

A compilation of items from national and state surveys

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Sources for Questions:

American College Health Association – National College Health Assessment (ACHA-NCHA II)

CORE Alcohol and Drug Survey (CORE)

College Alcohol Study, Harvard School of Public Health (CAS)

Missouri College Health Behavior Survey (MCHBS)

Monitoring the Future (MTF)

Behavioral Risk Factor Surveillance Survey (BRFSS)

Substance Use

Alcohol

1. What is the average number of drinks that you consume in a week? (CORE)

2. How would you best describe yourself in terms of your current use of alcohol? (CAS)
 - A. Abstainer
 - B. Abstainer — former problem drinker in recovery
 - C. Infrequent drinker
 - D. Light drinker
 - E. Moderate drinker
 - F. Heavy drinker
 - G. Problem drinker

3. Which statement below about drinking alcoholic beverages do you feel best represents your own attitude? (MCHBS)
 - A. Drinking is never a good thing to do
 - B. Drinking is alright, but a person should not get drunk
 - C. Occasionally getting drunk is okay as long as it doesn't interfere with academics or other responsibilities
 - D. Occasionally getting drunk is okay even if it does interfere with academics or responsibilities
 - E. Frequently getting drunk is okay if that's what the individual wants to do
 - F. I prefer not to respond

4. Which of the following best fits your intentions to change the way you drink alcohol? (MCHBS)
 - A. I am currently trying to drink in a healthier/safer way
 - B. I am ready to try drinking in a healthier/safer way
 - C. I am thinking about drinking in a healthier/safer way
 - D. I see no need to change the way I drink alcohol
 - E. I prefer not to respond

5. To what extent has your alcohol use changed within the last 12 months? (CORE)
 - A. Increased
 - B. About the same
 - C. Decreased
 - D. I have not used alcohol

6. Where do you typically consume alcohol? (Check all that apply) (MCHBS)
 - A. Bars/restaurants
 - B. Social gathering or friend's house (off-campus)
 - C. Fraternity or sorority house
 - D. Fraternity or sorority community in a residence hall

- E. Residence hall
- F. Sporting events
- G. Where I live
- H. Other
- I. I prefer not to respond

7. How easy is it for you to obtain alcohol? (CAS)

- A. Very difficult
- B. Difficult
- C. Easy
- D. Very easy
- E. Don't know, I don't drink

8. What type of alcohol did you usually have on those occasions when you had four or more drinks in a row? (CAS)

- A. Beer
- B. "Low alcohol" beer
- C. Wine
- D. Wine coolers
- E. Liquor (or mixed drinks)
- F. No "usual" drink

9. In the past 30 days, how often did you drink enough to get drunk? (By drunk, we mean unsteady, dizzy, or sick to your stomach.) (CAS)

- A. Not at all
- B. 1-2 occasions
- C. 3-5 occasions
- D. 6-9 occasions
- E. 10-19 occasions
- F. 20-39 occasions
- G. 40 or more occasions

10. When you drink alcoholic beverages, how drunk or high do you usually get? (MTF)

- A. Not at all high
- B. A little high
- C. Moderately high
- D. Very high

11. When you drink alcoholic beverages, how long do you usually stay drunk or high? (MTF)

- A. Usually don't get high
- B. One to two hours
- C. Three to six hours

- D. Seven to 24 hours
- E. More than 24 hours

12. Do you believe that alcohol has the following effects? (CORE)

Breaks the ice

- A. Yes
- B. No

Enhances social activity

- A. Yes
- B. No

Makes it easier to deal with stress

- A. Yes
- B. No

Facilitates a connection with peers

- A. Yes
- B. No

Gives people something to talk about

- A. Yes
- B. No

Facilitates male bonding

- A. Yes
- B. No

Facilitates female bonding

- A. Yes
- B. No

Allows people to have more fun

- A. Yes
- B. No

Gives people something to do

- A. Yes
- B. No

Makes food taste better

- A. Yes
- B. No

Makes women sexier

- A. Yes
- B. No

Makes men sexier

- A. Yes
- B. No

Makes me sexier

- A. Yes
- B. No

Facilitates sexual opportunities

- A. Yes
- B. No

13. What should be the legal minimum drinking age? (CAS)

- A. Under 18
- B. 18
- C. 19
- D. 20
- E. 21 or over

14. During your last year in high school, how often did you drink alcohol (beer, wine, liquor) during a typical month? (CAS)

- A. Never
- B. 1-2 occasions
- C. 3-5 occasions
- D. 6-9 occasions
- E. 10-19 occasions
- F. 20-39 occasions
- G. 40 or more occasions

15. During your last year in high school, how many drinks did you usually have when you drank alcohol? (A drink is a 12 oz. can or bottle of beer; a 4 oz. glass of wine; a 12 oz. bottle or can of wine cooler; or a shot of liquor straight or in a mixed drink.) (CAS)

- A. Did not drink alcohol
- B. 1 drink
- C. 2 drinks
- D. 3 drinks
- E. 4 drinks
- F. 5 drinks
- G. 6 drinks
- H. 7 drinks
- I. 8 drinks
- J. 9 or more drinks

Tobacco

16. Do you now smoke cigarettes every day, some days, or not at all? (BRFSS)

- A. Every day
- B. Some days
- C. Not at all
- D. Don't know / Not sure

17. Please indicate your level of agreement with each of the following statements related to cigarette smoking: (MCHBS)

Secondhand smoke has negative health effects

- A. Strongly disagree
- B. Disagree
- C. Neutral

- D. Agree
- E. Strongly agree
- F. I prefer not to respond

An occasional cigarette is dangerous to my health

- A. Strongly disagree
- B. Disagree
- C. Neutral
- D. Agree
- E. Strongly agree
- F. I prefer not to respond

