



15 Year Catch-up: Main Cohort

Child Questionnaire

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Interviewer Note: ID data seeded

ID Participant ID (Child): _____ • _____

FN First Name (Child): _____

LN Last Name (Child): _____

INTD Interview Date: ____ / ____ / ____

INTR Interviewer Name: _____

CTRY Childs Usual Country of Residence: _____

1. Introduction

Your 15 Year Catch-Up interview

Hello {NAME}, welcome to the latest *Growing Up in New Zealand* questionnaire. We are really excited to hear from you!

[REMOVE THESE SECTIONS FOR OVERSEAS CHILDREN]

[ADD THIS SECTION FOR OVERSEAS CHILDREN]

Some tips for the questionnaire:

1. Don't stress over every answer - your first answer is usually the best one.
 2. You can't use the back button once you have moved to a new page. **If you think you have made a mistake, tell the interviewer and they can make a note and we can change your answer manually later.** **If you are doing it by yourself and you made a mistake, you can send us a message and tell us what question you want the answer changed to and why.** Then you can keep going! **Note that time differences can cause a delayed reply.**
 3. Some of the questions won't seem relevant to you or your life but remember we ask questions from lots of different people in the study - just answer as best as you can.
 4. Don't forget all your answers are confidential and nobody will know what you have said.
 5. If you get stuck on a question or you don't know how to answer something, then please contact us or **ask the interviewer**, **send us a message** and we will see if we can help 😊
-

2. Child Health

This question is about your health and general wellbeing.

2.1 In general, how would you say your health is?

(Choose one only)

QOL11_y15C

- 1. Excellent
- 2. Very good
- 3. Good
- 4. Fair
- 5. Poor

2.2 During the past month, on work / school days what time have you usually gone to sleep?

_____ [start 4pm, with 30 min increments for whole 24 hours]

SLP14_y15C

2.3 During the past month, on work / school days what time have you usually woken up? _____ [start 4am, with 30 min increments for whole 24 hours]

SLP17_y15C

2.4 During the past month, on weekend days what time have you usually gone to sleep?

_____ [start 4pm, with 30 min increments for whole 24 hours]

SLP18_y15C

2.5 During the past month, on weekend days what time have you usually woken up? _____ [start 4am, with 30 min increments for whole 24 hours]

SLP19_y15C

2.6 During the last month, how well do you feel you have slept in general?

(Choose one only)

SLP16_y15C

- 1. Very well
- 2. Fairly well
- 3. Fairly badly
- 4. Very badly

During the past 4 weeks, how much of the time did you have...

<i>(Choose one only for each row)</i>	Variable name	0. None of the time	1. A little of the time	2. Some of the time	3. A good bit of the time	4. Most of the time	5. All the time
2.7 A problem falling asleep?	SLP13_1_y15C	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2.8 Waking up frequently during the night?	SLP13_2_y15C	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2.9 Waking up too early?	SLP13_3_y15C	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. Ethnicity

3.1 Which ethnic group do you belong to? ETH5_1_y15C to ETH5_99_y15C

(Choose all that apply, there is no wrong answer, you can select as many as you need)

- 1. New Zealand European
- 2. Māori
- 3. Samoan
- 4. Cook Islands Māori
- 5. Tongan
- 6. Niuean
- 7. Chinese
- 8. Indian
- 971. Other Ethnicity (Please tell us) _____
- 972. Other Ethnicity (Please tell us) _____
- 973. Other Ethnicity (Please tell us) _____
- 974. Other Ethnicity (Please tell us) _____
- 99. I don't know

[Note: 99 is an Exclusive option]

4. Cultural connectedness

People come from many different cultures and countries, and there are many different words to describe the different backgrounds or ethnic groups that people come from. Some examples of the names of ethnic groups are Māori, Pacific, Samoan, Cook Islands Māori, Tongan, Niuean, Chinese, Indian, New Zealand European/Pākehā, Middle Eastern, Latin American, African and many others.

These questions are about your ethnicity or your ethnic group and how you feel about it or react to it.

Please could you indicate how much you agree or disagree with the following statements?

