



CONFIDENTIAL
(when completed)

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Ontario Child Health Follow Up Study

Youth Self-report

(For ages 12 to 16)



Part A:

Below is a list of statements that describe some of the feelings and behaviour of kids and young people. For each statement, please mark the circle that best describes you now or within the past 6 months.

Please mark only one of the three circles for each statement. Mark your answers like this ⊗.

	Never or Not true	Sometimes or Somewhat true	Often or Very true		Never or Not true	Sometimes or Somewhat true	Often or Very true
I act too young for my age	001 <input type="radio"/>	002 <input type="radio"/>	003 <input type="radio"/>	I don't get along with other kids	076 <input type="radio"/>	077 <input type="radio"/>	078 <input type="radio"/>
I have an allergy	004 <input type="radio"/>	005 <input type="radio"/>	006 <input type="radio"/>	I don't feel guilty after doing something I shouldn't	079 <input type="radio"/>	080 <input type="radio"/>	081 <input type="radio"/>
I argue a lot	007 <input type="radio"/>	008 <input type="radio"/>	009 <input type="radio"/>	I am jealous of others	082 <input type="radio"/>	083 <input type="radio"/>	084 <input type="radio"/>
I have asthma	010 <input type="radio"/>	011 <input type="radio"/>	012 <input type="radio"/>	I am willing to help others when they need help	085 <input type="radio"/>	086 <input type="radio"/>	087 <input type="radio"/>
I like animals.....	013 <input type="radio"/>	014 <input type="radio"/>	015 <input type="radio"/>	I am afraid of certain animals, situations, or places, other than school	088 <input type="radio"/>	089 <input type="radio"/>	090 <input type="radio"/>
I brag	016 <input type="radio"/>	017 <input type="radio"/>	018 <input type="radio"/>	I am afraid of going to school	091 <input type="radio"/>	092 <input type="radio"/>	093 <input type="radio"/>
I have trouble concentrating or paying attention	019 <input type="radio"/>	020 <input type="radio"/>	021 <input type="radio"/>	I am afraid I might think or do something bad	094 <input type="radio"/>	095 <input type="radio"/>	096 <input type="radio"/>
I can't get my mind off certain thoughts	022 <input type="radio"/>	023 <input type="radio"/>	024 <input type="radio"/>	I feel that I have to be perfect.....	097 <input type="radio"/>	098 <input type="radio"/>	099 <input type="radio"/>
I have trouble sitting still	025 <input type="radio"/>	026 <input type="radio"/>	027 <input type="radio"/>	I feel that no one loves me	100 <input type="radio"/>	101 <input type="radio"/>	102 <input type="radio"/>
I'm too dependent on adults	028 <input type="radio"/>	029 <input type="radio"/>	030 <input type="radio"/>	I feel that others are out to get me.....	103 <input type="radio"/>	104 <input type="radio"/>	105 <input type="radio"/>
I feel lonely	031 <input type="radio"/>	032 <input type="radio"/>	033 <input type="radio"/>	I feel worthless or inferior	106 <input type="radio"/>	107 <input type="radio"/>	108 <input type="radio"/>
I feel confused or in a fog	034 <input type="radio"/>	035 <input type="radio"/>	036 <input type="radio"/>	I accidentally get hurt a lot	109 <input type="radio"/>	110 <input type="radio"/>	111 <input type="radio"/>
I cry a lot	037 <input type="radio"/>	038 <input type="radio"/>	039 <input type="radio"/>	I get in many fights	112 <input type="radio"/>	113 <input type="radio"/>	114 <input type="radio"/>
I am pretty honest	040 <input type="radio"/>	041 <input type="radio"/>	042 <input type="radio"/>	I get teased a lot	115 <input type="radio"/>	116 <input type="radio"/>	117 <input type="radio"/>
I am mean to others	043 <input type="radio"/>	044 <input type="radio"/>	045 <input type="radio"/>	I hang around with kids who get in trouble	118 <input type="radio"/>	119 <input type="radio"/>	120 <input type="radio"/>
I am mean to animals.....	046 <input type="radio"/>	047 <input type="radio"/>	048 <input type="radio"/>	I hear things that nobody else seems able to hear	121 <input type="radio"/>	122 <input type="radio"/>	123 <input type="radio"/>
I day dream a lot.....	049 <input type="radio"/>	050 <input type="radio"/>	051 <input type="radio"/>	I act without stopping to think	124 <input type="radio"/>	125 <input type="radio"/>	126 <input type="radio"/>
I deliberately try to hurt or kill myself	052 <input type="radio"/>	053 <input type="radio"/>	054 <input type="radio"/>	I like to be alone.....	127 <input type="radio"/>	128 <input type="radio"/>	129 <input type="radio"/>
I try to get a lot of attention	055 <input type="radio"/>	056 <input type="radio"/>	057 <input type="radio"/>	I lie and cheat	130 <input type="radio"/>	131 <input type="radio"/>	132 <input type="radio"/>
I destroy my own things	058 <input type="radio"/>	059 <input type="radio"/>	060 <input type="radio"/>	I am nervous or tense	133 <input type="radio"/>	134 <input type="radio"/>	135 <input type="radio"/>
I destroy things belonging to others...	061 <input type="radio"/>	062 <input type="radio"/>	063 <input type="radio"/>	Parts of my body twitch or make nervous movements	136 <input type="radio"/>	137 <input type="radio"/>	138 <input type="radio"/>
I damage schools or other property....	064 <input type="radio"/>	065 <input type="radio"/>	066 <input type="radio"/>	I have nightmares	139 <input type="radio"/>	140 <input type="radio"/>	141 <input type="radio"/>
I disobey my parents	067 <input type="radio"/>	068 <input type="radio"/>	069 <input type="radio"/>	I am not liked by other kids	142 <input type="radio"/>	143 <input type="radio"/>	144 <input type="radio"/>
I disobey at school	070 <input type="radio"/>	071 <input type="radio"/>	072 <input type="radio"/>	I can do certain things better than most kids	145 <input type="radio"/>	146 <input type="radio"/>	147 <input type="radio"/>
I don't eat as well as I should.....	073 <input type="radio"/>	074 <input type="radio"/>	075 <input type="radio"/>	I am too fearful or anxious	148 <input type="radio"/>	149 <input type="radio"/>	150 <input type="radio"/>