Smoking helps people relax

- A. Strongly disagree
- B. Disagree
- C. Neutral
- D. Agree
- E. Strongly agree
- F. I prefer not to respond

Smoking helps people stay thin

- A. Strongly disagree
- B. Disagree
- C. Neutral
- D. Agree
- E. Strongly agree
- F. I prefer not to respond

Smoking is unattractive

- A. Strongly disagree
- B. Disagree
- C. Neutral
- D. Agree
- E. Strongly agree
- F. I prefer not to respond

I don't like to be around smokers

- A. Strongly disagree
- B. Disagree
- C. Neutral
- D. Agree
- E. Strongly agree
- F. I prefer not to respond

Using hookah is a safe alternative to smoking cigarettes

- A. Strongly disagree
- B. Disagree
- C. Neutral

- D. Agree
- E. Strongly agree
- F. I prefer not to respond

Other Drugs

18. To what extent has your illegal drug use changed within the last 12 months? (CORE)

- A. Increased
- B. About the same
- C. Decreased
- D. I have not used drugs

19. How difficult do you think it would be for you to get marijuana, if you wanted some? (MTF)

- A. Probably impossible
- B. Very difficult
- C. Fairly difficult
- D. Fairly easy
- E. Very easy

20. How difficult do you think it would be for you to get "crack" cocaine, if you wanted some? (MTF)

- A. Probably impossible
- B. Very difficult
- C. Fairly difficult
- D. Fairly easy
- E. Very easy

21. How difficult do you think it would be for you to get cocaine powder, if you wanted some? (MTF)

- A. Probably impossible
- B. Very difficult
- C. Fairly difficult
- D. Fairly easy
- E. Very easy

22. People use prescription drugs for various reasons, including the reasons displayed below. For any of the drugs you used without a doctor's prescription, how important were these reasons for your use? (MCHBS)

Stress reduction

- A. Not at all important
- B. Not Important
- C. Somewhat Important
- D. Important
- E. Very Important
- F. I prefer not to respond

Sleep aid

- A. Not at all important
- B. Not Important
- C. Somewhat Important
- D. Important
- E. Very Important
- F. I prefer not to respond

Mood enhancement

- A. Not at all important
- B. Not Important
- C. Somewhat Important
- D. Important
- E. Very Important
- F. I prefer not to respond

Increased energy

- A. Not at all important
- B. Not Important
- C. Somewhat Important
- D. Important
- E. Very Important
- F. I prefer not to respond

Weight loss

- A. Not at all important
- B. Not Important
- C. Somewhat Important
- D. Important
- E. Very Important
- F. I prefer not to respond

To fit in with friends

- A. Not at all important
- B. Not Important
- C. Somewhat Important
- D. Important
- E. Very Important
- F. I prefer not to respond

To have a good time

- A. Not at all important
- B. Not Important
- C. Somewhat Important
- D. Important
- E. Very Important
- F. I prefer not to respond

To reduce pain

- A. Not at all important
- B. Not Important
- C. Somewhat Important
- D. Important
- E. Very Important
- F. I prefer not to respond

To improve academic performance

- A. Not at all important
- B. Not Important
- C. Somewhat Important
- D. Important
- E. Very Important
- F. I prefer not to respond

23. Do you believe a person risks harming themselves, physically or otherwise, when they use prescription drugs without a doctor's prescription? (CORE)

- A. No, no risk
- B. Yes, a little risk
- C. Yes, a moderate risk
- D. Yes, very risky
- E. I prefer not to respond

Environment and Peers

24. In general, how satisfied are you with your life at school? (CAS)

- A. Very satisfied
- B. Somewhat satisfied
- C. Somewhat dissatisfied
- D. Very dissatisfied

25. Do you know a member of the faculty or administration with whom you can discuss a personal problem? (CAS)

- A. Yes
- B. No

26. Does the social atmosphere on this campus promote alcohol use? (CORE)

- A. Yes
- B. No

27. Does the social atmosphere on this campus promote other drug use? (CORE)

- A. Yes
- B. No

28. Compared to other campuses with which you are familiar, this campus' use of alcohol is... (CORE)

- A. Greater than other campuses
- B. Less than other campuses
- C. About the same as other campuses

29. Do you think alcohol use is a problem for students on your campus? (CAS)

- A. A major problem
- B. A problem
- C. A minor problem
- D. Not a problem

30. On this campus, drinking is a central part in the social life of the following groups: (CORE)

Male students

- A. Yes
- B. No

Female students

- A. Yes
- B. No

Faculty/staff

- A. Yes
- B. No

Alumni

- A. Yes
- B. No

Athletes

- A. Yes
- B. No

Fraternities

- A. Yes
- B. No

Sororities

- A. Yes
- B. No

31. Within the last 30 days, what percent of students at your school used the following substances?

State your best estimate. (ACHA-NCHA II)

A. Alcohol _____

B. Cigarettes _____

C. Marijuana _____

32. On a typical night of drinking alcohol, how much do you think the average student on your campus consumes? (Please provide your best guess) (MCHBS)

33. Which statement below about drinking alcoholic beverages do you feel best represents the most common attitude of students on your campus? (MCHBS)

- A. Drinking is never a good thing to do
- B. Drinking is alright, but a person should not get drunk
- C. Occasionally getting drunk is okay as long as it doesn't interfere with academics or other responsibilities
- D. Occasionally getting drunk is okay even if it does interfere with academics or responsibilities
- E. Frequently getting drunk is okay if that's what the individual wants to do
- F. I prefer not to respond

34. How often do you think the typical student on your campus uses marijuana? (MCHBS)

- A. Never
- B. 1-6 times/year
- C. 1-2 times/month
- D. 1-2 times/week
- E. 3 or more times/week
- F. Daily
- G. I prefer not to respond

35. In which of the following ways does other students' drinking interfere with your life on or around campus? (CORE)

Interrupts your studying

- A. Yes
- B. No

Makes you feel unsafe

- A. Yes
- B. No

Messes up your physical living space (cleanliness, neatness, organization, etc.)

