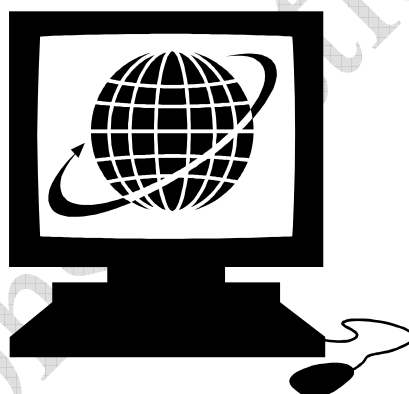




# Teenager's online Questionnaire (TOQ)



## E16 –ROUND 2013

Version of August 5, 2015



THE SURVEY ON THE  
FUTURE OF A GENERATION



L'ÉTUDE SUR L'AVENIR  
D'UNE GÉNÉRATION

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## Teenager's online Questionnaire (E16) – English

### ❖ Section **QELJ**

QELJ\_PRE  
QELJ\_NOM

QELJ\_DAT  
QELJ\_SEXE

QELJ\_DN

### ❖ Section **MOT**

MOT\_Q0a  
MOT\_Q0  
MOT\_Q13  
MOT\_Q14  
MOT\_Q15

MOT\_Q16  
MOT\_Q17  
MOT\_Q18  
MOT\_Q27  
MOT\_Q28

MOT\_Q29  
MOT\_Q30  
MOT\_Q31  
MOT\_Q32

### ❖ Section **DCS**

DCS\_Q1  
DCS\_Q1A  
DCS\_Q2  
DCS\_Q2A  
DCS\_Q3  
DCS\_Q3A  
DCS\_Q4  
DCS\_Q5

DCS\_Q6a  
DCS\_Q6b  
DCS\_Q7  
DCS\_Q7H  
DCS\_Q7M  
DCS\_Q8  
DCS\_Q9  
DCS\_Q10

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DCS\_Q13  
DCS\_Q14  
DCS\_Q15  
DCS\_Q15A  
DCS\_Q16  
DCS\_Q17

### ❖ Section **ATT**

ATT\_Q1  
ATT\_Q2

ATT\_Q3  
ATT\_Q4

ATT\_Q5

### ❖ Section **AAP**

AAP\_Q1  
AAP\_Q2  
AAP\_Q3

AAP\_Q4  
AAP\_Q5  
AAP\_Q6

AAP\_Q7  
AAP\_Q8

### ❖ Section **REN**

REN\_Q1A  
REN\_Q1B  
REN\_Q1C

REN\_Q1D  
REN\_Q1E  
REN\_Q1F

REN\_Q1G  
REN\_Q1H

### ❖ Section **MIA**

MIA\_Q1  
MIA\_Q2  
MIA\_Q3  
MIA\_Q4  
MIA\_Q5  
MIA\_Q6  
MIA\_Q7  
MIA\_Q8  
MIA\_Q9

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MIA\_Q110  
MIA\_Q111  
MIA\_Q112  
MIA\_Q113  
MIA\_Q114

❖ Section **PER**

PER\_Q1  
  
PER\_Q2  
PER\_Q3  
  
PER\_Q4

PER\_Q5  
  
PER\_Q6  
  
PER\_Q7

PER\_Q8  
  
PER\_Q9  
  
PER\_Q10  
PER\_Q11

❖ Section **PRO**

PRO\_Q1  
PRO\_Q2  
PRO\_Q3

PRO\_Q4  
PRO\_Q5  
PRO\_Q6

PRO\_Q7

❖ Section **HDV**

HDV\_Q1  
HDV\_Q2  
HDV\_Q2A  
HDV\_Q2B  
HDV\_Q2C

HDV\_Q2D  
HDV\_Q3  
HDV\_Q3A  
HDV\_Q4  
HDV\_Q5

HDV\_Q6  
HDV\_Q7  
HDV\_Q8  
HDV\_Q8A  
HDV\_Q8B

HDV\_Q8C  
HDV\_Q9  
HDV\_Q10A  
HDV\_Q10B  
HDV\_Q10CA  
HDV\_Q10DA  
HDV\_Q10EA  
HDV\_Q10FA  
HDV\_Q10GA  
HDV\_Q10H  
HDV\_Q10I  
HDV\_Q10J  
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HDV\_Q10M

HDV\_Q10MA  
HDV\_Q10MB  
HDV\_Q10MC  
HDV\_Q10MD  
HDV\_Q10ME  
HDV\_Q10MF  
HDV\_Q10MG  
HDV\_Q11  
HDV\_Q11A  
HDV\_Q12A  
HDV\_Q12B  
HDV\_Q12C  
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HDV\_Q12F

HDV\_Q12G  
HDV\_Q12H  
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HDV\_Q12K  
HDV\_Q12L  
HDV\_Q15A  
HDV\_Q15B  
HDV\_Q15C  
HDV\_Q15D  
HDV\_Q15E  
HDV\_Q15F  
HDV\_Q15G  
HDV\_Q15H  
HDV\_Q15I  
HDV\_Q15J

❖ Section **VIC**

VIC\_Q1A  
VIC\_Q2  
VIC\_Q3A

VIC\_Q4  
VIC\_Q5A  
VIC\_Q6

VIC\_Q7  
VIC\_Q7A  
VIC\_Q12

❖ Section **GAN**

GAN\_Q1  
GAN\_Q2

GAN\_Q3  
GAN\_Q4

GAN\_Q5  
GAN\_Q6

❖ Section **RPA**

RPA\_Q1  
RPA\_Q2  
RPA\_Q3A  
RPA\_Q3B  
RPA\_Q3C  
RPA\_Q3D  
RPA\_Q3E  
RPA\_Q3F

RPA\_Q3G  
RPA\_Q3H  
RPA\_Q3I  
RPA\_Q3J  
RPA\_Q4A  
RPA\_Q4B  
RPA\_Q4C  
RPA\_Q4D

RPA\_Q4E  
RPA\_Q4F  
RPA\_Q4G  
RPA\_Q4H  
RPA\_Q4I  
RPA\_Q4J  
RPA\_Q5

❖ Section **CSR**

CSR\_Q1  
CSR\_Q2  
CSR\_Q2A  
CSR\_Q3DA

CSR\_Q4  
CSR\_Q5  
CSR\_Q6  
CSR\_Q6A

CSR\_Q6B  
CSR\_Q7  
CSR\_Q8  
CSR\_Q9

❖ Section **VRA**

VRA\_Q1  
VRA\_Q2  
VRA\_Q3  
VRA\_Q4  
  
VRA\_Q5

VRA\_Q6  
  
VRA\_Q7  
  
VRA\_Q8

VRA\_Q9  
  
VRA\_Q10  
VRA\_Q11  
VRA\_Q12  
VRA\_Q13  
VRA\_Q14

VRA\_Q15

VRA\_Q16

VRA\_Q17

For consultation only

❖ Section **APL**

APL\_Q7A  
APL\_Q7C  
APL\_Q7DA  
APL\_Q7E

APL\_Q8  
APL\_Q8A  
APL\_Q9  
APL\_Q10

APL\_Q11A  
APL\_Q11B

❖ Section **TRA**

TRA\_Q1  
TRA\_Q2A  
TRA\_Q3A  
TRA\_Q4  
TRA\_Q5  
TRA\_Q6A  
TRA\_Q7A  
TRA\_Q7B  
TRA\_Q8A  
TRA\_Q8B  
TRA\_Q8C  
TRA\_Q8D  
TRA\_Q8E  
TRA\_Q8F  
TRA\_Q8FA  
TRA\_Q8G  
TRA\_Q8GA  
TRA\_Q8H  
TRA\_Q9  
TRA\_Q12  
TRA\_Q13A  
TRA\_Q13B  
TRA\_Q14A  
TRA\_Q14B  
TRA\_Q14C  
TRA\_Q14E  
TRA\_Q14F  
TRA\_Q14G  
TRA\_Q15  
TRA\_Q16  
TRA\_Q17  
TRA\_Q17A  
TRA\_Q17B  
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TRA\_Q18C  
TRA\_Q18D  
TRA\_Q19  
TRA\_Q20  
TRA\_Q21A  
TRA\_Q21B  
TRA\_Q22  
TRA\_Q23  
TRA\_Q24  
TRA\_Q25A  
TRA\_Q25B  
TRA\_Q26  
TRA\_Q27  
TRA\_Q28A  
TRA\_Q28B  
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TRA\_Q32A  
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TRA\_Q33A  
TRA\_Q33B  
TRA\_Q33C  
TRA\_Q34A  
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TRA\_Q34C  
TRA\_Q35  
TRA\_Q36

TRA\_Q36A  
TRA\_Q36B  
TRA\_Q36C  
TRA\_Q36D  
TRA\_Q37  
TRA\_Q38  
TRA\_Q39A  
TRA\_Q39B  
TRA\_Q40  
TRA\_Q41  
TRA\_Q42  
TRA\_Q43A  
TRA\_Q43B  
TRA\_Q44  
TRA\_Q45  
TRA\_Q46A  
TRA\_Q46B  
TRA\_Q47A  
TRA\_Q47B  
TRA\_Q47C  
TRA\_Q47D  
TRA\_Q47E  
TRA\_Q47F  
TRA\_Q47G  
TRA\_Q48  
TRA\_Q49  
TRA\_Q50A  
TRA\_Q50B  
TRA\_Q51A  
TRA\_Q51B  
TRA\_Q51C  
TRA\_Q52A  
TRA\_Q52B  
TRA\_Q52C  
TRA\_Q53

❖ Section **HLT (et QELJ)**

HLT\_Q1  
HLT\_Q2  
HLT\_Q3A

HLT\_Q3A1  
HLT\_Q3B  
QELJ\_TAIL

QELJ\_POID

❖ Section **PUB**

PUB\_Q1\_M  
PUB\_Q1\_F

PUB\_Q2\_M  
PUB\_Q2\_F

PUB\_Q7  
PUB\_Q7A

❖ Section **PIS**

PIS\_Q1  
PIS\_Q2

PIS\_Q3  
PIS\_Q4

PIS\_Q5  
PIS\_Q6

❖ Section **SOM**

SOM\_Q1  
SOM\_Q2  
SOM\_Q3  
SOM\_Q4

SOM\_Q5A  
SOM\_Q5B  
SOM\_Q5C  
SOM\_Q5D

SOM\_Q5E  
SOM\_Q5F  
SOM\_Q5G  
SOM\_Q5H

❖ Section **EVS**

EVS\_Q1A  
EVS\_Q1B  
EVS\_Q1C  
EVS\_Q1D  
EVS\_Q1E

EVS\_Q1F  
EVS\_Q1G  
EVS\_Q1H  
EVS\_Q1I  
EVS\_Q1J

EVS\_Q1K  
EVS\_Q1L  
EVS\_Q1M  
EVS\_Q1N  
EVS\_Q1NA

❖ Section **VPM**

VPM\_Q1C  
VPM\_Q1D

VPM\_Q1E  
VPM\_Q2B

VPM\_Q2D  
VPM\_Q2E

❖ Section **QELJ**

QELJ\_Q1  
QELJ\_Q2  
QELJ\_Q3  
QELJ\_Q4  
QELJ\_Q5

QELJ\_Q6  
QELJ\_Q6A  
QELJ\_Q6B  
QELJ\_Q7  
QELJ\_Q8A

QELJ\_Q8B  
QELJ\_Q8C  
QELJ\_Q8D  
QELJ\_Q9  
QELJ\_CMNT



## Consignes dans le questionnaire

- **Bleu gras : Note à l'enfant**
- Vert : Directives de programmation/instruction à l'interpréteur (ne pas inclure dans le questionnaire) : les PAQ, les bornes, les validations, les types de réponses (menus déroulants ou questions ouvertes)
- Rouge : mots à accorder

For consultation only

### Lors de l'entrée dans le lien URL :

Bienvenue dans le questionnaire du jeune de l'étude « Je suis, Je serai »! Choisis la langue dans laquelle tu veux remplir ton questionnaire.

Welcome in the Teenager's questionnaire of the "I am, I'll be" survey! Choose the language in which you want to complete your questionnaire.

### Langue

Choisis la langue dans laquelle tu veux remplir ton questionnaire. Choose the language in which you want to complete your questionnaire.

Français.....FR

English.....EN




### Intro

Hi!

The Institut de la statistique du Québec is very pleased that you are participating in the "I am, I'll be" study. The data you give us is very important. Remember that your responses remain confidential - no one (at home or at school) will ever see them.

In the questionnaire you will be responding to questions on your life, school, work if you have a job, relationships with your friends, health, leisure activities, etc. If you have any questions or comments, you can email us at [lam\\_illbe@stat.gouv.qc.ca](mailto:lam_illbe@stat.gouv.qc.ca)

### Here are some instructions for filling out your questionnaire:

- Do not use the navigation arrows.
- If you want to go back to a previous question, use the arrows  and .
- If you have to take a break while filling out your questionnaire, **click on EXIT** .
- When you leave your questionnaire idle for more than 30 minutes, you will be automatically disconnected from it.
- You can return to your questionnaire by clicking the link we sent you in the email (if applicable) or by going to the website of the study [http://www.jesuisjeserai.stat.gouv.qc.ca/default\\_an.htm](http://www.jesuisjeserai.stat.gouv.qc.ca/default_an.htm) and clicking on "Teenager's Questionnaire"
- Unless indicated otherwise, you should choose only one answer per question.

**This is not a test or exam. There are no right or wrong answers. Answer according to what you really think or feel.**

Filtre : Si le jeune a été contacté par courriel (variable previous ), (CONTPRV=1) : passer à MOP\_I1

Filtre : Si le jeune a été contacté par lettre (variable previous), (CONTPRV=2) : Passer à MOP\_I2

MOP\_I1

Please enter the password indicated in the email or letter we sent you.

Champs ouvert : mot de passe de 6 lettres (à confirmer) à générer. Si le mot de passe est non valide : le mot de passe est incorrect, entre-le de nouveau.

If you have forgotten or lost your password, you can call us at 1-800-561-0213 or click here.

If you need to take a break while filling out your questionnaire, click on EXIT. We will then ask you to change your password.

MOP\_I2

Please enter the password indicated in the email or letter we sent you.

Champs ouvert : mot de passe de 6 lettres (à confirmer) à générer. Si le mot de passe est non valide le mot de passe est incorrect, entre-le de nouveau.

If you have forgotten or lost your password, you can call us at 1-800-561-0213.

If you need to take a break while filling out your questionnaire, click on EXIT. We will then ask you to change your password.

**FOR VALIDATION PURPOSES, PLEASE FILL OUT THE INFORMATION FOR YOUR PROFILE.**

**Tous les champs sont obligatoires.**

QELJ\_PRE First Name : \_\_\_\_\_  
champs ouvert

QELJ\_NOM Last Name : \_\_\_\_\_  
champs ouvert

QELJ\_DAT Today's date : \_\_\_\_/\_\_\_\_/\_\_\_\_  
DD MM YYYY  
menu déroulant : jj mois 2013

QELJ\_SEXE Sex : \_\_\_\_\_  
menu déroulant : Male/ Female

QELJ\_DN Your date of birth : \_\_\_\_/\_\_\_\_/\_\_\_\_  
DD MM YYYY  
menu déroulant : DD entre 1 et 31 / MM entre 1 et 12 / YYYY entre 1997 et 1998

## Section 1      Motivation in school

The first few sections of the questionnaire cover your life at school – the classes you are taking, your interest in school, your relationships with your teachers, etc.

MOT\_Q0A    **In what grade level are you enrolled this current school year?**

**If you are taking classes in more than one grade level, please indicate the one in which you have the most classes.**

GRADE 4 ELEMENTARY.....04  
GRADE 5 ELEMENTARY.....05  
GRADE 6 ELEMENTARY.....06  
Secondary I.....11  
Secondary II.....12  
Secondary III.....13  
Secondary IV.....14  
Secondary V.....15  
I don't go to school anymore.....00  
Other.↓ specify your answer.....17

Ouvrir une boîte si « Other » est sélectionné.

PAQ : Si MOT\_Q0a = 00 : passer à MOT\_I0

PAQ : Si MOT\_Q0a = différent de 00 : passer à MOT\_I1

---

MOT\_I0

**For questions related to your school and teachers, use the most recent period in which you attended school.**

---

Passer à MOT\_I1

MOT\_I1

**What you think about the subjects you are taking...**

Students' levels of interest in subjects they are taking are different. We would like to know your feelings about some of those subjects.

MOT\_Q0    **Between the French and the English classes, which one of these classes are you taking more often?**

French.....1

English.....2

*For consultation only*

MOT\_I2

For each of the following statements, please indicate whether you think the answer is always no, sometimes no, sometimes yes, or always yes. If you don't know the answer, check I don't know.

- MOT\_Q27 I have always done well in [langue].  
MOT\_Q28 I like my [langue] classes.  
MOT\_Q29 My [langue] classes interest me a lot.  
MOT\_Q30 [Langue] is easy for me.  
MOT\_Q31 I read and write [Langue] even when I don't have to.  
MOT\_Q32 I learn things quickly in [langue] %s class.

