

Québec Health Survey of High School Students 2016-2017 (QSHSS)

Questionnaire #2

Questionnaires 1 and 2 of the QSHSS 2016-2017, like those of the 2010-2011 edition, were developed by the Institut de la statistique du Québec (ISQ) in collaboration with the Ministère de la Santé et des Services sociaux (MSSS) and experts in the field of health and social services.

Preference was given to questions that had already been validated as well as questions from other population surveys. In general, the exact wording of those questions was used. However, certain statements were adapted with the authorization of the copyright holders. A few topics were being studied for the first time. To this end, new questions, which were mostly drawn from other surveys or, in certain cases, developed specifically for the QSHSS, were suggested by the ISQ, the MSSS, members of the project orientation committee, and certain experts.

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For more information about the copyright holder and source of each question, please refer to the appendix of the questionnaire.

Question common to both questionnaires

Instructions on filling out this questionnaire

This questionnaire covers topics related to your mental and physical health, lifestyle habits, social and intimate relationships, environment at home and at school, etc. Your answers will help decision-makers design policies and programs for Québec youth.

THERE ARE NO RIGHT OR WRONG ANSWERS

THIS QUESTIONNAIRE IS NOT AN EXAM

No-one from your school will be able to see any of the answers you give.

The *Institut de la statistique du Québec* (ISQ) (Québec Institute of Statistics) guarantees the confidentiality of all the information that you will provide in this survey under the *Act respecting the Institut de la statistique du Québec* and the *Act respecting Access to documents held by public bodies and the protection of personal Information*.

By filling out this questionnaire, you agree that the data collected in this survey by the ISQ can be transferred to the *ministère de la Santé et des Services sociaux du Québec* (Québec Ministry of Health and Social Services) and the *Institut national de santé publique du Québec* (Québec Institute of Public Health). The data that will be transferred will not contain any information that can directly identify you.

- ◆ Don't write your name in the questionnaire.
- ◆ Carefully read the questions and choices of answers.
- ◆ Please give only one answer per question, unless requested otherwise.

- ◆ To answer : Indicate your response by clicking in the
- small box OR

Where requested, write your answer in the appropriate field using the tablet keyboard.

Are you ready?

Let's start!

General Information

(SD9_1) How old are you?

- 11 years or younger
- 12 years
- 13 years
- 14 years
- 15 years
- 16 years
- 17 years
- 18 years
- 19 years or older

(SD9_2) What is your sex?

- Male
- Female

(SD9_3) What grade level are you in?

If you are taking courses in more than one level, indicate the level in which you take the most courses.

If you are in a Work-Oriented Training Path (WOTP), in either Pre-Work Training or Training for a Semi-Skilled Trade, refer to the interviewer's instructions on how to respond to this question.

- Secondary 1
- Secondary 2
- Secondary 3
- Secondary 4
- Secondary 5

(SD12_1) With whom do you usually live?

- With my two parents (biological or adoptive)
- With my mother only
- With my mother and her partner
- With my father only
- With my father and his partner
- As much with my mother as with my father
- Other (guardian, foster family, group home, co-tenant or roommate, etc.)

↳ Please specify: _____ [Max 100 caractères]

About your health

(HV8_1) In general, would you say your health is...

- Excellent
- Very good
- Good
- Fair
- Poor

(HV3_1) How tall are you (without shoes on)?

Estimate your height if you are not certain.

In feet:

__ feet__ inch(es) [Pieds : min 2, max 7. Si 2 pieds, pouces : min 7, max 11, Si 3-4-5-6 pieds, pouces : min 0, max 11, Si 7 pieds, min : 0 max 7]

or

In meter(s):

__ meter(s) __ centimeter(s) [Mètres : min 0, max 2. Si 0 mètre, cm : min 79, max 99. Si 1 mètre, cm : min 0, max 99, Si 2 mètres, cm : min 0, max 31]

[Convertir automatiquement les mesures.]

(HV3_2) How much do you weigh?

Estimate your weight if you are not certain.

In pounds:

__ __ pounds [Continu : Min 50, Max 350]

or

In kilograms:

__ __ kilograms [Continu : Min 23, Max 159]
[Convertir automatiquement les mesures.]

About you and your school

(SM_E_2) Do you like school?

- I don't like school at all
- I don't like school
- I like school
- I like school very much

(SM_E_3) 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
- I am weaker than the average student
- I am an average student
- I am stronger than the average student
- I am one of the stronger students

(SM_E_4) How important is it for you to get good marks?

- Not important at all
- Somewhat important
- Important
- Very important

(SM_E_5a) During this school year, what is your average mark in English Language Arts (to the best of your knowledge)?

- 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%
- I'm not taking English Language Arts this school year

(SM_E_5b) During this school year, what is your average mark in mathematics (to the best of your knowledge)?

- 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%
- I'm not taking mathematics this school year

(SM_E_6) Have you ever repeated a year, in elementary or secondary school?

- No
- Yes, one year
- Yes, two years
- Yes, three years or more

(SM_E_7) If it were only up to you, how far would you go with your schooling?

- I don't care
- I don't want to finish secondary school (high school)
- I want to finish secondary school (high school)
- I want to finish CEGEP or university

(SM_F_1) How strongly do you agree or disagree with the following statements about your school?

	Strongly Disagree	Disagree	Neither Disagree Nor Agree	Agree	Strongly Agree
SM_F_1_1 I feel close to people at this school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_F_1_2 I am happy to be at this school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_F_1_3 I feel like I am part of this school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_F_1_4 The teachers at this school treat students fairly.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_F_1_5 I feel safe in my school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How true do you feel these statements are about your school environment?

(SM_F_2) At my school, there is a teacher or some other adult...

	Not at All True	A Little True	Pretty Much True	Very Much True
SM_F_2_1 Who really cares about me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_F_2_2 Who tells me when I do a good job.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_F_2_3 Who's concerned about me when I am absent.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_F_2_4 Who always wants me to do my best.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_F_2_5 Who listens to me when I have something to say.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_F_2_6 Who believes that I will be a success.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How true do you feel these statements are about your school environment?

(SM_F_3) At my school...

	Not at All True	A Little True	Pretty Much True	Very Much True
SM_F_3_1 I do interesting activities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_F_3_2 I help decide things like class activities or rules.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_F_3_3 I do things that help improve school life.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

(SM_C_3a) Since September, at your school or on the way to and from school, have you experienced the following?

	Often	Sometimes	Never
SM_C_3a_1 You've been insulted or called names.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_C_3a_2 Someone has threatened to hit you or break something belonging to you.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_C_3a_3 You've experienced unwanted sexual touching or fondling.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_C_3a_4 You've been hit (beat up, punched, kicked, bullied) or pushed around violently.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_C_3a_5 You've been offered money to do bad or illegal things (for example rob, threaten or hit someone, etc.).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_C_3a_6 You've been "taxed" (someone has robbed you of money or personal possessions after threatening you).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_C_3a_7 You've been threatened or attacked by gang members.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

(SM_C_3b) Cyber-bullying is when a person uses internet or cell phone technology (text message, Facebook, Snapchat, Messenger) to deliberately hurt another person. It could mean the mass distribution of images (photos or videos) or opinions. The origin is often anonymous.

(SM_C_3b_1) Since September, have you been a victim of cyber-bullying?

- Yes
- No [[Passe à la question SM_D-1b](#)]

(SM_C_3b_2) How often have you been a victim of cyber-bullying?

- Once
- A few times
- Often
- Very often

About you

(SM_D_1b) For each of the following statements, indicate the degree to which you agree or disagree.

	Completely Disagree	Somewhat Disagree	Somewhat Agree	Completely Agree
SM_D_1b_1 I think I'm someone who has something valuable to offer, at least as much as other people do.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_1b_2 I think I have a certain number of good qualities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_1b_3 Everything considered, I tend to think I'm a failure.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_1b_4 I'm able to do things as well as other people my age.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_1b_5 There's little reason to be proud of myself.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_1b_6 I have a positive attitude towards myself.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_1b_7 Overall, I'm satisfied with myself.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_1b_8 I find it difficult to accept myself as I am.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_1b_9 Sometimes I think I'm really useless.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_1b_10 Occasionally I've thought of myself as a good-for-nothing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

(SM_D_3) How true do you feel these statements are about you personally?

