time
   C. 2 or 3 times
   D. 4 or 5 times
   E. 6 or 7 times
   F. 8 or 9 times
   G. 10 or 11 times
   H. 12 or more times

22. During the past 12 months, have you been a member of a gang?
   A. Yes
   B. No

23. During the past 12 months, did your boyfriend or girlfriend ever hit, slap, or physically hurt you on purpose?
   A. Yes
   B. No

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

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

25. When you feel sad, empty, hopeless, angry or anxious and want to talk with an adult, who do you chose most often?
   A. I don’t feel sad, empty, hopeless, angry, or anxious
   B. A parent
   C. An adult relative other than a parent
   D. A minister/priest/rabbi/imam or other religious leader/advisor
   E. A teacher or other staff member at school
   F. Another adult
   G. I don’t talk with any adults, just people my own age
   H. I don’t talk with anyone

26. During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?
   A. Yes
   B. No

27. During the past 12 months, did you ever seriously consider attempting suicide?
   A. Yes
   B. No
28. During the past 12 months, did you make a plan about how you would attempt suicide?
   A. Yes
   B. No

29. During the past 12 months, how many times did you actually attempt suicide?
   A. 0 times
   B. 1 time
   C. 2 or 3 times
   D. 4 or 5 times
   E. 6 or more times

30. **If you attempted suicide** during the past 12 months, did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?
   A. I did not attempt suicide during the past 12 months
   B. Yes
   C. No

33. During the past 30 days, on how many days did you smoke cigarettes?
   A. 0 days
   B. 1 or 2 days
   C. 3 to 5 days
   D. 6 to 9 days
   E. 10 to 19 days
   F. 20 to 29 days
   G. All 30 days

34. During the past 30 days, on the days you smoked, how many cigarettes did you smoke per day?
   A. I did not smoke cigarettes during the past 30 days
   B. Less than 1 cigarette per day
   C. 1 cigarette per day
   D. 2 to 5 cigarettes per day
   E. 6 to 10 cigarettes per day
   F. 11 to 20 cigarettes per day
   G. More than 20 cigarettes per day

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

The next 11 questions ask about tobacco use.

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

32. How old were you when you smoked a whole cigarette for the first time?
   A. I have never smoked a whole cigarette
   B. 8 years old or younger
   C. 9 or 10 years old
   D. 11 or 12 years old
   E. 13 or 14 years old
   F. 15 or 16 years old
   G. 17 years old or older
36. During the past 30 days, on how many days did you smoke cigarettes on school property?
   A. 0 days
   B. 1 or 2 days
   C. 3 to 5 days
   D. 6 to 9 days
   E. 10 to 19 days
   F. 20 to 29 days
   G. All 30 days

37. Have you ever smoked cigarettes daily, that is, at least one cigarette every day for 30 days?
   A. Yes
   B. No

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

39. Do you think you will be smoking cigarettes 5 years from now?
   A. Yes
   B. No

40. During the past 30 days, on how many days did you use chewing tobacco, snuff, or dip, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen?
   A. 0 days
   B. 1 or 2 days
   C. 3 to 5 days
   D. 6 to 9 days
   E. 10 to 19 days
   F. 20 to 29 days
   G. All 30 days

41. During the past 30 days, on how many days did you smoke cigars, cigarillos, or little cigars?
   A. 0 days
   B. 1 or 2 days
   C. 3 to 5 days
   D. 6 to 9 days
   E. 10 to 19 days
   F. 20 to 29 days
   G. All 30 days

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

43. How old were you when you had your first drink of alcohol other than a few sips?
   A. I have never had a drink of alcohol other than a few sips
   B. 8 years old or younger
   C. 9 or 10 years old
   D. 11 or 12 years old
   E. 13 or 14 years old
   F. 15 or 16 years old
   G. 17 years old or older

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

44. During the past 30 days, on how many days did you drink any alcohol?
   A. 0 days
   B. 1 or 2 days
   C. 3 to 5 days
   D. 6 to 9 days
   E. 10 to 19 days
   F. 20 to 29 days
   G. All 30 days

45. Have you ever gotten drunk on more than one occasion?
   A. Yes
   B. No

46. How many times have you gotten drunk in the past 30 days?
   A. 0 times
   B. 1 time
   C. 2 times
   D. 3 times
   E. 4 times
   F. 5 times
   G. 6 or more times

47. How often do you drink beer, wine, or liquor?
   A. Never
   B. Sometimes
   C. Most days
   D. Every day

48. During the past 30 days, have you had a drink of alcohol on any day?
   A. Yes
   B. No

49. How many times did you drink alcohol during the past 30 days?
   A. 0 times
   B. 1 time
   C. 2 times
   D. 3 times
   E. 4 times
   F. 5 to 9 times
   G. 10 or more times

