

2025 QUESTIONNAIRE – 6TH GRADE



OREGON
SHS

STUDENT HEALTH SURVEY

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SURVEY VERSION – FROM SURVEY BEING ADMINISTERED/DO NOT ASK

Indicate survey version

- 1 6th
- 2 8th
- 3 11th

CONSENT

S1. Do you agree to participate in the Student Health Survey (SHS)?

- 1 Yes
- 2 No

OVERALL HEALTH

1. Would you say that in general your emotional and mental health is...

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair
- 5 Poor
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

2. Would you say that in general your physical health is...

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair
- 5 Poor
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

POSITIVE YOUTH DEVELOPMENT (PYD) – ODD YEARS

For these next statements, mark how true you feel each is for you.

3. I can do most things if I try.

- 1 Very much true
- 2 Pretty much true
- 3 A little true
- 4 Not at all true
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

4. I can work out my problems.

- 1 Very much true
- 2 Pretty much true
- 3 A little true
- 4 Not at all true
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

5. There are people in my life who encourage me to do my best.

- 1 Very much true
- 2 Pretty much true
- 3 A little true
- 4 Not at all true
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

6. I believe that I can make a difference in my community.

- 1 Very much true
- 2 Pretty much true
- 3 A little true
- 4 Not at all true
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

SCHOOL CLIMATE

We want to know how you feel about your school. Please tell us how strongly you agree or disagree with the next statements.

7. There is at least one teacher or other adult in my school that really cares about me.

- 1 Very much true
- 2 Pretty much true
- 3 A little true
- 4 Not at all true
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

8. I feel safe at my school.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

SCHOOL CLIMATE – ODD YEARS

9. It is easy to talk with teachers and other adults at this school.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

10. I am happy to be at this school.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

11. In the past 30 days, have you missed any days of school?

- 1 Yes
- 2 No
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

GRADES – ODD YEARS

12. What kind of grades do you usually get in school?

- 1 Mostly A's
- 2 Mostly B's
- 3 Mostly C's
- 4 Mostly D's
- 5 Mostly F's
- 6 None of these grades
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

BULLYING

The next questions are about bullying.

If you or someone you know needs help, a variety of free, confidential and anonymous support is available 24/7. Please see the Support Resource Sheet that will be handed out when you're done with the survey for details.

13. During the past 12 months, have you ever been bullied on school property?

- 1 Yes
- 2 No
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

14. During the past 12 months, have you ever been bullied when you were not on school property?

- 1 Yes
- 2 No
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

15. During the past 12 months, have you ever been electronically bullied? Count being bullied through texting, Instagram, other social media, online gaming, or livestreaming?

- 1 Yes
- 2 No
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

ACCESS TO CARE – ODD YEARS

We'd like to see if you're able to get the physical and mental health care you need.

16. When did you last go to a doctor or nurse practitioner for a check-up when you were not sick or injured?

- 1 During the past year
- 2 Between 1 and 2 years ago
- 3 More than 2 years ago
- 4 Never
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

17. When did you last get a dental check-up, exam, teeth cleaning, or other dental work?

- 1 During the past year
- 2 Between 1 and 2 years ago
- 3 More than 2 years ago
- 4 Never
- 7 I am not sure
- I don't know what this question is asking
- 9 I prefer not to answer

18. Have you ever had a cavity? **You can choose more than one.**

- 1 During the past year
- 2 Between 1 and 2 years ago
- 3 More than 2 years ago

IF ANY OF THE FOLLOWING SELECTED, CANNOT SELECT ANY OTHER RESPONSE

- 4 I have never had a cavity
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

MENTAL HEALTH

Earlier we asked about your overall mental health, now we'd like to ask a few more questions about how you're feeling.

-
19. During the past 30 days, how often have you felt worried or stressed?
- 1 Not at all
 - 2 Several days
 - 3 More than half the days
 - 4 Nearly every day
 - 7 I am not sure
 - 8 I don't know what this question is asking
 - 9 I prefer not to answer
-
20. During the past year, did you ever feel so sad or hopeless almost every day for **two weeks or more in a row** that you stopped doing some usual activities?
- 1 Yes
 - 2 No
 - 7 I am not sure
 - 8 I don't know what this question is asking
 - 9 I prefer not to answer
-
21. During the past year, did you do something to purposely hurt yourself without wanting to die, such as cutting or burning yourself on purpose?
- 1 Yes
 - 2 No
 - 7 I am not sure
 - 8 I don't know what this question is asking
 - 9 I prefer not to answer
-

SUICIDE PREVENTION

22. During the past year, did you ever consider attempting suicide?

- 1 Yes
- 2 No
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

23. During the past year, did you attempt suicide?

- 1 Yes
- 2 No
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

SEPARATE SCREEN

If you need emotional support, call or text the national mental health crisis hotline at **988**
for free and confidential help 24/7.

