

Remote Core Survey

High School Questionnaire

2020-2021

This survey asks about your behavior, experiences, and attitudes related to your school, health, and well-being, including while you are not attending school in person due to the novel coronavirus (COVID-19).

You do not have to answer these questions, but your answers will be very helpful in improving school and health programs. **You will be able to answer** whether or not you have done or experienced any of these things.

Please do not write your name on this form or the answer sheet. Do not identify yourself in any other way.

Please mark all of your answers on the answer sheet. Fill in the bubbles neatly with a **#2 pencil**. Do not write on the questionnaire. Mark only one answer unless told to *“Mark All That Apply.”*

This survey asks about things you may have done during different periods of time, such as during your **lifetime** (you ever did something), or the past **12 months**, or **30 days**. Each provides different information. Please pay careful attention to these time periods.

Thank you for taking this survey!

Remote Core Survey

Your School Schedule

This year, some students have returned to their school buildings to attend school. Some students are working from home and not going to the school buildings at all. And some students are doing a combination of both.

1. Which of the following best describes your school schedule during the past 30 days?
 - A) I went to school in person at my school building for the entire day, Monday through Friday. [**In-School Model**]
 - B) I participated in school from home for the entire day on most or all weekdays and did not go to school in person. [**Remote Learning Model**]
 - C) I went to school in person at my school building for the entire day on some weekdays and participated in school from home on other weekdays. [**Hybrid Model**]
 - D) I went to school in person at my school building for half of the day and participated in classes from home during the other half of the day on most or all weekdays. [**Hybrid Model**]

Next, we would like some background information about you.

2. What grade are you in?
 - A) 6th grade
 - B) 7th grade
 - C) 8th grade
 - D) 9th grade
 - E) 10th grade
 - F) 11th grade
 - G) 12th grade
 - H) Other grade
 - I) Ungraded
3. What is your gender?
 - A) Male
 - B) Female
 - C) Nonbinary
 - D) Something else
4. Some people describe themselves as transgender when how they think or feel about their gender is different from the sex they were assigned at birth. Are you transgender?
 - A) No, I am not transgender
 - B) Yes, I am transgender
 - C) I am not sure if I am transgender
 - D) Decline to respond

Remote Core Survey

5. Which of the following best describes you?
- A) Straight (not gay)
 - B) Lesbian or Gay
 - C) Bisexual
 - D) Something else
 - E) Not sure
 - F) Decline to respond
6. What is your race? (*Mark All That Apply.*)
- A) American Indian or Alaska Native
 - B) Asian or Asian American
 - C) Black or African American (not Hispanic or Latinx)
 - D) Hispanic/Latinx
 - E) Native Hawaiian or Pacific Islander
 - F) White (not Hispanic/Latinx)
 - G) Something else
7. If you are Asian or Pacific Islander, which groups best describe you? (*Mark All That Apply.*)
If you are not of Asian/Pacific Islander background, mark "A) Does not apply."
- A) Does not apply; I am not Asian or Pacific Islander
 - B) Asian Indian
 - C) Cambodian
 - D) Chinese
 - E) Filipino
 - F) Hmong
 - G) Japanese
 - H) Korean
 - I) Laotian
 - J) Vietnamese
 - K) Native Hawaiian, Guamanian, Samoan, Tahitian, or other Pacific Islander
 - L) Other Asian
8. If you are Hispanic or Latinx, which groups best describe you? (*Mark All That Apply.*)
If you are not of Hispanic or Latinx background, mark "A) Does not apply."
- A) Does not apply; I am not Hispanic or Latinx
 - B) Columbian
 - C) Cuban
 - D) Dominican
 - E) Guatemalan
 - F) Honduran
 - G) Mexican
 - H) Puerto Rican
 - I) Salvadoran
 - J) Other Hispanic/Latinx