	Never or Not true	Sometimes or Somewhat true	Often or Very true		Never or Not true	Sometimes or Somewhat true	Often or Very true
I feel dizzy	151 <input type="radio"/>	152 <input type="radio"/>	153 <input type="radio"/>	I can work well with my hands	247 <input type="radio"/>	248 <input type="radio"/>	249 <input type="radio"/>
I feel too guilty	154 <input type="radio"/>	155 <input type="radio"/>	156 <input type="radio"/>	I show off or clown	250 <input type="radio"/>	251 <input type="radio"/>	252 <input type="radio"/>
I eat too much	157 <input type="radio"/>	158 <input type="radio"/>	159 <input type="radio"/>	I am shy	253 <input type="radio"/>	254 <input type="radio"/>	255 <input type="radio"/>
I feel overtired	160 <input type="radio"/>	161 <input type="radio"/>	162 <input type="radio"/>	I sleep less than most kids	256 <input type="radio"/>	257 <input type="radio"/>	258 <input type="radio"/>
I am overweight	163 <input type="radio"/>	164 <input type="radio"/>	165 <input type="radio"/>	I sleep more than most kids during day and/or night	259 <input type="radio"/>	260 <input type="radio"/>	261 <input type="radio"/>
I physically attack people	166 <input type="radio"/>	167 <input type="radio"/>	168 <input type="radio"/>				
Physical problems without known medical cause:				I have a good imagination	262 <input type="radio"/>	263 <input type="radio"/>	264 <input type="radio"/>
a. Aches or pains	169 <input type="radio"/>	170 <input type="radio"/>	171 <input type="radio"/>	I have a speech problem	265 <input type="radio"/>	266 <input type="radio"/>	267 <input type="radio"/>
b. Headaches	172 <input type="radio"/>	173 <input type="radio"/>	174 <input type="radio"/>	I stand up for my rights	268 <input type="radio"/>	269 <input type="radio"/>	270 <input type="radio"/>
c. Nausea, feel sick	175 <input type="radio"/>	176 <input type="radio"/>	177 <input type="radio"/>	I steal things at home	271 <input type="radio"/>	272 <input type="radio"/>	273 <input type="radio"/>
d. Problems with eyes	178 <input type="radio"/>	179 <input type="radio"/>	180 <input type="radio"/>	I steal things from places other than home	274 <input type="radio"/>	275 <input type="radio"/>	276 <input type="radio"/>
e. Rashes or other skin problems	181 <input type="radio"/>	182 <input type="radio"/>	183 <input type="radio"/>				
f. Stomachaches or cramps	184 <input type="radio"/>	185 <input type="radio"/>	186 <input type="radio"/>	I store up things I don't need	277 <input type="radio"/>	278 <input type="radio"/>	279 <input type="radio"/>
g. Vomiting, throwing up	187 <input type="radio"/>	188 <input type="radio"/>	189 <input type="radio"/>	I do things other people think are strange	280 <input type="radio"/>	281 <input type="radio"/>	282 <input type="radio"/>
h. Difficulty swallowing	190 <input type="radio"/>	191 <input type="radio"/>	192 <input type="radio"/>	I have thoughts that other people would think are strange	283 <input type="radio"/>	284 <input type="radio"/>	285 <input type="radio"/>
i. Fainting or loss of consciousness ...	193 <input type="radio"/>	194 <input type="radio"/>	195 <input type="radio"/>	I am stubborn	286 <input type="radio"/>	287 <input type="radio"/>	288 <input type="radio"/>
j. Paralysis or muscle weakness	196 <input type="radio"/>	197 <input type="radio"/>	198 <input type="radio"/>	My moods or feelings change suddenly	289 <input type="radio"/>	290 <input type="radio"/>	291 <input type="radio"/>