Always no.....1  
Sometimes no.....2  
I don't know.....3  
Sometimes yes.....4  
Always yes.....5

#### TABLEAU

LANGUE : doit correspondre à la réponse à la question MOT\_Q0. S'assurer que les **de** ou **d'** soit correct en fonction des phrases.

---

Think now about your Math classes.

- MOT\_Q13 I have always done well in **math**.  
MOT\_Q14 I like my **math** classes.  
MOT\_Q15 My **math** classes interest me a lot.  
MOT\_Q16 **Math** is easy for me.  
MOT\_Q17 I do **math** even when I don't have to.  
MOT\_Q18 I learn things quickly in **math**.

Always no.....1  
Sometimes no.....2  
I don't know.....3  
Sometimes yes.....4  
Always yes.....5

#### TABLEAU

## Section 2 Dropping out of school

PAQ : Si MOT\_Q0a = 4,5,6,17 : Passer à DCS\_I2

PAQ : Si MOT\_Q0a = 11,12,13,14,15 : Passer à DCS\_I1

---

DCS\_I1 Regarding your academic aspirations, marks, and behaviours at school...

During this school year, what has been your average mark...

**Write down the mark between 0 and 100%.**

DCS\_Q1 in English Language Arts? \_\_\_\_\_

DCS\_Q2 in mathematics? \_\_\_\_\_

DCS\_Q15 overall (all subjects combined)? \_\_\_\_\_

DCS\_Q3 Have you ever repeated an entire school year?

Never .....0

Once.....1

Twice.....2

3 times or more .....3

Chiffre entier seulement

Bornes entre 0 et 100

Non-réponse = 999

PAQ : passer à DCS\_Q4

---

DCS\_I2 Regarding your academic aspirations, marks, and behaviours at school...

During this school year, what has been your average mark...

**Write down the mark between 0 and 100%.**

DCS\_Q1A English Language Arts? \_\_\_\_\_

DCS\_Q2A in mathematics? \_\_\_\_\_

DCS\_Q15A overall (all subjects combined)? \_\_\_\_\_

DCS\_Q3A **Have you ever repeated an entire school year?**

Never .....0  
 Once.....1  
 Twice.....2  
 3 times or more .....3

Never easily Always needs help			Rarely easily Often needs help				Often easily Rarely needs help				Always easily Never needs help		
←											→		
0 to 35%	36 to 40%	41 to 45%	46 to 50%	51 to 55%	56 to 60%	61 to 65%	66 to 70%	71 to 75%	76 to 80%	81 to 85%	86 to 90%	91 to 95%	96 to 100%

Tableau des équivalences à joindre

Chiffre entier seulement

Bornes entre 0 et 100

Non-réponse = 999

PAQ : passer à DCS\_Q4

DCS\_Q4 **Do you like school?**

I don't like school at all.....0  
 I don't like school.....1  
 I like school .....2  
 I really like school .....3

DCS\_Q5 **In terms of your school marks, how would you rate yourself compared with other students your age at your school?**

I am one of the weaker students.....1  
 I am weaker than the average student.....2  
 I am an average student.....3  
 I am stronger than the average student.....4  
 I am one of the stronger students .....5

DCS\_Q6A **How important is it for you to get good marks in French?**

Not important at all.....1  
 Somewhat important.....2  
 Important.....3  
 Very important.....4



DCS\_Q6B **How important is it for you to get good marks in mathematics?**

Not important at all.....1  
Somewhat important.....2  
Important.....3  
Very important.....4

---

DCS\_Q7 **Based on your own wishes, how far do you plan to go in school?**

I plan to leave before completing high school .....1  
I plan to finish high school (general education, SSD).....2  
I plan to do vocational training in high school (DVS) .....3  
I plan to do technical training at the CEGEP level (junior college) ....4  
I plan to attend university. ....5  
I don't know. It doesn't bother me .....6

---

**During this school year, how many hours a week, on average, have you devoted to your school work or homework outside of your classes, during free periods or at home?**

**Round off to the nearest 15 minutes. If there are no hours to specify, indicate 0 for hour(s). If there are no minutes to specify, indicate 0 for minute(s).**

DCS\_Q7H \_\_\_\_\_ hour(s) and DCS\_Q7M \_\_\_\_\_ minute(s) per week

MENU DÉROULANT : 0 à « 15 et plus » pour les heures et 0 – 15 – 30 – 45 pour les minutes

---

**During this school year, how many times have you...**

DCS\_Q8 disrupted the class on purpose?  
DCS\_Q9 been rude to your teacher?  
DCS\_Q10 used hidden notes or other means not allowed in order to cheat on a test?  
DCS\_Q11 missed school without a valid reason?  
DCS\_Q12 ever failed one or more of your subjects, as indicated on your report card (a mark under 60%)?  
DCS\_Q13 skipped a class while you were at school?

Never ..... 1  
Once or twice ..... 2  
Several times ..... 3  
Quite often ..... 4

TABLEAU

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DCS\_Q14 **Have you ever seriously thought of dropping out of school?**

Yes.....1  
No.....2

PAQ : Si DCS\_Q14 = 1, passer à DCS\_Q16

PAQ : Si DCS\_Q14 = 2, passer à ATT\_Q1

DCS\_Q16    **Have you dropped out of school?**

Yes.....1

No.....2

PAQ : Si DCS\_Q14 = 1, passer à DCS\_Q17

PAQ : Si DCS\_Q14=2, passer à ATT\_Q1

---

DCS\_Q17    **How many months has it been since you dropped out of school?**

**If it has been less than a month, enter 1.**

**Number of month(s): \_\_\_\_\_**

Bornes : 0 à 24 mois (chiffre entier)

For consultation only

### Section 3    Attachment to school

ATT\_I1        **About your school...**

The next few questions are on your feelings about your school. We want to know what you really think. There are no right or wrong answers and most teenagers will have different answers.

**Rate each item according to whether you strongly disagree, disagree, are unsure, agree, or strongly agree.**

- ATT\_Q1        I'm proud that I go **to this school**.
- ATT\_Q2        I'm happy to go **to this school**.
- ATT\_Q3        I feel safe at my school.
- ATT\_Q4        Most mornings I look forward to going to school.
- ATT\_Q5        I like my school.

- Strongly disagree ..... 1
- Disagree ..... 2
- Unsure ..... 3
- Agree ..... 4
- Strongly agree ..... 5

TABLEAU

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## Section 4 Self-regulation of Learnings

AAP\_I1 About your study habits...

Choose the answer that best reflects your degree of agreement or disagreement with each of the following statements.

- AAP\_Q1 I take time to plan my study time.  
AAP\_Q2 When I study, I try to identify what it is important rather than just reading the material.  
AAP\_Q3 When I study, I try to pull together information from courses and from readings.  
AAP\_Q4 I use special means (ex.: make tables) to summarize information from courses and readings.  
AAP\_Q5 I usually wait at the last minute to study for exams or to do my school work.  
AAP\_Q6 I take time to stop and make sure that I understand.  
AAP\_Q7 Sometimes I stop to figure out how the different parts are related.  
AAP\_Q8 When I study, I reformulate important ideas in my own words.

Strongly disagree ..... 1  
Disagree ..... 2  
Somewhat disagree ..... 3  
Somewhat agree ..... 4  
Agree ..... 5  
Strongly agree ..... 6

TABLEAU

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## Section 5 Relationship with Teachers

About your relationship with your teachers...

Indicate to what extent the following statements apply to your relationship with teachers.

- REN\_Q1A I spontaneously share information about myself with teachers  
REN\_Q1B I get easily angry at teachers.  
REN\_Q1C It takes much energy to a teacher for dealing with me.  
REN\_Q1D I find it difficult to get along with teachers.  
REN\_Q1E I sometimes think about my teachers when I'm not at school.  
REN\_Q1F I sometimes share my feelings and personal experiences with a teacher.  
REN\_Q1G I don't feel respected by teachers.  
REN\_Q1H I sometimes spend my free time with a teacher.

Not at all .....1  
Not really .....2  
Neutral/Not sure .....3  
Somewhat .....4  
A lot .....5

TABLEAU

---

## Section 6 Mental health

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MIA\_I1 About your feelings and behaviours over the past 12 months...

The following section relates to your behaviours and emotions over the past 12 months.

For each statement, check the box never true, sometimes true or often true.

Please give your answer based on your experience over the past 12 months.

If you forget to answer one or more question(s) in this section, they will be asked again later.

1 question par page dans cette section

Permutation aléatoire dans les questions. Groupe pour les permutations : 1 à 48 et 111-112.

Choices:

Never true..... 1

Sometimes true ..... 2

Always true ..... 3

- MIA\_Q1 I felt very restless, I was constantly on the move.
- MIA\_Q2 I feared or tried to avoid situations that involved a lot of people.
- MIA\_Q3 I stole money or objects from school or from stores.
- MIA\_Q4 I was too fearful or nervous.
- MIA\_Q5 I felt I wasn't as good-looking or as smart as other people.
- MIA\_Q6 I made myself sick for fear of gaining weight.
- MIA\_Q7 I appeared before a judge because I did something wrong.
- MIA\_Q8 I feared or tried to avoid situations that involved meeting new people.
- MIA\_Q9 I had temper tantrums.
- MIA\_Q10 I worried that I had lost control over how much I was eating.
- MIA\_Q11 I participated in gang fights.
- MIA\_Q12 I had worries that interfered with my everyday life.
- MIA\_Q13 I often had trouble staying calm during games or leisure activities.
- MIA\_Q14 I feared or tried to avoid situations that involved doing things in front of an audience.
- MIA\_Q15 I entered a house, a building or a car without permission in order to steal.
- MIA\_Q16 I was mean to certain people.
- MIA\_Q17 I worried about my past behaviour.
- MIA\_Q18 I threatened to hit someone to get what I wanted.
- MIA\_Q19 I feared or tried to avoid situations that involved speaking in class.
- MIA\_Q20 I was inattentive, I had difficulty paying attention to what someone was saying or doing.
- MIA\_Q21 I worried about my school work.

- MIA\_Q22 I stayed out all night without my parents' permission.
- MIA\_Q23 I lost over 13 pounds (6 kilos) in under 3 months.
- MIA\_Q24 I hit someone who hurt me, even though that person didn't hurt me on purpose.
- MIA\_Q25 I had trouble keeping my mind on what I was doing for more than a few minutes.
- MIA\_Q26 I feared or tried to avoid situations that involved reading out loud in front of others.
- MIA\_Q27 I skipped school without reason (cut class).
- MIA\_Q28 I worried about my own health.
- MIA\_Q29 I had trouble thinking clearly.
- MIA\_Q30 I hit someone who was threatening me.
- MIA\_Q31 I disliked being placed in social situations that drew attention to me.
- MIA\_Q32 I avoided doing things where I needed to pay attention for a long time.
- MIA\_Q33 I deliberately destroyed someone else's property.
- MIA\_Q34 I worried about my loved ones (family, friends).
- MIA\_Q35 I was placed in a youth centre (Centre Jeunesse) because I did something wrong.
- MIA\_Q36 Although I was with people that I trust, I feared social situations that drew attention to me.
- MIA\_Q37 I said hurtful things behind someone's back.
- MIA\_Q38 I believed myself to be too fat when others said I was too thin.
- MIA\_Q39 I got even with someone by telling lies about them.
- MIA\_Q40 I worried about my relationships with my friends (i.e. making and keeping friends).
- MIA\_Q41 I cyberbullied another young person (insults, threats, bullying, etc.) on the Internet or using a cell phone.
- MIA\_Q42 I blushed or trembled when faced with social situations that I fear.
- MIA\_Q43 I paid attention to other people's needs, I considered their feelings.
- MIA\_Q44 I was concerned about my appearance or weight.
- MIA\_Q45 Food dominated my life.
- MIA\_Q46 I did some things just to annoy people or make them angry.
- MIA\_Q47 I called other people names, insulted them or said hurtful things to them.
- MIA\_Q48 I found it difficult to control the worry.
- MIA\_Q111 I cared about how well I did at school or work.
- MIA\_Q112 I did not show my emotions to others.

Fin de permutation des questions

**MIA\_I2** We would now like to know if your different activities or your relationships with others have been negatively impacted by certain feelings or behaviours you have had. For example, it is possible that some of your behaviours or feelings have annoyed or frustrated your entourage or were a source of conflict. It is also possible that some of your feelings or behaviours have worried your parents, your teachers or your friends.

**Check the box that indicates to what extent you have had difficulties regarding your behaviours or your feelings in the following aspects of your life.**

**In the last year, have you had anxiety issues that have negatively impacted your life...**

- MIA\_Q49 at home, with your family?  
MIA\_Q50 at school, in your study habits or with your teachers?  
MIA\_Q51 in your friendships or romantic relationships?  
MIA\_Q52 in your daily occupations (i.e. not able to do things or go places)?

Choix de réponses : Not at all .....1  
Somewhat .....2  
Enough .....3  
A lot .....4

TABLEAU

**In the last year, have you had food or weight issues that have negatively impacted your life...**

- MIA\_Q53 at home, with your family?  
MIA\_Q54 at school, in your study habits or with your teachers?  
MIA\_Q55 in your friendships or romantic relationships?  
MIA\_Q56 in your daily occupations (i.e. not able to do things or go places)?

Choix de réponses : Not at all .....1  
Somewhat .....2  
Enough .....3  
A lot .....4

TABLEAU



**MIA\_I3      About your feelings and behaviours...**

**The following section relates to your behaviours and emotions over the past 12 months.**

**For each statement, check (or tick) the box never true, sometimes true or often true.**

**Please give your answer based on your experience over the past 12 months.**

**If you forget to answer one or more question(s) in this section, they will be asked again later.**

1 question par page dans cette section .

Permutation aléatoire dans les questions. Groupe pour les permutations : 1 à 48.

Choices:

Never true ..... 1

Sometimes true ..... 2

Always true ..... 3

- MIA\_Q57    I was impulsive (reacted quickly without thinking).
- MIA\_Q58    I cheated in order to succeed at school.
- MIA\_Q59    Nothing was fun for me, I wasn't interested in anything.
- MIA\_Q60    I deliberately hurt someone to the point that they had to receive medical care.
- MIA\_Q61    I refused to do what my parents or my teacher were telling me to do.
- MIA\_Q62    I had difficulty waiting for my turn in games or group activities.
- MIA\_Q63    I told lies in order to get things or favours from others.
- MIA\_Q64    I hit people with the intent to make them suffer.
- MIA\_Q65    I lost my temper easily.
- MIA\_Q66    I often stood up in class or in other situations where I was supposed to remain seated.
- MIA\_Q67    I used a weapon in order to steal.
- MIA\_Q68    I lost interest in things I usually like.
- MIA\_Q69    I hit someone who pushed me, even though that person didn't push me on purpose.
- MIA\_Q70    I forgot what I was supposed to be doing or what I had planned to do.
- MIA\_Q71    I deliberately started a fire.
- MIA\_Q72    I felt bad or guilty after doing something wrong.
- MIA\_Q73    I said things before thinking them through.
- MIA\_Q74    I cheated in order to make some money.
- MIA\_Q75    I felt sad and unhappy.
- MIA\_Q76    I used a weapon (i.e. stick, rock, knife) during a fight.
- MIA\_Q77    I felt sorry after doing something wrong.
- MIA\_Q78    I often blurted out the answer to a question that hadn't yet been completely asked.
- MIA\_Q79    I told lies in order to get out of doing things I was supposed to do.

- MIA\_Q80 I was convicted of doing something wrong.
- MIA\_Q81 I felt I couldn't do anything well.
- MIA\_Q82 I beat up someone who hadn't done anything to me.
- MIA\_Q83 I got even with someone by trying to hurt them.
- MIA\_Q84 I moved my hands and feet, I wriggled in my chair.
- MIA\_Q85 I stayed out at night much later than I was allowed to.
- MIA\_Q86 I made fun of or laughed at someone.
- MIA\_Q87 I made a lot of mistakes because it was hard for me to do things carefully.
- MIA\_Q88 I stopped someone from joining my group when they wanted to.
- MIA\_Q89 I did or said things without stopping to think.
- MIA\_Q90 I cheated in order to win a competition.
- MIA\_Q91 I lacked energy or felt tired.
- MIA\_Q92 I got into a fight intending to seriously hurt someone.
- MIA\_Q93 I threatened to fight someone to force him to do something that he did not want to do.
- MIA\_Q94 I got into trouble because I did things without thinking.
- MIA\_Q95 I stole money or objects from home.
- MIA\_Q96 Doing even little things made me feel really tired.
- MIA\_Q97 I threatened to hit someone in order to steal from them.
- MIA\_Q98 I blamed someone else when I got caught doing something wrong.
- MIA\_Q99 I completed all of my tasks or homework. I was able to stay focused.
- MIA\_Q100 I ran away from home.
- MIA\_Q101 I extorted something from another young person (forced the person to give me something that belonged to them).
- MIA\_Q102 I was arrested by the police for doing something wrong.
- MIA\_Q113 I have broken down a door or a window and have entered somewhere to take something.
- MIA\_Q114 I have been questionned by police officers about something they thought I had done.