	Not at All True	A Little True	Pretty Much True	Very Much True
SM_D_3_1 I feel bad when someone gets their feelings hurt.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_3_2 I try to understand what other people go through.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_3_3 I try to understand how other people feel and think.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

(SM_D_4) How true do you feel these statements are about you personally?

	Not at All True	A Little True	Pretty Much True	Very Much True
SM_D_4_1 I can work out or solve my problems.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_4_2 I can do most things if I try.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_4_3 I feel capable of meeting challenges that I care about.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_4_4 I get easily discouraged when I have trouble with something.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_4_5 I often give up on an activity or project before finishing it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_4_6 If I'm interested in an activity but it looks too complicated, I don't even bother trying.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_4_7 When I try to learn something new, I quickly give up if I'm not good at it right away.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

(SM_D_5) How true do you feel these statements are about you personally?

	Not at All True	A Little True	Pretty Much True	Very Much True
SM_D_5_1 When I need help, I find someone to talk with.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_5_2 I try to work out problems by talking or writing about them.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_5_3 When I have a problem, I take time to think about various solutions before acting.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How you feel

(SM_A_1a) In the past week, how often did you...

	Never	Once in a While	Fairly Often	Very Often
SM_A_1a_1 Feel nervous or shaky inside?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_A_1a_2 Feel tense, stressed or under pressure?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_A_1a_3 Feel afraid or fearful?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_A_1a_4 Lose your temper, get angry at someone or something?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_A_1a_5 Feel easily annoyed or irritated?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_A_1a_6 Feel critical of others?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_A_1a_7 Get angry over things that weren't very important?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_A_1a_8 Feel lonely?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_A_1a_9 Feel bored or have little interest in things?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_A_1a_10 Cry easily, or feel like crying?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_A_1a_11 Feel down, discouraged?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_A_1a_12 Feel hopeless about the future?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_A_1a_13 Have your mind go blank?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_A_1a_14 Have trouble remembering things?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Doctors and you

(SM_B_1) Do you have any of the following health problems that have been diagnosed or confirmed by a doctor or other health professional?

	Yes	No
SM_B_1_1 Food allergies	<input type="radio"/>	<input type="radio"/>
SM_B_1_2 Attention problems with or without hyperactivity	<input type="radio"/>	<input type="radio"/>
SM_B_1_3 Anxiety	<input type="radio"/>	<input type="radio"/>
SM_B_1_4 Depression	<input type="radio"/>	<input type="radio"/>
SM_B_1_5 Eating disorder (anorexia, bulimia)	<input type="radio"/>	<input type="radio"/>

(SM_B_2a) In the past 2 weeks, did you take medication prescribed by a doctor to treat depression or anxiety (Celexa, Effexor, Paxil, Prozac, Luvox, Wellbutrin, Zoloft, Rivotril...)?

- Yes
- No

(SM_B_2b) In the past 2 weeks, did you take medication prescribed by a doctor to calm you or help improve your concentration (Ritalin, Ativan...)?

- Yes
- No

About your friends and how you relate to others

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

(SM_H_1) I have a friend about my own age...

	Not at All True	A Little True	Pretty Much True	Very Much True
SM_H_1_1 Who really cares about me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_H_1_2 Who talks with me about my problems.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_H_1_3 Who helps me when I'm having a hard time.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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

(SM_H_2) My friends...

	Not at All True	A Little True	Pretty Much True	Very Much True
SM_H_2_1 Get into a lot of trouble.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_H_2_2 Try to do what's right.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_H_2_3 Do well in school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

(SM_B_4b) Read the following statements and choose the answer that best describes you.

	Never	Sometimes	Often
SM_B_4b_1 I get into a lot of fights.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_4b_2 When I'm mad at someone, I try to get others to dislike him/her.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_4b_3 When I'm mad at someone, I become friends with somebody else as revenge.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_4b_4 When another young person accidentally hurts me, I assume that he/she meant to do it, and I react with anger and start a fight.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_4b_5 When I'm mad at someone, I say bad things behind his/her back.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_4b_6 I physically attack people.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_4b_7 I threaten people.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_4b_8 I'm cruel, I bully or I'm mean to others.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_4b_9 When I'm mad at someone, I say to others: let's not hang out with him/her.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_4b_10 I hit, kick or bite other people my age.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_4b_11 When I'm mad at someone, I tell that person's secrets to other people.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

About your love relationships

(SM_H_3a) Have you ever gone out with a guy or a girl?

Here, “gone out with” means spending intimate time with him or her. This may have lasted just one night or a couple of weeks, months or years.

- Yes
- No

→ [Si SD9.1 (âge) = 13 ans ou moins, passer à la section HV2a_1 automatiquement]

→ [Si SD9_1 (âge) = 14 ans ou plus, passer à la question HV7_12]

(SM_H_3b) In the past 12 months, did you go out with a guy or a girl?

- Yes
- No

→ [Si SD9_1 (âge) = 13 ans ou moins, passer à la section HV2a_1 automatiquement]

→ [Si SD9_1 (âge) = 14 ans ou plus, passer à la question HV7_12]

The next two series of questions have a similar wording. The first series is about how you have behaved towards others; the second is about how others have behaved towards you.

(SM_B_5) Think about the guy(s) or girl(s) you went out with during the past 12 months. How many times did the following situations occur with one or more of these guys or girls?

	Never	Once	Twice	3 times or more
SM_B_5_1 I criticized him/her viciously about his/her physical appearance; I insulted him/her in front of people; I put him/her down.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_5_2 I controlled his/her outings, email conversations or cell phone; I prevented him/her from seeing his/her friends.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_5_3 I forced him/her to kiss or caress me when he/she didn't want to.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_5_4 I threw something at him/her which could have hurt him/her.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_5_5 I grabbed him/her (held him/her by the arms); I pushed him/her around; I shook him/her.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

SM_B_5_6 I slapped him/her.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_5_7 I used my fists or feet, an object or a weapon to hurt him/her.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_5_8 I forced him/her to have sexual contact or sexual intercourse with me when he/she didn't want to.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

(SM_C_4) Think about the guy(s) or girl(s) you went out with during the past 12 months. How many times did the following situations occur with one or more of these guys or girls?

	Never	Once	Twice	3 times or more
SM_C_4_1 He/she viciously criticized my physical appearance; he/she insulted me in front of people; he/she put me down.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_C_4_2 He/she controlled my outings, my email conversations or cell phone; he/she prevented me from seeing my friends	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_C_4_3 He/she forced me to kiss or caress him/her when I didn't want to.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_C_4_4 He/she threw something at me which could have hurt me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_C_4_5 He/she grabbed me (held me by the arms); he/she pushed me around; he/she shook me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_C_4_6 He/she slapped me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_C_4_7 He/she used his/her fists or feet, an object or a weapon to hurt me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_C_4_8 He/she forced me to have sexual contact or sexual intercourse when I didn't want to.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

→ [Si SD9_1 (âge) = 13 ans ou moins, passer à la section HV2a_1]
automatiquement

→ [Si SD9_1 (âge) = 14 ans ou plus, passer à la question HV7_12]

(HV7_12) In your lifetime, have you ever been forced to have sexual relations (oral, vaginal or anal) when you did not want to?

- Yes, by another youth
- Yes, by an adult
- No

Physical activity related to means of transportation

The following questions are about the means of active transportation you use such as walking, cycling, rollerblading (or other), to get to school, work, a friend's place or elsewhere.

(HV2a_1) During the school year, do you use one (or more) of these means of active transportation?

- Yes
- No [Passe à la question HV2_1]

(HV2a_2) In general, during the school year, do you use this/these means of active transportation every week?

- Yes
- No [Passe à la question HV2_1]

(HV2a_3) In general, during the school year, how many days a week do you use this/these means of active transportation?

- 1 day a week
- 2 days a week
- 3 days a week
- 4 days a week
- 5 days a week
- 6 days a week
- 7 days a week

(HV2a_4) On a typical school day, how much time do you spend on this/these means of active transportation?