Remote Core Survey

9. What best describes where you live? A home includes a house, apartment, trailer, or mobile home.
- | | |
|---|---|
| A) A home with one or more parent or guardian | E) Foster home, group care, or waiting placement |
| B) Other relative's home | F) Hotel or motel |
| C) A home with more than one family | G) Shelter, car, campground, or other transitional or temporary housing |
| D) Friend's home | H) Other living arrangement |
10. What is the highest level of education your parents or guardians completed? (*Mark the educational level of the parent or guardian who went the furthest in school.*)
- A) Did not finish high school
 - B) Graduated from high school
 - C) Attended college but did not complete four-year degree
 - D) Graduated from college
 - E) Don't know
11. Is your father, mother, or guardian currently in the military (Army, Navy, Marines, Air Force, National Guard, or Reserves)?
- A) No
 - B) Yes
 - C) Don't know
12. Last year, did you receive free or reduced-price lunches at school? (*Receiving free or reduced-price lunches means that lunch at school is provided to you for free or you pay less for it.*)
- A) No
 - B) Yes
 - C) Don't know
13. What language is spoken most of the time in your home?
- | | |
|--------------|---------------|
| A) English | F) Tagalog |
| B) Spanish | G) Vietnamese |
| C) Mandarin | H) Korean |
| D) Cantonese | I) Arabic |
| E) Taiwanese | J) Other |

Core Survey

How well do you understand, speak, read, and write English?

- | | Very Well | Well | Not Well | Not At All |
|------------------------|-----------|------|----------|------------|
| 14. Understand English | A | B | C | D |
| 15. Speak English | A | B | C | D |
| 16. Read English | A | B | C | D |
| 17. Write English | A | B | C | D |
18. What time did you go to bed last night?
- | | |
|-------------------|-------------------|
| A) Before 7:00 pm | E) 10:00–10:59 pm |
| B) 7:00–7:59 pm | F) 11:00–11:59 pm |
| C) 8:00–8:59 pm | G) 12:00–12:59 am |
| D) 9:00–9:59 pm | H) After 1:00 am |
19. What time did you wake up this morning?
- | | |
|-------------------|-------------------|
| A) Before 5:00 am | F) 9:00–9:59 am |
| B) 5:00–5:59 am | G) 10:00–10:59 am |
| C) 6:00–6:59 am | H) 11:00–11:59 am |
| D) 7:00–7:59 am | I) 12 pm or later |
| E) 8:00–8:59 am | |
20. Did you eat breakfast today?
- | |
|--------|
| A) No |
| B) Yes |

Core Survey

The next set of questions ask about your experiences participating in school from home.

Participating in school from home means that, instead of going to a school building in person to learn and complete schoolwork, you did your schoolwork and learning from home.

21. In the past **30 days**, how many weekdays in an average week did you participate in **school from home** for an entire school day?
- A) 0 days
 - B) 1 day
 - C) 2 days
 - D) 3 days
 - E) 4 days
 - F) 5 days
22. On the average weekday, how much of your day did you spend learning and completing **schoolwork from home**?
- A) Less than 1 hour
 - B) Between 1 and 2 hours
 - C) Between 2 and 3 hours
 - D) Between 3 and 4 hours
 - E) Between 4 and 5 hours
 - F) More than 5 hours
23. What time did you start your schoolwork from home today? **[If 1 = 2 or 25 = 1 only]**
- | | |
|-------------------|-------------------|
| A) Before 7:00 am | E) 10:00–10:59 am |
| B) 7:00–7:59 am | F) 11:00–11:59 am |
| C) 8:00–8:59 am | G) 12 pm or later |
| D) 9:00–9:59 am | |
24. How many days in the past week did you participate in an online class from home where your teacher talked to students from a computer, phone, or tablet (iPad)?
- A) 0 days
 - B) 1 day
 - C) 2 days
 - D) 3 days
 - E) 4 days
 - F) 5 days

Core Survey

25. In the past **30 days**, how often did you miss an entire day of remote learning classes for any reason?
- A) I did not miss an entire day of remote learning classes
 - B) 1 day
 - C) 2 days
 - D) 3 or more days
26. In the past **30 days**, how many remote learning classes did you miss for any reason?
- A) I did not miss any remote learning classes
 - B) 1-2 classes
 - C) 3-4 classes
 - D) 5 or more classes

The next questions ask about your experiences with school in general.