24. There is a teacher or some other adult in my school I feel safe going to if I need help.

1 Yes

2 No

SKIP TO Q26

7 I am not sure

SKIP TO Q26

8 I don't understand this question

SKIP TO Q26

9 I prefer not to answer

SKIP TO Q26

25. How likely are you to go to this teacher or other adult in school if you need help?

1 Very likely

2 Somewhat likely

3 Somewhat unlikely

4 Not at all likely

7 I am not sure

8 I don't know what this question is asking

9 I prefer not to answer

26. Outside of school hours, there is a safe place or person I can go to if I need help.

1 Yes

2 No

SKIP TO Q28

7 I am not sure

SKIP TO Q28

8 I don't know what this question is asking

SKIP TO Q28

9 I prefer not to answer

SKIP TO Q28

27. How likely are you to go to this safe place or person outside of school if you need help?

1 Very likely

2 Somewhat likely

3 Somewhat unlikely

4 Not at all likely

7 I am not sure

8 I don't know what this question is asking

9 I prefer not to answer

COMPREHENSIVE SEX EDUCATION

The next questions ask about topics you may have been taught in school during the last school year (2024-25).

-
28. During the last school year, were you taught in school about healthy and respectful relationships?
- 1 Yes
 - 2 No
 - 7 I am not sure
 - 8 I don't know what this question is asking
 - 9 I prefer not to answer

ALCOHOL

The next questions ask about drinking alcohol. This includes drinking beer, wine, spiked seltzers such as White Claw or Truly, and liquor “shots” such as rum, gin, vodka, or whiskey. For these questions, drinking alcohol does not include drinking a few sips of wine for religious purposes.

29. Have you ever had a drink of alcohol other than a few sips?

- | | | |
|---|---|--------------------|
| 1 | Yes | |
| 2 | I have never had a drink of alcohol | SKIP TO Q31 |
| 7 | I am not sure | SKIP TO Q31 |
| 8 | I don't know what this question is asking | SKIP TO Q31 |
| 9 | I prefer not to answer | SKIP TO Q31 |

30. During the past 30 days, did you have at least one drink of alcohol?

- | | |
|---|---|
| 1 | Yes |
| 2 | No |
| 7 | I am not sure |
| 8 | I don't know what this question is asking |
| 9 | I prefer not to answer |

MARIJUANA

The next questions are about marijuana. This means marijuana or cannabis in any form, sometimes called weed, hash or pot. Do not include hemp-based or CBD-only products.

31. Have you ever used marijuana in any form?

- | | | |
|---|---|--------------------|
| 1 | Yes | |
| 2 | I have never used marijuana or cannabis | SKIP TO Q33 |
| 7 | I am not sure | SKIP TO Q33 |
| 8 | I don't know what this question is asking | SKIP TO Q33 |
| 9 | I prefer not to answer | SKIP TO Q33 |
-

32. During the past 30 days, did you use marijuana?

- | | |
|---|---|
| 1 | Yes |
| 2 | No |
| 7 | I am not sure |
| 8 | I don't know what this question is asking |
| 9 | I prefer not to answer |

TOBACCO

6TH ONLY

33. Have you ever used vape, cigarettes or chewing tobacco products?

- | | | |
|---|---|--------------------|
| 1 | Yes | |
| 2 | No | SKIP TO Q35 |
| 7 | I am not sure | SKIP TO Q35 |
| 8 | I don't know what this question is asking | SKIP TO Q35 |
| 9 | I prefer not to answer | SKIP TO Q35 |

34. During the past 30 days, which products have you used? **You can choose more than one.**

- | | |
|---|--------------------------------------|
| 1 | Cigarettes |
| 2 | Vaping product or other e-cigarettes |
| 3 | Chewing tobacco |