- Less than 10 minutes
- From 10 to 19 minutes
- From 20 to 39 minutes
- From 40 to 59 minutes
- From 1 hour to 1 hour and 29 minutes
- From 1 hour and 30 minutes to 1 hour and 59 minutes
- 2 hours or more

Physical activity during your leisure time

The following questions are about the leisure-time physical activities you engage in at home, at school or elsewhere: sports, outdoor recreation, physical conditioning, dance or simply walking.

They can involve activities in an organized context (with a monitor, coach, trainer or other person in charge) or a non-organized context (alone or with other people). Specialized programs (sports-studies, dance-studies, sports concentration or other) should also be indicated in your responses.

[Bulle rappel pour chaque question]

Note! You must exclude:

- your physical education classes;
- your active transportation (on foot, bicycle or other physical means) to get somewhere (to school, to work, to the store or another place);
- activities you do in the context of a paid job.

(HV2_1) During the school year, do you engage in these types of physical activity?

- Yes
- No [Passe à la question HV5_1]

(HV2_2) In general, during the school year, do you engage in these types of physical activity every week?

- Yes
- No [Passe à la question HV5_1]

(HV2_3) In general, during the school year, how many days a week do you engage in these types of physical activity?

- 1 day a week
- 2 days a week
- 3 days a week
- 4 days a week
- 5 days a week
- 6 days a week
- 7 days a week

(HV2_4) On a typical school day, how much time do you spend on these types of physical activity?

- Less than 10 minutes
- From 10 to 19 minutes
- From 20 to 39 minutes
- From 40 to 59 minutes
- From 1 hour to 1 hour and 29 minutes
- From 1 hour and 30 minutes to 1 hour and 59 minutes
- 2 hours or more

(HV2_5) Most often, when you engage in these types of physical activity, is your level of effort...

- Very low (Your breathing and heartbeat change very little)
- Low (Your breathing and heartbeat increase slightly)
- Moderate (Your breathing and heartbeat are fairly rapid)
- High (Your breathing and heartbeat are very rapid)

Your work experience during the school year

Note! You must not include household chores you do around the house for pocket money (washing dishes, vacuuming, gardening, etc.).

(HV5_10) Do you currently work...

	Yes (1)	No (2)
(HV5_10a) For the family business <u>with pay</u>? <i>On the family farm, at the grocery store or “dépanneur” (convenience store), clinic or home office, etc.</i>	<input type="radio"/>	<input type="radio"/>
(HV5_10b) For the family business <u>without pay</u>? <i>On the family farm, at the grocery store or “dépanneur” (convenience store), clinic or home office, etc.</i>	<input type="radio"/>	<input type="radio"/>
(HV5_10c) For an employer <u>with pay</u>? <i>At a store, a restaurant, city sports and recreation or culture department, etc.</i>	<input type="radio"/>	<input type="radio"/>
(HV5_10d) Doing odd jobs <u>with pay</u>? <i>Babysitting, mowing a <u>neighbour’s</u> lawn, helping with homework, etc.</i>	<input type="radio"/>	<input type="radio"/>

[Passer à la SM_D_6b (section suivante) si l’élève a répondu :

« non » à HV5_10a, à HV5_10b, à HV5_10c et à HV5_10d]

(HV5_11) Thinking of all the jobs you currently have (with or without pay), how many hours a week do you generally work?

- Less than 6 hours a week 1
- 6 to 10 hours a week.. 2
- 11 to 15 hours a week 3
- 16 to 20 hours a week 4
- 21 hours a week or more 5

[Si HV5_10a = Oui ou HV5_10b = Oui ou HV5_10c = Oui → Passez à HV5_12]

[Si HV5_10a = Non et HV5_10b = Non et HV5_10c = Non, mais que HV5_10d = Oui → Passez à HV5_16]

The following questions refer only to your job **at the family business** (on the family farm, at the grocery store or “dépanneur” [convenience store], clinic, home office, etc.) or **for an employer** (at a store, restaurant, city sports and recreation or culture department, etc.).

If you have more than one job, answer the following questions by thinking of the job **where you currently work the most hours.**

(HV5_12) What kind of work (family business or employer) do you do most of the time?

- Cook, assistant cook, butcher, baker, etc.
- Waiter/waitress, food counter attendant, bus boy/girl, host/hostess
- Dishwasher
- Cashier, clerk/cashier
- Packer
- Salesperson, sales clerk, store clerk
- Work on a farm or in the field of agriculture
- Newspaper delivery, delivering circulars or flyers
- Cleaning/housekeeping services, yard maintenance, snow removal, lawn mowing, etc.
- Coach, sports monitor, lifeguard, referee, etc.
- Office work (filing, receptionist, clerk, customer service, etc.)
- Construction work, carpentry, plumbing, electricity, etc.
- Mechanics
- Factory worker, day labourer, etc.
- Gas station attendant
- Beauty or skin care, hairdressing, makeup, etc.
- Other → Please specify _____ [max 70 characters]

(HV5_13) At this job, did you receive any instructions (oral or written) or training on workplace safety or hazards to prevent you from being injured?

- Yes 1
- No 2

(HV5_14) Have you ever been injured at this job?

- Yes 1
- No 2 → [Si HV5_10d = oui, passe à HV5_16; sinon passe à SM_D_6b (section suivante)]

(HV5_15) Due to this injury, did you

	Yes (1)	No (2)
(HV5_15a) receive any treatment or care from your employer, a supervisor, another employee or person from the family business?	<input type="radio"/>	<input type="radio"/>
(HV5_15b) consult a health professional (nurse, doctor, etc) in a clinic or hospital?	<input type="radio"/>	<input type="radio"/>
(HV5_15c) miss at least one day of school?	<input type="radio"/>	<input type="radio"/>

[Si HV5_10d = Oui → Réponds à la question **HV5_16**; sinon passe à SM_D_6b (section suivante)]

The following question refers only to your **odd jobs** (babysitting, mowing a neighbour's lawn, helping with homework, etc.).

Answer the following question by thinking of the odd job **where you currently work the most hours.**

(HV5_16) What kind of odd job do you do most of the time?

- Babysitting
- Yard work, snow removal, lawn mowing, raking leaves, etc.
- House cleaning
- Pet sitting or taking care of animals
- House sitting for absent owners (bringing in the mail, watering plants, etc.)
- Helping with homework
- Other

→ Please specify _____ [max 70 caractères]

About your behaviour and your attitudes

(SM_D_6b) How true do you feel these statements are about you personally?

	Not at All True	A Little True	Pretty Much True	Very Much True
SM_D_6b_4 I say inappropriate things.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_6b_5 I do certain things that are bad for me, if they are fun.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_6b_12 Sometimes I can't stop myself from doing something, even if I know it is wrong.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_6b_13 I often act without thinking through all the alternatives.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

(SM_D_6a) How true do you feel these statements are about you personally?

	Not at All True	A Little True	Pretty Much True	Very Much True
SM_D_6a_7 I have difficulty making friends.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_6a_8 I feel uncomfortable in group activities with other young people.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_D_6a_9 I get along well with people my age.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

(SM_B_4c) In the past 12 months, about how many times...

	Never	Once or twice	3 or 4 times	5 times or more
SM_B_4c_1 Have you stayed out all night without permission?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_4c_2 Were you questioned by the police about something they thought you did?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_4c_3 Have you run away from home?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_4c_4 Have you stolen something from a school or store?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_4c_5 Have you damaged or destroyed something that didn't belong to you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_4c_6 Have you fought with someone to the point where the person needed medical treatment for their injuries?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_4c_7 Have you fought with someone with the idea of seriously hurting him/her?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_4c_8 Have you carried a weapon for the purpose of defending yourself or using it in a fight?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_4c_9 Have you sold drugs?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_B_4c_10 Have you tried to sexually touch or fondle someone while knowing that they probably wouldn't want you to?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

(SM_B_4d) In the past 12 months, did you belong to a gang which broke the law by stealing, hitting someone, committing vandalism, etc.?