- A. Yes
- B. No

Adversely affects your involvement on an athletic team or in other organized groups

- A. Yes
- B. No

Prevents you from enjoying events (concerts, sports, social activities, etc.)

- A. Yes
- B. No

Interferes in other way(s)

- A. Yes
- B. No

Doesn't interfere with my life

- A. Yes B. No

36. Since the beginning of the school year, how often have you complained to a college official or Resident Advisor about the behavior of students who were high or intoxicated? (CAS)
- A. Not at all
 - B. Once
 - C. 2-3 times
 - D. 4 or more times
37. Do you believe your campus is concerned about prevention of drug and alcohol use? (MCHBS)
- A. Yes
 - B. No
 - C. I prefer not to respond
38. What is your school's policy about alcohol use on campus by students, staff, and faculty? (CAS)
- A. Alcohol prohibited for everyone, regardless of age
 - B. Alcohol prohibited for all students, regardless of age
 - C. Alcohol prohibited for everyone under 21
 - D. Alcohol allowed for those over 21 but only in designated locations or at special events
 - E. No school policy
 - F. Don't know school's policy
39. In your opinion, how strongly does your school enforce its alcohol policy? (CAS)
- A. The alcohol policy is strongly enforced
 - B. The alcohol policy is enforced
 - C. The alcohol policy is weakly enforced
 - D. The alcohol policy is not enforced at all
 - E. Don't know school's policy / No school policy
40. Do you agree with the way your college is dealing with student alcohol use? (CAS)
- A. Agree strongly
 - B. Agree
 - C. Disagree
 - D. Disagree strongly
41. Which of the following do you think should be your school's policy about student drinking? (CAS)
- A. The current alcohol policy
 - B. A policy which imposes greater restrictions on alcohol use
 - C. A policy which imposes fewer restrictions on alcohol use
 - D. Don't know school's policy

42. To what extent do you support or oppose the following possible school policies or procedures? (CAS)

Prohibit kegs on campus

- A. Strongly support
- B. Support
- C. Oppose
- D. Strongly oppose

Offer alcohol-free dorms

- A. Strongly support
- B. Support
- C. Oppose
- D. Strongly oppose

Ban advertisements of alcohol availability at campus events and parties

- A. Strongly support
- B. Support
- C. Oppose
- D. Strongly oppose

Provide more alcohol-free recreational and cultural opportunities such as movies, dances, sports, and lectures

- A. Strongly support
- B. Support
- C. Oppose
- D. Strongly oppose

Make the alcohol rules more clear

- A. Strongly support
- B. Support
- C. Oppose
- D. Strongly oppose

Enforce the alcohol rules more strictly

- A. Strongly support
- B. Support
- C. Oppose
- D. Strongly oppose

Crack down on drinking at sororities and fraternities

- A. Strongly support
- B. Support
- C. Oppose
- D. Strongly oppose

Hold hosts responsible for problems arising from alcohol use

- A. Strongly support
- B. Support

- C. Oppose
- D. Strongly oppose

Crack down on under-age drinking

- A. Strongly support
- B. Support
- C. Oppose
- D. Strongly oppose

43. How likely is it that a student under 21 years of age who drinks alcohol on or near your campus in any of the following situations will be caught? (CAS)

In a dorm room

- A. Very likely
- B. Somewhat likely
- C. Somewhat unlikely
- D. Very unlikely
- E. Don't know

At a dorm party or social event

- A. Very likely
- B. Somewhat likely
- C. Somewhat unlikely
- D. Very unlikely
- E. Don't know

At a fraternity or sorority party

- A. Very likely
- B. Somewhat likely
- C. Somewhat unlikely
- D. Very unlikely
- E. Don't know

At an intercollegiate home athletic event

- A. Very likely
- B. Somewhat likely
- C. Somewhat unlikely
- D. Very unlikely
- E. Don't know

At an intercollegiate away athletic event

- A. Very likely
- B. Somewhat likely
- C. Somewhat unlikely
- D. Very unlikely
- E. Don't know

At an off-campus party

- A. Very likely
- B. Somewhat likely
- C. Somewhat unlikely
- D. Very unlikely
- E. Don't know

At an off-campus bar or club

- A. Very likely
- B. Somewhat likely
- C. Somewhat unlikely
- D. Very unlikely
- E. Don't know

44. Are there places at or near your school where you or your friends usually can get alcohol without showing an ID? (CAS)

At a local off-campus bar or club

- A. Yes
- B. No
- C. I don't know

At an on-campus pub

- A. Yes
- B. No
- C. I don't know

At a local liquor or grocery store

- A. Yes
- B. No
- C. I don't know

At a fraternity or sorority house

- A. Yes
- B. No
- C. I don't know

45. Since the beginning of the school year, has your school provided the following types of information to you? (CAS)

Where you can get help for alcohol-related problems

- A. Yes
- B. No

How to recognize when someone has a drinking problem

- A. Yes
- B. No

The long term health effects of heavy drinking

- A. Yes
- B. No

The dangers of alcohol overdose

- A. Yes B. No

College rules for drinking

- A. Yes B. No

Penalties for breaking rules

- A. Yes B. No

Students' drinking rate at your school

- A. Yes B. No

46. Describe your father's (or that person who served as your father in raising you) use of alcohol during most of the time that you were growing up. (CAS)