IF ANY OF THE FOLLOWING SELECTED, CANNOT SELECT ANY OTHER RESPONSE

- | | |
|---|---|
| 4 | I have not used any of these products |
| 7 | I am not sure |
| 8 | I don't know what this question is asking |
| 9 | I prefer not to answer |

35. In the past month, have you used any flavored tobacco or vaping product such as mint, fruit, coffee, candy, or other flavors? Exclude marijuana

- | | |
|---|---|
| 1 | Yes |
| 2 | No |
| 7 | I am not sure |
| 8 | I don't know what this question is asking |
| 9 | I prefer not to answer |

DEMOGRAPHICS – RACE AND ETHNICITY

People have different life experiences that can impact their health. Please tell us about yourself so we can provide the best type of support for you to be healthy and thrive.

36. What is your race or ethnicity? **You can choose more than one.**

100 Indigenous American, American Indian or Alaska Native

200 Asian

300 Black or African American

400 Hispanic or Latino/a/x

500 Native Hawaiian or Pacific Islander

601 Middle Eastern/North African/SWANA (Southwest Asian/North African) s

800 White

IF ANY OF THE FOLLOWING SELECTED, CANNOT SELECT ANY OTHER RESPONSE

997 I am not sure

SKIP TO Q48

998 I don't know what this question is asking

SKIP TO Q48

999 I prefer not to answer

SKIP TO Q48

IF INDIGENOUS, AMERICAN INDIAN OR ALASKA NATIVE SELECTED

37. Are you... **You can choose more than one.**

105 Indigenous American

101 American Indian

102 Alaska Native

104 Canadian Inuit, Metis, or First Nation

103 Indigenous Mexican, Central American, or South American

195 Something else fits better

(Please tell us more) _____

IF ANY OF THE FOLLOWING SELECTED, CANNOT SELECT ANY OTHER RESPONSE

197 I am not sure

198 I don't know what this question is asking

199 I prefer not to answer

IF ASIAN SELECTED

38. Are you... **You can choose more than one.**

- 201 Asian Indian
- 202 Cambodian
- 203 Chinese
- 204 Communities of Myanmar
- 205 Filipino/a/x
- 206 Hmong
- 207 Japanese
- 208 Korean
- 209 Laotian
- 210 South Asian
- 211 Vietnamese
- 295 Something else fits better
(Please tell us more) _____

IF ANY OF THE FOLLOWING SELECTED, CANNOT SELECT ANY OTHER RESPONSE

- 297 I am not sure
- 298 I don't know what this question is asking
- 299 I prefer not to answer

IF BLACK/AFRICAN AMERICAN SELECTED

39. Are you... **You can choose more than one.**

- 301 Black
- 302 African American
- 310 Afro-Caribbean
- 311 Afro-Latino/a/x
- 303 Jamaican
- 304 Haitian
- 308 Ethiopian
- 309 Somali
- 395 Something else fits better
(Please tell us more) _____

IF ANY OF THE FOLLOWING SELECTED, CANNOT SELECT ANY OTHER RESPONSE

- 397 I am not sure
- 398 I don't know what this question is asking
- 399 I prefer not to answer ^{BRF}

IF LATINX SELECTED

40. Are you... **You can choose more than one.**

- 401 Mexican, Mexican American, Chicano/a
- 402 Puerto Rican
- 403 Cuban
- 404 Guatemalan
- 405 Honduran
- 407 Salvadoran
- 420 Afro-Latino/a/x/e

495 Something else fits better
(Please tell us more) _____

IF ANY OF THE FOLLOWING SELECTED, CANNOT SELECT ANY OTHER RESPONSE

- 497 I am not sure
- 498 I don't know what this question is asking
- 499 I prefer not to answer

IF NATIVE HAWAIIAN/PACIFIC ISLANDER SELECTED

41. Are you... **You can choose more than one.**

- 501 Native Hawaiian/Kanaka Maoli
- 502 CHAmoru (Chamorro)
- 503 Chuukese
- 504 Communities of the Micronesian Region
- 505 Fijian
- 506 Guamanian
- 507 Kosraean
- 508 Maori
- 509 Marshallese
- 510 Palauan
- 514 Samoan
- 515 Tongan
- 595 Something else fits better

(Please tell us more) _____

IF ANY OF THE FOLLOWING SELECTED, CANNOT SELECT ANY OTHER RESPONSE

- 597 I am not sure
- 598 I don't know what this question is asking
- 599 I prefer not to answer