<i>(Choose one only for each row)</i>	Variable name	1. Strongly disagree	2. Disagree	3. Neither agree nor disagree	4. Agree	5. Strongly agree
4.1 I have spent time trying to find out more about my ethnic group, such as its history, traditions, and customs.	ETHID1_y15C	○	○	○	○	○
4.2 I have a strong sense of belonging to my own ethnic group.	ETHID6_y15C	○	○	○	○	○
4.3 I understand pretty well what my ethnic group membership means to me.	ETHID7_y15C	○	○	○	○	○
4.4 I have often done things that will help me understand my ethnic background better.	ETHID13_y15C	○	○	○	○	○
4.5 I have often talked to other people in order to learn more about my ethnic group.	ETHID8_y15C	○	○	○	○	○
4.6 I feel a strong attachment towards my own ethnic group.	ETHID11_y15C	○	○	○	○	○
4.7 I am active in organisations or social groups that include mostly members of my own ethnic group.	ETHID2_y15C	○	○	○	○	○
4.8 I have a clear sense of my ethnic background and what it means for me.	ETHID3_y15C	○	○	○	○	○
4.9 I think a lot about how my life will be affected by my ethnic group membership.	ETHID4_y15C	○	○	○	○	○
4.10 I am happy that I am a member of the group I belong to.	ETHID5_y15C	○	○	○	○	○
4.11 I have a lot of pride in my ethnic group.	ETHID9_y15C	○	○	○	○	○
4.12 I participate in cultural practices of my own group, such as special food, music, or customs.	ETHID10_y15C	○	○	○	○	○
4.13 I feel good about my cultural or ethnic background.	ETHID12_y15C	○	○	○	○	○

5. Languages

5.1 What language(s) do you speak well enough to hold a conversation about a lot of everyday things?

(Choose all that apply – at least one)

LD51_1_y15C to LD51_973_y15C

- 1. English
- 2. Māori
- 3. Samoan
- 4. Tongan
- 5. Niuean
- 6. Cook Islands Māori
- 7. Fijian
- 8. Hindi
- 9. Punjabi
- 10. Gujarati
- 11. Cantonese
- 12. Mandarin
- 13. Korean
- 14. Japanese
- 15. Arabic
- 16. New Zealand Sign Language
- 17. Filipino
- 18. Spanish
- 19. Italian
- 20. French
- 971. Other, please specify _____
- 972. Other, please specify _____
- 973. Other, please specify _____
- 95. Not applicable

[Note: 95 is an Exclusive option – if selected, go to 6.1]

[If only option 1. English selected, go to 6.1. If any of 2. Māori to 973. Other selected, go to 5.2. If 1. English AND any other language (of 2. Māori to 973. Other), go to 5.2.]

5.2 Thinking only about the language/languages you speak that is/are not English, select situations where you are able to hear, read or speak to other people in that language/these languages.

(Choose all that apply – at least one)

LD53_1_y15C to LD53_97_y15C

- 1. At home
- 2. With my parents
- 3. With my siblings
- 4. With other family or extended family (e.g. aunty, uncle, grandparents)
- 5. At school
- 6. At a language class outside of my school
- 7. Meeting with friends
- 8. At a marae
- 9. At Kapa Haka
- 10. At my church, mosque, synagogue or other places of worship
- 11. At community groups or clubs
- 12. At community events (e.g. Te Matatini, Polyfest, Pasifika)
- 13. At a cultural event (e.g. Chinese New Year, Diwali, Eid)
- 14. At sporting events
- 15. Watching TV
- 16. At the movies
- 17. Listening to the radio
- 18. Listening to music
- 19. Internet
- 20. Social media (e.g. Instagram, Tiktok, Facebook, Snapchat, Youtube etc.)
- 21. Learning apps
- 22. Books, magazines
- 97. Other, please specify _____

6. Discrimination

The next question is about discrimination in New Zealand. By discrimination, we mean being treated unfairly or differently compared to other people.

These are some reasons why people may be discriminated against: age, skin colour, way of dress or appearance, race or ethnic group, accent or language spoken, gender, sexual orientation, religious beliefs, disability or health issues or any other reason.

6.1 In the last 12 months, have you been discriminated against?

NDIS15_y15C

(Choose one only)

- 1. Yes → **Go to 6.2**
- 0. No → **Go to 7.1**
- 99. I don't know → **Go to 7.1**
- 98. I don't want to answer this question → **Go to 7.1**

6.2 Why do you think you were discriminated against?

NDIS16_1_y15C to NDIS16_97_y15C

(Choose all that apply)

- 1. Age
- 2. Skin colour
- 3. Way of dress or appearance
- 4. Race or ethnic group
- 5. Accent or language spoken
- 6. Gender
- 7. Sexual orientation
- 8. Religious beliefs
- 9. Disability or health issues
- 97. Other please specify: _____

6.3 What situation or situations were you in when you were discriminated against?

NDIS17_1_y15C to NDIS17_97_y15C

(Choose all that apply)

- 1. In a shop or restaurant
- 2. On the street or in a public place
- 3. Seeking medical care
- 4. Dealing with the police
- 5. Trying to get a job
- 6. At work
- 7. Trying to rent housing
- 8. At school
- 97. Other please specify: _____

7. Peer Relationships

These next questions are about your friends: they might be friends at school, out of school or other young people you know.

For each statement, choose the answer option that best describes you and your friends.