Fin de permutation des questions

**MIA\_I4** We would now like to know if your different activities or your relationships with others have been negatively impacted by certain feelings or behaviours you have had. For example, it is possible that some of your behaviours or feelings have annoyed or frustrated your entourage or were a source of conflict. It is also possible that some of your feelings or behaviours have worried your parents, your teachers or your friends.

**Check the box that indicates to what extent you have had difficulties regarding your behaviours or your feelings in the following aspects of your life.**

**In the last year, have you felt so sad or depressed that these feelings negatively impacted your life...**

MIA\_Q103 at home, with your family?

MIA\_Q104 at school, in your study habits or with your teachers?

MIA\_Q105 in your friendships or romantic relationships?

MIA\_Q106 in your daily occupations (i.e. not able to do things or go places)?

Choices :            Not at all .....1  
                             Somewhat .....2  
                             Enough .....3  
                             A lot .....4

TABLEAU

**In the last year, have you had behaviour issues (i.e. fights, stealing, hyperactivity, telling lies) that have negatively impacted your life...**

MIA\_Q107 at home, with your family?

MIA\_Q108 at school, in your study habits or with your teachers?

MIA\_Q109 in your friendships or romantic relationships?

MIA\_Q110 in your daily occupations (i.e. not able to do things or go places)?

Choices :            Not at all .....1  
                             Somewhat .....2  
                             Enough .....3  
                             A lot .....4

TABLEAU

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## Section 7    Personality

About what you like and what you like less...

Indicate to what extent you agree or disagree with each of the following statement.

- PER\_Q1      I would like to skydive (parachute out of a plane).  
PER\_Q2      I enjoy new and exciting experiences even if they are unconventional (out of the ordinary/ different).  
PER\_Q3      I like doing things that frighten me a little.  
PER\_Q4      I would like to learn how to drive a motorcycle.  
PER\_Q5      I would enjoy hiking long distances in wild and uninhabited territory.

Strongly disagree.....1  
Disagree.....2  
Agree.....3  
Strongly agree.....4

TABLEAU

---

Indicate by checking the appropriate box, to what extent you agree or disagree with each of the following statement.

- PER\_Q6      It's frightening to feel dizzy or faint..  
PER\_Q7      It frightens me when I feel my heart beat change.  
PER\_Q8      I get scared when I'm too nervous.  
PER\_Q9      I get scared when I experience unusual body sensations (feelings).  
PER\_Q10     It scares me when I'm unable to focus on a task.  
PER\_Q11     I feel I have to be crafty or manipulative (sneaky) to get what I want.

Strongly disagree.....1  
Disagree.....2  
Agree.....3  
Strongly agree.....4

TABLEAU

## Section 8    Prosocial behaviours

About some of your behaviours...

Here are statements that describe behaviours you may or may not have had, over the past **12 months**. Choose the answer that best describes you.

- PRO\_Q1    When someone got hurt, I didn't hesitate to help them.  
PRO\_Q2    When someone made a mistake, I felt sorry for them.  
PRO\_Q3    When I witnessed an argument, I tried to stop it.  
PRO\_Q4    When someone spilled or broke something, I offered to help clean it up.  
PRO\_Q5    I helped people around me when they were having difficulty.  
PRO\_Q6    I readily shared my belongings with others.  
PRO\_Q7    I was kind to younger children.

Never or not true ..... 1  
Sometimes or a little true ..... 2  
Often or very true ..... 3

TABLEAU

## Section 9 Life Habits

### HDV\_I1 About your habits...

The next few questions are on things you might or might not be doing. There are no right or wrong answers. No one at home or school will ever see your answers.

Variable previous : Si HDVQ1PRV = 1 et HDVQ2PRV = 0 : Passer à HDV\_Q2.

Variable previous : Si HDVQ1PRV = 1 et HDVQ2PRV = 1 : Passer à HDV\_Q2B.

Variable previous : Si HDVQ1PRV = 0: Passer à HDV\_Q1.

### HDV\_Q1 Have you ever tried cigarette smoking, even just a few puffs?

Yes.....1

No.....2

PAQ: Si HDV\_Q1 = 2, passer à HDV\_Q4

PAQ: Si HDV\_Q1 = 1, passer à HDV\_Q2

### HDV\_Q2 Have you ever smoked a whole cigarette?

Yes.....1

No.....2

PAQ: Si HDV\_Q2 = 2, passer à HDV\_Q3

PAQ: Si HDV\_Q2 = 1, passer à HDV\_Q2A

### HDV\_Q2A How old were you (in years) when you smoked your first whole cigarette?

\_\_\_\_\_ years

MENU DÉROULANT : 8 ans et moins à 15 ans (ordre décroissant)

### HDV\_Q2B In the last 12 months, have you smoked at least one cigarette?

Yes.....1

No.....2

PAQ : Si HDV\_Q2B=1, passer à la question HDV\_Q2C

PAQ : Si HDV\_Q2B = 2, passer à la question HDV\_Q3

### HDV\_Q2C In the last 12 months, how often did you smoke?

Occasionally.....1

Approx. Once a month.....2

Weekends or once or twice during the week.....3

3 times or more a week but not every day.....4

Every day .....5

HDV\_Q2D **How many times have you tried to quit smoking in the last 12 months?**

**If you never tried to quit smoking, enter "0".**

\_\_\_\_\_ times

Réponse ouverte : nombre entier seulement.

Bornes : Min = 0 Max = 50

---

HDV\_Q3 **During the past 30 days, did you smoke cigarettes, even just a few puffs?**

- No, I didn't smoke in the last 30 days.....1  
Yes, every day.....2  
Yes, almost every day.....3  
Yes, a few days.....4

PAQ: Si HDV\_Q3 = 2, 3 ou 4 : passer à HDV\_Q3A

PAQ: Si HDV\_Q3 = 1 : passer à HDV\_Q4

---

HDV\_Q3A **On the days you smoked, how many cigarettes did you usually smoke?**

- Less than one cigarette a day (a few puffs a day).....1  
1 to 2 cigarettes a day.....2  
3 to 5 cigarettes a day.....3  
6 to 10 cigarettes a day.....4  
11 to 20 cigarettes a day.....5  
More than 20 cigarettes a day .....6

---

HDV\_Q4 **During the past 30 days, have you smoked cigars, cigarillos, or little cigars (plain or flavoured), even just a few puffs?**

- No.....1  
Yes, every day.....2  
Yes, almost every day.....3  
Yes, a few days.....4  
Yes, one or two days.....5

---

HDV\_Q5 **How often are you exposed to second-hand cigarette smoke in your home (because someone in your family smokes, for example)?**

**If you smoke, do not include the smoke from your own cigarettes. Refer only to smoke from others.**

- Every day.....1  
Almost every day.....2  
About once a week .....3  
About once a month.....4  
Less than once a month.....5  
Never.....6

---

Variable previous : Si HDVQ6PRV = 1 : Passer à HDV\_Q7.

Variable previous : Si HDVQ6PRV = 0 : passer à HDV\_Q6.

HDV\_Q6 **In your lifetime**, have you ever drunk alcohol?

**That is, more than just a few sips.**

Yes.....1

No.....2

PAQ: Si HDV\_Q6 = 2 : passer à HDV\_Q9

PAQ: Si HDV\_Q6 = 1 : passer à HDV\_Q7

---

HDV\_Q7 **During the past 12 months** how often did you drink alcohol?

I didn't drink alcohol during the past 12 months.....1

Just once to try .....2

Less than once a month (occasionally).....3

About once a month.....4

Weekends OR once or twice a week.....5

3 or more times a week BUT not every day.....6

Every day.....7

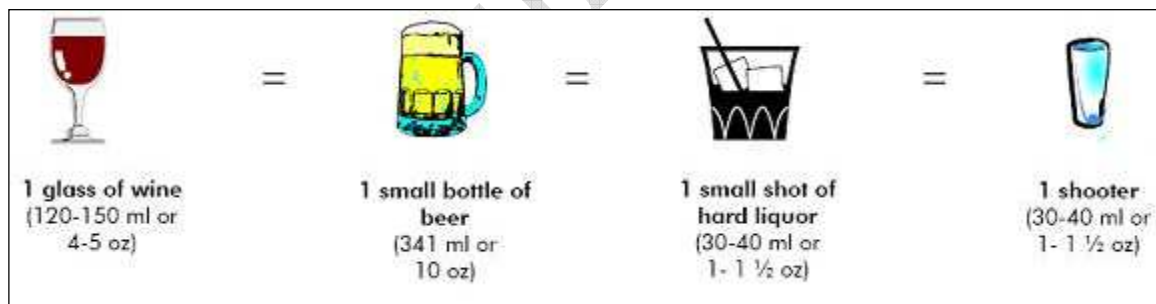
PAQ: Si HDV\_Q7 = 2, 3, 4, 5, 6, 7 : passer à HDV\_Q8

PAQ: Si HDV\_Q7 = 1 : passer à HDV\_Q9

---

HDV\_Q8 **During the last 12 months**, how many times have you had 5 drinks or more of alcohol on the same occasion?

**1 drink corresponds to...**



None. .... 0

Once..... 1

Twice..... 2

3 times ..... 3

4 times ..... 4

5 times or more ..... 5

---

HDV\_Q8A **In the past 30 days**, did you drink alcohol?

Yes.....1

No.....2



HDV\_Q8B **In your lifetime, have you ever consumed alcohol on a regular basis, meaning at least once a week for at least one month?**

Yes.....1  
No.....2

PAQ: Si HDV\_Q8B = 2 passer à HDV\_I2  
PAQ: Si HDV\_Q8B = 1 : passer à HDV\_Q8C

---

HDV\_Q8C **How old were you when you first drank alcohol on a regular basis, meaning at least once a week for at least one month?**

I was \_\_\_\_ years old

MENU DÉROULANT : 8 et moins à 15 ans (ordre décroissant)

---

HDV\_I2 **The next few questions are on drug use and gambling.**

Variable previous : Si HDVQ9PRV = 1 : Passer à HDV\_Q10.  
Variable previous : Si HDVQ9PRV = 0 : Passer à HDV\_Q9.

---

HDV\_Q9 **In your lifetime, have you ever used drugs?**

Yes.....1  
No.....2

PAQ: Si HDV\_Q9 = 2 passer à FILTRE\_HDV\_PROB  
PAQ: Si HDV\_Q9 = 1 : passer à HDV\_10

---

**During the past 12 months, how often did you use the following drug:**

HDV\_Q10A Cannabis (marijuana, pot, hashish)  
HDV\_Q10B Cocaine (coke, snow, crack, free base)  
HDV\_Q10CA Solvents, glue, gas, poppers, cleaners, etc. nitrites, etc.  
HDV\_Q10DA Hallucinogens (LSD, acid, blotters, PCP, mescaline, mess, magic mushrooms, etc.)  
HDV\_Q10EA Heroin (smack, junk, etc.)  
HDV\_Q10FA Amphetamines or methamphetamines (speed, uppers, meth, crystal, ice, peanut, etc.)  
HDV\_Q10GA Medication without a prescription (ex. Valium, Librium, Dalmane, Halcion, Ativan, Ritalin, Dilaudid, Codeine, Oxycontin, etc.)

I didn't ..... 1  
Just once to try ..... 2  
Less than once a month (occasionally)..... 3  
About once a month..... 4  
Weekends OR once or twice a week ..... 5  
3 or more times or more a week BUT not every day ..... 6  
Every day ..... 7

TABLEAU

PAQ: Si HDV\_Q10Ga = différent de 1: passer à HDV\_Q10H  
PAQ: Si HDV\_Q10Ga = 1 : passer à FILTRE\_HDV\_Q10

*For consultation only*

HDV\_Q10H - Indicate the name of the drug or medication you have taken without a prescription:

Answer : \_\_\_\_\_

Réponse ouverte

passer à HDV\_Q10I

FILTRE\_HDV\_Q10

PAQ: Si HDV\_Q10A ou Q\_10B ou 10Ca ou 10Da ou 10Ea ou 10Fa ou 10Ga = différent de 1: passer à HDV\_Q10I

PAQ: Si HDV\_Q10A et Q\_10B et 10Ca et 10Da et 10Ea et 10Fa et 10Ga = 1: passer à HDV\_Q10J

---

HDV\_Q10I **Thinking of the drug(s) you checked in the previous two pages...: In the past 30 days, did you use any of these drugs?**

Yes.....1

No.....2

---

HDV\_Q10J **In your lifetime, have you ever used drugs on a regular basis, meaning at least once a week for at least one month?**

Yes.....1

No.....2

PAQ: Si HDV\_Q10J = 1 : passer à HDV\_Q10K

PAQ: Si HDV\_Q10J = 2 : passer à HDV\_Q10L

---

HDV\_Q10K **How old were you when you first used drugs on a regular basis, meaning at least once a week for at least one month?**

I was \_\_\_\_\_ years old

MENU DÉROULANT : 8 ans et moins à 15 ans (ordre décroissant)

---

HDV\_Q10L **Have you ever used any drug by injection or needles?**

Yes.....1

No.....2

---

FILTRE\_HDV\_PROB pour la question HDV\_Q10M (problèmes alcool ou drogues) Arrive au même endroit pour les 2 réponses

PAQ : Si ( HDV\_Q10A à HDV\_Q10Ga= 1 ou HDV\_Q9 = 2) **et** (HDV\_Q7 = 1 ou HDV\_Q6=2 ): passer à HDV\_Q11

Sinon, passer à HDV\_Q10M

During the past 12 months, have you ever been in any of the following situations?

		Yes	No
HDV_10MA	My alcohol or drug use has had negative psychological effects on me (ex. anxiety, depression, problems concentrating, etc.)		
HDV_10MB	My alcohol or drug use has had negative effects on my relationships with my family		
HDV_10MC	My alcohol or drug use has had negative effects with my friends or in my love life		
HDV_10MD	My alcohol or drug use has had negative effects on my studies		
HDV_10ME	I committed a delinquent act (even if I wasn't arrested by the police) while under the influence of alcohol or drugs		
HDV_10MF	I have had the feeling as though the same quantities of alcohol or drugs were having less effect on me than they once had		
HDV_10MG	I have spoken with a healthcare worker or counsellor about my alcohol or drug use		

#### TABLEAU

Variable previous : Si HDVQ11PRV = 1 : Passer à HDV\_Q11A

Variable previous : Si HDVQ11PRV = 0 : Passer à HDV\_Q11

HDV\_Q11 - **In your lifetime**, have you ever gambled, played games for money (for example: lotteries, scratch tickets, video poker, casino, cards, dice, bingo, betting on sports events, etc.)?

Yes.....1

No.....2

PAQ: Si HDV\_Q11 = 1: Passer à HDV\_Q11A

PAQ: Si HDV\_Q11 = 2: Passer à VIC\_Q1A (en passant par VIC\_I1)

HDV\_Q11A **Over the past 12 months**, how frequently have you played games for money (for example: lottery, scratch tickets, video lottery terminal or video poker, casino, dice games, bingo, sport bets, etc.)?

Never .....1

Just once to try.....2

Less than once a month (occasionally.....3

About once a month.....4

Weekends OR once or twice a week.....5

3 or more times a week BUT not every day.....6

Every day.....7

PAQ: Si HDV\_Q11A = 1: Passer à VIC\_Q1A (en passant par VIC\_I1)

PAQ: Si HDV\_Q11A = 2,3,4,5,6,7: Passer à HDV\_Q12A

**During the past 12 months, have you...**

- HDV\_Q12A Bought lottery tickets (such as 6/49® or Banco™)?
- HDV\_Q12B Played Mise-O-Jeu®?
- HDV\_Q12C Bought scratch tickets?
- HDV\_Q12D Played bingo for money?
- HDV\_Q12E Gambled online (on the internet)?
- HDV\_Q12F Played on video lottery terminals (VLTs) BUT NOT in a casino?
- HDV\_Q12G Played card games for money?
- HDV\_Q12H Bet money on sports events (other than with Mise-O-Jeu®)?
- HDV\_Q12J Bet money on games of skill (such as when you were playing pool, basketball, etc.)?
- HDV\_Q12K Played dice games for money?
- HDV\_Q12L Bet money on games other than those mentioned before?

- Never.....1
- Just once to try.....2
- Less than once a month (occasionally).....3
- About once a month.....4
- Weekends OR once or twice a week.....5
- 3 or more times a week BUT not every day.....6
- Every day.....7

**TABLEAU**

Validation interne : Si HDV\_Q12A à HDV\_Q12L = 1 et que HDV\_Q11B (précédente) = différent de 1 : afficher le message d'erreur :

**Attention** : Tu as indiqué à la question précédente que tu avais joué à des jeux d'argent au cours des 12 derniers mois, mais tu as indiqué « jamais » à tous les types de jeux indiqués dans le tableau. Clique sur Précédent pour corriger ta réponse.