k. Heart palpitations	199 <input type="radio"/>	200 <input type="radio"/>	201 <input type="radio"/>				
I pick my skin or other parts of my body	202 <input type="radio"/>	203 <input type="radio"/>	204 <input type="radio"/>	I enjoy being with other people	292 <input type="radio"/>	293 <input type="radio"/>	294 <input type="radio"/>
I can be pretty friendly	205 <input type="radio"/>	206 <input type="radio"/>	207 <input type="radio"/>	I am suspicious	295 <input type="radio"/>	296 <input type="radio"/>	297 <input type="radio"/>
I like to try new things	208 <input type="radio"/>	209 <input type="radio"/>	210 <input type="radio"/>	I swear or use dirty language	298 <input type="radio"/>	299 <input type="radio"/>	300 <input type="radio"/>
My school work is poor	211 <input type="radio"/>	212 <input type="radio"/>	213 <input type="radio"/>	I think about killing myself	301 <input type="radio"/>	302 <input type="radio"/>	303 <input type="radio"/>
I am poorly coordinated or clumsy ...	214 <input type="radio"/>	215 <input type="radio"/>	216 <input type="radio"/>	I like to make others laugh	304 <input type="radio"/>	305 <input type="radio"/>	306 <input type="radio"/>
I would rather be with older kids than with kids my own age	217 <input type="radio"/>	218 <input type="radio"/>	219 <input type="radio"/>	I talk too much	307 <input type="radio"/>	308 <input type="radio"/>	309 <input type="radio"/>
I would rather be with younger kids than with kids my own age	220 <input type="radio"/>	221 <input type="radio"/>	222 <input type="radio"/>	I tease others a lot	310 <input type="radio"/>	311 <input type="radio"/>	312 <input type="radio"/>
I refuse to talk	223 <input type="radio"/>	224 <input type="radio"/>	225 <input type="radio"/>	I have a hot temper	313 <input type="radio"/>	314 <input type="radio"/>	315 <input type="radio"/>
I repeat certain actions over and over	226 <input type="radio"/>	227 <input type="radio"/>	228 <input type="radio"/>	I threaten to hurt people	316 <input type="radio"/>	317 <input type="radio"/>	318 <input type="radio"/>
I run away from home	229 <input type="radio"/>	230 <input type="radio"/>	231 <input type="radio"/>	I like to help others	319 <input type="radio"/>	320 <input type="radio"/>	321 <input type="radio"/>
I scream a lot	232 <input type="radio"/>	233 <input type="radio"/>	234 <input type="radio"/>				
I am secretive or keep things to myself	235 <input type="radio"/>	236 <input type="radio"/>	237 <input type="radio"/>	I am too concerned about being neat or clean	322 <input type="radio"/>	323 <input type="radio"/>	324 <input type="radio"/>
I see things that nobody else seems able to see	238 <input type="radio"/>	239 <input type="radio"/>	240 <input type="radio"/>	I have trouble sleeping	325 <input type="radio"/>	326 <input type="radio"/>	327 <input type="radio"/>
I am self-conscious or easily embarrassed	241 <input type="radio"/>	242 <input type="radio"/>	243 <input type="radio"/>	I cut classes or skip school	328 <input type="radio"/>	329 <input type="radio"/>	330 <input type="radio"/>
I set fires	244 <input type="radio"/>	245 <input type="radio"/>	246 <input type="radio"/>	I don't have much energy	331 <input type="radio"/>	332 <input type="radio"/>	333 <input type="radio"/>
				I am unhappy, sad or depressed	334 <input type="radio"/>	335 <input type="radio"/>	336 <input type="radio"/>

