

MUSP Youth 14 Years

PLEASE WRITE YOUR DATE OF BIRTH/...../19.....

PHASE:

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CODE: _____

DATE: _____

WHICH BEST DESCRIBES YOUR BEHAVIOUR IN THE **LAST SIX MONTHS?**

(Circle one number for each question 1-112)

	Often	Sometimes	Rarely/ Never
1 I act too young for my age	1	2	3
2 I have an allergy	1	2	3
3 I argue a lot	1	2	3
4 I have asthma	1	2	3
5 I act like the opposite sex	1	2	3
6 I like animals	1	2	3
7 I brag	1	2	3
8 I have trouble concentrating or paying attention	1	2	3
9 I can't get my mind off certain thoughts	1	2	3
10 I have trouble sitting still	1	2	3
11 I am too dependent on adults	1	2	3
12 I feel lonely	1	2	3
13 I feel confused or in a fog	1	2	3
14 I cry a lot	1	2	3

15 I am pretty honest	1	2	3
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(Circle one number)

		Often	Sometimes	Rarely/ Never
16	I am mean to others	1	2	3
17	I day-dream a lot	1	2	3
18	I deliberately try to hurt or kill myself	1	2	3
19	I try to get a lot of attention	1	2	3
20	I destroy my own things	1	2	3
21	I destroy things belonging to others	1	2	3
22	I disobey my parents	1	2	3
23	I disobey at school	1	2	3
24	I don't eat as well as I should	1	2	3
25	I don't get along with other kids	1	2	3
26	I don't feel guilty after doing something I shouldn't	1	2	3
27	I am jealous of others	1	2	3
28	I am willing to help others when they need help	1	2	3
29	I am afraid of certain animals, situations, or places, other than school	1	2	3
30	I am afraid of going to school	1	2	3
31	I am afraid I might think or do something bad	1	2	3
32	I feel that I have to be perfect	1	2	3

(Circle one number)

		Often	Sometimes	Rarely/ Never
33	I feel that no one loves me	1	2	3
34	I feel that others are out to get me	1	2	3
35	I feel worthless or inferior	1	2	3
36	I accidentally get hurt a lot	1	2	3
37	I get in many fights	1	2	3
38	I get teased a lot	1	2	3
39	I hang around with kids who get in trouble	1	2	3
40	I hear sounds or voices that other people think aren't there	1	2	3
41	I act without stopping to think	1	2	3
42	I would rather be alone than with others	1	2	3
43	I lie or cheat	1	2	3
44	I bite my fingernails	1	2	3
45	I am nervous or tense	1	2	3
46	Parts of my body twitch or make nervous movements	1	2	3
47	I have nightmares	1	2	3
48	I am not liked by other kids	1	2	3
49	I can do certain things better than most kids	1	2	3

(Circle one number)

		Often	Sometimes	Rarely/ Never
50	I am fearful or anxious	1	2	3
51	I feel dizzy	1	2	3
52	I feel too guilty	1	2	3
53	I eat too much	1	2	3
54	I feel overtired	1	2	3
55	I am overweight	1	2	3
56	I physically attack people	1	2	3
57	I pick my skin or other parts of my body	1	2	3
58	I can be pretty friendly	1	2	3
59	I like to try new things	1	2	3
60	My school work is poor	1	2	3
61	I am poorly coordinated or clumsy	1	2	3
62	I would rather be with older kids than with kids my own age	1	2	3
63	I would rather be with younger kids than with kids my own age	1	2	3
64	I refuse to talk	1	2	3
65	I repeat certain actions over and over	1	2	3
66	I run away from home	1	2	3

(Circle one number)

		Often	Sometimes	Rarely/ Never
67	I scream a lot	1	2	3
68	I am secretive or keep things to myself	1	2	3
69	I see things that other people think aren't there	1	2	3
70	I am self-conscious or easily embarrassed	1	2	3
71	I set fires	1	2	3
72	I can work well with my hands	1	2	3
73	I show off or clown	1	2	3
74	I am shy	1	2	3
75	I sleep less than most kids	1	2	3
76	I sleep more than most kids during day and/or night	1	2	3
77	I have a good imagination	1	2	3
78	I have a speech problem	1	2	3
79	I stand up for my rights	1	2	3
80	I steal at home	1	2	3
81	I steal from places other than home	1	2	3
82	I store up things I don't need	1	2	3
83	I do things other people think are strange	1	2	3

(Circle one number)

		Often	Sometimes	Rarely/ Never
84	I have thoughts that other people would think are strange	1	2	3
85	I am stubborn	1	2	3
86	My moods or feelings change suddenly	1	2	3
87	I enjoy being with other people	1	2	3
88	I am suspicious	1	2	3
89	I swear or use dirty language	1	2	3
90	I think about killing myself	1	2	3
91	I like to make others laugh	1	2	3
92	I talk too much	1	2	3
93	I tease others a lot	1	2	3
94	I have a hot temper	1	2	3
95	I think about sex too much	1	2	3
96	I threaten to hurt people	1	2	3
97	I like to help others	1	2	3
98	I am too concerned about being neat and clean	1	2	3
99	I have trouble sleeping	1	2	3
100	I cut classes or skip school	1	2	3

(Circle one number)

		Often	Sometimes	Rarely/ Never
101	I don't have much energy	1	2	3
102	I am unhappy, sad or depressed	1	2	3
103	I am louder than other kids	1	2	3
104	I use alcohol or drugs for nonmedical purposes	1	2	3
105	I try to be fair to others	1	2	3
106	I enjoy a good joke	1	2	3
107	I try to take life easy	1	2	3
108	I try to help other people when I can	1	2	3
109	I wish I were of the opposite sex	1	2	3
110	I keep from getting involved with others	1	2	3
111	I worry a lot	1	2	3
112	I smoke cigarettes	1	2	3

How often have you had the following in the **last six months**?