27. How would you describe the grades you received during the past 12 months?
- A) Mostly A's
 - B) A's and B's
 - C) Mostly B's
 - D) B's and C's
 - E) Mostly C's
 - F) C's and D's
 - G) Mostly D's
 - H) Mostly F's
28. In the past **30 days**, did you miss a day of **school from home** for any of the following reasons? (*Mark All That Apply.*)
- A) Does not apply; I didn't miss any school
 - B) Illness (feeling physically sick), including problems with breathing or your teeth
 - C) Felt very sad, hopeless, anxious, stressed, or angry
 - D) Didn't get enough sleep
 - E) Had to take care of or help a family member or friend
 - F) Wanted to spend time with friends
 - G) Used alcohol or drugs
 - H) Were behind in schoolwork or weren't prepared for a test or class assignment
 - I) Were bored or uninterested in school
 - J) Other reason

Core Survey

How strongly do you agree or disagree with the following statements?

	<u>Strongly Disagree</u>	<u>Disagree</u>	<u>Neither Disagree Nor Agree</u>	<u>Agree</u>	<u>Strongly Agree</u>
29. Teachers at this school communicate with parents about what students are expected to learn in class.	A	B	C	D	E
30. Parents feel welcome to participate at this school.	A	B	C	D	E
31. School staff take parent concerns seriously.	A	B	C	D	E
32. It is hard for me to stay focused when doing my schoolwork.	A	B	C	D	E
33. I am interested in the schoolwork I do when participating in school from home .	A	B	C	D	E
34. I try hard to make sure that I am good at my schoolwork.	A	B	C	D	E
35. I try hard on my schoolwork because I am interested in it.	A	B	C	D	E
36. I work hard to try to understand new things when doing my schoolwork.	A	B	C	D	E
37. I am always trying to do better in my schoolwork.	A	B	C	D	E

Core Survey

Please mark on your answer sheet how **TRUE** you feel each of the following statements is about your **SCHOOL** and things you might do there.

There is a teacher or some other adult from my school...

	Not At All True	A Little True	Pretty Much True	Very Much True
38. who really cares about me.	A	B	C	D
39. who tells me when I do a good job.	A	B	C	D
40. who provides me with interesting activities to do while I am participating in school from home .	A	B	C	D
41. who notices when I'm not there.	A	B	C	D
42. who always wants me to do my best.	A	B	C	D
43. who checks on how I am doing.	A	B	C	D
44. who listens to me when I have something to say.	A	B	C	D
45. who believes that I will be a success.	A	B	C	D

*On how many of the past **7 days** did you...*

	0	1	2	3	4	5	6	7
46. talk to your friends by phone, computer, or tablet (iPad)?	A	B	C	D	E	F	G	H
47. exercise or do a physical activity for at least 20 minutes that made you sweat and breathe hard? (For example, basketball, soccer, running, fast bicycling, fast dancing, or similar aerobic activities.)	A	B	C	D	E	F	G	H
48. participate in a physical activity for at least 30 minutes that did not make you sweat and breathe hard? (For example, fast walking, slow bicycling, shooting baskets, raking leaves, or mopping floors.)	A	B	C	D	E	F	G	H

Core Survey

The next questions ask about the use of alcohol, tobacco, marijuana, and other drugs, including pills or medications, to get “high” or for reasons other than medical, as ordered or prescribed by a doctor.