- Yes
- No

About your family environment

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

(SM_G_1) In my home, there is a parent or some other adult...

	Not at All True	A Little True	Pretty Much True	Very Much True
SM_G_1_1 Who is interested in my school work.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_G_1_2 Who talks with me about my problems.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_G_1_3 Who listens to me when I have something to say.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_G_1_4 Who expects me to follow the rules.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_G_1_5 Who believes that I will be a success.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_G_1_6 Who always wants me to do my best.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_G_1_7 Who is affectionate with me (hugs me, smiles at me, gives me kisses).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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

(SM_G2) At home...

	Not at All True	A Little True	Pretty Much True	Very Much True
SM_G2_1 I do fun things or go to fun places with my parents or other adults	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_G2_2 I do things that help improve family life.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_G2_3 I help make decisions with my family.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

(SM_G_3a) In everyday life, do your parents know where you are when you are not at home?

- Never
- Occasionally
- Often
- Always

(SM_G_3b) In everyday life, do your parents know who you are with when you are not at home?

- Never
- Occasionally
- Often
- Always

About your sexual attraction to others and sexual relations

[Si SD9.1 (âge) = 13 years ou moins, passer à la section HV8_6 automatiquement]

(HV7_15) People are different in their sexual attraction to others. Which statement best describes how you feel.

You are sexually attracted...

- only to people of the opposite sex 1
- mostly to people of the opposite sex 2
- only to people of the same sex (as you) 3
- mostly to people of the same sex (as you) 4
- equally to both sexes 5
- to neither sex 6
- uncertain/questioning (I don't know) 7

(HV7_0) Have you ever had sexual relations (oral, vaginal or anal) with your consent?

- Yes
- No [Passe à la question HV8_6]

(HV7_0a) How old were you the first time you had sexual relations (with your consent)?

I was _____ years old

Liste déroulante (âge en ordre décroissant) : [Continu : âge maximum = SD9.1, âge minimum = 1 an]

(HV7_0b) With how many different people have you had sexual relations (oral, vaginal or anal) with your consent?

- 1 person
- 2 people
- 3 people
- 4 people
- 5 people
- 6 people
- 7 people
- 8 people
- 9 people or more

If you do not feel at ease in responding to other questions on this topic, you can go directly to the next section. [Bouton pour passer à la section HV8_6 : Bouton : Go to next section]

Do you wish to continue in this section?

- Yes
- No, I prefer skipping to the next section.

Oral sex

(HV7_1) Have you ever had oral sex (contact of the mouth with the vulva or penis) with your consent?

- Yes
- No

Vaginal sex

(HV7_4) Have you ever had vaginal sex (penetration of the penis into the vagina) with your consent?

- Yes
- No [Passe à la question HV7_8]

(HV7_7) The last time you had vaginal sex (with your consent), did you or your partner use a condom?

- Yes
- No

(HV7_13) The last time you had vaginal sex (with your consent), did you or your partner use any of the following contraceptive methods, other than the condom?

	Yes (1)	No (2)
(HV7_13a) Birth control pill, patch, ring, Depo-Provera	<input type="radio"/>	<input type="radio"/>
(HV7_13b) Diaphragm, cervical cap, female condom	<input type="radio"/>	<input type="radio"/>
(HV7_13c) IUD (intrauterine device)	<input type="radio"/>	<input type="radio"/>
(HV7_13d) Withdrawal (penis withdrawn before ejaculation)	<input type="radio"/>	<input type="radio"/>
(HV7_13e) Natural methods (calendar, symptothermal, Billings, etc.)	<input type="radio"/>	<input type="radio"/>
(HV7_13f) Other method	<input type="radio"/>	<input type="radio"/>
Please specify (HV7_13f_aut) _____ [100 caractères]		

[Filtre : La question HV7_14 est posée uniquement aux filles de 14 ans et plus]

[Si SD9_2 = 2 et SD9_1 = 14 ans ou plus, passe à la question HV7_14; sinon, passe à la question HV7_8]

(HV7_14) In the past 12 months, how many times did you use the emergency contraception pill (morning-after pill, Plan B)?

(If you did not use it, select "Not once.")

Menu déroulant: Not once, Once, Twice, 3 times, 4 times, 5 times, 6 times, 7 times, 8 times, 9 times, 10 times, 11 times, 12 times or more

Anal sex

(HV7_8) Have you ever had anal sex (penetration of the penis into the anus) with your consent?

- Yes
- No [Passe à la question HV7_16]

(HV7_11) The last time you had anal sex (with your consent), did you or your partner use a condom?

- Yes
- No

[Filtre : La question HV7_16 est posée seulement à ceux ayant répondu « oui » à la question HV7_0.]

(HV7_16) Up until now, when you engaged in sexual relations (oral, vaginal or anal) with your consent, it was...

- always with a person of the opposite sex 1
- mostly with a person of the opposite sex 2
- always with a person of the same sex (as you) 3
- mostly with a person of the same sex (as you) 4
- equally with persons of the same sex (as you) or opposite sex 5

Your experience with cigarillos, cigars, electronic cigarettes and other tobacco products

(HV8_6) In the past 30 days, have you smoked cigarillos or little cigars, even just a few puffs?

- No, I haven't smoked cigarillos or little cigars in the past 30 days 1
- Yes, every day 2
- Yes, almost every day 3
- Yes, a few times (a few days) 4
- Yes, one or two days 5

(HV8_7) Have you ever used an electronic cigarette (or e-cigarette), even if just for a few puffs?

- Yes 1
- No 2 [passe à la question HV8_9]

(HV8_8) In the past 30 days, have you used an electronic cigarette (or e-cigarette)?

- Yes 1
- No 2

(HV8_9) In the past 30 days, have you used a tobacco product other than cigarettes, cigarillos or little cigars?

- Yes 1
 - **(HV8_9P)** Please specify the product(s): _____ [70 caractères]
- No 2

Your experience with cigarettes

(HV8_2T) Have you ever tried cigarette smoking, even just a few puffs?

- Yes
- No [Passe à la question HV_J-3]

(HV8_2T) Have you ever smoked a whole cigarette?

- Yes
- No [Passe à la question HV8_5Y]

(HV8_3AT) How old were you when you smoked your first whole cigarette?

I was ____years old

Liste déroulante (âge en ordre décroissant) : [Continu : âge maximum = SD9_1, âge minimum = 1 an]

(HV8_4T) Have you smoked 100 or more cigarettes in your life?

100 cigarettes = 4 packs of 25 cigarettes

- Yes
- No
- I don't know

(HV8_5T) In the past 30 days, have you smoked cigarettes, even just a few puffs?

- No, I haven't smoked in the past 30 days [Passe à la question (HV_J_3)]
- Yes, every day
- Yes, almost every day
- Yes, a few times (a few days)

Your experience with alcohol

1 DRINK CORRESPONDS TO...



1 glass of wine
(120-150 ml or
4-5 oz)

=



1 small bottle of
beer
(341 ml or
10 oz)

=



1 small shot of
hard liquor
(30-40 ml or
1- 1½ oz)

=



1 shooter
(30-40 ml or
1- 1½ oz)

Do not consider beer with a 0.5% rating as an alcoholic beverage.

[À garder pour chaque question de la section HV_J]

(HV_J_3) In your lifetime, have you ever drunk alcohol that is, more than just a few sips?

- Yes
- No [Passe à la question HV_14a]

(HV_J_4) How old were you when you first had more than a sip or two of beer, wine, etc.?

I was ____ years old

Liste déroulante (âge en ordre décroissant) : [Continu : âge maximum = SD9_1, âge minimum = 1 an]

(HV_J_5) In the past 12 months, how often did you drink alcohol?

- I didn't drink alcohol in the past 12 months [Passe à la question HV_J_6c]
- Just once to try
- Less than once a month (occasionally)
- About once a month
- Weekends **or** once or twice a week
- 3 times a week or more **but** not every day
- Every day

In the past 12 months, how many times have you...