50. Did you have more than 10 drinks on any one occasion during the past 30 days?
   A. Yes
   B. No

51. Did you have a drink in public or at a bar on any day during the past 30 days?
   A. Yes
   B. No

52. During the past 30 days, have you had a drink of alcohol more than twice a week?
   A. Yes
   B. No

53. How many times did you drink alcohol during the past 30 days?
   A. 0 times
   B. 1 time
   C. 2 times
   D. 3 times
   E. 4 times
   F. 5 to 9 times
   G. 10 or more times
44. During the past 30 days, on how many days did you have at least one drink of alcohol?
   A. 0 days  
   B. 1 or 2 days  
   C. 3 to 5 days  
   D. 6 to 9 days  
   E. 10 to 19 days  
   F. 20 to 29 days  
   G. All 30 days

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

46. During the past 30 days, on how many days did you have at least one drink of alcohol on school property?
   A. 0 days  
   B. 1 or 2 days  
   C. 3 to 5 days  
   D. 6 to 9 days  
   E. 10 to 19 days  
   F. 20 to 29 days  
   G. All 30 days

47. During your life, how many times have you used marijuana?
   A. 0 times  
   B. 1 or 2 times  
   C. 3 to 9 times  
   D. 10 to 19 times  
   E. 20 to 39 times  
   F. 40 to 99 times  
   G. 100 or more times

48. How old were you when you tried marijuana for the first time?
   A. I have never tried marijuana  
   B. 8 years old or younger  
   C. 9 or 10 years old  
   D. 11 or 12 years old  
   E. 13 or 14 years old  
   F. 15 or 16 years old  
   G. 17 years old or older

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

50. During the past 30 days, how many times did you use marijuana on school property?
   A. 0 times  
   B. 1 or 2 times  
   C. 3 to 9 times  
   D. 10 to 19 times  
   E. 20 to 39 times  
   F. 40 or more times
The next 9 questions ask about other drugs.

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

52. During the past 30 days, how many times did you use any form of cocaine, including powder, crack, or freebase?
   A. 0 times
   B. 1 or 2 times
   C. 3 to 9 times
   D. 10 to 19 times
   E. 20 to 39 times
   F. 40 or more times

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

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

55. During your life, how many times have you used methamphetamine (also called speed, crystal, crank, or ice)?
   A. 0 times
   B. 1 or 2 times
   C. 3 to 9 times
   D. 10 to 19 times
   E. 20 to 39 times
   F. 40 or more times

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

57. During your life, how many times have you taken steroid pills or shots without a doctor’s prescription?
   A. 0 times
   B. 1 or 2 times
   C. 3 to 9 times
   D. 10 to 19 times
   E. 20 to 39 times
   F. 40 or more times
58. During your life, how many times have you used a needle to inject any **illegal** drug into your body?
   A. 0 times  
   B. 1 time  
   C. 2 or more times

59. During the past 12 months, has anyone offered, sold, or given you an illegal drug on school property?
   A. Yes  
   B. No

The next 11 questions ask about sexual behavior.

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

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

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

63. How old were you when you had sexual intercourse for the first time?
   A. I have never had sexual intercourse
   B. 11 years old or younger  
   C. 12 years old  
   D. 13 years old  
   E. 14 years old  
   F. 15 years old  
   G. 16 years old  
   H. 17 years old or older

64. During your life, with how many people have you had sexual intercourse?
   A. I have never had sexual intercourse
   B. 1 person  
   C. 2 people  
   D. 3 people  
   E. 4 people  
   F. 5 people  
   G. 6 or more people

65. During the past 3 months, with how many people did you have sexual intercourse?
   A. I have never had sexual intercourse
   B. I have had sexual intercourse, but not during the past 3 months  
   C. 1 person  
   D. 2 people  
   E. 3 people  
   F. 4 people  
   G. 5 people  
   H. 6 or more people
66. Did you drink alcohol or use drugs before you had sexual intercourse the last time?
   A. I have never had sexual intercourse
   B. Yes
   C. No

67. The last time you had sexual intercourse, did you or your partner use a condom?
   A. I have never had sexual intercourse
   B. Yes
   C. No

68. The last time you had sexual intercourse, what one method did you or your partner use to prevent pregnancy? (Select only one response.)
   A. I have never had sexual intercourse
   B. No method was used to prevent pregnancy
   C. Birth control pills
   D. Condoms
   E. Depo-Provera (injectable birth control)
   F. Withdrawal
   G. Some other method
   H. Not sure

69. How many times have you been pregnant or gotten someone pregnant?
   A. 0 times
   B. 1 time
   C. 2 or more times
   D. Not sure

70. Have you ever heard of emergency contraceptive pills, sometimes called morning after pills?
   A. Yes
   B. No

The next 9 questions ask about body weight.