- A. Not applicable (no father or father substitute)
- B. Abstainer
- C. Abstainer - former problem drinker in recovery or recovered
- D. Infrequent or light drinker
- E. Moderate drinker
- F. Heavy drinker
- G. Problem drinker
- H. I don't know

47. Describe your mother's (or that person who served as your mother in raising you) use of alcohol during most of the time that you were growing up. (CAS)

- A. Not applicable (no father or father substitute)
- B. Abstainer
- C. Abstainer - former problem drinker in recovery or recovered
- D. Infrequent or light drinker
- E. Moderate drinker
- F. Heavy drinker
- G. Problem drinker
- H. I don't know

48. How would your family feel about you using prescription drug medication without a doctor's prescription? (MCHBS)

- A. Strongly disapprove
- B. Disapprove
- C. Approve
- D. Strongly Approve
- E. Not applicable/I prefer not to respond

49. How would your friends feel about you using prescription drug medication without a doctor's prescription? (MCHBS)

- A. Strongly disapprove
- B. Disapprove
- C. Approve
- D. Strongly Approve
- E. Not applicable/I prefer not to respond

Protective Factors

50. To what extent do you agree with the following statements? (CORE)

I feel valued as a person on this campus.

- A. Strongly agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly disagree
- F. I don't know

I feel that faculty and staff care about me as a student.

- A. Strongly agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly disagree
- F. I don't know

I have a responsibility to contribute to the well-being of other students.

- A. Strongly agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly disagree
- F. I don't know

My campus encourages me to help others in need.

- A. Strongly agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly disagree
- F. I don't know

I abide by the university policy and regulations that concern alcohol and other drug use.

- A. Strongly agree
- B. Agree
- C. Neutral
- D. Disagree

- E. Strongly disagree
- F. I don't know

51. Within the last year to what extent have you participated in any of the following activities? (CORE)

Intercollegiate athletics

- A. Not involved
- B. Attended
- C. Active involvement, non-leader
- D. Leadership position

Intramural or club sports

- A. Not involved
- B. Attended
- C. Active involvement, non-leader
- D. Leadership position

Social fraternities or sororities

- A. Not involved
- B. Attended
- C. Active involvement, non-leader
- D. Leadership position

Religious and interfaith groups

- A. Not involved
- B. Attended
- C. Active involvement, non-leader
- D. Leadership position

International and language groups

- A. Not involved
- B. Attended
- C. Active involvement, non-leader
- D. Leadership position

Minority and ethnic organizations

- A. Not involved
- B. Attended
- C. Active involvement, non-leader
- D. Leadership position

Political and social action groups

- A. Not involved
- B. Attended
- C. Active involvement, non-leader
- D. Leadership position

Music and other performing arts groups

- A. Not involved
- B. Attended
- C. Active involvement, non-leader
- D. Leadership position

Student newspaper, radio, TV, magazine, etc.

- A. Not involved
- B. Attended
- C. Active involvement, non-leader
- D. Leadership position

52. Have you received information on the following topics from your college or university? (ACHA-NCHA II)

Alcohol and other drug use

- A. Yes
- B. No

Cold/flu/sore throat

- A. Yes
- B. No

Depression/anxiety

- A. Yes
- B. No

Eating disorders

- A. Yes
- B. No

Grief and loss

- A. Yes
- B. No

How to help others in distress

- A. Yes
- B. No

Injury prevention

- A. Yes
- B. No

Nutrition

- A. Yes
- B. No

Physical activity

- A. Yes
- B. No

Pregnancy prevention

- A. Yes
- B. No

Problem use of internet/computer games

- A. Yes
- B. No

Relationship difficulties

A. Yes B. No

Sexual assault/relationship violence prevention

A. Yes B. No

Sexually transmitted disease/infection (STD/I) prevention

A. Yes B. No

Sleep difficulties

A. Yes B. No

Stress reduction

A. Yes B. No

Suicide prevention

A. Yes B. No

Tobacco use

A. Yes B. No

Violence prevention

A. Yes B. No

53. During the last 12 months, when you “partied”/socialized, how often did you... (ACHA-NCHA II)

Alternate non-alcoholic with alcoholic beverages?

- A. Never
- B. Rarely
- C. Sometimes
- D. Most of the time
- E. Always

Avoid drinking games?

- A. Never
- B. Rarely
- C. Sometimes
- D. Most of the time
- E. Always

Choose not to drink alcohol?

- A. Never
- B. Rarely
- C. Sometimes
- D. Most of the time
- E. Always

Determine, in advance, not to exceed a set number of drinks?

- A. Never

- B. Rarely
- C. Sometimes
- D. Most of the time
- E. Always

Eat before and/or during drinking?

- A. Never
- B. Rarely
- C. Sometimes
- D. Most of the time
- E. Always

Have a friend let you know when you have had enough?

- A. Never
- B. Rarely
- C. Sometimes
- D. Most of the time
- E. Always

Keep track of how many drinks you were having?

- A. Never
- B. Rarely
- C. Sometimes
- D. Most of the time
- E. Always

Pace your drinks to 1 or fewer per hour?

- A. Never
- B. Rarely
- C. Sometimes
- D. Most of the time
- E. Always

Stay with the same group of friends the entire time you were drinking?

- A. Never
- B. Rarely
- C. Sometimes
- D. Most of the time
- E. Always

Stick with only one kind of alcohol when drinking?

- A. Never
- B. Rarely
- C. Sometimes
- D. Most of the time
- E. Always

Use a designated driver?