The following questions are about situations you may have experienced related to gambling.

**During the past 12 months, did the following situations happen to you?**

- HDV\_Q15A You have thought about gambling or betting for money or planned the next time you could play.
- HDV\_Q15B You have felt the need to spend more and more money when you are gambling or betting in order to feel the same level of excitement.
- HDV\_Q15C You have become frustrated or angry when you tried to reduce or stop your gambling or betting.
- HDV\_Q15D After losing money at gambling, you have played the days that followed in order to gain back the lost money.
- HDV\_Q15E You have lied to family or friends to hide the frequency of your gambling or betting.

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www.teljeunes.com  
1 800 263-2266

HDV_Q15F	You have spent money for your school lunch or for your bus or metro tickets on gambling or betting.
HDV_Q15G	You have taken money without permission from someone you live with in order to gamble or bet.
HDV_Q15H	You have stolen money from people who are not family or have you shoplifted to participate in gambling or betting
HDV_Q15I	You have argued with family or close friends over your gambling or betting.
HDV_Q15J	You have asked for help from someone in order to face up to financial worries caused by your gambling or betting.
	Yes.....1
	No.....2

#### TABLEAU

## Section 10 Victimization

VIC\_I1 **About the young people around you...**

Social relations are not always easy. We would like to know more about what you are experiencing.

**Since the beginning of this school year, how many times did the following situation happen to you at school?**

- VIC\_Q1A Someone called me names, insulted me or said mean things to me.  
VIC\_Q2 Someone didn't let me be part of his or her group when I wanted to.  
VIC\_Q3A Someone pushed, shoved, hit or kicked me.  
VIC\_Q4 Someone said bad things behind my back to other students.  
VIC\_Q5A Someone made fun of me, laughed at me.  
VIC\_Q6 I was «taxed» by other students (someone made me pay them or give them something so they would leave me alone).

Never.....1  
Rarely (once or twice).....2  
Often (about once a week on average).....3  
Very often (more than once a week on average).....4

### TABLEAU

---

VIC\_Q7 **Since the beginning of this school year, at school, how many times...**

I was a victim of cyber-bullying (insults, threats, intimidation, etc.) on the internet or by cellphone (perpetrated by other students).

Never ..... 1  
Once ..... 2  
A few times..... 3  
Often. .... 4  
Very often..... 5

PAQ: Si VIC\_Q7 = 1 : Passer à GAN\_Q1  
PAQ: Si VIC\_Q7 = 2 à 5 : Passer à VIC\_7A

VIC\_Q7A I was a victim of cyberbullying by internet or cellphone that originated from:

Mark all the appropriate responses.

Students at my school.....1  
Other young people who don't go to my school.....2  
I never knew by whom.....3  
Other ↓ Specify.....4

Ouvrir une boîte si « Other » est sélectionné

Choix multiples

---

VIC\_Q12 **Since the beginning of this school year, at school, when you had cyber-bullying exchanges, did you tend to initiate the bullying or react to the bullying?**

Generally initiate.....1  
More often initiate.....2  
About equal.....3  
More often react.....4  
Generally react.....5



## Section 11 Involvement in street gangs

### Regarding your group of friends...

The following questions are about your group of friends and the things they do.

GAN\_Q1 **Some people have a certain group of friends that they spend time with, doing things together or just hanging out. Do you have a group of friends like that?**

Yes.....1

No.....2

PAQ : Si GAN\_Q1 = 2, passer à RPA\_Q1

PAQ : Si GAN\_Q1 = 1, passer à GAN\_Q2

---

GAN\_Q2 **Does this group spend a lot of time together in public places like the park, the street, shopping areas, or the neighbourhood?**

Yes.....1

No.....2

---

GAN\_Q3 **How long has this group existed?**

Less than 3 months .....1

Between three months to a year .....2

1 to 4 years .....3

5 to 10 years .....4

11 to 20 years .....5

More than 20 years.....6

---

GAN\_Q4 **Is doing illegal things (against the law) accepted by or okay for your group?**

Yes.....1

No.....2

---

GAN\_Q5 **Do people in your group actually do illegal things (against the law) together?**

Yes.....1

No.....2

---

GAN\_Q6 **Do you consider your group of friends to be a gang?**

Yes.....1

No.....2

## Section 12 Relationship with parents

About your relationship with your parents...

RPA\_Q1 **Think about the mother (biological mother, step-mother, or other) whom you spend the most time with. Overall, how would you describe your relationship with her?**

Very close.....1  
Somewhat close.....2  
Not very close.....3  
I'm not in touch with my mother.....4

---

RPA\_Q2 - **Think about the father (biological father, step-father, or other) whom you spend the most time with. Overall, how would you describe your relationship with him?**

Very close.....1  
Somewhat close.....2  
Not very close.....3  
I'm not in touch with my father.....4

---

RPA\_I3 For each of the following statements, pick the answer that best describes the way your parent(s) (or step-parent(s), foster parent(s) or guardian(s)) in general have acted toward you in the past 6 months.

Answer these questions thinking of the father and the mother you indicated in previous questions.

**In the past 6 months, my parent/my father/my mother...**

RPA\_Q3A want to know exactly where I am and what I am doing.  
RPA\_Q3B let me go out any evening I want.  
RPA\_Q3C listen to my ideas and opinions.  
RPA\_Q3D and me solve a problem together whenever we disagree about something.  
RPA\_Q3E get angry and yell at me.  
RPA\_Q3F make sure I know I am appreciated.  
RPA\_Q3G hit me or threaten to do so.  
RPA\_Q3H find out about my misbehaviour.  
RPA\_Q3I seem too busy to spend as much time with me as I'd like.  
RPA\_Q3J grab firmly or shake me.

Never.....1  
Rarely.....2  
Sometimes.....3  
Often .....4  
Always .....5

TABLEAU

RPA\_I4      **Your parents, school and you...**

**We would like to know your opinion about your parents' involvement in your studies at home and at school. Choose the answer that best corresponds to what has happened since September 2012.**

**Since last September, how many times did one of your parents do the following:**

- RPA\_Q4A      Help me figure out my homework when I don't understand.
- RPA\_Q4B      Encourage me to do better when I receive a bad mark in school.
- RPA\_Q4C      Help me with my homework when I ask for help.
- RPA\_Q4D      Give me praise for what I do (for example: scores at exams, homework, etc.).
- RPA\_Q4E      Give me encouragement about school.
- RPA\_Q4F      Talk with me about courses I can take next year.
- RPA\_Q4G      Help me schedule my activities (work, homework, house chores, etc.).
- RPA\_Q4H      Ask me about school (assignments, tests, activities, friends, teachers, etc.).
- RPA\_Q4I      Ask me if I did my homework.
- RPA\_Q4J      Ask me about my grades.

- Never ..... 1
- Sometimes ..... 2
- Often ..... 3
- Very Often ..... 4

#### TABLEAU

RPA\_Q5      **Since last September, how many times has one of your parents attended activities that you participate in at school (sports, plays, music concerts, etc.)?**

- Never ..... 0
- Once ..... 1
- Twice ..... 2
- 3 times ..... 3
- 4 times ..... 4
- 5 times ..... 5
- 6 times ..... 6
- 7 times ..... 7
- 8 times ..... 8
- 9 times ..... 9
- 10 or more times ..... 10

MENU DÉROULANT Aucune fois à 10 fois et plus

## Section 13 At-risk sexual behaviours

About your romantic/intimate relationships...

CSR\_Q1 Do you currently have a boyfriend or girlfriend?

Yes.....1

No.....2

PAQ : Si CSR\_Q1 = 2, passer à CSR\_Q2A

PAQ : Si CSR\_Q1 = 1, passer à CSR\_Q2

---

CSR\_Q2 How old is your boyfriend/girlfriend (in years)?

Answer : \_\_\_\_\_ years

Réponse ouverte : nombre entier seulement.

Bornes : Min = 2 Max = 98

PAQ : passer à la question CSR\_Q2A

---

CSR\_Q2A Regarding your attraction and sexual desires, would you say that you are mostly attracted by...

The opposite sex..... 1

Both sexes..... 2

Same sex as you..... 3

No attraction..... 4

---

Variable previous : si CSRQ3DPRV= 1, Passer à CSR\_Q6

Variable previous : si CSRQ3DPRV= 0, Passer à CSR\_Q3DA

---

CSR\_Q3DA Have you ever had sexual intercourse (sexual encounter with penetration)?

Yes.....1

No.....2

---

PAQ : Si CSR\_Q3DA = 2, passer à VRA\_Q1

PAQ : Si CSR\_Q3DA = 1, passer à CSR\_Q4

---

CSR\_Q4 How old were you when you first had sexual intercourse?

Answer : \_\_\_\_\_ years

Réponse ouverte : nombre entier seulement.

Bornes : Min = 2 Max = 15

CSR\_Q5      **How old was the person with whom you first had sexual intercourse?**

Answer : \_\_\_\_\_ years

Réponse ouverte : nombre entier seulement.

Bornes : Min = 2 Max = 98

---

CSR\_Q6      **During the past 12 months, did you have complete sexual intercourse (with penetration)?**

Never ..... 1  
Just once to try ..... 2  
Less than once a month (occasionally) ..... 3  
About once a month ..... 4  
Weekends OR once or twice a week ..... 5  
3 or more times a week BUT not every day ..... 6  
Every day ..... 7

PAQ : Si CSR\_Q6 = 1, passer à CSR\_Q9

---

CSR\_Q6A      **During the past 12 months, did you have complete sexual intercourse (with penetration) with someone from the opposite sex?**

Never ..... 1  
Just once to try ..... 2  
Less than once a month (occasionally) ..... 3  
About once a month ..... 4  
Weekends OR once or twice a week ..... 5  
3 or more times a week BUT not every day ..... 6  
Every day ..... 7

---

CSR\_Q7      **Overt he past 12 months, with how many different people did you have complete sexual intercourse (with penetration)?**

1 person ..... 1  
2 people ..... 2  
3 people ..... 3  
4 people ..... 4  
5 people ..... 5  
6 people ..... 6  
7 people or more ..... 7

---

CSR\_Q8      **How often do you use contraception (pill, intrauterine device, condom, etc.)**

Always ..... 1  
Often ..... 2  
Occasionnaly ..... 3  
Never ..... 4

---

CSR\_Q9      **Have your sexual relations led to a pregnancy?**

Yes ..... 1  
No ..... 2  
I don't know ..... 3

## Section 14      Violence in romantic/intimate relationships

### VRA\_I1

Filtre : CSR\_Q1=2 ou CSR\_Q1=9 passer à VRA\_Q1

PAQ : si CSR\_Q1=1, passer à VRA\_Q2 (en passant par VRA\_I2)

The next few questions refer to the **past 12 months**.

VRA\_Q1      **Did you have at least one boyfriend or girlfriend in the past 12 months?**

Yes.....1

No .....2

PAQ : si VRA\_Q1=1, passer à VRA\_Q2 (en passant par VRA\_I2)

PAQ : si VRA\_Q1=2, passer à APL\_Q1 (section suivante)

VRA\_I2      **The next two series of questions are similarly formulated. The first series covers what you might have done and the second on what you might have endured.**

Choose your answer thinking of the boyfriends or girlfriends you had during the past 12 months. Indicate for each of the following statements how you would describe relations with him/her by choosing Never true, Sometimes true or Often true.

VRA\_Q2      I criticized him/her viciously about his/her appearance; I insulted him/her in front of people; I put him/her down.

VRA\_Q3      I controlled his/her outings, email or cell phone conversations; I prevented him/her from seeing his/her friends.

VRA\_Q4      I forced him/her to kiss or caress me when he/she didn't want to.

VRA\_Q5      I threw something at him/her which could have hurt him/her.

VRA\_Q6      I grabbed him/her (held him/her by the arms); I pushed him/her around; I shook him/her.

VRA\_Q7      I slapped him/her.

VRA\_Q8      I used my fists or feet, an object or a weapon to hurt him/her.

VRA\_Q9      I forced him/her to have sexual contact or sexual intercourse with me when he/she didn't want to.

Never true.....1

Sometimes true .....2

Often true .....3

TABLEAU

Choose your answer thinking of the boyfriends or girlfriends you had during the past 12 months. Indicate for each of the following statements how you would describe relations with him/her by choosing Never true, Sometimes true, Often true.

- VRA\_Q10 He/she viciously criticized my physical appearance; he/she insulted me in front of people; he/she put me down.
- VRA\_Q11 He/she controlled my outings, my email or cell phone conversations; he/she prevented me from seeing my friends.
- VRA\_Q12 He/she forced me to kiss or caress him/her when I didn't want to.
- VRA\_Q13 He/she threw something at me which could have hurt me.
- VRA\_Q14 He/she grabbed me (held me by the arms); he/she pushed me around; he/she shook me.
- VRA\_Q15 He/she slapped me.
- VRA\_Q16 He/she used his/her fists or feet, an object or a weapon to hurt me.
- VRA\_Q17 He/she forced me to have sexual contact or sexual intercourse when I didn't want to.

Never true.....1  
Sometimes true .....2  
Often true .....3

TABLEAU

## Section 15 Physical activity and Leisure activities

### APL\_I1 About your activities...

The next few questions are on your physical activities at school and in your free time.

The following questions are about your physical activities during your leisure time at school, at home, or elsewhere. These can be organized or non-organized activities. For example, you can do a sports activity, do outdoor activities, exercise, dance or simply go for a walk. These activities do not include your physical education classes nor going to and from school, work, or a store, etc.

---

#### APL\_Q7A During your leisure time, do you do one (or more) physical activities?

Yes.....1

No .....2

PAQ : si APL\_Q7A=1, passer à APL\_Q7C

PAQ : si APL\_Q7A=2, passer à APL\_Q8 (en passant par APL\_I8)

---

#### PL\_Q7C During your leisure time, how many days a week do usually you do physical activities?

**These activities do not include your physical education classes or going to and from school, work, or a store, etc.**

Less than one 1 day a week ..... 8

1 day a week ..... 1

2 days a week ..... 2

3 days a week ..... 3

4 days a week ..... 4

5 days a week ..... 5

6 days a week ..... 6

7 days a week ..... 7

PAQ : Si APL\_Q7C = 8 : passer à APL\_Q8 (en passant par APL\_I8)

PAQ : Si APL\_Q7C = différent de 8 : Passer à APL\_Q7DA

---

#### APL\_Q7DA In general, on a typical day, how much time do you spend doing these physical activities?

Less than 10 minutes .....1

10 to 19 minutes.....2

20 to 39 minutes.....3

40 to 59 minutes.....4

1h00 to 1h29.....5

1h30 to 1h59.....6

2h00 or more .....7

---

#### APL\_Q7E When you do physical activities, your level of physical efforts is usually:

Very low (Your breathing and heart rate **don't change much**) ..... 1

Low (Your breathing and heart rate are **slightly faster**)..... 2

Medium (Your breathing and heart rate are **moderately faster**) ..... 3

High (Your breathing and heart rate are **much faster**)..... 4



APL\_I8      **The following questions are about the past 3 months.**

---

APL\_Q8      **During the past 3 months, ...**

**In a typical week, how much time did you usually spend on a computer (including on the internet, playing games, doing homework or research for school, or chatting)?**

**Do not include time spent on computer at school.**

- None .....1
- Less than 1 hour a week .....2
- 1 to 2 hours a week .....3
- 3 to 5 hours a week .....4
- 6 to 10 hours a week .....5
- 11 to 14 hours a week .....6
- 15 to 20 hours a week .....7
- More than 20 hours a week.....8

PAQ: si APL\_Q8 = 2 à 8, passer à APL\_Q8A

PAQ: si APL\_Q8 = 1, passer à APL\_Q9

---

APL\_Q8A      **During the past 3 months, ...**

**In a typical week, when you spent time on computer, how much time did you usually spend on the internet (playing games, doing research for school, chatting or being on Facebook)?**

**Do not include time spent on computer at school.**

- None .....1
- Less than 1 hour a week .....2
- 1 to 2 hours a week .....3
- 3 to 5 hours a week .....4
- 6 to 10 hours a week .....5
- 11 to 14 hours a week .....6
- 15 to 20 hours a week .....7
- More than 20 hours a week.....8

Validation interne : Vérifier que la réponse donnée en APL\_Q8A est égale ou inférieur à APL\_Q8. Sinon, mettre un message d'erreur suivant : The time spent browsing the internet cannot be longer than the time spent on the computer.