IF MIDDLE EASTERN/NORTH AFRICAN/SWANA SELECTED

42. Are you... **You can choose more than one.**

611 Egyptian

612 Iraqi

613 Iranian

614 Israeli

615 Lebanese

616 Palestinian

617 Syrian

618 Turkish

695 Something else fits better **(Please tell us more)**_____

IF ANY OF THE FOLLOWING SELECTED, CANNOT SELECT ANY OTHER RESPONSE

627 I am not sure

628 I don't know what this question is asking

629 I prefer not to answer

IF WHITE SELECTED

43. Are you... **You can choose more than one.**

803 English

804 French

805 German

806 Greek

808 Irish

809 Italian

810 Norwegian

811 Polish

812 Romanian

813 Russian

814 Scottish

816 Spaniard/Spanish

817 Swedish

818 Ukrainian

895 Something else fits better **(Please tell us more)**_____

IF ANY OF THE FOLLOWING SELECTED, CANNOT SELECT ANY OTHER RESPONSE

897 I am not sure

898 I don't know what this question is asking

899 I prefer not to answer

ASK IF MORE THAN ONE BROAD RACE/ETHNIC CATEGORY SELECTED

You answered that you have more than one race or ethnicity.

44. Is there one you think of as your **main** racial or ethnic identity?
- | | | |
|---|--|--------------------|
| 1 | Yes, I have one main race or ethnic identity | |
| 2 | I do not have just one main racial or ethnic identity/No single race best describes me | SKIP TO Q46 |
| 3 | I identify as biracial or multiracial | SKIP TO Q46 |
| 7 | I am not sure | SKIP TO Q46 |
| 8 | I don't know what this question is asking | SKIP TO Q46 |
| 9 | I prefer not to answer | SKIP TO Q46 |
-
45. Which **one** do you think is your **main** racial or ethnic identity?
- | | |
|-----|---|
| 100 | Indigenous American, American Indian or Alaska Native |
| 200 | Asian |
| 300 | Black or African American |
| 400 | Hispanic or Latino/a/x |
| 500 | Native Hawaiian or Pacific Islander |
| 601 | Middle Eastern/North African/SWANA |
| 800 | White |
| 997 | I am not sure |
| 998 | I don't know what this question is asking |
| 999 | I prefer not to answer |

DEMOGRAPHICS – TRIBES

IF INDIGENOUS, AMERICAN INDIAN OR ALASKA NATIVE SELECTED

46. Are you an enrolled member of a tribe located in the state of Oregon?

- 1 Yes, enrolled in an Oregon tribe
- 2 No, enrolled in a tribe outside of Oregon **SKIP TO Q48**
- 3 No, not enrolled in any tribe **SKIP TO Q48**

IF ANY OF THE FOLLOWING SELECTED, CANNOT SELECT ANY OTHER RESPONSE

- 7 I am not sure **SKIP TO Q48**
- 8 I don't know what this question is asking **SKIP TO Q48**
- 9 I prefer not to answer **SKIP TO Q48/**

47. Which Oregon Tribe are you a member of?

- 01 Burns Paiute Tribe
- 02 Confederated Tribes of the Coos, Lower Umpqua, and Siuslaw Indians
- 03 Confederated Tribes of Grand Ronde
- 04 Confederated Tribes of Siletz Indians
- 05 Confederated Tribes of Umatilla Indian Reservation
- 06 Confederated Tribes of Warm Springs
- 07 Coquille Indian Tribe
- 08 Cow Creek Band of Umpqua Indians
- 09 Klamath Tribes
- 10 I am enrolled in a different tribe
(Please tell us more) _____
- 97 I am not sure
- 98 I don't know what this question is asking
- 99 I prefer not to answer

DEMOGRAPHICS – LANGUAGES

48. What language or languages do you use at home? **You can choose more than one.**
- ☐ 01 English
 - ☐ 02 Spanish
 - ☐ 03 American Indian/Alaska Native tribal language
 - ☐ 04 Cantonese
 - ☐ 05 Mandarin
 - ☐ 06 Vietnamese
 - ☐ 07 Hawaiian
 - ☐ 08 Samoan
 - ☐ 09 Somali
 - ☐ 10 Russian
 - ☐ 11 ASL, PSE (American Sign Language, Pidgin Signed English, tactile interpreting, etc.)
 - ☐ 95 Another language **(Please tell us more)**

IF ANY OF THE FOLLOWING SELECTED, CANNOT SELECT ANY OTHER RESPONSE

- ☐ 97 I am not sure
- ☐ 98 I don't know what this question is asking
- ☐ 99 I prefer not to answer

DEMOGRAPHICS – HOUSELESSNESS

Where you live can impact your health.