		Not once	Once	Twice	3 times	4 times	5 to 10 times	11 to 25 times	26 times or more
HV_J_6	had 5 drinks or more of alcohol on the same occasion?	<input type="radio"/>							
HV_J_6a	had 8 drinks or more of alcohol on the same occasion?	<input type="radio"/>							

(HV_J_6b) In the past 30 days, did you drink alcohol?

- Yes
- No

(HV_J_6c) In your lifetime, have you ever drunk alcohol on a regular basis, meaning at least once a week for at least one month?

- Yes
- No → [Passe à la question HV_J_14a]

(HV_J_6d) 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

Liste déroulante (âge en ordre décroissant) : [Continu : âge maximum = SD9_1, âge minimum = 1 an]

[Filtre : La question HV_J_14a est posée à tous.]

(HV_J_14a) How difficult or easy do you think it would be for you personally to obtain alcohol within 24 hours?

- Very easy
- Fairly easy
- Fairly difficult
- Very difficult
- Impossible
- I don't know

Your experience with drugs

(HV_J_7) In your lifetime, have you ever used drugs?

- Yes
 No [Passe à la question HV_J_13]

(HV_J_8) How old were you when you first used drugs?

I was _____ years old

Liste déroulante (âge en ordre décroissant) : [Continu : âge maximum = SD9_1, âge minimum = 1 an]

(HV_J_9) In the past 12 months, how often did you use each of the following drugs?

	I didn't	Just once to try	Less than once a month <u>or</u> occasionally	About once a month	Weekends OR once or twice a week	3 times a week or more <u>but</u> not every day	Every day
HV_J_9_1 Cannabis (marijuana, pot, weed, hash, hashish oil, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
HV_J_9_2 Cocaine (coke, snow, crack, free base, powder, rocks, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
HV_J_9_3 Solvents, gas, glue, poppers, nitrites, whippets, cleaners, dusters, etc.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
HV_J_9_4 Hallucinogens (LSD, acid, candy, blotters, PCP, mescaline, mess, magic mushrooms, mush, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
HV_J_9_5 MDMA (ecstasy, E, XTC, X, pill, dove, love drug, molly, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
HV_J_9_13 GHB (liquid ecstasy, juice, g, gh, gamma-OH, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
HV_J_9_6 Heroin (smack, junk, point, jazz, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HV_J_9_7 Amphetamines or methamphetamines (speed, uppers, peanut, meth, crystal, ice, pill, wake-up, pep pills, peach, etc.)	<input type="radio"/>						
HV_J_9_8 Medication without a prescription to get high (Ativan, xanies, Rivotril, Seroquel, Ritalin, Concerta, codeine, fentanyl, Dialaudid, Oxycontin, etc.)	<input type="radio"/>						

[Ouvre une boîte; si HV_J_9_8 n'égale pas à « I didn't », demander :]

HV_J_9_8p Please specify the name of the medication (or medications) without a prescription that you took: _____ [100 caractères]

HV_J_9_10 Bath salts, plant food, synthetic cocaine, mephedrone, MDPV, alpha-PVP, Flakka, Gravel							
HV_J_9_11 Incense, Spice, K2, Dream, Yucatan fire							
HV_J_9_12 Dabs, wax, shatter, butter, budder, BHO oil, bubble hash, ice-wax							
HV_J_9_14 Salvia, ketamine, K, vitamin K, ket, ketty, special K, khat, BZP, 2C-B, nexus							
HV_J_9_9 Other drug							

[Ouvre une boîte; si HV_J_9_9 n'égale pas à « I didn't », demander :]

HV_J_9_9p Please specify the name of the drug (or drugs) that you took: _____ [100 caractères]

[Si HV_J_9_1 à HV_J_9_9 = « Je n'ai pas consommé », passer à HV_J_10a]

(HV_J_10) Thinking of the drug(s) you checked in the previous pages: In the past 30 days, did you use any of these drugs?

- Yes
- No

(HV_J_10a) In your lifetime, have you ever used drugs on a regular basis, meaning at least once a week for at least one month?

- Yes
- No → [Passe à la question HV_J_12]

(HV_J_10b) 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 → [Passe à la question HV_J_12]

Liste déroulante (âge en ordre décroissant) : [Continu : âge maximum = SD9_1, âge minimum = 1 an]

[Filtre : À poser la HV_J_13 aux seulement aux répondants ayant répondu « non » à la question HV_J_7.]

(HV_J_13) In the past 12 months, how often did you take medication without a prescription to get a high similar to that of a drug (Ativan, xanies, Rivotril, Seroquel, Wellbutrin, Ritalin, Concerta, codeine, fentanyl, Dilaudid, OxyContin, etc.)?

- I didn't take any medication without a prescription in the past 12 months 1
[Si HV_J_5 = « I didn't drink... », passe à la question HV_J_14b] Ou [Si HV_J_5 ≠ « I didn't drink... », passe à la question HV_J_12]
- 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 times a week or more **but** not every day 6
- Every day 7

HV_J_13P Please specify the name of the medication (or medications) without a prescription that you took: _____ [100 caractères]

(HV_J_12) In the past 12 months, have you ever been in any of the following situations?

		Yes	No
(HV_J_12A)	My alcohol or drug use has had negative psychological effects on me (e.g. anxiety, depression, problems concentrating, etc.).	<input type="radio"/>	<input type="radio"/>
(HV_J_12B)	My alcohol or drug use has had negative effects on my relationships with my family.	<input type="radio"/>	<input type="radio"/>
(HV_J_12C)	My alcohol or drug use has had negative effects with my friends or in my love life.	<input type="radio"/>	<input type="radio"/>
(HV_J_12D)	My alcohol or drug use has had negative effects on my studies.	<input type="radio"/>	<input type="radio"/>
(HV_J_12E)	I committed a delinquent act (even if I wasn't arrested by the police) while under the influence of alcohol or drugs	<input type="radio"/>	<input type="radio"/>
(HV_J_12F)	I have had the feeling as though the same quantities of alcohol or drugs were having less effect on me than they once had.	<input type="radio"/>	<input type="radio"/>
(HV_J_12G)	I have spoken with a healthcare worker or counsellor about my alcohol or drug use.	<input type="radio"/>	<input type="radio"/>

[Filtre: La question HV_J_14b est posée à tous]

(HV_J_14b) How difficult or easy do you think it would be for you personally to obtain cannabis within 24 hours?

- Very easy
- Fairly easy
- Fairly difficult
- Very difficult
- Impossible
- I don't know

About your neighbourhood or community environment

The next statements are about what might occur outside your school or home, such as in your neighbourhood, community, or with an adult other than your parents or guardian.

How true do you feel these statements are about your neighbourhood or community environment?

(SM_I_1) Outside of my home and school, there is an adult...

	Not at All True	A Little True	Pretty Much True	Very Much True
SM_I_1_1 Who really cares about me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_I_1_2 Who tells me when I do a good job.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_I_1_3 Who notices when I am upset about something.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_I_1_4 Who believes that I will be a success.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_I_1_5 Who always wants me to do my best.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_I_1_6 Whom I trust.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How true do you feel these statements are about you?

(SM_I_2) Outside of my home and school...

	Not at All True	A Little True	Pretty Much True	Very Much True
SM_I_2_1 I am part of clubs, sports teams, church/temple or other group activities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_I_2_2 I am involved in music, art, literature, sports or a hobby.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_I_2_3 I help other people.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

About your well-being

The following questions are about how you have been feeling during the past month.

(SM_J_1) In the past month, how often did you feel...

		Every day	Almost every day	About 2 or 3 times a week	About once a week	Once or twice	Never
SM_J_1_1	Happy?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_J_1_2	Interested in life?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_J_1_3	Satisfied with your life?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		

(SM_J_1s) In the past month, how often did you feel...

		Every day	Almost every day	About 2 or 3 times a week	About once a week	Once or twice	Never
SM_J_1_4	That you had something important to contribute to society?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_J_1_5	That you belonged to a community (like a social group, your school, or your neighborhood)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_J_1_6	That our society is becoming a better place for people like you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_J_1_7	That people are basically good?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_J_1_8	That the way our society works makes sense to you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SM_J_1_9	Good at managing the responsibilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	of your daily life?						
SM_J_1_10	That you had warm and trusting relationships with other young people?	<input type="radio"/>					
SM_J_1_11	That you had experiences that challenge you to grow and become a better person?	<input type="radio"/>					
SM_J_1_12	Confident to think or express your own ideas and opinions?	<input type="radio"/>					

About your sleeping habits

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

(HV_9_1) What time do you usually turn off the lights to go to sleep during the school week (Sunday to Thursday)?