- A. Never
- B. Rarely
- C. Sometimes
- D. Most of the time
- E. Always

Mental Health

54. During the past 30 days, for about how many days have you felt sad, blue, or depressed? (BRFSS)

55. During the past 30 days, for about how many days have you felt worried, tense, or anxious? (BRFSS)

56. During the past 30 days, for about how many days have you felt very healthy and full of energy? (BRFSS)

57. Within the last 12 months, how would you rate the overall level of stress you have experienced? (ACHA-NCHA II)

- A. No stress
- B. Less than average stress
- C. Average stress
- D. More than average stress
- E. Tremendous stress

58. In the past two weeks, how stressed have you felt? (MCHBS)

- A. I have experienced no stress
- B. Minimal
- C. A little stressed
- D. Stressed, but managing
- E. Overwhelmed
- F. My stress is unbearable
- G. I prefer not to respond

59. To what extent has stress impacted or interfered with your academic life? (MCHBS)

- A. Not at all
- B. Somewhat
- C. Moderately

- D. Considerably
- E. A great deal
- F. I prefer not to respond

60. To what extent has stress impacted or interfered with your personal life? (MCHBS)

- A. Not at all
- B. Somewhat
- C. Moderately
- D. Considerably
- E. A great deal
- F. I prefer not to respond

61. Within the last 12 months, have any of the following been traumatic or very difficult for you to handle? (ACHA-NCHA II)

Academics

- A. Yes
- B. No

Career-related issue

- A. Yes
- B. No

Death of a family member or friend

- A. Yes
- B. No

Family problems

- A. Yes
- B. No

Intimate relationships

- A. Yes
- B. No

Other social relationships

- A. Yes
- B. No

Finances

- A. Yes
- B. No

Health problem of a family member or partner

- A. Yes
- B. No

Personal appearance

- A. Yes
- B. No

Personal health issue

- A. Yes
- B. No

Sleep difficulties

- A. Yes
- B. No

Other

- A. Yes B. No

62. Have you ever... (ACHA-NCHA II)

Felt things were hopeless?

- A. No, never
- B. No, not in the last 12 months
- C. Yes, in the last 2 weeks
- D. Yes, in the last 30 days
- E. Yes, in the last 12 months

Felt overwhelmed by all you had to do?

- A. No, never
- B. No, not in the last 12 months
- C. Yes, in the last 2 weeks
- D. Yes, in the last 30 days
- E. Yes, in the last 12 months

Felt exhausted (not from physical activity)?

- A. No, never
- B. No, not in the last 12 months
- C. Yes, in the last 2 weeks
- D. Yes, in the last 30 days
- E. Yes, in the last 12 months

Felt very lonely?

- A. No, never
- B. No, not in the last 12 months
- C. Yes, in the last 2 weeks
- D. Yes, in the last 30 days
- E. Yes, in the last 12 months

Felt very sad?

- A. No, never
- B. No, not in the last 12 months
- C. Yes, in the last 2 weeks
- D. Yes, in the last 30 days
- E. Yes, in the last 12 months

Felt so depressed that it was difficult to function?

- A. No, never
- B. No, not in the last 12 months
- C. Yes, in the last 2 weeks
- D. Yes, in the last 30 days
- E. Yes, in the last 12 months

Felt overwhelming anxiety?

- A. No, never
- B. No, not in the last 12 months
- C. Yes, in the last 2 weeks
- D. Yes, in the last 30 days
- E. Yes, in the last 12 months

Felt overwhelming anger?

- A. No, never
- B. No, not in the last 12 months
- C. Yes, in the last 2 weeks
- D. Yes, in the last 30 days
- E. Yes, in the last 12 months

Intentionally cut, burned, bruised, or otherwise injured yourself?

- A. No, never
- B. No, not in the last 12 months
- C. Yes, in the last 2 weeks
- D. Yes, in the last 30 days
- E. Yes, in the last 12 months

Seriously considered suicide?

- A. No, never
- B. No, not in the last 12 months
- C. Yes, in the last 2 weeks
- D. Yes, in the last 30 days
- E. Yes, in the last 12 months

Attempted suicide?

- A. No, never
- B. No, not in the last 12 months
- C. Yes, in the last 2 weeks
- D. Yes, in the last 30 days
- E. Yes, in the last 12 months

63. Have you ever been diagnosed with depression? (ACHA-NCHA II)

- A. Yes
- B. No

64. Within the last 12 months, have you been diagnosed or treated by a professional for any of the following? (ACHA-NCHA II)

Anorexia

- A. No
- B. Yes, diagnosed but not treated
- C. Yes, treated with medication
- D. Yes, treated with psychotherapy

- E. Yes, treated with medication and psychotherapy
- F. Yes, other treatment

Anxiety

- A. No
- B. Yes, diagnosed but not treated
- C. Yes, treated with medication
- D. Yes, treated with psychotherapy
- E. Yes, treated with medication and psychotherapy
- F. Yes, other treatment

Attention Deficit and Hyperactivity Disorder (ADHD)

- A. No
- B. Yes, diagnosed but not treated
- C. Yes, treated with medication
- D. Yes, treated with psychotherapy
- E. Yes, treated with medication and psychotherapy
- F. Yes, other treatment

Bipolar Disorder

- A. No
- B. Yes, diagnosed but not treated
- C. Yes, treated with medication
- D. Yes, treated with psychotherapy
- E. Yes, treated with medication and psychotherapy
- F. Yes, other treatment

Bulimia

- A. No
- B. Yes, diagnosed but not treated
- C. Yes, treated with medication
- D. Yes, treated with psychotherapy
- E. Yes, treated with medication and psychotherapy
- F. Yes, other treatment

Depression

- A. No
- B. Yes, diagnosed but not treated
- C. Yes, treated with medication
- D. Yes, treated with psychotherapy
- E. Yes, treated with medication and psychotherapy
- F. Yes, other treatment