	Never or Not true	Sometimes or Somewhat true	Often or Very true		Never or Not true	Sometimes or Somewhat true	Often or Very true
I am louder than other kids	337 <input type="radio"/>	338 <input type="radio"/>	339 <input type="radio"/>	I have a poor appetite, am not hungry	379 <input type="radio"/>	380 <input type="radio"/>	381 <input type="radio"/>
I use alcohol or drugs other than for medical conditions.....	340 <input type="radio"/>	341 <input type="radio"/>	342 <input type="radio"/>	I feel that my health should be better ..	382 <input type="radio"/>	383 <input type="radio"/>	384 <input type="radio"/>
I try to be fair to others	343 <input type="radio"/>	344 <input type="radio"/>	345 <input type="radio"/>	I worry that something bad will happen to people I am close to	385 <input type="radio"/>	386 <input type="radio"/>	387 <input type="radio"/>
I enjoy a good joke	346 <input type="radio"/>	347 <input type="radio"/>	348 <input type="radio"/>	I am cranky	388 <input type="radio"/>	389 <input type="radio"/>	390 <input type="radio"/>
I like to take life easy	349 <input type="radio"/>	350 <input type="radio"/>	351 <input type="radio"/>	I bite my fingernails	391 <input type="radio"/>	392 <input type="radio"/>	393 <input type="radio"/>
				I have trouble enjoying myself	394 <input type="radio"/>	395 <input type="radio"/>	396 <input type="radio"/>
I try to help other people when I can	352 <input type="radio"/>	353 <input type="radio"/>	354 <input type="radio"/>	I worry a lot about my health	397 <input type="radio"/>	398 <input type="radio"/>	399 <input type="radio"/>
I keep from getting involved with others	355 <input type="radio"/>	356 <input type="radio"/>	357 <input type="radio"/>	I have difficulty awaiting my turn in games or groups	400 <input type="radio"/>	401 <input type="radio"/>	402 <input type="radio"/>
I worry a lot	358 <input type="radio"/>	359 <input type="radio"/>	360 <input type="radio"/>	I worry about doing the wrong thing ..	403 <input type="radio"/>	404 <input type="radio"/>	405 <input type="radio"/>
I become overly upset when leaving someone I am close to	361 <input type="radio"/>	362 <input type="radio"/>	363 <input type="radio"/>	I cannot keep friends	406 <input type="radio"/>	407 <input type="radio"/>	408 <input type="radio"/>
I become overly upset while away from someone I am close to	364 <input type="radio"/>	365 <input type="radio"/>	366 <input type="radio"/>	I fidget	409 <input type="radio"/>	410 <input type="radio"/>	411 <input type="radio"/>
				I am constipated, have trouble moving my bowels	412 <input type="radio"/>	413 <input type="radio"/>	414 <input type="radio"/>
I see myself as more unwell or sickly than I really am	367 <input type="radio"/>	368 <input type="radio"/>	369 <input type="radio"/>	I have trouble listening	415 <input type="radio"/>	416 <input type="radio"/>	417 <input type="radio"/>
I worry that terrible things might happen	370 <input type="radio"/>	371 <input type="radio"/>	372 <input type="radio"/>	I jump from one activity to another ...	418 <input type="radio"/>	419 <input type="radio"/>	420 <input type="radio"/>
I am not as happy as other children ..	373 <input type="radio"/>	374 <input type="radio"/>	375 <input type="radio"/>	I worry about being separated from those I'm close to	421 <input type="radio"/>	422 <input type="radio"/>	423 <input type="radio"/>
I am easily distracted, have difficulty sticking to any activity	376 <input type="radio"/>	377 <input type="radio"/>	378 <input type="radio"/>	I worry about whether I did right or wrong in the past	424 <input type="radio"/>	425 <input type="radio"/>	426 <input type="radio"/>