NOTE: Round off to the nearest 15 minutes.

(HV_9_1H) _____ h **(HV_9_1M)** _____ min

Menu déroulant

<u>Hour</u>	<u>Minutes</u>
7 p.m.	0 min
8 p.m.	15 min
9 p.m.	30 min
10 p.m.	45 min
11 p.m.	
12 a.m.	
1 a.m.	
2 a.m.	
3 a.m.	

(HV_9_2) What time do you usually wake up in the morning during the school week (Monday to Friday)?

NOTE: Round off to the nearest 15 minutes.

(HV_9_2H) _____ h **(HV_9_2M)** _____ min

Menu déroulant

<u>Hour</u>	<u>Minutes</u>
3 a.m.	0 min
4 a.m.	15 min
5 a.m.	30 min
6 a.m.	45 min
7 a.m.	
8 a.m.	
9 a.m.	
10 a.m.	

(HV_9_3) What time do you usually turn off the lights to go to sleep on the weekend (Friday and Saturday)?

NOTE: Round off to the nearest 15 minutes.

(HV_9_3H) _____ h **(HV_9_3M)** _____ min

Menu déroulant

<u>Hour</u>	<u>Minutes</u>
7 p.m.	0 min
8 p.m.	15 min
9 p.m.	30 min
10 p.m.	45 min
11 p.m.	
12 a.m.	
1 a.m.	
2 a.m.	
3 a.m.	
4 a.m.	

(HV_9_4) What time do you usually wake up in the morning on the weekend (Saturday and Sunday)?

NOTE: Round off to the nearest 15 minutes.

(HV_9_4H) _____ h **(HV_9_4M)** _____ min

Menu déroulant

<u>Hour</u>	<u>Minutes</u>
3 a.m.	0 min
4 a.m.	15 min
5 a.m.	30 min
6 a.m.	45 min
7 a.m.	
8 a.m.	
9 a.m.	
10 a.m.	
11 a.m.	
12 p.m.	
1 p.m.	
2 p.m.	
3 p.m.	

The last few questions

(SD13_1) What is the highest level of education your mother (or the adult woman responsible for you) has achieved?

- Elementary
- High school or secondary school (did not finish)
- High school or secondary school (graduated)
- CEGEP, technical or vocational school, private commercial college or other
- University
- Other
↳ Please specify: _____ [Max 50 caractères]
- I don't know
- Not applicable (no mother or adult woman responsible for me)

(SD13_2) What is the highest level of education your father (or the adult man responsible for you) has achieved?

- Elementary
- High school or secondary school (did not finish)
- High school or secondary school (graduated)
- CEGEP, technical or vocational school, private commercial college or other
- University
- Other
↳ Please specify: _____ [Max 50 caractères]
- I don't know
- Not applicable (no father or adult man responsible for me)

(SD13_3) What is the main occupation of your mother (or the adult woman responsible for you)?

- She works full time (30 hours a week or more)
This includes being self-employed (at home or elsewhere)
- She works part-time (less than 30 hours a week)
This includes being self-employed (at home or elsewhere)
- She's at school
- She's unemployed (or is looking for a job)
- She's a homemaker (stay-at-home mom or housewife)
- She's retired, on maternity leave or on sick leave
- Other
↳ Please specify: _____ [Max 70 caractères]
- Not applicable (no mother or adult woman responsible for me)

(SD13_4) What is the main occupation of your father (or the adult man responsible for you)?

- He works full time (30 hours a week or more)
This includes being self-employed (at home or elsewhere)
- He works part-time (less than 30 hours a week)
This includes being self-employed (at home or elsewhere)
- He's at school
- He's unemployed (or is looking for a job)
- He's a homemaker (stay-at-home dad or house husband)
- He's retired, on paternity leave or on sick leave
- Other
↳ Please specify: _____ [Max 70 caractères]
- Not applicable (no father or adult man responsible for me)

(SD13_5) On average, would you say that you and your family are better off or worse off financially compared to your classmates?

- Better off
- Neither better nor worse off
- Worse off

(SD10_2) Where were you born?

- Quebec [Go to SD10_4]
- Other Canadian province or territory [Menu déroulant pour lister les autres provinces et territoires]
 - Alberta
 - British Columbia
 - Prince Edward Island
 - Manitoba
 - New Brunswick
 - Nova Scotia
 - Ontario
 - Saskatchewan
 - Newfoundland and Labrador
 - Nunavut
 - Northwest Territories
 - Yukon

[Then: Go to SD10_4]

- Outside Canada
 - ↳ ○ Algeria
 - China
 - Colombia
 - United States
 - France
 - Haiti
 - Italy
 - Lebanon
 - Morocco
 - Romania
 - Great Britain
 - Other

→ Please specify the country:

[Max 50 caractères]

(SD10_3) How long have you lived in Canada?

- Less than 2 years
- Between 2 and 3 years
- Between 4 and 5 years
- Between 6 and 10 years
- More than 10 years

(SD10_4) Where was your biological father born?

- Quebec
- Other Canadian province or territory
- Outside Canada

- Algeria
- China
- Colombia
- United States
- France
- Haiti
- Italy
- Lebanon
- Morocco
- Romania
- Great Britain
- Other

→ Please specify the country:

[Max 50 caractères]

- I don't know

(SD10_5) Where was your biological mother born?

- Quebec
- Other Canadian province or territory
- Outside Canada
 - Algeria
 - China
 - Colombia
 - United States
 - France
 - Haiti
 - Italy
 - Lebanon
 - Morocco
 - Romania
 - Great Britain
 - Other

→ Please specify the country:

_____ **[Max 50 caractères]**

- I don't know

(SD9_4) What is your postal code?

If you do not know your postal code, you can find it by looking at your student card.

Appendix:
Québec Health Survey of High School Students 2016-2017
Sources and author of the questions

Question	Questionnaire		Author			Source
	1	2	MSSS	Institut	Other	
HV2a	√	√			X	Actimètre 2004 (adapted questions); Nolin, B. (2012). <i>Indice d'activité physique : codification, critères et algorithmes – Enquête québécoise sur la santé des jeunes du secondaire (EQSJS) 2010-2011</i> , Québec, INSPQ, 17 p.
HV2	√	√			X	Actimètre 2004 (idem)
HV3_1	√	√		X		<i>Enquête sociale et de santé 1998 (ESS) [Health and Social Survey 1998]; Enquête québécoise sur la santé de la population 2008 (EQSP) [Québec Population Health Survey 2008]</i>
HV3_2	√	√		X		ESS 1998; EQSP 2008
HV3_3	√				X	John Wiley & Sons, Inc. (Collins, 1991) NOTE: To use one or more questions copyrighted to John Wiley & Sons, Inc., permission must be obtained from the publisher (including fees to be paid), and credit must be given as follows: "Credit to our work must appear on every copy using the Material and must include the following: Title of the Work, Author(s) and/or Editor(s) Name(s). Copyright © year and owner. Reproduced with permission of John Wiley & Sons, Inc."
HV3_4	√				X	John Wiley & Sons, Inc. (Collins, 1991) NOTE: To use one or more questions copyrighted to John Wiley & Sons, Inc., permission must be obtained from the publisher (including fees to be paid), and credit must be given as follows: "Credit to our work must appear on every copy using the Material and must include the following: Title of the Work, Author(s) and/or Editor(s) Name(s). Copyright © year and owner. Reproduced with permission of John Wiley & Sons, Inc."
HV3_5	√			X		<i>Enquête sociale et de santé auprès des enfants et des adolescents québécois 1999 (ESSEA) [Health and Social Survey of Québec Children and Youth 1999]</i>
HV3_6	√			X		ESSEA 1999
HV3_7	√				X	Project EAT (question modified) www.sphresearch.umn.edu/epi/project-eat/ Eisenberg, M.E., Wall, M. & Neumark-Sztainer, D. (2012), Muscle-enhancing Behaviors Among