Insomnia

- A. No
- B. Yes, diagnosed but not treated
- C. Yes, treated with medication
- D. Yes, treated with psychotherapy

- E. Yes, treated with medication and psychotherapy
- F. Yes, other treatment

Other sleep disorder

- A. No
- B. Yes, diagnosed but not treated
- C. Yes, treated with medication
- D. Yes, treated with psychotherapy
- E. Yes, treated with medication and psychotherapy
- F. Yes, other treatment

Obsessive Compulsive Disorder (OCD)

- A. No
- B. Yes, diagnosed but not treated
- C. Yes, treated with medication
- D. Yes, treated with psychotherapy
- E. Yes, treated with medication and psychotherapy
- F. Yes, other treatment

Panic attacks

- A. No
- B. Yes, diagnosed but not treated
- C. Yes, treated with medication
- D. Yes, treated with psychotherapy
- E. Yes, treated with medication and psychotherapy
- F. Yes, other treatment

Phobia

- A. No
- B. Yes, diagnosed but not treated
- C. Yes, treated with medication
- D. Yes, treated with psychotherapy
- E. Yes, treated with medication and psychotherapy
- F. Yes, other treatment

Schizophrenia

- A. No
- B. Yes, diagnosed but not treated
- C. Yes, treated with medication
- D. Yes, treated with psychotherapy
- E. Yes, treated with medication and psychotherapy
- F. Yes, other treatment

Substance abuse or addiction (alcohol or other drugs)

- A. No
- B. Yes, diagnosed but not treated
- C. Yes, treated with medication
- D. Yes, treated with psychotherapy

- E. Yes, treated with medication and psychotherapy
- F. Yes, other treatment

Other addiction (e.g., gambling, internet, sexual)

- A. No
- B. Yes, diagnosed but not treated
- C. Yes, treated with medication
- D. Yes, treated with psychotherapy
- E. Yes, treated with medication and psychotherapy
- F. Yes, other treatment

Other mental health condition

- A. No
- B. Yes, diagnosed but not treated
- C. Yes, treated with medication
- D. Yes, treated with psychotherapy
- E. Yes, treated with medication and psychotherapy
- F. Yes, other treatment

65. Have you ever received psychological or mental health services from any of the following? (ACHA-NCHA II)

Counselor/Therapist/Psychologist

- A. Yes
- B. No

Psychiatrist

- A. Yes
- B. No

Other medical provider (e.g., physician, nurse practitioner)

- A. Yes
- B. No

Minister/Priest/Rabbi/Other clergy

- A. Yes
- B. No

66. Have you ever received psychological or mental health services from your current college/university's Counseling or Health Service? (ACHA-NCHA II)

- A. Yes
- B. No

67. If in the future you were having a personal problem that was really bothering you, would you consider seeking help from a mental health professional? (ACHA-NCHA II)

- A. Yes
- B. No

68. Whom do you feel you can go to ON CAMPUS when personal concerns arise? (Check all that apply) (MCHBS)

- A. Friends/peers
- B. University counseling center
- C. Religious or spiritual advisor
- D. Residence life staff
- E. University health center
- F. Law enforcement/campus security
- G. Academic advisor
- H. Faculty/Professor
- I. University staff member
- J. Other (please specify)
- K. I don't feel like I can go to anyone on campus when personal concerns arise
- L. I prefer not to respond

69. Whom do you feel you can go to OFF CAMPUS when personal concerns arise? (Check all that apply) (MCHBS)

- A. Parents
- B. Sibling/extended family
- C. Friends/peers
- D. Mental health professional (counselor)
- E. Religious or spiritual advisor
- F. Chat rooms or online support groups
- G. Dating partner/spouse
- H. Other (please specify)
- I. I don't feel like I can go to anyone off campus when personal concerns arise
- J. I prefer not to respond

70. How often do you get the social and emotional support you need? (BRFSS)

- A. Always
- B. Usually
- C. Sometimes
- D. Rarely
- E. Never

Sexual Health

71. If you have ever been sexually active, has it been with...? (CAS)

- A. I have not been sexually active
- B. Opposite sex partner(s)
- C. Same sex partner(s)
- D. Both opposite and same sex partners

72. Within the last 12 months, with how many partners have you had oral sex, vaginal intercourse, or anal intercourse? (If you did not have a sex partner within the last 12 months, please enter 00. If less than 10, enter 01, 02, 03, etc.) (ACHA-NCHA II)

73. When you have sexual intercourse, how often do you or your partner use a condom? (CAS)

- A. Never
- B. Rarely
- C. Sometimes
- D. Always

74. Did you or your partner use a method of birth control to prevent pregnancy the last time you had vaginal intercourse? (ACHA-NCHA II)

- A. Yes
- B. N/A, have not had vaginal intercourse
- C. No, have not had vaginal intercourse that could result in a pregnancy
- D. No, did not want to prevent pregnancy
- E. No, did not use any birth control method
- F. Don't know

75. Please indicate whether or not you or your partner used each of the following methods of birth control to prevent pregnancy the last time you had vaginal intercourse: (ACHA-NCHA II)

Birth control pills (monthly or extended cycle)

- A. Yes
- B. No

Birth control shots

- A. Yes
- B. No

Birth control implants

- A. Yes
- B. No

Birth control patch

- A. Yes
- B. No

Vaginal ring

- A. Yes
- B. No

Intrauterine device (IUD)

- A. Yes
- B. No

Male condom

- A. Yes
- B. No

Female condom

- A. Yes
- B. No

Diaphragm or cervical cap

- A. Yes
- B. No

Contraceptive sponge

- A. Yes B. No

Spermicide (e.g., foam, jelly, cream)

- A. Yes B. No

Fertility awareness (e.g., calendar, mucous, basal body temperature)