PLEASE BE SURE YOU HAVE MARKED ONE CIRCLE FOR EACH STATEMENT

Part B:

The following questions ask about your feelings, friendships and social activities. For each question, please mark the answer you think comes closest. Mark your answers like this ☒.

427. The following statements describe peoples' feelings. For each statement please mark whether you strongly agree, agree, disagree or strongly disagree.

	Strongly Agree	Agree	Disagree	Strongly Disagree
a) On the whole, I am satisfied with myself.....	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>
b) At times I think I am no good at all	05 <input type="radio"/>	06 <input type="radio"/>	07 <input type="radio"/>	08 <input type="radio"/>
c) I feel that I have a number of good qualities	09 <input type="radio"/>	10 <input type="radio"/>	11 <input type="radio"/>	12 <input type="radio"/>
d) I am able to do things as well as most other people	13 <input type="radio"/>	14 <input type="radio"/>	15 <input type="radio"/>	16 <input type="radio"/>
e) I feel I do not have much to be proud of	17 <input type="radio"/>	18 <input type="radio"/>	19 <input type="radio"/>	20 <input type="radio"/>
f) I certainly feel useless at times	21 <input type="radio"/>	22 <input type="radio"/>	23 <input type="radio"/>	24 <input type="radio"/>
g) I feel that I am a person of worth, at least on an equal level with others....	25 <input type="radio"/>	26 <input type="radio"/>	27 <input type="radio"/>	28 <input type="radio"/>
h) I wish I could have more respect for myself	29 <input type="radio"/>	30 <input type="radio"/>	31 <input type="radio"/>	32 <input type="radio"/>
i) All in all, I am inclined to feel that I am a failure....	33 <input type="radio"/>	34 <input type="radio"/>	35 <input type="radio"/>	36 <input type="radio"/>
j) I take a positive attitude towards myself	37 <input type="radio"/>	38 <input type="radio"/>	39 <input type="radio"/>	40 <input type="radio"/>

428. About how many days a week do you do things with friends?

- 1 ☐ Never
 2 ☐ 1 day a week
 3 ☐ 2-3 days a week
 4 ☐ 4-5 days a week
 5 ☐ 6-7 days a week

429. About how many **close** friends do you have?

- 1 ☐ None
 2 ☐ 1
 3 ☐ 2 or 3
 4 ☐ 4 or 5
 5 ☐ 6 or more

430. During the past 6 months, how well have you gotten along with other kids, such as friends or classmates?

- 1 ☐ Very well, no problems
 2 ☐ Quite well, hardly any problems
 3 ☐ Pretty well, occasional problems
 4 ☐ Not too well, frequent problems
 5 ☐ Not well at all, constant problems

431. During the past 6 months, how well have you gotten along with your teacher(s) at school?

- 1 ☐ Very well, no problems
 2 ☐ Quite well, hardly any problems
 3 ☐ Pretty well, occasional problems
 4 ☐ Not too well, frequent problems
 5 ☐ Not well at all, constant problems
 6 ☐ Not in school

432. During the past 6 months, how well have you gotten along with the family?

- 1 ☐ Very well, no problems
 2 ☐ Quite well, hardly any problems
 3 ☐ Pretty well, occasional problems
 4 ☐ Not too well, frequent problems
 5 ☐ Not well at all, constant problems

433. How well do you do in sports compared to other kids your age?

- 1 ☐ Way below average
 2 ☐ Below average
 3 ☐ Average
 4 ☐ Above average
 5 ☐ Way above average

434. During the past year, how many times a week did you participate in sports?

- 1 ☐ Less than once a week
 2 ☐ 1-3 times a week
 3 ☐ 4 or more times a week

435. Outside of regular physical education classes, did you take part in any sports during the past year which involved adult coaching or instruction?

- 1 ☐ Yes
 2 ☐ No

How many such sports did you take part in?

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436. For activities such as music, dance, art and individual hobbies, how well do you do compared to other kids your age?

- 1 ☐ Way below average
 2 ☐ Below average
 3 ☐ Average
 4 ☐ Above average
 5 ☐ Way above average

437. During the past year, how many times a week did you participate in music, dance or other non-sport activities?

- 1 ☐ Less than once a week
 2 ☐ 1-3 times a week
 3 ☐ 4 or more times a week

438. Outside of regular classes in school, did you take any lessons or instruction during the past year in music, dance, or other non-sport activities?

- 1 ☐ Yes
 2 ☐ No

How many such activities did you take lessons or instruction in?