						Adolescent Girls and Boys, <i>Pediatrics</i> , 130(6), 1019-1026.
HV4_1	√			X		ESSEA 1999
HV4_2	√			X		ESSEA 1999
HV4_3	√			X		ESSEA 1999
HV4_4	√			X		ESSEA 1999
HV4_5	√			X		ESSEA 1999
HV4_6	√			X		ESSEA 1999
HV4_7	√		X	X		Original question created for the <i>Enquête québécoise sur la santé des jeunes du secondaire 2010-2011</i> (EQSJS) [<i>Québec Health Survey of High School Students 2010-2011</i>]
HV4_8_1a à 8_1d	√				X	<i>Enquête sur le bien-être des jeunes Montréalais 2003</i> (EBEJM) [<i>Survey on the Well-being of Young Montrealers 2003</i>]
HV4_8_1e et 8_1f	√		X	X		Original questions created for the EQSJS 2016-2017
HV4_8_2a à 8_2d	√		X	X		Original questions created for the EQSJS 2016-2017
HV4_8_3	√				X	EBEJM 2003
HV4_10	√			X	X	ESSEA 1999; EBEJM 2003 (adapted from both surveys)
HV4_11	√			X		ESSEA 1999
HV5_10	√	√			X	Based on Statistics Canada's <i>National Longitudinal Survey of Children and Youth 2008-2009</i> (NLSCY)
HV5_11	√	√			X	Based on the MELS's <i>Enquête auprès des élèves du secondaire sur le travail rémunéré durant l'année scolaire 1991-1992</i> (EESTRM) [<i>Survey of High School Students on Paid Work During the School Year 1991-1992</i>]
HV5_12	√	√			X	Based on the EESTRM 1991-1992 (MELS)
HV5_13	√	√		X		Original question created for the EQSJS 2016-2017
HV5_14	√	√			X	<i>Canadian Young Workers Workplace Health & Safety Experience</i> (CYWWHSE), March 2000 (organization no longer exists)
HV5_15	√	√			X	Adapted from the IPSOS-Reid survey conducted as part of the 2nd AWCBC Public Forum in 2003
HV5_16	√	√			X	Based on the EESTRM 1991-1992 (MELS)
HV5_17	√			X		Original question created for the EQSJS 2016-2017
HV5_18	√				X	Adapted from the IPSOS-Reid survey conducted as part of the 2nd AWCBC Public Forum in 2003
HV6_1, HV6_7, HV6_10, HV6_11 et HV6_12	√				X	<i>International Study of Asthma and Allergies in Childhood 1993</i> (ISAAC) (in the public domain)
HV7_0	√	√		X		ESSEA 1999
HV7_0a	√	√		X		ESSEA 1999
HV7_0b	√	√		X		ESSEA 1999 (adapted)
HV7_1	√	√		X		ESSEA 1999
HV7_4	√	√		X		ESSEA 1999

HV7_7	√	√		X		ESS 1998; EQSP 2008
HV7_8	√	√		X		ESSEA 1999
HV7_11	√	√		X		ESS 1998; EQSP 2008
HV7_12	√	√			X	<i>Youth Risk Behavior Surveillance Survey (YRBSS)</i> by the Centers for Disease Control (in the public domain)
HV7_13	√	√			X	<i>Portrait de la santé sexuelle des jeunes adultes au Québec (PIXEL study)</i> [<i>Portrait of the Sexual Health of Young Adults in Québec</i>], by Edith Guilbert
HV7_14	√	√			X	<i>Étude des conditions de vie et des besoins de la population, 2008 (ECOBES)</i> [<i>Study on the Living Conditions and Needs of the Population, 2008</i>] (Enquête interrégionale auprès des jeunes) [<i>Interregional Youth Survey</i>]
HV7_15	√	√			X	<i>Enquête sur le parcours amoureux des jeunes (PAJ)</i> [<i>Survey on the Love Lives of Youth</i>], Martin Blais (in the public domain)
HV7_16	√	√		X		Based on the <i>Enquête québécoise sur les facteurs de risque associés au sida et aux autres MTS : la population des 15-29 ans, 1991</i> [<i>Québec Survey on Risk Factors Associated with STDs in the 15-29 Year-old Population, 1991</i>] (Santé Québec, 1992) and on the ESS 1998
HV8_1	√	√		X		ESS 1998; ESSEA 1999; EQSP 2008
HV8_2T	√	√			X	<i>Youth Smoking Survey, 1994 (YSS), Q9a</i> ; Statistics Canada
HV8_3T	√	√			X	YSS 1994, Q12; Statistics Canada
HV8_3AT	√	√			X	YSS 1994, Q13; Statistics Canada
HV8_4T	√	√			X	YSS 1994, Q14; Statistics Canada
HV8_5T	√	√			X	YSS 1994, Q17; Statistics Canada
HV8_6	√	√		X		<i>Enquête québécoise sur le tabac, l'alcool, la drogue et le jeu chez les élèves du secondaire 1998 (ETADJES)</i> [<i>Québec Survey on Smoking, Alcohol, Drugs and Gambling in High School Students 1998</i>]
HV8_7 et HV8_8	√	√			X	YSS 2012-2013 / Source: Canadian Cancer Society
HV8_9	√	√		X		ETADJES (modified)
HV_9_1 à 9_4	√	√			X	<u>Original questions:</u> L. LABERGE, D. PETIT, C. SIMARD, F. VITARO, R.E. TREMBLAY & J. MONTPLAISIR (2001). Development of sleep patterns in early adolescence; <i>Journal of Sleep Research</i> , vol. 10, p. 59-67. <u>Adapted questions (those used in the QSHSS 2016-2017):</u> Enquête interrégionale auprès des jeunes du secondaire 2008, Agence de la santé et des services sociaux du Saguenay-Lac-Saint-Jean (René Lapierre, 2010)
HV_J_3	√	√		X		ETADJES

HV_J_4	√	√		X		ESSEA 1999; ETADJES 2004
HV_J_5	√	√			X	Recherche et intervention sur les substances psychoactives – Québec (RISQ) [Research and Intervention on Psychoactive Substances]
HV_J_6	√	√			X	RISQ
HV_J_6a à J_6d	√	√			X	RISQ
HV_J_7 et HV_J_8	√	√		X		Added to the RISQ's DEP-ADO index for the ETADJES 2004 (filter question); ESSEA 1999
HV_J_9_1 à J_9_4	√	√			X	RISQ
HV_J_9_5	√	√	X	X		Adapted from: Ministère de la Santé et des Services sociaux, <i>More About Drugs</i> , c2015 http://publications.msss.gouv.qc.ca/msss/en/document-000275/
HV_J_9_6 à J_9_9	√	√			X	RISQ
HV_J_9_10, J_9_11, J_9_12, HV_J_9_13 et J_9_14	√	√	X	X		Adapted from: Ministère de la Santé et des Services sociaux, <i>More About Drugs</i> , c2015 http://publications.msss.gouv.qc.ca/msss/en/document-000275/
HV_J_10	√	√			X	RISQ
HV_J_10a et 10b	√	√			X	RISQ
HV_J_12a à J_12g	√	√			X	RISQ
HV_J_13 et J_13P	√	√	X	X		Original questions created for the ETADJES 2013; adapted from the RISQ's DEP-ADO index
HV_J_14a et J_14b	√	√			X	<i>Flash Eurobarometer 401. Young people and drugs Report 2014</i> (in the public domain)
SM_A_1a		√		X		ESS 1998; ESSEA 1999 (translated and adapted from the <i>Psychiatric Symptom Index</i> by F. W. ILFELD, 1976)
SM_B_1_1	√	√		X		ESSEA 1999
SM_B_1_2	√	√			X	EBEJM 2003; Statistics Canada's <i>Canadian Community Health Survey, 2005</i> (CCHS)
SM_B_1_3	√	√			X	CCHS 2005
SM_B_1_4	√	√		X		ESSEA 1999
SM_B_1_5	√	√			X	CCHS 2005
SM_B_2a	√	√	X	X		Original question created for the EQSJS 2010-2011
SM_B_2b	√	√		X		ESSEA 1999
SM_B_4b_1 à 4b_11	√	√			X	EBEJM 2003; NLSCY 2004-2005
SM_B_4c_1 à 4c_10	√	√			X	EBEJM 2003; NLSCY 2004-2005
SM_B_4d	√	√			X	EBEJM 2003; NLSCY 2004-2005
SM_B_5_1 à SM_B_5_2	√	√			X	<i>Styles de vie des jeunes du secondaire en Outaouais, 1996</i> (SVJSO) [<i>Lifestyles of Outaouais High School Students, 1996</i>]; EBEJM 2003
SM_B_5_3	√	√			X	EBEJM 2003
SM_B_5_4 à SM_B_5_7	√	√			X	F. Lavoie & L. Vézina (2001). <i>Violence dans les relations amoureuses. Enquête sociale et de santé auprès des enfants et adolescents québécois 1999</i> , Québec, Institut de la statistique du Québec, 471-484. Based on the <i>Conflict Tactics Scale</i> (Straus 1979)
SM_B_5_8	√	√			X	EBEJM 2003