- A. Yes B. No

Withdrawal

- A. Yes B. No

Sterilization (e.g., hysterectomy, tubes tied, or vasectomy)

- A. Yes B. No

Other method

- A. Yes B. No

76. Within the last 12 months, have you or your partner(s) become pregnant? (ACHA-NCHA II)

- A. N/A, have not had vaginal intercourse in the last 12 months
B. No
C. Yes, unintentionally
D. Yes, intentionally
E. Don't know

77. Have you ever done something more sexually than you had originally planned because you had been drinking alcohol or using drugs? (MCHBS)

- A. Yes
B. No
C. Prefer not to respond

78. Have you ever experienced non-consensual sexual contact (against your will)? (MCHBS)

- A. Yes
B. No
C. Prefer not to respond

Safety

79. While driving a vehicle, how often do you wear a safety belt? (MCHBS)

- A. Never
B. Rarely
C. Sometimes
D. Most of the time
E. Always

- F. I do not drive
- G. I prefer not to respond

80. While driving a vehicle, how often do you talk on a cell phone? (MCHBS)

- A. Never
- B. Rarely
- C. Sometimes
- D. Most of the time
- E. Always
- F. I do not drive
- G. I prefer not to respond

81. While driving a vehicle, how often do you text-message on a cell phone? (MCHBS)

- A. Never
- B. Rarely
- C. Sometimes
- D. Most of the time
- E. Always
- F. I do not drive
- G. I prefer not to respond

82. While driving a vehicle, how often do you drive while drowsy? (MCHBS)

- A. Never
- B. Rarely
- C. Sometimes
- D. Most of the time
- E. Always
- F. I do not drive
- G. I prefer not to respond

83. While driving a vehicle, how often do you go 10 or more miles per hour over the speed limit?
(MCHBS)

- A. Never
- B. Rarely
- C. Sometimes
- D. Most of the time
- E. Always
- F. I do not drive
- G. I prefer not to respond

84. While driving a vehicle, how often do you become angry at other drivers? (MCHBS)

- A. Never
- B. Rarely

- C. Sometimes
- D. Most of the time
- E. Always
- F. I do not drive
- G. I prefer not to respond

85. While driving a vehicle, how often do you change a musical component? (MCHBS)

- A. Never
- B. Rarely
- C. Sometimes
- D. Most of the time
- E. Always
- F. I do not drive
- G. I prefer not to respond

86. While driving a vehicle, how often do you eat or drink? (MCHBS)

- A. Never
- B. Rarely
- C. Sometimes
- D. Most of the time
- E. Always
- F. I do not drive
- G. I prefer not to respond

87. Within the last 12 months, how often did you wear a helmet when you rode a bicycle? (ACHA-NCHA II)

- A. Never
- B. Rarely
- C. Sometimes
- D. Most of the time
- E. Always
- F. N/A, did not do this activity in the last 12 months

88. Within the last 12 months, how often did you wear a helmet when your rode a motorcycle? (ACHA-NCHA II)

- A. Never
- B. Rarely
- C. Sometimes
- D. Most of the time
- E. Always
- F. N/A, did not do this activity in the last 12 months

89. How safe do you feel on this campus (daytime)? (ACHA-NCHA II)

- A. Not safe at all
- B. Somewhat unsafe
- C. Somewhat safe
- D. Very safe

90. How safe do you feel on this campus (nighttime)? (ACHA-NCHA II)

- A. Not safe at all
- B. Somewhat unsafe
- C. Somewhat safe
- D. Very safe

91. How safe do you feel in the community surrounding this school (daytime)? (ACHA-NCHA II)

- A. Not safe at all
- B. Somewhat unsafe
- C. Somewhat safe
- D. Very safe

92. How safe do you feel in the community surrounding this school (nighttime)? (ACHA-NCHA II)

- A. Not safe at all
- B. Somewhat unsafe
- C. Somewhat safe
- D. Very safe

Violence-Related Behaviors

93. Within the last 12 months... (ACHA-NCHA II)

Were you in a physical fight?

- A. Yes
- B. No

Were you physically assaulted (do not include sexual assault)?

- A. Yes
- B. No

Were you verbally threatened?

- A. Yes
- B. No

Were you sexually touched without your consent?

- A. Yes
- B. No

Was sexual penetration attempted (vaginal, anal, oral) without your consent?

- A. Yes
- B. No

Were you sexually penetrated (vaginal, anal, oral) without your consent?

- A. Yes
- B. No

Were you a victim of stalking (e.g., waiting for you outside your classroom, residence, or office; repeated emails/phone calls)?

- A. Yes B. No

94. Have you ever been in an intimate relationship that has been...? (Check all that apply) (MCHBS)

- A. Emotionally-verbally abusive
- B. Sexually abusive
- C. Physically abusive
- D. Mentally abusive
- E. Financially abusive
- F. Abusive in any other way (please specify)
- G. Not applicable/none of the above
- H. Prefer not to respond

95. Within the last 12 months, have you been in an intimate (coupled/partnered) relationship that was: (ACHA-NCHA II)

Emotionally abusive? (e.g., called derogatory names, yelled at, ridiculed)

- A. Yes B. No

Physically abusive? (e.g., kicked, slapped, punched)

- A. Yes B. No

Sexually abusive? (e.g., forced to have sex when you didn't want it, forced to perform or have an unwanted sexual act performed on you)

- A. Yes B. No

Weight, Nutrition, and Physical Activity

96. How do you describe your weight? (ACHA-NCHA II)

- A. Very underweight
- B. Very overweight
- C. Slightly underweight
- D. About the right weight
- E. Slightly overweight
- F. Very overweight