APL\_Q9      **During the past 3 months, ...**

**In a typical week, how much time did you usually spend playing Xbox, Nintendo DS, Wii and PlayStation (games not on a regular computer)?**

None .....1  
Less than 1 hour a week .....2  
1 to 2 hours a week .....3  
3 to 5 hours a week .....4  
6 to 10 hours a week .....5  
11 to 14 hours a week .....6  
15 to 20 hours a week .....7  
More than 20 hours a week.....8

---

APL\_Q10      **During the past 3 months, ...**

**In a typical week, how much time did you usually spend watching television or videos/DVDs?**

None .....1  
Less than 1 hour a week .....2  
1 to 2 hours a week .....3  
3 to 5 hours a week .....4  
6 to 10 hours a week .....5  
11 to 14 hours a week .....6  
15 to 20 hours a week .....7  
More than 20 hours a week.....8

---

APL\_Q11A      **During the past 3 months, ...**

**In a typical week, how much time did you usually spend reading, not counting during class time?**

**Include books, magazines, newspapers, reading time on the computer or the Internet.**

None .....1  
Less than 1 hour a week .....2  
1 to 2 hours a week .....3  
3 to 5 hours a week .....4  
6 to 10 hours a week .....5  
11 to 14 hours a week .....6  
15 to 20 hours a week .....7  
More than 20 hours a week.....8

APL\_Q11B During the past 3 months, ...

In a typical week, how many hours do you usually spend reading for your school work, not counting hours you are in class?

- None .....1
- Less than 1 hour a week .....2
- 1 to 2 hours a week .....3
- 3 to 5 hours a week .....4
- 6 to 10 hours a week .....5
- 11 to 14 hours a week .....6
- 15 to 20 hours a week .....7
- More than 20 hours a week.....8

For consultation only

## Section 16 Work

### TRA\_I1 About work...

The following questions deal with different aspects of work (paid and unpaid), such as the work environment, the job characteristics, the occupational health and safety, and school-work balance.

---

#### TRA\_Q1 Have you worked since last September?

Yes.....1

No .....2

PAQ : SI TRA\_Q1 = 1, passer à TRA\_Q2a

PAQ : SI TRA\_Q1 = 2, passer à TRA\_Q3a

PAQ : si TRA\_Q1 = 9 (NR), passer à TRA\_Q3a

#### TRA\_Q2A Have you worked since last September ... Check off all the boxes that apply.

for an employer (paid).....1

for a family business (paid).....2

for a family business (without pay) .....3

in paid odd jobs such as babysitting, grass  
cutting, snowshovelling, homework assistance, etc.....4

#### TABLEAU

##### Choix multiples

PAQ : si TRA\_Q2a=1 à 4, passer à la question TRA\_Q3a.

PAQ : si TRA\_Q2a=9 (NR), passer à TRA\_Q3a

---

#### TRA\_Q3A Have you worked in the last month?

Yes.....1

No .....2

PAQ : SI TRA\_Q3a = 1, passer à TRA\_Q4

PAQ : si TRA\_Q3a = 2 ET TRA\_Q1 =1, passer à Q8a- Sphère ne travaille pas\_au cours du dernier mois

PAQ : si TRA\_Q3a = 2 ET TRA\_Q1 =9, passer à Q8a- Sphère ne travaille pas\_au cours du dernier mois

PAQ : si TRA\_Q3a = 2 ET TRA\_Q1 =2, passer à Q7a -Sphère ne travaille pas \_depuis septembre

PAQ : Si TRA\_Q3a = 9 (NR), passer à HLT\_Q1 (en passant par HLT\_I1)-sort de la section du travail

TRA\_Q4 **Have you worked in the last month ...**  
**Check off all the boxes that apply.**

for an employer (paid).....1  
for a family business (paid).....2  
for a family business (without pay) .....3  
in paid odd jobs such as babysitting, grass  
cutting, snowshovelling, homework assistance, etc.....4

**TABLEAU**

Choix multiples

PAQ : si TRA\_Q4=1 à 4, passer à la question TRA\_Q5H

Validation interne : si TRA\_Q4=9 (NR), afficher message d'erreur : Tu as indiqué précédemment que tu as travaillé au cours du dernier mois, mais tu n'as rien coché à la dernière question concernant ton type d'emploi. Clique sur précédent pour corriger ta réponse ou suivant pour continuer.

PAQ : si le jeune répond toujours rien TRA\_Q4=9, passer à TRA\_Q5

TRA\_Q5H **Taking into consideration all the paid and unpaid jobs you have had in the last month, how many hours per week do you work on average?**

**Round off to the nearest 15 minutes.** (For example: if you worked 10 hours per week, write "10" hours and "0" minutes. If you worked 45 minutes per week, write "0" hours and "45" minutes).

\_\_\_\_\_ hours and \_\_\_\_\_ minutes per week

MENU DÉROULANT : 0 à 25 pour les heures et 0 – 15 – 30 – 45 pour les minutes

Validation: 0 heures ET 0 minutes n'est pas valide

TRA\_Q6A **Taking into consideration all the paid and unpaid jobs you have had in the last month, when do you usually work?**

**Check off all the boxes that apply.**

	Very early in the morning (between 5:00 and 8:59 a.m.)	During the day (between 9:00 and 3:59 p.m.)	In the evening (between 4:00 and 10:59 p.m.)	Late at night (between 11:00 p.m. and 4:59 am)	Do not work
	1	2	3	4	5
a) on weekdays					
b) on the weekend					

**TABLEAU**

Choix multiples

PAQ : Si non réponse à toutes les questions depuis TRA\_Q4 : passer à HLT\_Q1 (en passant par HLT\_I1)

PAQ : Si non réponse à TRA\_Q3a=9, passer à HLT\_Q1 (en passant par HLT\_I1)

Il faut coder chaque choix de réponses comme des variables binaires (on aura un total de 10 variables ici : a1, a2, ....b5. ex : TRA\_Q6a1 peut être 0 ou 1

**Déterminer la sphère de travail**

**Les PAQ sont affichés selon la priorité de réponse si plus d'un choix est coché à TRA\_Q4**

1-PAQ : Si TRA\_Q4 = 1 ou 2, passer à TRA\_Q18 (Sphère\_Emploi rémunéré\_Employeur ou Entreprise familiale)

2-PAQ : Si TRA\_Q4 = 3, passer à TRA\_Q36 (Sphère\_travail\_entreprise familiale sans rémunération)

3-PAQ : Si TRA\_Q4 = 4, passer à TRA\_Q9 (Sphère\_petits travaux rémunérés)

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## Work sphere\_not working since september

Filtre : Si TRA\_Q3A = 2 ET TRA\_Q1 =2

TRA\_Q7a **Why have you not been working since September?**  
**Check off all the boxes that apply.**

- Because I want to spend more time on my studies..... 1
- Because I want to spend more time on my pastimes/hobbies. .... 2
- Because my parents don't want me to work..... 3
- Because I haven't found a job..... 4
- Because I don't need more money..... 5
- Because I'm not interested in working during the school year. .... 6
- I'm not working now, but I'm seriously thinking about it for next school year..... 7
- Other...↓ please explain : ..... 8

Ouvrir une boîte si « Other » est sélectionné.

Choix multiples

---

TRA\_Q7b **If you had been offered a job since September, would you have accepted?**

- Yes..... 1
- No ..... 2
- I don't know..... 3

Passer à HLT\_Q1 (en passant par HLT\_I1)

Fin de la section\_Sphère Ne travaille pas\_depuis septembre

## Work sphere\_not working for the last month

Filtre : Si (TRA\_Q3A = 2) ET (TRA\_Q1 =1 ou 9)

TRA\_Q8A **Why have you not been working for the last month?**  
**Check off all the boxes that apply.**

- Because I want to spend more time on my studies. .... 1
- Because I want to spend more time on my pastimes/hobbies. .... 2
- Because my parents don't want me to work. .... 3
- Because I haven't found a job..... 4
- Because I don't need more money..... 5
- Because I'm not interested in working during the school year. .... 6
- I'm not working now, but I'm seriously thinking about it for next school year..... 7
- Other...↓ please explain : ..... 8

Ouvrir une boîte si « Other » est sélectionné

Choix multiples

---

TRA\_Q8B **If you had been offered a job during the last month, would you have accepted?**

- Yes..... 1
- No ..... 2
- I don't know..... 3

Si (TRA\_Q3A = 2) ET (TRA\_Q1 = 9) passer à la question TRA\_Q8c

Si (TRA\_Q3A = 2) ET (TRA\_Q1 = 1) passer à la question TRA\_Q8e

---

TRA\_Q8e **You mentioned having worked since last September. Indicate why you decided to do odd jobs for money.**

**Check off all the boxes that apply.**

- To pay for things that I want. .... 1
- To have something to do in my free time. .... 2
- To give me something else to think about other than school..... 3
- To save up money for later on..... 4
- To help my parents..... 5
- Because my parents encouraged me to work. .... 6
- To be more independent from my parents ..... 7
- To become more responsible. .... 8
- To learn new things. .... 9
- To gain work experience. .... 10
- Other.↓ please explain: ..... 11

Ouvrir une boîte si « Other » est sélectionné

Choix multiples

TABLEAU



TRA\_Q8F **Have you ever “come close” to being injured while working since September?**

Yes.....1

No .....2

PAQ :Si TRA\_Q8f=1 et TRA\_Q2a=plus que 1 choix de réponse, passer à la question TRA\_Q8fa.

PAQ :Si TRA\_Q8f=1 et TRA\_Q2a=1 choix de réponse, passer à la question TRA\_Q8g

PAQ :Si TRA\_Q8f=2 ou 9, passer à la question TRA\_Q8g

---

TRA\_Q8FA **In what type of work have you “come close” to being injured?**

**Check off all the boxes that apply.**

for an employer (paid).....1

for a family business (paid).....2

for a family business (without pay) .....3

in paid odd jobs such as babysitting, grass  
cutting, snowshovelling, homework assistance, etc.....4

Cette question s’affiche lorsque plus de 1 choix de réponse ont été choisies à la question TRA\_Q2a

---

TRA\_Q8G **Since last September, have you ever been injured while working?**

Yes.....1

No .....2

PAQ :Si TRA\_Q8g=1 et TRA\_Q2a=plus que 1 choix de réponse, passer à la question TRA\_Q8ga

PAQ :Si TRA\_Q8g=1 et TRA\_Q2a=1 choix de réponse, passer à la question TRA\_Q8h

PAQ :Si TRA\_Q8g=2 ou 9, passer à la question TRA\_Q8c

---

TRA\_Q8ga **In what type of work have you been injured?**

**Check off all the boxes that apply.**

for an employer (paid).....1

for a family business (paid).....2

for a family business (without pay) .....3

in paid odd jobs such as babysitting, grass  
cutting, snowshovelling, homework assistance, etc.....4

Cette question s’affiche lorsque plus de 1 choix de réponse ont été choisies à la question TRA\_Q2a

---

TRA\_Q8H **If we ever need more information about how you injured yourself, can we contact you? Your answers will be kept strictly confidential.**

Yes.....1

No .....2

TRA\_Q8c **Have you ever read or heard about occupational health and safety at work (prevention of work accidents and injuries)?**

Yes.....1

No .....2

PAQ :Si TRA\_Q8c=1, passer à la question TRA\_Q8d

PAQ :Si TRA\_Q8c=2 ou 9, sortie de la section

---

TRA\_Q8d **Where did you get the information from?**

**Check off all the boxes that apply.**

Employer..... 1

Escouade jeunesse..... .2

Television..... 3

Job training..... .4

Co-workers..... .5

My parents..... 6

School ..... 7

Défi prévention jeunesse..... 8

Internet..... 9

Magazines..... 10

Friends ..... 11

Other ↓ please explain : ..... 12

Ouvrir une boîte si « Other » est sélectionné

Choix multiples

Passer à HLT\_Q1 (section santé)

---

Fin de la section\_Sphère Ne travaille pas\_au cours du dernier mois

## Work sphere\_paid odd jobs

Filtre : si TRA\_Q4 = 4

TRA\_Q9 **During the last month, what type of odd jobs have you had?**

**Check off all the boxes that apply.**

- Baby sitting .....1  
Yard maintenance (shovelling, grass cutting, weeding, gardening, etc.).....2  
Housekeeping .....3  
Animal care .....4  
House watching for absent owners (bring in the mail, water plants, etc.) .....5  
Homework assistance.....6  
Other ↓ please explain : .....7

Ouvrir une boîte si « Other » est sélectionné

TABLEAU

Choix multiples

---

TRA\_Q12 **How old were you when you first started doing paid odd jobs ?**

\_\_\_\_\_ years old

MENU DÉROULANT : 10 à 15 pour les ans

---

TRA\_Q13A **Have you ever “come close” to being injured doing these odd jobs?**

Yes.....1

No .....2

---

TRA\_Q13B **Have you ever been injured doing these odd jobs?**

Yes.....1

No .....2

PAQ : si TRA\_Q13B=1, passer à TRA\_Q14A

PAQ : si TRA\_Q13B=2, passer à TRA\_Q15

PAQ : si TRA\_Q13B=9, passer à TRA\_Q15

TRA\_Q14A In the last accident you had doing these odd jobs, what type of injury did you get?  
If you had more than one injury in the last accident, indicate the most serious one.

Cut .....	1
Burn .....	2
Sprain .....	3
Fracture .....	4
Back injury .....	5
Bruise .....	6
Other ↓ specify the type of injury: .....	7

Ouvrir une boîte si « Other » est sélectionné

For consultation only

TRA\_Q14B **What part(s) of your body was (were) injured?**

**Check off all the boxes that apply.**

Head..... 1  
Face, eyes ..... 2  
Trunk..... 3  
Back ..... 4  
Arm, elbow, shoulder ..... 5  
Hand, fingers..... 6  
Leg ..... 7  
Ankle, feet..... 8  
Other(s) ↓ Specify the body part(s) that was (were) injured :..... 9

Ouvrir une boîte si « Other » est sélectionné

Choix multiples

---

TRA\_Q14C **Describe how the accident happened ?**

**One Saturday night, when I was going to a neighbour's place to baby-sit her children, I slipped and fell on some ice- and snow-covered stairs.**

---

TRA\_Q14E **After the accident, did you...**

**Check off all the boxes that apply**

receive any treatment from a family member or person that you know?..... 1  
consult a health professional (doctor, nurse) in a clinic or hospital? ..... 2  
miss at least one day of school?..... 3  
None of the above..... 4

Choix multiples

---

TRA\_Q14F **For how many days after this accident did you feel pain or stiffness in your daily activities?**

No pain or stiffness..... 1  
1 day or less ..... 2  
Between 2 and 5 days..... 3  
Between 6 and 10 days..... 4  
More than 10 days..... 5

---

TRA\_Q14G **If we ever need more information about how you injured yourself, can we contact you? Your answers will be kept strictly confidential.**

Yes..... 1  
No ..... 2

TRA\_Q15 After doing odd jobs for money, how often do you generally feel pain or muscular stiffness...

	Never	From time to time	Often	All the time
	1	2	3	4
a) in your back?				
b) in your neck ?				
c) in your legs or feet?				
d) in your shoulders?				
e) in your elbows, wrists, hands?				

TABLEAU

TRA\_Q16 Do you feel more tired since you've been doing odd jobs for money?

Yes.....1

No .....2

TRA\_Q17 Indicate why you decided to do odd jobs for money.

Check off all the boxes that apply.

- To pay for things that I want.....1
- To have something to do in my free time.....2
- To give me something else to think about other than school. ....3
- To save up money for later on.....4
- To help my parents. ....5
- Because my parents encouraged me to work. ....6
- To be more independent from my parents. ....7
- To become more responsible. ....8
- To learn new things. ....9
- To gain work experience.....10
- Other ↓ please explain: .....11

Ouvrir une boîte si « Other » est sélectionné

Choix multiples

TABLEAU

TRA\_Q17A Have you ever read or heard about occupational health and safety at work (prevention of work accidents and injuries)?