Keep the following definitions in mind:

- **One drink of ALCOHOL**, or alcoholic drink (beverage), means one regular size can/bottle of beer or wine cooler, one glass of wine, one mixed drink, or one shot glass of liquor.
- Questions about alcohol do **not** include drinking a few sips of wine for religious purposes.
- **DRUG** means any substance other than alcohol or tobacco, including pills and medications, used to get “high” (“loaded,” “stoned,” or “wasted”) or for purposes other than prescribed by a doctor.
- **VAPES or VAPE PRODUCTS:** Electronic devices like vape pens, e-cigarettes, e-hookah, hookah pens, e-vaporizers, tanks, pods, or mods used to inhale a vapor. Can be used to vape many things, including nicotine or just flavoring. Popular brands are JUUL, Suorin, SMOK, Zodiac Constellation, and Stiiizy.

Core Survey

During your life, how many times have you used the following?

	Number of Times					
	0 Times	1 Time	2 Times	3 Times	4-6 Times	7 or More Times
49. A whole cigarette	A	B	C	D	E	F
50. Smokeless tobacco (dip, chew, or snuff)	A	B	C	D	E	F
51. Vape products	A	B	C	D	E	F
52. One full drink of alcohol (such as a can of beer, glass of wine, wine cooler, or shot of liquor)	A	B	C	D	E	F
53. Marijuana (smoke, vape, eat, or drink)	A	B	C	D	E	F
54. Inhalants (things you sniff, huff, or breathe to get "high" such as glue, paint, aerosol sprays, gasoline, poppers, gases)	A	B	C	D	E	F
55. Cocaine, methamphetamine, or any amphetamines (meth, speed, crystal, crank, ice)	A	B	C	D	E	F
56. Derbisol	A	B	C	D	E	F
57. Heroin	A	B	C	D	E	F
58. Ecstasy, LSD, or other psychedelics (acid, mescaline, peyote, mushrooms)	A	B	C	D	E	F
59. Prescription pain medication (Vicodin, OxyContin, Percodan, Fentanyl)	A	B	C	D	E	F
60. Tranquilizers or sedatives (Xanax, Klonopin, Ativan, Valium)	A	B	C	D	E	F
61. Diet pills (Didrex, Dexedrine, Xenadrine, Skittles, M&M's)	A	B	C	D	E	F
62. Ritalin or Adderall or other prescription stimulant	A	B	C	D	E	F
63. Cold/cough medicines or other over-the-counter medicines to get "high"	A	B	C	D	E	F
64. Any other drug, pill, or medicine to get "high" or for reasons other than medical	A	B	C	D	E	F

Core Survey

During your life, how many times have you been...

	<u>Number of Times</u>					
	<u>0 Times</u>	<u>1 Time</u>	<u>2 Times</u>	<u>3 Times</u>	<u>4-6 Times</u>	<u>7 or More Times</u>
65. very drunk or sick after drinking alcohol ?	A	B	C	D	E	F
66. “high” (loaded, stoned, or wasted) from using drugs ?	A	B	C	D	E	F
67. drunk on alcohol or “high” on drugs on school property ?	A	B	C	D	E	F

During your life, how many times have you used marijuana in any of the following ways:

	<u>Number of Times</u>					
	<u>0 Times</u>	<u>1 Time</u>	<u>2 Times</u>	<u>3 Times</u>	<u>4-6 Times</u>	<u>7 or More Times</u>
68. Smoke it?	A	B	C	D	E	F
69. In a vaping device (vape pens, mods, portable vaporizers)?	A	B	C	D	E	F
70. Eat or drink it in products made with marijuana ?	A	B	C	D	E	F

During the past 30 days, on how many **days** did you use...

	<u>0 Days</u>	<u>1 Day</u>	<u>2 Days</u>	<u>3-9 Days</u>	<u>10-19 Days</u>	<u>20-30 Days</u>
	71. cigarettes ?	A	B	C	D	E
72. smokeless tobacco (dip, chew, or snuff)?	A	B	C	D	E	F
73. vape products ?	A	B	C	D	E	F
74. one or more drinks of alcohol?	A	B	C	D	E	F

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During the past **30 days**, on how many **days** did you use...