SM_C_3a_1 à 3a_5	√	√			X	SVJJSO 1996; <i>Expérience de vie des élèves du secondaire de la Montérégie 1998</i> (EVENSM) [<i>Life Experience of Montérégie High School Students 1998</i>], Direction de la santé publique de la Montérégie; ESSEA 1999
SM_C_3a_6	√	√			X	EVENSM 1998; ESSEA 1999; EBEJM 2003
SM_C_3a_7	√	√			X	EBEJM 2003
SM_C_3b_1 et 3b_2	√	√	X	X		Original questions created for the EQSJS 2010-2011
SM_C_4_1 à SM_C_3	√	√			X	SVJJSO 1996; EVENSM 1998; EBEJM 2003.
SM_C_4_4 à SM_C_4_7	√	√			X	F. Lavoie & L. Vézina (2001). Violence dans les relations amoureuses. <i>Enquête sociale et de santé auprès des enfants et adolescents québécois 1999</i> , Québec, Institut de la statistique du Québec, 471-484. Based on the <i>Conflict Tactics Scale</i> (Straus 1979)
SM_C_4_8	√	√			X	EBEJM 2003
SM_D_1b_1 à 1b_10	√	√			X	Vallières & Vallerand, 1990 (French version), scale adapted from Morris ROSENBERG (1965), <i>Society and the adolescent self-image</i> , Princeton University Press, 326 p. NOTE: The mailing address to obtain permission to use this material is <i>The Morris Rosenberg Foundation</i> ; c/o Dept. of Sociology, University of Maryland (English version)
SM_D_3_1 à 3_3		√			X	<i>California Healthy Kids Survey</i> (CHKS) 2007-2008 and 2016-2017 NOTE: To use questions from the CHKS, an agreement (contractual license and fees to be paid) must be signed with the CHKS WestEd organization (chks.wested.org).
SM_D_4_1 et 4_2	√	√			X	CHKS 2007-2008 and 2016-2017 NOTE: To use questions from the CHKS, an agreement (contractual license and fees to be paid) must be signed with the CHKS WestEd organization (chks.wested.org).
SM_D_4_3 à 4_7	√	√			X	SVJJSO 2002
SM_D_5_1 et 5_2		√			X	CHKS 2007-2008 and 2016-2017 NOTE: To use questions from the CHKS, an agreement (contractual license and fees to be paid) must be signed with the CHKS WestEd organization (chks.wested.org).
SM_D_5_3		√	X	X		Original question created for the EQSJS 2010-2011
SM_D_6a_7 et 6a_8		√			X	SVJJSO 1996 and 2002
SM_D_6a_9		√			X	EBEJM 2003
SM_D_6b_4, 6b_5, 6b_12 et 6b_13	√	√			X	John Wiley & Sons, Inc. (Tangney, et al., 2004)

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SM_E_2	√	√			X	Michel Janosz, 2004
SM_E_3	√	√			X	Michel Janosz, 2004
SM_E_4	√	√			X	Michel Janosz, 2004
SM_E_5a et 5b	√	√			X	Michel Janosz, 2004
SM_E_6	√	√			X	Michel Janosz, 2004
SM_E_7	√	√			X	Michel Janosz, 2004
SM_F_1_1 à 1_5		√			X	CHKS 2007-2008 NOTE: To use questions from the CHKS, an agreement (contractual license and fees to be paid) must be signed with the CHKS WestEd organization (chks.wested.org).
SM_F_2_1 à 2_6		√			X	CHKS 2007-2008 Idem
SM_F_3_1 à 3_3		√			X	CHKS 2007-2008 Idem
SM_G_1_1 à 1_6	√	√			X	CHKS 2007-2008 and 2016-2017 Idem
SM_G_1_7	√	√			X	SVJSO 1996 and 2002
SM_G2_1 à G2_3	√	√			X	CHKS 2007-2008 and 2016-2017 NOTE: To use questions from the CHKS, an agreement (contractual license and fees to be paid) must be signed with the CHKS WestEd organization (chks.wested.org).
SM_G_3a et 3b	√	√			X	ECOBES 2002; Janosz 2007
SM_H_1_1 à 1_3	√	√			X	CHKS 2007-2008 and 2016-2017 NOTE: To use questions from the CHKS, an agreement (contractual license and fees to be paid) must be signed with the CHKS WestEd organization (chks.wested.org).
SM_H_2_1 à 2_3		√			X	CHKS 2007-2008 and 2016-2017 Idem
SM_H_3a et 3b	√	√			X	F. Lavoie & L. Vézina (2001). Violence dans les relations amoureuses. <i>Enquête sociale et de santé auprès des enfants et adolescents québécois 1999</i> , Québec, Institut de la statistique du Québec, 471-484. Based on the <i>Conflict Tactics Scale</i> (Straus 1979)

SM_I_1_1 à 1_6		√			X	CHKS 2007-2008 and 2016-2017 NOTE: To use questions from the CHKS, an agreement (contractual license and fees to be paid) must be signed with the CHKS WestEd organization (chks.wested.org).
SM_I_2_1 à 2_3		√			X	CHKS 2007-2008 and 2016-2017 Idem
SM_J_1_1 à 1_12		√			X	Cory Keyes, 2002, 2006
SD9_1	√	√		X		ESSEA 1999; ETADJES
SD9_2	√	√		X		ESSEA 1999
SD9_3	√	√		X		ESSEA 1999
SD9_4	√	√		X		EQSJS 2010-2011
SD10_2	√	√		X		ESS 1992-1993; ESSEA 1999
SD10_3	√	√	X	X		<i>Enquête québécoise sur la satisfaction des usagers à l'égard des services de santé et des services sociaux, 2006-2007 (EQSSS) [Québec Survey on Users' Satisfaction with Regard to Health and Social Services]; EQSP 2008</i>
SD10_4	√	√		X		ESS 1992-1993; ESSEA 1999
SD10_5	√	√		X		ESS 1992-1993; ESSEA 1999
SD12_1	√	√		X		<i>Enquête québécoise sur le tabagisme chez les élèves du secondaire, 1998 (ETES) [Québec Survey on Smoking in High School Students]; ESSEA 1999</i>
SD13_1 et SD13_2	√	√			X	<i>Enquête Ados, famille et milieu de vie, 1994 [Teens, Family and Living Environment survey, 1994], by the Ministère de l'Éducation and the Université Laval's Centre de recherche sur l'adaptation des jeunes et des familles à risque (JEFAR)</i>
SD13_3	√	√		X		ESS 1998; ESSEA 1999
SD13_4	√	√		X		ESS 1998; ESSEA 1999
SD13_5	√	√			X	<i>Enquête Ados, famille et milieu de vie, 1994 [Teens, Family and Living Environment survey, 1994], by the Ministère de l'Éducation and the Université Laval's Centre de recherche sur l'adaptation des jeunes et des familles à risque (JEFAR)</i>