

# Physical Health Questions on the 2021 Healthy Youth Survey

Number of question as listed in the "Frequency Reports" for the 2021 HYS results:

<https://www.askhys.net/Reports>

\*\*\* "grades 8-12" means that those questions were only asked to students in those grades. If no grade is indicated, that means that the questions were asked to all students who took the survey.

## **Demographics:**

#15 Are your current living arrangements the result of losing your home because your family cannot afford housing? (grades 8-12)

#16 Do you receive free or reduced price lunches at school? (grades 8-12)

## **Nutrition:**

#80 Obese or overweight? (Computed from numeric responses to "How tall are you without your shoes on?" and "How much do you weight without your shoes on?") (grades 8-12)

#81 How often do you eat dinner with your family?

#82 How often in the past 12 months did you or your family have to cut meal size or skip meals because there wasn't enough money for food? (grades 8-12)

#83 Did you eat breakfast today?

#84 Number of servings of fruits and vegetables eaten per day (Computed from FV1-FV6) (grades 8-12)

#85 During the past 7 days, how many times did you drink sugar-sweetened drinks, like soda, sports drinks, energy drinks, coffee drinks, tea drinks, or other flavored sugar- sweetened drinks? Do not include diet, sugar-free or drinks with artificial sweetener. (grades 8-12)

#86 During the past 7 days, how many times did you drink sugar-sweetened drinks like soda, sports drinks, energy drinks, coffee drinks, tea drinks, or other flavored sugar-sweetened drinks at school (including any after-school and weekend activities)? Do not include diet, sugar-free or drinks with artificial sweetener (grades 8-12)

#87 During the past 7 days, where did you usually get the soda or other sugar-sweetened drinks that you drank at school? Choose only one answer.



#88 How many sugar-sweetened drinks (such as sodas, sports drinks, energy drinks, coffee drinks, or tea drinks) did you drink yesterday? (only asked to 6<sup>th</sup> grade)

#89 Did you buy any sugar-sweetened drink (such as sodas, sports drinks, energy drinks, coffee drinks, or tea drinks) at school yesterday (only asked to 6<sup>th</sup> grade)

**Physical Activity:**

#90 In the past 7 days, on how many days were you physically active for a total of at least 60 minutes per day? (Add up all the time you spent in any kind of physical activity that increases your heart rate and makes you breathe hard some of the time)

#91 On how many of the past 7 days did you do exercises to strengthen or tone your muscles, such as push-ups, sit-ups, or weight lifting? (grades 8-12)

#92 On average how many days a week do you walk to or from school?

#93 On average how many days a week do you ride a bicycle to or from school?

#97 Did you participate in team sports or athletics in the past 12 months? (grades 8-12)

**Sedentary Behavior:**

#94 On an average school day, how many hours do you watch TV shows or movies or stream videos (such as YouTube, Netflix, Hulu) on any electronic device (Computer, TV set, tablets or smartphone)?

#95 On an average school day, how many hours do you play video or computer games, or use a computer for something that is not school work? (Count time spent on things such as Xbox, PlayStation, tablet or smartphone, social media).

**Health Care and Asthma:**

#98 When was the last time you saw a doctor or health care provider for a check-up or physical exam when you were not sick or injured? (grades 8-12)

#99 Has a doctor or nurse ever told you that you have asthma? (grades 8-12)

#100 Do you still have asthma? (grades 8-12)

**Oral Health:**

#101 When was the last time you saw a dentist for a check-up, exam, teeth cleaning, or other dental work? (grades 8-12)

#102 During the past 12 months, how many days did you miss some school because of toothache? (Do not include toothache due to braces or injury.) (grades 8-12)

#103 During the past year, did you miss any time from school because of toothache? (Do not include toothache due to braces or an injury.) (only asked to 6<sup>th</sup> grade)

**Sleep:**

#104 On an average school night how many hours do you sleep? (grades 8-12)

**Disabilities:**

#105 Do you have any physical disabilities or long-term health problems lasting or expected to last 6 months or more? (grades 8-12)

#106 Do you have any long-term emotional problems or learning disabilities lasting or expected to last 6 months or more? (grades 8-12)

#107 Would other people consider you to have a disability or long-term health problem including physical health, emotional, or learning problems? (grades 8-12)

#108 Are you limited in any activities because of a disability or long-term health problem including physical health, emotional, or learning problems expected to last 6 months or more? (grades 8-12)

**Sexual Behavior (optional questions, not administered to all students):**

#109 Have you ever had sex? (grades 8-12)

#110 How old were you when you had sex for the first time? (grades 8-12)

#111 With how many people have you ever had sex? (grades 8-12)

#112 During your life, with whom have you had sexual contact? Choose all that apply (grades 8-12)

#113 The last time you had sex, what method(s) did you or your partner use to prevent pregnancy and/or sexually transmitted infections? Choose all that you used. (grades 8-12)

**Unintentional Injury:**

#114 When you ride a bicycle, how often do you wear a helmet? (only asked to 6<sup>th</sup> grade)

#115 How good a swimmer do you think you are?

#116 Have you ever taken formal swimming lessons?

#117 & #118 During the past 30 days, how many times did you ride in a car or other vehicle driven by someone who had been drinking alcohol?

- #119 During the past 30 days, how many times did you: Drive a car or other vehicle when you had been drinking alcohol? (grades 8-12)
- #120 During the past 30 days, how many times did you ride in a car or other vehicle driven by someone who had been using marijuana? (grades 8-12)
- #121 During the past 30 days, how many times did you: Drive a car or other vehicle within three hours after using marijuana? (grades 8-12)
- #122 During the past 30 days, how many days did you: Drive a car or other vehicle when you had been drinking alcohol and using marijuana at the same time?
- #123 During the past 30 days, did you ride in a car or other vehicle driven by someone who was texting or emailing? (only asked to 6<sup>th</sup> grade)
- #124 During the past 30 days, how many days did you text or email while driving a car or other vehicle? (grades 8-12)

**Extracurricular Activities:**

Which of the following activities for people your age are available in your community?

- #194 Sports teams and recreation (grades 8-12)
- #195 Scouts, Camp Fire, 4-H Clubs, or other service clubs (grades 8-12)
- #196 Boys and Girls Club, YMCA, or other activity clubs (grades 8-12)

**Facts Sheets found here:** <https://www.askhys.net/FactSheets>

*\*\*\* Fact Sheets are not created for all topic areas*

**Weight and Obesity:**

- Obese, overweight, healthy weight and underweight

**Dietary Behaviors:**

- Eating dinner as a family
- Sugary drink consumption
- Fruit and vegetable intake
- Eating breakfast

**Oral Health:**

- Dental visits
- Missed school due to toothache

**Physical Activity:**

- Physical activity
- Screen time

**Sexual Behavior, Orientation, and Identity:**

- Sexual Behavior
- STD and Pregnancy Prevention