Yes.....1

No .....2

PAQ :Si TRA\_Q17A=1, passer à la question TRA\_Q17B

PAQ :Si TRA\_Q17A=2 ou 9, sortie de la section

TRA\_Q17B **Where did you get the information from?**

**Check off all the boxes that apply.**

Employer..... 1  
Escouade jeunesse..... 2  
Television..... 3  
Job training ..... 4  
Co-workers..... 5  
My parents..... 6  
School ..... 7  
Défi prévention jeunesse..... 8  
Internet..... 9  
Magazines..... 10  
Friends ..... 11  
Other ↓ please explain : ..... 12

Ouvrir une boîte si « Other » est sélectionné

Choix multiples

Fin de la section : Sphère Travail\_Entreprise familiale sans rémunération

## Work sphere \_paid work\_employer or family business

Filtre : Si TRA\_Q4 = 1 ou 2

TRA\_Q18 **During the last month, have you had more than one paying job (for an employer or the family business)?**

Yes.....1

No .....2

PAQ : Si TRA\_Q18=1, passer à TRA\_Q18a (en passant par TRA\_I2)

PAQ : Si TRA\_Q18=2, passer à TRA\_Q18a

---

TRA\_I2

**When you answer the following questions, please tell us about the paying job (for an employer or the family business) where you worked the most in the last month.**

---

TRA\_Q18A **In what type of business have you been working in the last month?**

- Restaurant, catering services.....1
- Convenience store .....2
- Gas station .....3
- Day camp or holiday camp.....4
- Retail stores (clothing store, hardware shop, etc.).....5
- Grocery store .....6
- Hotel .....7
- Sporting complexes (gym, arena, pool, etc.) .....8
- Health institutions (hospital, clinic, etc.) .....9
- Factory .....10
- Farm.....11
- Landscaping .....12
- Other ↓ Specify the type of business: .....13

Ouvrir une boîte si « Other » est sélectionné

---

TRA\_Q18B **Around how many people work for the company or organization that you've been working for in the last month?**

- I'm the only employee ..... 1
- Between 2 and 20 ..... 2
- Between 21 and 50 ..... 3
- Between 51 and 199 ..... 4
- Between 200 and 499 ..... 5
- 500 or more ..... 6



TRA\_Q18C **What kind of paid work have you been doing in the last month?**

Newspaper delivery .....	1
Work on a farm or in the field of agriculture .....	2
Coach, sports monitor, lifeguard .....	3
Referee .....	4
Group leader, instructor, monitor .....	5
Dishwasher in a restaurant .....	6
Cook or assistant cook .....	7
Waitress .....	8
Packer .....	9
Cashier .....	10
Gas station attendant .....	11
Salesperson .....	12
Receptionist .....	13
Security guard .....	14
Worker, day labourer, mechanic .....	15
Other ↓ Specify the type of paid work : .....	16

Ouvrir une boîte si « Other » est sélectionné

TRA\_Q18D **What type of tasks do you usually do in this job?**

**Check off all the boxes that apply.**

Clean tidy up (tools, floor, counters, rooms, etc.) .....	1
Wash dishes .....	2
Sell and give advice about products .....	3
Work at the cash register .....	4
Wait on tables, work at counter .....	5
Put items on the shelves, in fridges, or in warehouse .....	6
Wrap, pack .....	7
Deliver .....	8
Prepare food (cook, cut, bag, etc.) .....	9
Put together and manufacture objects .....	10
Watch over or take care of people .....	11
Run socio-cultural and sports activities, give courses .....	12
Do clerical work (answer the phone, provide information, file documents, enter data, etc.) .....	13
Drive vehicles (tractor, ATVs, etc.) .....	14
Repair and do maintenance on equipment, tools, bikes, etc. ....	15
Welcome, inform, and guide clients. ....	16
Others Other ↓ Specify the type of tasks : .....	17

TABLEAU

Choix multiples

TRA\_Q19 **For how long have you had this job?**

Indicate the number of years and months. If you started less than a year ago, choose "0" and the appropriate number of months, e.g., "0" years and "6" months.

\_\_\_\_\_ Year(s) \_\_\_\_\_ month(s)

MENU DÉROULANT :

0 à « 5 années et plus » pour les années

moins de 1 mois, 0 - 11 pour les mois

Validation : le choix 0 an ET 0 mois n'est pas valide

---

**Ce filtre devrait s'appliquer seulement s'il ya un seul choix coché à la Q4 si plus de 1 choix coché, il faudrait passer par la 20**

**FILTRE : SI PAQ :** Si TRA\_Q18=1 ou 9, passer à TRA\_Q20 puis à TRA\_q21A et TRA\_Q21B et Tra\_q22 et 34A

PAQ : Si TRA\_Q18=2, passer à TRA\_Q21A (21B), et 34A (ne fait pas 20 ni 22)

---

TRA\_Q20 **During the last month, how many hours have you worked on average per week doing this job?**

Round off to the nearest 15 minutes (For example: if you worked 10 hours per week, write "10" hours and "0" minutes. If you worked 45 minutes per week, write "0" hours and "45" minutes).

h)\_\_\_\_\_ hour(s) and m)\_\_\_\_\_ minute(s) per week

Inclure un menu déroulant

MENU DÉROULANT : 0 à « 25 heures et plus » et 0, 15, 30, 45 minutes

Validation: 0 heure ET 0 minute n'est pas valide

---

TRA\_Q21A **When you found this job, did your employer require that you work a minimal number of hours per week before hiring you?**

Yes.....1

No .....2

PAQ: si TRA\_Q21A=1, passer à TRA\_Q21B

PAQ : si TRA\_Q21A=2, passer à TRA\_Q22

---

TRA\_Q21B **How many hours per week did he require?**

Round off to the nearest 15 minutes (For example: if you worked 10 hours per week, write "10" hours and "0" minutes. If you worked 45 minutes per week, write "0" hours and "45" minutes).

h)\_\_\_\_\_ hour(s) and m)\_\_\_\_\_ minute(s) per week

Inclure un menu déroulant

0 à 25 heures et plus et 0, 15, 30, 45 minutes

Validation:0 heures ET 0 minutes n'est pas valide

*For consultation only*

TRA\_Q22 When do you usually work at your paid job ?

Check off all the boxes that apply.

	Very early in the morning (between 5:00 a.m. and 8:59 a.m.)	During the day (between 9:00 a.m. and 3:59 p.m.)	In the evening (between 4:00 and 10:59 p.m.)	Late at night (between 11:00 p.m. and 4:59 a.m.)	Do not work
	1	2	3	4	5
a) on weekdays					
b) on the weekend					

Idem à question 11.

Il faut coder chaque choix de réponses comme des variables binaires (on aura un total de 10 variables ici : a1, a2, ....b5. ex : TRA\_Q22a1 peut être 0 ou 1.

TABLEAU

Choix multiples

---

TRA\_Q34A Does your boss ask you to work extra hours?

- Yes, every week ..... 1  
Yes, from time to time ..... 2  
Yes, but rarely ..... 3  
No, never ..... 4

PAQ : si TRA\_Q34A=1 à 3, passer à TRA\_Q34B

PAQ : si TRA\_Q34A=4, passer à TRA\_Q34C

---

TRA\_Q34B Do you usually accept to work overtime/extra hours?

- Yes, it's hard to refuse because my boss would have a hard time finding someone else ..... 1  
Yes, it's hard to refuse because I might lose my job ..... 2  
Yes, I want to work as much as possible to make more money ..... 3  
Yes, I want to work overtime but I don't want to go over a certain number of hours per week .... 4  
Yes, but I can refuse easily ..... 5  
No, I don't work overtime because I want time for other things ..... 6  
Other ↓ Specify : ..... 7

---

TRA\_Q34C Do you ask your boss for more hours?

- Yes, every week ..... 1  
Yes, from time to time ..... 2  
Yes, but rarely ..... 3  
No, never ..... 4

TRA\_Q35 **For each of the following statements, indicate whether or not it corresponds to your situation.**  
**Check off all the boxes that apply.**

- I can easily miss work if I need to.....1
- I can do homework and school assignments at work when I have the time.....2
- I chose the maximum number of hours of work that I will do per week. ....3
- I can go to work on foot (my job is close to our house or my school).....4
- I can arrange things with my workmates to change my work schedule. ....5
- I deliberately limited my work availability in  
order to have free time for myself or time to study. ....6
- I would change jobs or stop working if it impacted on my studies. ....7
- Because of my work hours/I'm working, I sometimes  
ask teachers to adjust a course, exam, or assignment. ....8
- None of the answers describe my situation. ....9

Choix multiples

TABLEAU

---

Filtre : si TRA\_Q4=1 ou 2

TRA\_Q23 **Indicate why you decided to take this paying job.**  
**Check off all the boxes that apply.**

- To pay for things that I want. .... 1
- To have something to do in my free time. .... 2
- To give me a thing else to think about other than school. .... 3
- To save up money for later on..... 4
- To help my parents. .... 5
- Because my parents encouraged me to work. .... 6
- To be more independent from my parents. .... 7
- To become more responsible. .... 8
- To learn new things. .... 9
- To gain work experience. .... 10
- Other ↓ please explain : ..... 11

Ouvrir une boîte si « Other » est sélectionné

Choix multiples

TABLEAU

TRA\_Q24 In your paying job, how often are you exposed to one or another of the following situations:

	Never	Occasion- nally	Often	All the time
	1	2	3	4
a) Working with your hands above your shoulders.				
b) Working with your back bent forward or to one side, or with your back twisted.				
c) Doing repetitive movements with your hands or arms, for example on an assembly line, data entry or at a rhythm imposed by a machine.				
d) Doing precise movements for example grasping an object with the tips of your fingers, lining up a tool or part, controlling very fine movements of your hands.				
e) Doing work that requires forceful exertion when using tools, machines or equipment.				
f) Handling heavy loads without lifting devices, for example lifting or carrying people or heavy objects such as cases or furniture.				
g) Being exposed to vibration from hand tools, that is hand-arm vibration.				
h) Being exposed to vibration from large machines or the floor that is, the whole body vibration.				
i) Driving a vehicle such as ATV, fork lift, tractor.				
j) Inhaling vapors of solvents such as paint strippers, oil paint, thinners, glue, varnish, varsol, turpentine, etc.				
k) Working in an environment where it is so noisy that it is difficult to hold a conversation with someone at one meter from you, even when shouting.				

#### TABLEAU

TRA\_Q25A What is the proportion of work time that you are usually standing up in your paying job?

- Never ..... 1
- Quarter of the time or less ..... 2
- Half of the time..... 3
- Three quarter of the time ..... 4
- All the time ..... 5

PAQ : si TRA\_Q25A = 2 à 5, passer à TRA\_Q25B

PAQ : si TRA\_Q25A = 1, passer à TRA\_Q26

TRA\_Q25B **When you are standing up at your paying job, which of these situations applies most often to your work?**

Standing...

- with the possibility of sitting **when you want to**..... 1  
 with the possibility of sitting **occasionally** ..... 2  
 with **no** possibility of sitting..... 3

TRA\_Q26 **As concerns your paying job, indicate to what extent you agree or disagree with the following statements:**

	Strongly disagree	Disagree	Agree	Strongly agree
	1	2	3	4
a) My job requires that I learn new things.				
b) My job requires a high level of skill.				
c) My job involves a lot of repetitive work.				
d) On my job, I have the freedom to decide how I do my work.				
e) I have a lot of say about what happens on my job.				

**As concerns your paying job, indicate to what extent you agree or disagree with the following statements:**

	Strongly disagree	Disagree	Agree	Strongly agree	Working alone
	1	2	3	4	5
f) People I work with are helpful in getting the job done.					
g) At work, I feel part of a community.					
h) I am exposed to conflict from my co-workers.					

As concerns your paying job, indicate to what extent you agree or disagree with the following statements:

	Strongly disagree	Disagree	Agree	Strongly agree
	1	2	3	4
i) My supervisor is successful in getting people to work together.				
j) My supervisor pays attention to what I am saying.				
k) My supervisor is helpful in getting the job done.				
l) I am exposed to conflict from my supervisor.				
m) My work requires working very fast.				
n) I am asked to do an excessive amount of work.				
o) I have enough time to get the job done.				
p) I receive conflicting demands that others make.				
q) My job requires working very hard				
r) I experienced many interruptions and disturbances in my job.				

TRA\_Q27 **At work, do you experience tense situations in your relations with the general public (clients, customers, users, patients, students, etc.)?**

No, I don't work with general public ..... 1  
 Never ..... 2  
 Occasionally ..... 3  
 Often ..... 4  
 Very often ..... 5

TRA\_Q28A **Have you ever "come close" to being injured while working at this paying job?**

Yes ..... 1  
 No ..... 2

TRA\_Q28B **Have you ever been injured while working at this paying job ?**

Yes ..... 1  
 No ..... 2

PAQ : si TRA\_Q28B=1, passer à TRA\_Q29A

PAQ : si TRA\_Q28B=2 ou 9, passer à TRA\_Q30



TRA\_Q29A In the last accident you had when you were at work, what type of injury did you get?

If you had more than one injury in the last accident, indicate the most serious one.

- Cut ..... 1
- Burn ..... 2
- Sprain ..... 3
- Fracture ..... 4
- Back injury ..... 5
- Bruise ..... 6
- Other ↓ Specify the type of injury : ..... 7

Ouvrir une boîte si « Other » est sélectionné

---

TRA\_Q29B What part(s) of your body was (were) injured?

Check off all the boxes that apply

- Head..... 1
- Face, eyes ..... 2
- Trunk..... 3
- Back ..... 4
- Arm, elbow, shoulder ..... 5
- Hand, fingers..... 6
- Leg ..... 7
- Ankle, feet..... 8
- Other(s) ↓ Specify the body part(s) that was (were) injured: ..... 9

Ouvrir une boîte si « Other » est sélectionné

Choix multiples

---

TRA\_Q29C Describe, as precisely as possible, how the accident happened ?

E.g.: I was working as a day labourer. I was hurrying to finish my work before the end of the day. The accident happened when I was pulling a cart filled with boxes of tomatoes down a poorly lit slope. The cart didn't have a break and there was an unstable load of 3 boxes wide by 10 boxes tall. I was pulling the cart and it started to speed up and ran into my ankle.

Réponse ouverte

---

TRA\_Q29D At the time of this work accident, were you doing a new task or one that you weren't familiar with?

- Yes..... 1
- No ..... 2

TRA\_Q29E **After this accident, did you ...**

**Check all the boxes that apply.**

- receive care from your employer, a supervisor, or another employee? ..... 1
- consult a health professional (nurse, doctor, etc) in a clinic or hospital? ..... 2
- miss at least one day of school? ..... 3
- miss at least one day of work? ..... 4
- fill out an accident declaration form at your employer's request? ..... 5
- none of the above ..... 6

**Choix multiples**

TRA\_Q29F **For how many days after this accident did you feel pain or stiffness in your daily activities?**

- No pain or stiffness .....1
- 1 day or less .....2
- Between 2 and 5 days .....3
- Between 6 and 10 days .....4
- More than 10 days .....5

TRA\_Q29G **If we ever need more information about how you injured yourself, can we contact you? Your answers will be kept strictly confidential.**

- Yes .....1
- No .....2

TRA\_Q30 **After working at this paying job, how often do you generally feel pain or muscular stiffness...**

	Never	From time to time	Often	All the time
	1	2	3	4
a) in your back?				
b) in your neck ?				
c) in your legs or feet?				
d) in your shoulders?				
e) in your elbows, wrists, hands?				

**TABLEAU**

TRA\_Q31 **Do you feel more tired since you've been working at this paying job ?**

- Yes .....1
- No .....2

TRA\_Q32A **Have you ever read or heard about occupational health and safety at work (prevention of work accidents and injuries)?**

Yes.....1

No .....2

PAQ : si TRA\_Q32A=1, passer à TRA\_Q32B

PAQ : si TRA\_Q32A=2 ou 9, passer à Q33A (en passant par TRA\_I3)

---

TRA\_Q32B **Where did you get the information from?**

**N.B.: Check all the boxes that apply.**

Employer or supervisor.....1  
Escouade jeunesse.....2  
Television.....3  
Job training .....4  
Co-workers.....5  
My parents.....6  
School .....7  
Défi prévention jeunesse.....8  
Internet.....9  
Magazines.....10  
Friends .....11  
Other ↓ specify : .....12

Ouvrir une boîte si « Other » est sélectionné  
Choix multiples

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FILTRE VALIDATION INTERNE : SI DCS\_Q16=1 (abandonné l'école) ET DCS\_Q17= plus grand ou égale à 6 (depuis 6 mois et plus), passer à HLT\_Q1 (en passant par HLT\_I1 )

TRA\_I3

**The following questions deal with school-work balance. Remember that there are no right or wrong answers and that no one at your house or school will see your answers.**

TRA\_Q33A **Is working at a paying job during the school year more important, as important, or less important than your school?**

More important .....1  
As important .....2  
Less important .....3

TRA\_Q33B Does having a paying job make it difficult to do well in your courses at school?

Often.....1  
Sometimes.....2  
A little .....3  
Not at all .....4

---

TRA\_Q33C Have you ever missed classes because of a paying job?

Often .....1  
Rarely.....2  
Never .....3

Fin de section – HLT\_Q1 (en passant par HLT\_I1 )

For consultation only

## Work sphere\_family business without pay

Filtre : Si TRA\_Q4 = 3

TRA\_Q36 During the last month, have you worked in more than one family business without being paid?

Yes.....1

No .....2

PAQ : Si TRA\_Q36=1, passer à TRA\_Q36A (en passant par TRA\_I4)

PAQ : Si TRA\_Q36=2, passer à TRA\_Q36A

---

TRA\_I4

**When you answer the following questions, please tell us about the paying job for the family business where you worked the most in the last month.**

---

TRA\_Q36A In what type of business have you been working in the last month?

- Restaurant, catering services.....1
- Convenience store .....2
- Gas station .....3
- Day camp or holiday camp .....4
- Retail stores (clothing store, hardware shop, etc.).....5
- Grocery store .....6
- Hotel .....7
- Sporting complexes (gym, arena, pool, etc.) .....8
- Health institutions (hospital, clinic, etc.) .....9
- Factory .....10
- Farm.....11
- Landscaping .....12
- Other ↓ Specify the type of business :.....13

Ouvrir une boîte si « Other » est sélectionné

TRA\_Q36b Around how many people work for the company or organization that you've been working for in the last month?