	0 Days	1 Day	2 Days	3-9 Days	10-19 Days	20-30 Days
75. five or more drinks of alcohol in a row, that is, within a couple of hours?	A	B	C	D	E	F
76. marijuana (smoke, vape, eat, or drink)?	A	B	C	D	E	F
77. inhalants (things you sniff, huff, or breathe to get “high”)?	A	B	C	D	E	F
78. prescription drugs to get “high” or for reasons other than prescribed?	A	B	C	D	E	F
79. any other drug, pill, or medicine to get “high” or for reasons other than medical?	A	B	C	D	E	F
80. two or more substances at the same time (for example, alcohol with marijuana, ecstasy with mushrooms)?	A	B	C	D	E	F
81. During your life , how many times have you ever driven a car when you had been using alcohol or drugs, or been in a car driven by a friend when he or she had been using?						
	A) Never	B) 1 time	C) 2 times	D) 3 to 6 times	E) 7 or more times	
82. During the past 12 months , how many times did other students spread mean rumors or lies, or hurtful pictures, about you online, on social media, or on a cell phone?						
	A) 0 times (never)	B) 1 time	C) 2–3 times	D) 4 or more times		
83. During the past 12 months , did you ever feel so sad or hopeless almost every day for two weeks or more that you stopped doing some usual activities?						
	A) No	B) Yes				

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84. During the past **12 months**, did you ever seriously consider attempting suicide?

- A) No
B) Yes

Over the past **30 days**, how true do you feel these statements are about you?

	Not At All True	A Little True	Pretty Much True	Very Much True
85. I had a hard time breathing because I was anxious.	A	B	C	D
86. I worried that I would embarrass myself in front of others.	A	B	C	D
87. I was tense and uptight.	A	B	C	D
88. I had a hard time relaxing.	A	B	C	D
89. I felt sad and down.	A	B	C	D
90. I was easily irritated.	A	B	C	D
91. It was hard for me to cope and I thought I would panic.	A	B	C	D
92. It was hard for me to get excited about anything.	A	B	C	D
93. I was easily annoyed and sensitive.	A	B	C	D
94. I was scared for no good reason.	A	B	C	D

Please tell us how true each statement is of you.

	Not At All True	A Little True	Pretty Much True	Very Much True
95. I can work out my problems.	A	B	C	D
96. I can do most things if I try.	A	B	C	D
97. There are many things that I do well.	A	B	C	D
98. There is a purpose to my life.	A	B	C	D
99. I understand my moods and feelings.	A	B	C	D
100. I understand why I do what I do.	A	B	C	D
101. When I need help I find someone to talk with.	A	B	C	D

Core Survey

Please tell us how true each statement is of you.

	Not At All True	A Little True	Pretty Much True	Very Much True
102. Each day I look forward to having a lot of fun.	A	B	C	D
103. I usually expect to have a good day.	A	B	C	D
104. Overall, I expect more good things to happen to me than bad things.	A	B	C	D
105. I try to work out my problems by talking or writing about them.	A	B	C	D
106. I trust my ability to solve difficult problems.	A	B	C	D
107. On most days I feel GRATEFUL.	A	B	C	D
108. On most days I feel THANKFUL.	A	B	C	D
109. On most days I feel APPRECIATIVE.	A	B	C	D

How true do you feel these statements are about your family and friends?

	Not At All True	A Little True	Pretty Much True	Very Much True
110. There is an adult who really cares about me.	A	B	C	D
111. There is an adult who talks with me about my problems.	A	B	C	D
112. There is an adult who helps me when I am having a hard time.	A	B	C	D
113. I have a friend my age who really cares about me.	A	B	C	D
114. I have a friend my age who talks with me about my problems.	A	B	C	D
115. I have a friend my age who helps me when I am having a hard time.	A	B	C	D

116. How many questions in this survey did you answer honestly?

- A) All of them
- B) Most of them
- C) Only some of them
- D) Hardly any