(Circle one number for each question 113-119)

	Often	Sometimes	Rarely/ Never
113 Aches or pains (not headaches)	1	2	3
114 Headaches	1	2	3
115 Nausea, feel sick	1	2	3
116 Problems with eyes	1	2	3
117 Rashes or other skin problems	1	2	3
118 Stomach aches or cramps	1	2	3
119 Vomiting, throwing up	1	2	3

120 On average how many **hours a day (Monday to Friday)** do you sit and watch TV?
(Circle one number)

- 7 hours or more 1
 5 - less than 7 hours..... 2
 3 - less than 5 hours..... 3
 1 - less than 3 hours..... 4
 Less than 1 hour 5
 Never watch TV 6

121 On average how many **hours a day (Saturday to Sunday)** do you sit and watch TV?
(Circle one number)

- 7 hours or more 1
 5 - less than 7 hours..... 2
 3 - less than 5 hours..... 3
 1 - less than 3 hours..... 4
 Less than 1 hour 5
 Never watch TV 6

122 In the **last week** how often did you smoke cigarettes?

(Circle one number)

- | | |
|----------------------------|---|
| Every day | 1 |
| Every few days | 2 |
| Once or so only | 3 |
| Did not smoke at all | 4 |

123 In the last week how many cigarettes did you smoke?

(Circle one number)

- | | |
|------------------|---|
| 50 or more | 1 |
| 30-49 | 2 |
| 20-29 | 3 |
| 10-19 | 4 |
| 1-9..... | 5 |
| Nil smoked | 6 |

124 How often do you drink alcohol?

(Circle one number)

- | | |
|--------------------------|---|
| Daily | 1 |
| A few times a week | 2 |
| A few times a month..... | 3 |
| A few times a year | 4 |
| Rarely | 5 |
| Never | 6 |

125 How much alcohol do you usually drink at those times?

(Circle one number)

- | | |
|-----------------------------|---|
| Seven or more glasses | 1 |
| Five or six glasses | 2 |
| Three or four glasses | 3 |
| One or two glasses | 4 |
| Less than one glass | 5 |
| Never drink | 6 |

126 For writing, which hand do you use?

(Circle one number)

Left hand 1
 Right hand 2
 Either hand 3

127 For most tasks which hand do you use?

(Circle one number)

Always right 1
 Usually right 2
 Always left 3
 Usually left 4
 Either hand 5

128 In general, over the last year, do you think your health has been?

(Circle one number)

Excellent 1
 Good 2
 Fair 3
 Poor 4

129 Do you have anyone you can talk to about your problems?

(Circle one number)

No 1
 Yes 2

130 How often did you exercise or play sports in the last week?

(Circle one number)

Not at all 1
 1 day 2
 2 or 3 days 3
 4 or 5 days 4
 6 or 7 days 5

131 How are you doing at school in English?

(Circle one number)

- Below average..... 1
 A bit below average 2
 Average 3
 A bit above average..... 4
 Above average..... 5

132 How are you doing at school in Maths?

(Circle one number)

- Below average..... 1
 A bit below average 2
 Average 3
 A bit above average..... 4
 Above average..... 5

133 How are you doing at school in Science?

(Circle one number)

- Below average..... 1
 A bit below average 2
 Average 3
 A bit above average..... 4
 Above average..... 5

134 How are you doing at school overall?

(Circle one number)

- Below average..... 1
 A bit below average 2
 Average 3
 A bit above average..... 4
 Above average..... 5

135 How important do your friends think it is to work hard at school?

(Circle one number)

- Not important 1
 A bit important 2
 Fairly important 3
 Very important 4

136 Is the amount of effort you put into your school work?

(Circle one number)

- Below average 1
 A bit below average 2
 Average 3
 A bit above average 4
 Above average 5

137 How important do you think it is for you to do well at school?

(Circle one number)

- Not important 1
 A bit important 2
 Fairly important 3
 Very important 4

138 How important does your mother think it is for you to work hard at school?

(Circle one number)

- No mother 1
 Not important 2
 A bit important 3
 Fairly important 4
 Very important 5

- 139 How important does your father think it is for you to work hard at school?

(Circle one number)

- No father 1
Not important 2
A bit important 3
Fairly important 4
Very important 5

- 140 What would you like to do when you finish school?

(Circle one number)

- Get a job 1
Trade/apprenticeship 2
College 3
University 4
Other (please specify) 5

- 141 What would you like to be when you leave school (eg plumber, hairdresser)?