97. Are you trying to do any of the following about your weight? (ACHA-NCHA II)

- A. I am not trying to do anything about my weight
- B. Stay the same weight
- C. Lose weight
- D. Gain weight

98. Within the last 30 days, did you do any of the following? (ACHA-NCHA II)

Exercise to lose weight

- A. Yes B. No

Diet to lose weight

- A. Yes B. No

Vomit or take laxatives to lose weight

- A. Yes B. No

Take diet pills to lose weight

- A. Yes B. No

99. How many servings of fruits and vegetables do you usually have per day? (1 serving = 1 medium piece of fruit; 1/2 cup fresh, frozen, or canned fruits/vegetables; 3/4 cup fruit/vegetable juice; 1 cup salad greens; or 1/4 cup dried fruit)? (ACHA-NCHA II)

- A. 0 servings per day
- B. 1–2 servings per day
- C. 3–4 servings per day
- D. 5 or more servings per day

100. During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise? (BRFSS)

- A. Yes
- B. No
- C. Don't know / Not sure

101. On how many of the past 7 days did you do moderate-intensity cardio or aerobic exercise (caused a noticeable increase in heart rate, such as a brisk walk) for at least 30 minutes? (ACHA-NCHA II)

- A. 0 days
- B. 1 day
- C. 2 days
- D. 3 days
- E. 4 days
- F. 5 days
- G. 6 days
- H. 7 days

102. On how many of the past 7 days did you do vigorous-intensity cardio or aerobic exercise (caused large increases in breathing or heart rate, such as jogging) for at least 20 minutes? (ACHA-NCHA II)

- A. 0 days
- B. 1 day
- C. 2 days
- D. 3 days

- E. 4 days
- F. 5 days
- G. 6 days
- H. 7 days

103. On how many of the past 7 days did you do 8-10 strength training exercises (such as resistance weight machines) for 8-12 repetitions each? (ACHA-NCHA II)

- A. 0 days
- B. 1 day
- C. 2 days
- D. 3 days
- E. 4 days
- F. 5 days
- G. 6 days
- H. 7 days

Other Health-Related Questions

104. In general, how satisfied are you with your life? (BRFSS)

- A. Very satisfied
- B. Satisfied
- C. Dissatisfied
- D. Very dissatisfied

105. How would you describe your general health? (ACHA-NCHA II)

- A. Excellent
- B. Very Good
- C. Good
- D. Fair
- E. Poor
- F. Don't know

106. Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good? (BRFSS)

107. During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation? (BRFSS)

108. Have you had a dental exam and cleaning in the last 12 months? (ACHA-NCHA II)
- A. Yes
 - B. No
 - C. I don't know
109. Have you performed testicular self-exam in the last 30 days? (Males) (ACHA-NCHA II)
- A. Yes
 - B. No
 - C. I don't know
110. Have you performed breast self-exam in the last 30 days? (Females) (ACHA-NCHA II)
- A. Yes
 - B. No
 - C. I don't know
111. Have you had a routine gynecological exam in the last 12 months? (Females) (ACHA-NCHA II)
- A. Yes
 - B. No
 - C. I don't know
112. Have you used sunscreen regularly with sun exposure? (ACHA-NCHA II)
- A. Yes
 - B. No
 - C. I don't know
113. Have you ever been tested for Human Immunodeficiency Virus (HIV) infection? (ACHA-NCHA II)
- A. Yes
 - B. No
 - C. I don't know
114. In the last 12 months, how many times (if any) have you seen a doctor or other professional for each of the following? (MTF)
- For a routine physical check-up*
- A. None
 - B. Once
 - C. Twice
 - D. 3 to 5 times
 - E. 6 to 9 times
 - F. 10+ times
- For an injury suffered in a fight, assault, or auto accident*
- A. None
 - B. Once
 - C. Twice
 - D. 3 to 5 times
 - E. 6 to 9 times
 - F. 10+ times

For any other accidental injury

- A. None
- B. Once
- C. Twice
- D. 3 to 5 times
- E. 6 to 9 times
- F. 10+ times

For some physical illness or symptom

- A. None
- B. Once
- C. Twice
- D. 3 to 5 times
- E. 6 to 9 times
- F. 10+ times

For some emotional or psychological problem or symptom

- A. None
- B. Once
- C. Twice
- D. 3 to 5 times
- E. 6 to 9 times
- F. 10+ times

115. Have you received the following vaccinations (shots)? (ACHA-NCHA II)

Hepatitis B

- A. Yes
- B. No
- C. I don't know

Human Papillomavirus/HPV (cervical cancer vaccine)

- A. Yes
- B. No
- C. I don't know

Influenza (the flu) in the last 12 months (shot or nasal mist)

- A. Yes
- B. No
- C. I don't know

Measles, Mumps, Rubella

- A. Yes
- B. No
- C. I don't know

Meningococcal disease (meningococcal meningitis)

- A. Yes
- B. No
- C. I don't know

Varicella (chicken pox)

- A. Yes
- B. No
- C. I don't know

116. On average, how many hours of sleep do you get in a 24-hour period? (BRFSS)

117. On how many of the past 7 days did you get enough sleep so that you felt rested when you woke up in the morning? (ACHA-NCHA II)

- A. 0 days
- B. 1 day
- C. 2 days
- D. 3 days
- E. 4 days
- F. 5 days
- G. 6 days
- H. 7 days

118. People sometimes feel sleepy during the daytime. In the past 7 days, how much of a problem have you had with sleepiness (feeling sleepy, struggling to stay awake) during your daytime activities? (ACHA-NCHA II)

- A. No problem at all
- B. A little problem
- C. More than a little problem
- D. A big problem
- E. A very big problem

119. About how many hours do you work per week at all of your jobs and businesses combined? (BRFSS)