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439. During the past year did you belong to any clubs or groups with adult leadership such as cubs, scouts, brownies, a church group or community programs?

- 1 ☐ Yes
 2 ☐ No

Go to 442

440. How many such clubs or groups did you belong to?

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441. During the past year, how many times a week did you attend meetings at these clubs or groups?

- 1 ☐ Less than once a week
 2 ☐ 1-2 times a week
 3 ☐ 3 or more times a week

442. In the past year, did you work on any hobbies during your spare time (other than school or watching T.V.)?

- 1 ☐ Yes
 2 ☐ No

Go to 444

443. How many times a week did you work at your hobbies?

- 1 ☐ Less than once a week
 2 ☐ 1-2 times a week
 3 ☐ 3 or more times a week

444. How often do you go to religious services?

- 1 ☐ Almost every week
 2 ☐ Less than every week but more than just on holidays
 3 ☐ Only on holidays or special occasions
 4 ☐ Never, almost never

445. Do you ever read books or magazines for fun (not just for school)?

- 1 ☐ Yes
 2 ☐ No

Go to 447

446. On average, how often do you read for fun?

- 1 ☐ Every day
 2 ☐ 1-6 times a week
 3 ☐ 1-4 times a month
 4 ☐ Less than once a month
 5 ☐ Almost never

447. On average, how many hours a day do you watch T.V.?

- 1 ☐ More than 6 hours a day
 2 ☐ 4-6 hours a day
 3 ☐ 1-3 hours a day
 4 ☐ Less than one hour a day
 5 ☐ Never or almost never

THE FOLLOWING QUESTIONS ASK ABOUT YOUR HEIGHT AND WEIGHT

448. This question asks about your height. If you are answering in feet and inches, you only need to complete part A. If you are answering in centimetres you only need to complete part B. What is your height?

A.

--	--	--

ft./inches.

OR

B.

--	--	--

centimetres

449. This question asks about your weight. If you are answering in pounds you only need to complete part A. If you are answering in kilograms you only need to complete part B. What is your weight?

A.

--	--	--

pounds

OR

B.

--	--	--

kilograms

450. In the last 6 months have you thought that you were too fat or in danger of getting too fat.

- 1 ☐ Yes
 2 ☐ No

451. In the last 6 months have you lost a lot of weight – that is, 15 pounds or more, either by dieting or without meaning to?

- 1 ☐ Yes
 2 ☐ No

452. In the last 6 months did you think that you were overweight when other people such as your parents or friends said that you had gotten too thin?

- 1 ☐ Yes
 2 ☐ No

453. This question asks about your **lowest weight** in the last 6 months. If you are answering in pounds you only need to complete part A. If you are answering in kilograms you only need to complete part B. What was your **lowest weight** in the last 6 months?

A.

--	--	--

pounds

OR

B.