- I'm the only employee ..... 1
- Between 2 and 20 ..... 2
- Between 21 and 50 ..... 3
- Between 51 and 199 ..... 4
- Between 200 and 499 ..... 5
- 500 or more..... 6

TRA\_Q36C **What kind of non-paying job have you been doing in the last month?**

Newspaper delivery.....	1
Work on a farm or in the field of agriculture .....	2
Coach, sports monitor, lifeguard .....	3
Referee .....	4
Animateur/Monitor .....	5
Dishwasher in a restaurant.....	6
Cook or assistant cook .....	7
Waitress.....	8
Packer .....	9
Cashier .....	10
Gas station attendant .....	11
Salesperson .....	12
Receptionist.....	13
Security guard .....	14
Worker, day labourer, mechanic .....	15
Other ↓ Specify the type of unpaid work : .....	16

Ouvrir une boîte si « Other » est sélectionné

TRA\_Q36D **What type of tasks do you usually do in this job?**

**Check all the boxes that apply.**

Clean tidy up (tools, floor, counters, rooms, etc.).....	1
Wash dishes.....	2
Sell and give advice about products.....	3
Work at the cash register .....	4
Wait on tables, work at counter .....	5
Put items on the shelves, in fridges, or in warehouse.....	6
Wrap, pack.....	7
Deliver .....	8
Prepare food (cook, cut, bag, etc.) .....	9
Put together and manufacture objects .....	10
Watch over or take care of people.....	11
Run socio-cultural and sports activities, give courses .....	12
Do clerical work (answer the phone, provide information, file documents, enter data, etc.) .....	13
Drive vehicles (tractor, ATVs, etc.) .....	14
Repair and do maintenance on equipment, tools, bikes, etc.....	15
Welcome, inform, and guide clients.....	16
Other ↓ Specify the type of tasks : .....	17

Ouvrir une boîte si « Other » est sélectionné

Choix multiples

**TABLEAU**

TRA\_Q37 **For how long have you had this non-paying job?**

Indicate the number of years and months. If you started less than a year ago, choose "0" and the appropriate number of months, e.g., "0" years and "4" months.

a) \_\_\_\_\_ Years(s) m) \_\_\_\_\_ month(s)

MENU DÉROULANT : 0 à « 5 années et plus » pour les années

Moins de 1 mois, 0 – 12 pour les mois

Validation : le choix 0 année ET 0 mois n'est pas valide

Ajout de filtre après la TRA\_Q37 : ce filtre devrait s'appliquer seulement s'il ya un seul choix coché à la Q4 si plus de 1 choix coché, il faudrait passer par la 38.

FILTRE : SI PAQ : Si TRA\_Q18=1 ou 9, passer à TRA\_Q38 puis à TRA\_q39A (TRA\_39B) et Tra\_q40 et 52A

PAQ : Si TRA\_Q18=2, passer à TRA\_q39A (TRA\_39B) et 52A (ne fait pas 38 ni 40)

TRA\_Q38 **During the last month, how many hours have you worked on average per week doing this job?**

Round off to the nearest 15 minutes. (For example: if you worked 10 hours per week, write "10" hours and "0" minutes. If you worked 45 minutes per week, write "0" hours and "45" minutes).

h) \_\_\_\_\_ hour(s) and m) \_\_\_\_\_ minute(s) per week

MENU DÉROULANT : 0 à « 25 et plus » pour les heures et 0-15-30-45 pour les minutes

Validation : 0 heure ET 0 minute n'est pas valide

TRA\_Q39A **When you started working in the family business, did your parent(s) require that you work a minimal number of hours per week?**

Yes.....1

No .....2

PAQ : si TRA\_Q39a =1, passer à TRA\_Q39b

PAQ : si TRA\_Q39b=2, passer à TRA\_Q40

TRA\_Q39B **How many hours per week did they require?**

Round off to the nearest 15 minutes. (For example: if you worked 10 hours per week, write "10" hours and "0" minutes. If you worked 45 minutes per week, write "0" hours and "45" minutes).

h) \_\_\_\_\_ hour(s) and m) \_\_\_\_\_ minute(s) per week

MENU DÉROULANT : 0 à « 25 et plus » pour les heures et 0-15-30-45 pour les minutes

Validation : 0 heure ET 0 minute n'est pas valide

TRA\_Q40 **When do you usually work at your unpaid job?**

**Check all the boxes that apply.**

	Very early in the morning (between 5:00 and 8:59)	During the day (between 9:00 and 3:59)	In the evening (between 4:00 and 10:59 p.m.)	Late at night (between 11:00 p.m. and 4:59 a.m.)	Do not work
	1	2	3	4	5
a) on weekdays					
b) on the weekend					

Idem à question 11

Choix multiples

Tableau

Il faut coder chaque choix de réponses comme des variables binaires (on aura un total de 10 variables ici : a1, a2, b5. ex : TRA\_Q40a1 peut être 0 ou 1.

---

TRA\_Q52A **Does (do) your parent(s) ask you to work more?**

- Yes, every week .....1  
Yes, from time to time .....2  
Yes, but rarely .....3  
No, never .....4

PAQ : si TRA\_Q52A = 1 à 3, passer à TRA\_Q52B

PAQ : si TRA\_Q52A = 4, passer à TRA\_52C



TRA\_Q52B **Do you usually accept to work more?**

- Yes, it's hard to refuse because my parent(s) would have a hard time finding someone else ..... 1  
Yes, I want to work overtime but I don't want to go over a certain number of hours per week ..... 2  
Yes, but I can refuse easily..... 3  
No, I don't work overtime because I want time for other things ..... 4  
Other ↓ specify Yes or No and indicate why : ..... 5

Ouvrir une boîte si « Other » est sélectionné

TRA\_Q52C **Do you ask your parent(s) if you can work more?**

- Yes, every week .....1  
Yes, from time to time .....2  
Yes, but rarely.....3  
No, never .....4

TRA\_Q53 **For each of the following statements, indicate whether or not it corresponds to your situation.**

**Check all the boxes that apply.**

- I can easily miss work if I need to ..... 1  
I can do homework and school assignments at work when I have the time. .... 2  
I chose the maximum number of hours of work that I will do per week. .... 3  
I can go to work on foot (my job is close to our house or my school)..... 4  
I can arrange things with my workmates to change my work schedule. .... 5  
I deliberately limited my work availability in order to have free time for myself or time to study. .... 6  
I would change jobs or stop working if it impacted on my studies. .... 7  
Because of the hours I'm working, I sometimes try to work  
things out with my teachers concerning course, exam, or assignment. .... 8  
None of these answers represents my situation..... 9

Choix multiples

TRA\_Q41 **Indicate why you decided to take this non-paying job in the family business.**  
**Check all the boxes that apply.**

- To have something to do in my free time. .... 1  
 To give me something else to think about other than school..... 2  
 To help my parents..... 5  
 Because my parents encouraged me to work. .... 6  
 To become more responsible..... 7  
 To learn new things. .... 8  
 To gain work experience. .... 9  
 Other ↓ please explain : ..... 10

TRA\_Q42 **In your non-paying job, how often are you exposed to one or another of the following situations:**

	Never	Occasion- nally	Often	All the time
	1	2	3	4
a) Working with your hands above your shoulders				
b) Working with your back bent forward or to one side, or with your back twisted				
c) Doing repetitive movements with your hands or arms, for example on an assembly line, data entry or at a rhythm imposed by a machine				
d) Doing precise movements for example grasping an object with the tips of your fingers, lining up a tool or part, controlling very fine movements of your hands				
e) Doing work that requires forceful exertion when using tools, machines or equipment.				
f) Handling heavy loads without lifting devices, for example lifting or carrying people or heavy objects such as cases or furniture				
g) Being exposed to vibration from hand tools, that is hand-arm vibration				
h) Being exposed to vibration from large machines or the floor that is, that is, the whole body vibration				
i) Driving a vehicle such as ATV, fork lift, tractor				
j) Inhaling vapors of solvents such as paint strippers, oil paint, thinners, glue, varnish, varsol, turpentine, etc.				
k) Working in an environment where it is so noisy that it is difficult to hold a conversation with someone at one meter from you, even when shouting				

TABLEAU

TRA\_Q43A **What is the proportion of work time that you are usually standing up in your non-paying job?**

- Never ..... 1  
 Quarter of the time or less ..... 2  
 Half of the time..... 3  
 Three quarter of the time ..... 4  
 All the time ..... 5

PAQ : si TRA\_Q43a=2 à 5, passer à TRA\_Q43B

PAQ : si TRA\_Q43a = 1, passer à TRA\_Q44

TRA\_Q43B **When you are standing up at your non-paying job, which of these situations applies most often to your work?**

- Standing...  
 with the possibility of sitting when you want to ..... 1  
 with the possibility of sitting occasionally ..... 2  
 with no possibility of sitting..... 3

TRA\_Q44 **As concerns your non-paying job, indicate to what extent you agree or disagree with the following statements:**

	Strongly disagree	Disagree	Agree	Strongly agree
	1	2	3	4
a) My job requires that I learn new things.				
b) My job requires a high level of skill.				
c) My job involves a lot of repetitive work.				
d) On my job, I have the freedom to decide how I do my work.				
e) I have a lot of say about what happens on my job.				

**As concerns your non-paying job, indicate to what extent you agree or disagree with the following statements:**

	Strongly disagree	Disagree	Agree	Strongly agree	Working alone
	1	2	3	4	5
f) People I work with are helpful in getting the job done.					
g) At work, I feel part of a community.					
h) I am exposed to conflict from my co-workers.					

As concerns your non-paying job, indicate to what extent you agree or disagree with the following statements:

	Strongly disagree	Disagree	Agree	Strongly agree
	1	2	3	4
i) My supervisor is successful in getting people to work together.				
j) My supervisor pays attention to what I am saying.				
k) My supervisor is helpful in getting the job done.				
l) I am exposed to conflict from my supervisor.				

As concerns your non-paying job, indicate to what extent you agree or disagree with the following statements:

	Strongly disagree	Disagree	Agree	Strongly agree
	1	2	3	4
m) My work requires working very fast.				
n) I am asked to do an excessive amount of work.				
o) I have enough time to get the job done.				
p) I receive conflicting demands that others make.				
q) My job requires working very hard.				
r) I experienced many interruptions and disturbances in my job.				

TRA\_Q45 At work, do you experience tense situations in your relations with the general public (clients, customers, users, patients, students, etc.)?

No, I don't work with general public ..... 1  
 Never ..... 2  
 Occasionally ..... 3  
 Often ..... 4  
 Very often ..... 5

TRA\_Q46A Have you ever "come close" to being injured while working at this non-paying job ?

Yes ..... 1  
 No ..... 2

TRA\_Q46B **Have you ever been injured while working at this non-paying job ?**

Yes.....1

No .....2

PAQ : si TRA\_Q46=1, passer à TRA\_Q47A

PAQ : si TRA\_Q46=2 ou 9, passer à TRA\_Q48

---

TRA\_Q47A **In the last accident you had when you were doing unpaid work for the family business, what type of injury did you get?**

**If you had more than one injury in the last accident, indicate the most serious one.**

Cut ..... 1

Burn ..... 2

Sprain ..... 3

Fracture ..... 4

Back injury ..... 5

Bruise ..... 6

Other ↓ Specify the type of injury : ..... 7

Ouvrir une boîte si « Other » est sélectionné

---

TRA\_Q47B **What part(s) of your body was (were) injured?**

**Check all the boxes that apply.**

Head.....1

Face, eyes .....2

Trunk.....3

Back .....4

Arm, elbow, shoulder .....5

Hand, fingers.....6

Leg .....7

Ankle, feet.....8

Other(s) ↓ Specify the body part(s) that was (were) injured : .....9

Ouvrir une boîte si « Other » est sélectionné

Choix multiples

---

TRA\_Q47C **Describe, as precisely as possible, how the accident happened?**

**E.g.: I was working as a day labourer. I was hurrying to finish my work before the end of the day. The accident happened when I was pulling a cart filled with boxes of tomatoes down a poorly lit slope. The cart didn't have a break and there was an unstable load of 3 boxes wide by 10 boxes tall. I was pulling the cart and it started to speed up and ran into my ankle.**

---

TRA\_Q47d **At the time of this work accident, were you doing a new task or one that you weren't familiar with?**

Yes.....1

No .....2

TRA\_Q47E **After the accident, did you...**  
**Check all the boxes that apply.**

- receive any treatment from a family member or person that you know? .....1  
consult a health professional (doctor, nurse, others) in a clinic or hospital? .....2  
miss at least one day of school? .....3  
miss at least one day of work ? .....4  
fill out an accident declaration form at your employer's request? .....5  
None of the above .....6

Choix multiples

TRA\_Q47F **For how many days after this accident did you feel pain or stiffness in your daily activities?**

- No pain or stiffness .....1  
1 day or less .....2  
Between 2 and 5 days .....3  
Between 6 and 10 days .....4  
More than 10 days .....5

TRA\_Q47G **If we ever need more information about how you injured yourself, can we contact you? Your answers will be kept strictly confidential.**

- Yes .....1  
No .....2

TRA\_Q48 **After working at this unpaid job, how often do you generally feel pain or muscular fatigue...**

	Never	From time to time	Often	All the time
	1	2	3	4
a) in your back?				
b) in your neck ?				
c) in your legs or feet?				
d) in your shoulders?				
e) in your elbows, wrists, hands?				

TABLEAU

TRA\_Q49 **Do you feel more tired since you've been doing unpaid work for the family business?**

- Yes .....1  
No .....2

TRA\_Q50A **Have you ever read or heard about occupational health and safety at work (prevention of occupational accidents and disorders)?**

Yes.....1  
No .....2

PAQ : si TRA\_Q50A = 1, passer à TRA\_Q50B

PAQ : si TRA\_Q50A = 2, passer à TRA\_Q51A (en passant par TRA\_I5)

---

TRA\_Q50B **Where did you get the information from?**  
**Check all the boxes that apply.**

Employer or supervisor..... 1  
Escouade jeunesse..... 2  
Television..... 3  
Job training ..... 4  
Co-workers..... 5  
My parents..... 6  
School ..... 7  
Défi prévention jeunesse..... 8  
Internet..... 9  
Magazines..... 10  
Friends ..... 11  
Other ↓ please explain : ..... 12

Ouvrir une boîte si « Other » est sélectionné  
Choix multiples

---

TRA\_I5

**The following questions deal with school-work balance. Remember that there are no right or wrong answers and that no one at your house or school will see your answers.**

Passer à TRA\_Q51A

FILTRE VALIDATION INTERNE : SI DCS\_Q16=1 (abandonné l'école) ET DCS\_Q17= plus grand ou égale à 6 (depuis 6 mois et plus), passer à HLT\_Q1

---

TRA\_Q51A **Is working at a non-paying job in the family business during the school year more important, as important, or less important than your school?**

More important ..... 1  
As important ..... 2  
Less important ..... 3

PAQ : si TRA\_Q51A= 1 à 3, passer à TRA\_Q51B

TRA\_Q51B **Does having a non-paying job in the family business make it difficult to do well in your courses at school?**

Often.....1  
Sometimes.....2  
A little .....3  
Not at all .....4

---

TRA\_Q51C **Have you ever missed classes because of a non-paying job in the family business?**

Often .....1  
Rarely.....2  
Never .....3

Fin de la section.

For consultation only



## SECTION 17 Anthropometric measurements

### About your health...

HLT\_I1      The following questions are on various aspects of your health and development.

HLT\_Q1      In general, would you say your health is...

Excellent .....1  
Very good.....2  
Good .....3  
Fair .....4  
Poor .....5

---

QELJ\_TAIL      What is your height (without shoes on)?

\_\_\_\_\_ feet \_\_\_\_\_ inches

Bornes :

pieds : Min= 2 Max= 7.

pouces : Min= 0 Max 11.

ou

\_\_\_\_\_ metre(s) \_\_\_\_\_ centimetres

Bornes :

mètres: min 0, max 2.

cm= min 0, max 31.

QELJ\_POID **What is your weight ?**

\_\_\_\_\_ pounds

ou

Bornes :  
50 et 350

\_\_\_\_\_ kilograms

Bornes :  
23 et 159

Une fois qu'il a entré sa taille et son poids, une conversion de pied/pouces à mètre/cm se fait et on indique :

**Could you verify the answers you have indicated.**

Your height is \_ feet, \_ inches or if you prefer \_ metres.

Your weight is \_ pounds or \_ kilograms.

Pour corriger, le jeune peut appuyer sur précédent.

---

HLT\_Q2 **In the past 12 months, how many times have you seen or talked on the telephone with any of the following professionals about your physical, emotional or mental health?**

**Enter 0 if none.**

	Number of times
a) A general practitioner, family physician	
b) A pediatrician	
c) Another medical doctor (such as an orthopedist, ophthalmologist)	
d) A dentist, pedodontist (children dentist) or orthodontist	
e) A psychiatrist or psychologist	
f) Any other person trained to provide treatment or counsel? ( <i>For example a speech therapist, a physiotherapist, a social worker, a child welfare worker, children's aid worker, an optometrist or an optician, a public health nurse or nurse practitioner.</i> ) ↓specify:  Specify the health care professional(s) you consulted.	