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

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

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

74. During the past 30 days, did you eat less food, fewer calories, or foods low in fat to lose weight or to keep from gaining weight?
   A. Yes
   B. No
75. During the past 30 days, did you **go without eating for 24 hours or more** (also called fasting) to lose weight or to keep from gaining weight?
   A. Yes
   B. No

76. During the past 30 days, did you **take any diet pills, powders, or liquids** without a doctor’s advice to lose weight or to keep from gaining weight? (Do **not** include meal replacement products such as Slim Fast.)
   A. Yes
   B. No

77. During the past 30 days, did you **vomit or take laxatives** to lose weight or to keep from gaining weight?
   A. Yes
   B. No

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

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

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

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

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

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

84. During the past 7 days, how many glasses of milk did you drink? (Include the milk you drank in a glass or cup, from a carton, or with cereal. Count the half pint of milk served at school as equal to one glass.)
A. I did not drink milk during the past 7 days
B. 1 to 3 glasses during the past 7 days
C. 4 to 6 glasses during the past 7 days
D. 1 glass per day
E. 2 glasses per day
F. 3 glasses per day
G. 4 or more glasses per day
85. During the past 7 days, how many times did you drink soda such as Coke, Pepsi, 7-up, Root Beer, Fanta, or Cherry Soda? (DO NOT count diet soda or seltzer water)
   A. I did not drink soda during the past 7 days
   B. 1 to 3 times during the past 7 days
   C. 4 to 6 times during the past 7 days
   D. 1 time per day
   E. 2 times per day
   F. 3 times per day
   G. 4 or more times per day

86. During the past 7 days, how many times did all or most of your family living in your house eat a meal together?
   A. Never
   B. 1 or 2 times
   C. 3 or 4 times
   D. 5 or 6 times
   E. 7 times
   F. More than 7 times

The next 8 questions ask about physical activity.

87. On how many of the past 7 days did you exercise or participate in physical activity for at least 20 minutes that made you sweat and breathe hard, such as basketball, soccer, running, swimming laps, fast bicycling, fast dancing, or similar aerobic activities?
   A. 0 days
   B. 1 day
   C. 2 days
   D. 3 days
   E. 4 days
   F. 5 days
   G. 6 days
   H. 7 days

88. On how many of the past 7 days did you participate in physical activity for at least 30 minutes that did not make you sweat or breathe hard, such as fast walking, slow bicycling, skating, pushing a lawn mower, or mopping floors?
   A. 0 days
   B. 1 day
   C. 2 days
   D. 3 days
   E. 4 days
   F. 5 days
   G. 6 days
   H. 7 days
89. During the past 7 days, on how many days were you physically active for a total of at least 60 minutes per day? (Add up all the time you spend in any kind of physical activity that increases your heart rate and makes you breathe hard some of the time.)
   A. 0 days
   B. 1 day
   C. 2 days
   D. 3 days
   E. 4 days
   F. 5 days
   G. 6 days
   H. 7 days

90. On an average school day, how many hours do you watch TV?
   A. I do not watch TV on an average school day
   B. Less than 1 hour per day
   C. 1 hour per day
   D. 2 hours per day
   E. 3 hours per day
   F. 4 hours per day
   G. 5 or more hours per day

91. On an average school day, how many hours do you play video or computer games or use a computer for something that is not schoolwork? (Include activities such as Nintendo, Game Boy, Play Station, Computer games and Internet)
   A. I do not play video or computer games or use a computer for something that is not schoolwork
   B. Less than 1 hour per day
   C. 1 hour per day
   D. 2 hours per day
   E. 3 hours per day
   F. 4 hours per day
   G. 5 or more hours per day

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

93. During an average physical education (PE) class, how many minutes do you spend actually exercising or playing sports?
   A. I do not take PE
   B. Less than 10 minutes
   C. 10 to 20 minutes
   D. 21 to 30 minutes
   E. 31 to 40 minutes
   F. 41 to 50 minutes
   G. 51 to 60 minutes
   H. More than 60 minutes

94. During the past 12 months, on how many sports teams did you play? (Include any teams run by your school or community groups.)
   A. 0 teams
   B. 1 team
   C. 2 teams
   D. 3 or more teams

The next 3 questions ask about other health-related topics.

95. Have you ever been taught about AIDS or HIV infection in school?
   A. Yes
   B. No
   C. Not sure
96. Has a doctor or nurse ever told you that you have asthma?
   A. Yes
   B. No
   C. Not sure

97. During the past 12 months, have you had an episode of asthma or an asthma attack?
   A. I do not have asthma
   B. No, I have asthma, but I have not had an episode of asthma or an asthma attack during the past 12 months.
   C. Yes, I have had an episode of asthma or an asthma attack during the past 12 months.
   D. Not sure

The last 2 questions ask about your school

98. Do you agree or disagree that the teachers of this school treat students fairly?
   A. Strongly agree
   B. Agree
   C. Not sure
   D. Disagree
   E. Strongly disagree

99. Do you agree or disagree that you feel like you are part of this school?
   A. Strongly agree
   B. Agree
   C. Not sure
   D. Disagree
   E. Strongly disagree

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