--	--	--

kilograms

Part C	
<p>454. Since last September, do you think that you have had any emotional or behavioural problems?</p> <p>1 <input type="radio"/> Yes</p> <p>2 <input type="radio"/> No → Go to 460</p>	<p>462. In the past 6 months have you lived with or had regular contact with your mother?</p> <p>1 <input type="radio"/> Yes</p> <p>2 <input type="radio"/> No → Go to 466</p>
<p>455. During that time, did you tend to have more emotional or behavioural problems than other boys/girls your age?</p> <p>1 <input type="radio"/> Yes</p> <p>2 <input type="radio"/> No</p>	<p>463. How often have you and your mother quarrelled?</p> <p>1 <input type="radio"/> Never or rarely</p> <p>2 <input type="radio"/> Sometimes</p> <p>3 <input type="radio"/> Often</p>
<p>456. Do you think you need or needed professional help with these problems?</p> <p>1 <input type="radio"/> Yes</p> <p>2 <input type="radio"/> No</p>	<p>464. How often has your mother scolded or criticized you in the last 6 months?</p> <p>1 <input type="radio"/> Never or rarely</p> <p>2 <input type="radio"/> Sometimes</p> <p>3 <input type="radio"/> Often</p>
<p>457. Did you receive any professional help with these problems?</p> <p>1 <input type="radio"/> Yes → Go to 460</p> <p>2 <input type="radio"/> No</p>	<p>465. Even when the two of you quarrel, how sure are you that your mother still cares about you?</p> <p>1 <input type="radio"/> Very sure</p> <p>2 <input type="radio"/> Pretty sure</p> <p>3 <input type="radio"/> Not too sure</p>
<p>458. Is professional help available where you live?</p> <p>1 <input type="radio"/> Yes</p> <p>2 <input type="radio"/> No</p> <p>3 <input type="radio"/> Don't know</p>	<p>466. In the past 6 months have you lived with or had regular contact with your father?</p> <p>1 <input type="radio"/> Yes</p> <p>2 <input type="radio"/> No → Go to 470</p>
<p>459. What is the main reason you did not receive any professional help with these problems? (choose one from list below)</p> <p>1 <input type="radio"/> I didn't want to go for help</p> <p>2 <input type="radio"/> Problems not severe enough</p> <p>3 <input type="radio"/> My parent(s) opposed me going for help</p> <p>4 <input type="radio"/> Help wouldn't do any good</p> <p>5 <input type="radio"/> Previous help not useful</p> <p>6 <input type="radio"/> Help too far away</p> <p>7 <input type="radio"/> Transportation is a problem</p> <p>8 <input type="radio"/> Some other reason (Please write it down) _____</p> <p>_____</p> <p>_____</p>	<p>467. How often have you and your father quarrelled?</p> <p>1 <input type="radio"/> Never or rarely</p> <p>2 <input type="radio"/> Sometimes</p> <p>3 <input type="radio"/> Often</p>
<p>460. Do you have anyone in particular you can talk to or confide in about yourself or your problems?</p> <p>1 <input type="radio"/> Yes</p> <p>2 <input type="radio"/> No → Go to 462</p>	<p>468. How often has your father scolded or criticized you in the last 6 months?</p> <p>1 <input type="radio"/> Never or rarely</p> <p>2 <input type="radio"/> Sometimes</p> <p>3 <input type="radio"/> Often</p>
<p>461. What is their relationship to you? (Mark all that apply)</p> <p>1 <input type="radio"/> Parent/guardian</p> <p>2 <input type="radio"/> Brother/sister</p> <p>3 <input type="radio"/> Other family member</p> <p>4 <input type="radio"/> Friend</p> <p>5 <input type="radio"/> Teacher</p> <p>6 <input type="radio"/> Other professional</p> <p>7 <input type="radio"/> Someone else</p>	<p>469. Even when the two of you quarrel, how sure are you that your father still cares about you?</p> <p>1 <input type="radio"/> Very sure</p> <p>2 <input type="radio"/> Pretty sure</p> <p>3 <input type="radio"/> Not too sure</p>
	<p>470. In the past 6 months have you lived with or had regular contact with your brothers or sisters?</p> <p>1 <input type="radio"/> Yes</p> <p>2 <input type="radio"/> No → Go to 474</p> <p>3 <input type="radio"/> I do not have any brothers or sisters → Go to 474</p>
	<p>471. How often have you and your brothers or sisters quarrelled?</p> <p>1 <input type="radio"/> Never or rarely</p> <p>2 <input type="radio"/> Sometimes</p> <p>3 <input type="radio"/> Often</p>

472. How often have your brothers or sisters scolded or criticized you in the last 6 months?

- 1 ☐ Never or rarely
2 ☐ Sometimes
3 ☐ Often

473. Even when you and your brothers or sisters quarrel, how sure are you they still care about you?

- 1 ☐ Very sure
2 ☐ Pretty sure
3 ☐ Not too sure

474. In the past 6 months have you had regular contact with older relatives or adults with whom you feel close?

- 1 ☐ Yes
2 ☐ No → Go to 478

475. How often have you and these relatives or adults quarrelled?

- 1 ☐ Never or rarely
2 ☐ Sometimes
3 ☐ Often

476. How often have these relatives or adults scolded or criticized you in the last 6 months?

- 1 ☐ Never or rarely
2 ☐ Sometimes
3 ☐ Often

477. Even when you and these relatives or adults quarrel, how sure are you they still care about you?

- 1 ☐ Very sure
2 ☐ Pretty sure
3 ☐ Not too sure

478. Since last September, have you been questioned by the police about anything you might have done such as stealing, damaging property, or something else?