-
49. During the past 30 days, where did you usually sleep?
- 01 In my parent's, stepparent's or guardian's home
 - 02 In the home of a friend, family member, or other person because I had to leave my home, or my parent or guardian cannot afford housing
 - 03 In a foster home
 - 04 In a shelter or emergency housing
 - 05 In a motel or hotel
 - 06 In a car, park, campground, or other public place
 - 07 I do not have a usual place to sleep
 - 95 Some other place fits better **(Please tell us more)** _____
 - 97 I am not sure
 - 98 I don't know what this question is asking
 - 99 I prefer not to answer

DEMOGRAPHICS – FOSTER CARE

50. Have you ever been placed in foster care or stayed in a group home?
- 1 Yes
 - 2 No
 - 7 I am not sure
 - 8 I don't know what this question is asking
 - 9 I prefer not to answer

DEMOGRAPHICS – HUNGER

51. In the past 30 days, how often were you hungry because there was not enough food at home?
- 1 Never or almost never
 - 2 About once a week
 - 3 2 to 3 times a week
 - 4 Almost every day
 - 7 I am not sure
 - 8 I don't know what this question is asking
 - 9 I prefer not to answer

DEMOGRAPHICS – DISABILITY

We want to get a sense of how many students may need additional help to succeed in school.

52. Are you deaf or do you have serious difficulty hearing?

- 1 Yes
- 2 No
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

53. Are you blind or do you have serious difficulty seeing, even when wearing glasses?

- 1 Yes
- 2 No
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

54. Do you have serious difficulty walking or climbing stairs?

- 1 Yes
- 2 No
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

55. Do you have difficulty dressing or bathing?

- 1 Yes
- 2 No
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

DEMOGRAPHICS – GENDER IDENTIFY AND SEXUAL ORIENTATION

56. What is your gender identity? **You can choose more than one.**

- 01 Two Spirit **SHOW TWO SPIRIT ONLY IF IDENTIFY AS INDIGENOUS, AMERICAN INDIAN OR ALASKA NATIVE**
- 02 Girl or Woman
- 03 Boy or Man
- 04 Demigirl/Demiboy
- 05 Nonbinary
- 06 Genderfluid
- 08 Genderqueer
- 09 Questioning
- 07 Agender/No gender

SHOW 20-25 ONLY IF IDENTIFY AS NATIVE HAWAIIAN/PACIFIC ISLANDER

- 20 Fa'afafine
- 21 Fa'atane
- 22 Leiti
- 23 Mahu kane
- 24 Mahu wahine
- 25 Takatapui
- 95 Something else fits better
(Please tell us more) _____

IF ANY OF THE FOLLOWING SELECTED, CANNOT SELECT ANY OTHER RESPONSE

- 97 I am not sure of my gender identity
- 98 I don't know what this question is asking
- 99 I prefer not to answer

57. Are you transgender?

- 1 Yes
- 2 No
- 7 I am not sure
- 8 I don't know what this question is asking
- 9 I prefer not to answer

58. What is your sexual orientation? **You can choose more than one.**

- 02 Straight
- 01 Lesbian
- 07 Gay
- 03 Bisexual
- 04 Pansexual
- 05 Asexual or Aromantic
- 06 Queer
- 08 Questioning
- 95 Something else fits better
(Please tell us more) _____
- 97 I am not sure of my sexual orientation

IF ANY OF THE FOLLOWING SELECTED, CANNOT SELECT ANY OTHER RESPONSE

- 98 I don't know what this question is asking
- 99 I prefer not to answer

HONESTY

59. How honest were you in answering the questions?
- 1 I was very honest
 - 2 I was honest most of the time
 - 3 I was honest once in a while
 - 4 I was not honest at all

CLOSING

That's the end of the survey.

Thank you for taking the time to answer our questions.

Scan the QR code for a list of places that can help you and provide support for challenges you might be facing.