---

HLT\_Q3A **In the past 12 months, did you take Ritalin or any other medication that treat hyperactivity or inattention on a regular basis?**

Yes.....1

No .....2

PAQ : si HLT\_Q3a = 1, passer à HLT\_Q3a1

PAQ : si HLT\_Q3a=2, passer à HLT\_Q3b

HLT\_Q3A1    **Do you still take Ritalin or any other medication that treat hyperactivity or inattention?**

Yes.....1

No .....2

---

HLT\_Q3B    **In the past 12 months, did you take other prescribed medication, for example, tranquilizers or nerve pills, anti-convulsants or anti-epileptic pills on a regular basis?**

Other ↓ please explain : ..... 1

No ..... 2

For consultation only

## Section 18 Puberty

PUB\_I1:

### Puberty...

Here are some illustrations that show different stages of development through puberty. Every **boy (girl)** passes through each of the five stages shown in these illustrations. The changes occur at different rates for individuals and they don't start at the same time for everyone.

Please **look** at each set of illustrations and **read** the sentences under them. Then choose the illustration closest to your stage of development in each set.

---

Validation interne: afficher les questions selon le sexe du répondant

PAQ: les garçons répondent à la question PUB\_Q1\_M

PAQ: les filles répondent à la question PUB\_Q1\_F

PUB\_Q1\_M:

IMAGE : développement des poils pubiens [5 stades]

Answer: \_\_\_\_\_

PAQ : Passer à PUB\_Q2\_M

---

PUB\_Q1\_F:

IMAGE : développement des seins [5 stades]

Answer: \_\_\_\_\_

PAQ : Passer à PUB\_Q2\_F

---

PUB\_Q2\_M:

IMAGE : développement des testicules [5 stades]

Answer: \_\_\_\_\_

PAQ : Passer à PIS\_I1

---

PUB\_Q2\_F:

IMAGE : développement des poils pubiens [5 stades]

Answer: \_\_\_\_\_

PAQ : Passer à PUB\_Q7

---

Variable previous : Si PUBQ7PRV = 1: Passer à PIS\_I1.

Variable previous : Si PUBQ7PRV = 0: Passer à PUB\_Q7.

PUB\_Q7     **Have you begun to menstruate, to have periods?**

Yes.....1

No .....2

PAQ: si PUB\_Q7=1 : passer à la question PUB\_Q7A

PAQ : si PUB\_Q7 = 2 : passer à PIS\_I1

---

PUB\_Q7A     **When did you start to have periods?**

Answer: \_\_\_\_/\_\_\_\_  
(MM / YYYY)

The date can't be greater than today's date.

For consultation only

## Section 19 Thoughts and ideas about suicide

### What you have been feeling...

PIS\_I1:

Some of the following questions might be hard for you to answer. If you feel like you need help, we encourage you to talk to your family doctor or a nurse, or use the resources around you (for example, your school psychologist or counsellor).

---

PIS\_Q1      **In the past 12 months, did you ever think about suicide?**

Never .....1

Rarely .....2

Fairly often.....3

Very often.....4

PAQ: si PIS\_Q1 = 2 à 4, passer à la question PIS\_Q2

PAQ : si PIS\_Q1=1, passer à la question PIS\_Q4

---

PIS\_Q2      **In the past 12 months, did you ever seriously think of attempting to commit suicide?**

Yes.....1

No .....2

PAQ: si PIS\_Q2 = 1, passer à la question PIS\_Q3

PAQ : si PIS\_Q2=2, passer à la question PIS\_Q4

---

PIS\_Q3      **In the past 12 months, how many times did you attempt suicide?**

Once.....1

More than once.....2

Never.. .....3

PAQ : passer à PIS\_I5

---

PIS\_Q4      **During the past 12 months, have you seriously thought about hurting yourself?**

Yes.....1

No .....2

PAQ : si PIS\_Q4=1, passer à la question PIS\_I5

PAQ : si PIS\_Q4=2, passer à la question PIS\_Q5

**PIS\_I5:**

*Your answers to the previous questions indicate that things aren't going very well for you these days. Sometimes in life we go through difficult times and we don't know how to feel better about ourselves. Asking for help can be the first step in solving our problems.*

*It would be good to talk to an adult you trust - your father, mother, an aunt or uncle, your favourite teacher, the school nurse or psychologist. If you don't have anyone among your family or friends or you don't want to confide in the people around you, there are various organizations that can help you anonymously and confidentially. Here are a few examples:*

**Tel-jeunes** : 1-800-263-2266

**Kids Help Phone**: 1-800-668-6868

**Suicide Action** : 1-866-APPELLE (1-866-277-3553)

**Info santé CLSC** : 811

*There's always hope, even if you don't feel that way right now. Be strong - there are people who really care about you!*

*The team of «I am, I'll be! »*

---

**PIS\_Q5      Has anyone in your school committed suicide?**

Yes, within the last year .....1  
Yes, more than a year ago. ....2  
No, never. ....3  
I don't know.....8

---

**PIS\_Q6      Has anyone that you have personally known committed suicide?**

Yes, within the last year .....1  
Yes, more than a year ago. ....2  
No, never. ....3  
I don't know.....8

## Section 20 Sleep

SOM\_I1

About your sleep habits...

We would now like you to tell us about your sleep habits.

SOM\_Q1 In general, how many hours of sleep do you need to feel in good shape?

Round off to the nearest 15 minutes.

h) \_\_\_\_\_ hour(s) m) \_\_\_\_\_ minute(s)

Menu déroulant en ordre croissant. (1 à 15 pour heures)

Arrondir les minutes aux 15 minutes (0-15-30-45)

---

SOM\_Q2 In general, at what time do you go to bed for the night?

Enter your answer using the international system of showing time (over 24 hours). For example, for 10:00 p.m. enter 22:00. Be as precise as possible. Round off to the nearest 15 minutes.

ah) **Week** : \_\_\_\_\_ : am) \_\_\_\_\_ minute(s)  
(from Sunday to Thursday)

Menu déroulant en ordre croissant (18h à 17h). ex : 18h, 19h, 20h, ..., 1h, 2h, ..., 16h, 17h

Arrondir les minutes aux 15 minutes (0-15-30-45)

bh) **Weekend** : \_\_\_\_\_ : bm) \_\_\_\_\_ minute(s)  
(Friday, Saturday)

Menu déroulant en ordre croissant (18h à 17h). ex : 18h, 19h, 20h, ..., 1h, 2h, ..., 16h, 17h

Arrondir les minutes aux 15 minutes (0-15-30-45)

---

SOM\_Q3 In general, at what time do you wake up in the morning?

Enter your answer using the international system of showing time (over 24 hours). For example, for 9:00 p.m. enter 21:00. Be as precise as possible. Round off to the nearest 15 minutes.

ah) **Week** : \_\_\_\_\_ : am) \_\_\_\_\_ minute(s)  
(from Monday to Friday)

Menu déroulant en ordre croissant. (1 à 24 pour heures)

Arrondir les minutes aux 15 minutes (0-15-30-45)

bh) **Weekend** : \_\_\_\_\_ : bm) \_\_\_\_\_ minute(s)  
(Saturday, Sunday)

Menu déroulant en ordre croissant. (1 à 24 pour heures)

Arrondir les minutes aux 15 minutes (0-15-30-45)



SOM\_Q4 Indicate how much time you spend awake during one night (in general); that is, the total duration of time awake between bedtime and getting up, including the time taken to fall asleep.

The time you spend awake at NIGHT cannot be longer than the time you spend in bed. Round off to the nearest 15 minutes.

h)\_\_\_\_\_hour(s) m)\_\_\_\_\_minute(s)

Menu déroulant en ordre croissant. (1 à 15 pour heures)  
Arrondir les minutes aux 15 minutes (0-15-30-45)

Validation : le nombre d'heures éveillé ne peut pas être plus élevé que le nombre d'heures couché  
Ex 1 : si enfant couche à 21h et lève à 7h, il était couché pour  $(24h-21h) + 7h = 10h$ ---  $(24h-SOM\_Q2)-SOM\_Q3$   
Ex2 : si enfant couche à 1h et lève à 7h, il était couché pour  $(7h-1h) = 6h$ ---  $(SOM\_Q3-SOM\_Q2)$

Here is the last series of questions on your sleeping habits.

- SOM\_Q5A How often do you fall asleep or get drowsy during class periods?  
SOM\_Q5B How often do you get sleepy or drowsy while doing your homework?  
SOM\_Q5C Are you usually alert most of the day?  
SOM\_Q5D How often are you ever tired and grumpy during the day?  
SOM\_Q5E How often do you have trouble getting out of bed in the morning?  
SOM\_Q5F How often do you fall back to sleep after being awakened in the morning?  
SOM\_Q5G How often do you need someone to awaken you in the morning?  
SOM\_Q5H How often do you think that you need more sleep?
- Never. ....1  
Seldom. ....2  
Sometimes. ....3  
Frequently.....4  
Always.....5

TABLEAU

## Section 21 Stressful Events

About how you have been feeling in the past 3 months...

During the past 3 months, have you been worried or stressed by any of the following:

EVS\_Q1A **Your parents separating or divorcing.**

Not at all ..... 1  
A little bit. .... 2  
Quite a bit ..... 3  
A whole lot..... 4  
You've not thought about this ..... 7

---

EVS\_Q1B **Loneliness.**

Not at all. .... 1  
A little bit..... 2  
Quite a bit..... 3  
A whole lot..... 4  
You've never felt lonely.. ..... 7

---

EVS\_Q1C **Breaking up with your boyfriend or girlfriend.**

Not at all. .... 1  
A little bit..... 2  
Quite a bit..... 3  
A whole lot..... 4  
This has not happened to you  
OR you've not thought about it. .... 7

---

EVS\_Q1D **Your relationship with your father.**

Not at all. .... 1  
A little bit..... 2  
Quite a bit..... 3  
A whole lot..... 4

**EVS\_Q1E Your relationship with your mother.**

Not at all ..... 1  
A little bit..... 2  
Quite a bit..... 3  
A whole lot..... 4

---

**EVS\_Q1F Your relationship with your brother(s)/sister(s).**

Not at all ..... 1  
A little bit..... 2  
Quite a bit..... 3  
A whole lot..... 4  
You don't have brothers or sister ..... 7

---

**EVS\_Q1G Your relationship with your friends.**

Not at all ..... 1  
A little bit..... 2  
Quite a bit..... 3  
A whole lot..... 4

---

**EVS\_Q1H A health problem (such as acne or asthma).**

Not at all ..... 1  
A little bit..... 2  
Quite a bit..... 3  
A whole lot..... 4  
You don't have any health problem ..... 7

---

**EVS\_Q1I Your weight.**

Not at all ..... 1  
A little bit..... 2  
Quite a bit..... 3  
A whole lot..... 4

---

**EVS\_Q1J Sex**

Not at all ..... 1  
A little bit..... 2  
Quite a bit..... 3  
A whole lot..... 4

---

**EVS\_Q1K Your new family (parents remarried).**

Not at all ..... 1  
A little bit..... 2  
Quite a bit..... 3  
A whole lot..... 4  
You aren't in a new or blended family..... 7

EVS\_Q1L **Financial problems in your family.**

- Not at all..... 1  
A little bit..... 2  
Quite a bit..... 3  
A whole lot..... 4

---

EVS\_Q1M **School work**

- Not at all..... 1  
A little bit..... 2  
Quite a bit..... 3  
A whole lot..... 4  
You don't have any school work..... 7

---

EVS\_Q1N **Other thing(s)**

- Not at all..... 1  
A little bit..... 2  
Quite a bit..... 3  
A whole lot..... 4

PAQ : si EVS\_Q1N = 2 à 4, passer à la question EVS\_Q1NA

PAQ : si EVS\_Q1N = 1, passer à VPM\_Q1C (en passant par VPM\_I1)

---

EVS\_Q1NA **Specify the type of the problem:**

Answer : \_\_\_\_\_

Question ouverte

## Section 22 Minor and Major perceived Violence

VPM\_I1

### About your school...

Things are not always great at school. The next few questions are about things that may have happened at your school. Answer the questions as best you can, and remember that no one at school will ever see your responses.

---

Since the beginning of the school year, how often have you observed or have you been informed of the following problems at your school?

**Don't take rumours into account.**

VPM\_Q1C Students insulting each other.

VPM\_Q1D Students who insult teachers.

VPM\_Q1E Children threatening each other («taxing», bullying, harassment, etc.).

VPM\_Q2B Students being physically assaulted by other students (beaten up, punched, kicked).

VPM\_Q2D Students who intimidate (threaten) adults at the school.

VPM\_Q2E Students who physically attack adults at the school.

Never .....	1
Several times during the school year.....	2
Several times a month.....	3
Several times a week .....	4
Almost every day.....	5

## Section 23 Conclusion

QELJ\_intro1

Now we are going to talk about the questionnaire itself. We would like to know what you think about its length, whether the questions were easy to understand, any technical problems you encountered, etc. As soon as you have finished answering these questions, you can give us your comments and then end your questionnaire in order to receive your \$25.

---

QELJ\_Q1    **Overall, how easy did you find the questionnaire to understand?**

Not at all easy ..... 1  
Not very easy ..... 2  
Fairly easy ..... 3  
Very easy ..... 4

---

QELJ\_Q2    **What about the length of the questionnaire?**

Much too long ..... 1  
A bit too long ..... 2  
About right..... 3  
Too short..... 4

---

QELJ\_Q3    **What do you think of the speed with which the questionnaire proceeded (e.g. the time it took for each page or each question to appear on the screen, namely to go from one page or one question to the next)?**

Much too slow ..... 1  
Somewhat slow ..... 2  
Just the right speed ..... 3  
Very fast..... 4

---

QELJ\_Q4    **What type of device did you use to fill out your questionnaire?**

Desktop computer..... 1  
Laptop computer ..... 2  
Netbook ..... 3  
Tablet..... 4  
Smartphone..... 5  
Other ↓ specify the type of device you used:..... 6

---

QELJ\_Q5    **Did you have any problems viewing a page or a question? (for example, a question appeared incomplete, the answers were not aligned, etc.)**

Yes ..↓ Specify the type of problem you encountered: ..... 1  
No ..... 2

QELJ\_Q6 **Were there any breaks of more than 5 minutes while you were filling out your questionnaire?**

Yes.....1

No .....2

PAQ : si QELJ\_Q6=1, passer à QELJ\_Q6a

PAQ : si QELJ\_Q6=2, passer à QELJ\_Q7

---

QELJ\_Q6A **How many breaks of more than 5 minutes occurred while you were filling out your questionnaire?**

1 to 2 pauses..... 1

3 to 5 pauses..... 2

6 to 10 pauses..... 3

More than 10 pauses..... 4

---

QELJ\_Q6B **What were the reasons why there were breaks for more than 5 minutes while you were filling out your questionnaire?**

**Check off all the boxes that apply.**

The questionnaire was not working (system disruption).....1

Someone interrupted me (phone call, visit, a parent ask me something, etc.).....2

I had an appointment or something to do.....3

I was tired .....4

I went to eat or drink.....5

Other ↓ specify : .....6

---

QELJ\_Q7 **About how much time did it take you to fill out the questionnaire, excluding breaks you took?**

**Round off to the nearest 15 minutes. If there is no hour(s) to specify, enter "0" for "hour(s)". If there are no minutes to specify, enter 0 for "minutes".**

h)\_\_\_\_\_ hour(s) m)\_\_\_\_\_ minutes

---

**While filling out your questionnaire, did any of these situations happen?**

QELJ\_Q8A I was disturbed by my brother(s) / sister(s) / friend(s)

QELJ\_Q8B I was disturbed by one of my parents

QELJ\_Q8C Someone was trying to see my answers

QELJ\_Q8D I asked a parent / brother / sister / friend for answers

Yes, once or twice.....1

Yes, many times.....2

No .....3

---

QELJ\_Q9 **Where exactly are you filling your questionnaire?**

In my room ..... 1

At home, but not in my room (e.g. kitchen, living room, yard) ..... 2

In a public space inside (e.g. restaurant, library, internet café, etc.) ..... 3

In a public space outside (e.g. park, etc.) ..... 4

Another place. .... 5

QELJ\_CMNT

**If you have any comments, select "Leave comment (s)" and take some time to write them. We'll be happy to read them.**

I would like to leave a comment..... 1

I don't want to leave a comment..... 2

Ouvrir une boîte si « I would like to leave a comment =1 » est sélectionné : Comment (s) \_\_\_\_\_

---

INT02

**Thank you for your participation.**

You will receive your compensation in the mail within 5 weeks.

Remember that you can call Tel-Jeunes any time you feel the need to talk to someone about a problem.

I am finished and this is my final version. Submit questionnaire 1