- 1 ☐ Yes
2 ☐ No

479. Since last September, have you been to Juvenile Court or some other court for anything you have done?

- 1 ☐ Yes
2 ☐ No

480. Have you ever smoked cigarettes everyday for a month or longer?

- 1 ☐ Yes
2 ☐ No → Go to 482

481. How old were you the first time you smoked cigarettes everyday for a month or longer?

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 Age

482. Since last September, have you tried or smoked any cigarettes or cigars?

- 1 ☐ Yes
2 ☐ No → Go to 487

483. Since last September, have you smoked every day for a month or longer?

- 1 ☐ Yes
2 ☐ No → Go to 486

484. On average, were you smoking 10 or more cigarettes a day during that period?

- 1 ☐ Yes
2 ☐ No

485. Since last September, have you tried hard to quit or reduce your smoking?

- 1 ☐ Yes
2 ☐ No

486. At the present time how many cigarettes do you smoke each day?

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487. Have you ever had three or more drinks of beer, wine or other alcoholic beverage such as rum, whiskey, etc. at one time? (a drink means one 12 oz. bottle of beer, one 5 oz. glass of wine or 1½ oz. shot of liquor)

- 1 ☐ Yes
2 ☐ No → Go to 489

488. How old were you the first time you had three or more drinks of alcohol at one time?

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 Age

489. Since last September, have you drank any beer, wine or other alcoholic beverage, not counting drinks given to you by your parents on special occasions?

- 1 ☐ Yes
2 ☐ No → Go to 495

490. Since last September, have you had at least one drink of beer, wine or other alcoholic beverage four or more weeks in a row?

- 1 ☐ Yes
2 ☐ No

491. Since last September, did you have three or more drinks of beer, wine or other alcoholic beverages at one time?

- 1 ☐ Yes
2 ☐ No

492. Have you been drunk at any time since last September?

- 1 ☐ Yes
2 ☐ No

493. Have you ever worried that you drink too much?

- 1 ☐ Yes
2 ☐ No

494. At the present time how often do you drink beer, wine or other alcoholic beverages?

- 1 ☐ I do not drink
2 ☐ Less than once a week
3 ☐ Once a week
4 ☐ 2-3 times a week
5 ☐ 4 or more times a week

495. From the following list, mark "Yes" for those drugs you have used in the last 6 months and "No" for those drugs you have not used in the past 6 months.

	Yes	No
Marijuana, hashish, pot grass	01 <input type="radio"/>	02 <input type="radio"/>
Amphetamines, stimulants, uppers, speed	03 <input type="radio"/>	04 <input type="radio"/>
Barbiturates, sedatives, downers, sleeping pills, seconal, quaaludes	05 <input type="radio"/>	06 <input type="radio"/>
Tranquilizers, valium, librium	07 <input type="radio"/>	08 <input type="radio"/>
Cocaine, crack, snow	09 <input type="radio"/>	10 <input type="radio"/>
Heroin	11 <input type="radio"/>	12 <input type="radio"/>
Opiates other than heroin (codeine, demerol, morphine, methadone, darvon, opium)	13 <input type="radio"/>	14 <input type="radio"/>
Psychedelics, hallucinogens (LSD, mescaline, peyote, psilocybin, DMT, PCP) ..	15 <input type="radio"/>	16 <input type="radio"/>
Sniffed or inhaled glue, gasoline or other fumes	17 <input type="radio"/>	18 <input type="radio"/>
Something else (please write it down) _____	19 <input type="radio"/>	20 <input type="radio"/>

496. Altogether, how many times in the past 6 months did you use any of the kinds of drugs listed in question 495?

99 ☐ Never → Go to 498

OR

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Number of times

497. Have you ever worried that you used these kinds of drugs too much?

- 1 ☐ Yes
2 ☐ No

498. In the last 6 months, have any of the following drugs been prescribed for you by a doctor?

	Yes	No
Tranquilizers or nerve pills to make you calm and relaxed	01 <input type="radio"/>	02 <input type="radio"/>
Sleeping pills	03 <input type="radio"/>	04 <input type="radio"/>
Stimulant pills to keep you awake and alert	05 <input type="radio"/>	06 <input type="radio"/>
Antibiotics	07 <input type="radio"/>	08 <input type="radio"/>
Pain relievers	09 <input type="radio"/>	10 <input type="radio"/>
Something else (please write it down) _____	11 <input type="radio"/>	12 <input type="radio"/>

THANK YOU FOR ANSWERING THESE QUESTIONS. IF YOU WISH YOU MAY PUT THE COMPLETED FORM IN THE ENVELOPE PROVIDED BEFORE HANDING IT BACK TO YOUR INTERVIEWER.