<i>(Choose one only for each row)</i>	Variable name	1. Almost always true	2. Often true	3. Sometimes true	4. Seldom true	5. Almost never true
7.1 My friends sense when I'm upset about something.	<i>CPR17_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.2 My friends encourage me to talk about my difficulties.	<i>CPR18_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.3 I trust my friends.	<i>CPR19_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.4 My friends listen to what I say.	<i>CPR20_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.5 My friends respect my feelings.	<i>CPR21_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.6 I feel my friends are good friends.	<i>CPR22_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.7 If my friends know something is bothering me, they ask me about it.	<i>CPR23_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.8 I tell my friends about my problems and troubles.	<i>CPR24_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. Disability

The next questions ask about difficulties you may have doing certain activities.

8.1 Do you have difficulty seeing, even if wearing glasses or contact lenses?

(Choose one only)

DIS1_y15C

- 0. No – no difficulty
- 1. Yes – some difficulty
- 2. Yes – a lot of difficulty
- 3. Cannot do at all

8.2 Do you have difficulty hearing, even if using a hearing aid or with a cochlear implant?

(Choose one only)

DIS2_y15C

- 0. No – no difficulty
- 1. Yes – some difficulty
- 2. Yes – a lot of difficulty
- 3. Cannot do at all

8.3 Do you have difficulty walking or climbing steps?

(Choose one only)

DIS3_y15C

- 0. No – no difficulty
- 1. Yes – some difficulty
- 2. Yes – a lot of difficulty
- 3. Cannot do at all

8.4 Do you have difficulty remembering or concentrating?

(Choose one only)

DIS4_y15C

- 0. No – no difficulty
- 1. Yes – some difficulty
- 2. Yes – a lot of difficulty
- 3. Cannot do at all

8.5 Do you have difficulty (with self-care such as) washing all over or dressing?

(Choose one only)

DIS5_y15C

- 0. No – no difficulty
- 1. Yes – some difficulty
- 2. Yes – a lot of difficulty
- 3. Cannot do at all

8.6 Using your usual language, do you have difficulty communicating, for example understanding or being understood?

(Choose one only)

DIS6_y15C

- 0. No – no difficulty
- 1. Yes – some difficulty
- 2. Yes – a lot of difficulty
- 3. Cannot do at all

9. Puberty

How you see your body

The next questions are about how you see your body and changes that may be happening to your body as you get older (called puberty). These changes happen at different ages.

These questions can be personal. You might like to type these answers in private by yourself (without anyone watching). Your name will not be attached to the survey so no one will know what you answer to these questions.

9.1 [ALL] Click on one to three words that best describe how you feel about changes that might be happening in your body?

(Multiple choice—up to three responses)

PUB10_1_y15C to PUB10_98_y15C

RESPONSE OPTIONS 1 to 12 APPEAR IN RANDOM ORDER

- 1. Proud
- 2. Excited
- 3. Worried
- 4. Scared
- 5. Embarrassed
- 6. Positive
- 7. Nervous
- 8. Annoyed
- 9. Not interested
- 10. Upset
- 11. Angry
- 12. Confused
- 98. I don't want to answer this question

[Note: 98 is an exclusive code]

Some people, for health and wellbeing reasons, may be prescribed medication to change, delay, or halt puberty. So we can ask the right questions in the next section, are you using medication to change, delay or halt puberty? We understand this question can be personal, so you can choose not to answer it.

9.2 [ALL] Are you currently taking any prescribed medication to change, delay, or halt puberty (sometimes called “puberty blockers” or “hormone therapy”)?

(Choose one only)

BLOCKER4_y15C

- 1. Yes
- 0. No
- 2. I don't understand this question
- 98. I don't want to answer this question

[INSTRUCTIONS: ALL participants answer 9.3 (*PUB11_y15C*) which is then used to determine who answers the sex specific puberty questions. ALL then answer 9.4, 9.5, 9.6 and 9.7. IF 9.3=2 then participants are routed to 9.8, 9.9, 9.10, 9.11, and 9.12. IF 9.3=1 then participants are routed to 9.13, and 9.14. If 9.3=3 or 98 then participants skip to 10.1.]

9.3 [ALL] The next questions are about puberty based on your sex assigned at birth (not how you identify now). For example, what was recorded on your original birth certificate? Were you born a ...

(Choose one only)

PUB11_y15C

- 1. Male
- 2. Female
- 3. Indeterminate → **Go to 10.1**
- 98. I don't wish to answer this question → **Go to 10.1**

9.4 [ALL] The next questions are about experiences of puberty. Would you like to answer these questions?

(Choose one only)

PUB12_y15C

- 1. Yes
- 0. No → **Go to 10.1**

9.5 [ALL] Would you say that your growth in height...?

(Choose one only)

PUB1_y15C

- 1. Has not yet begun to spurt ('spurt' means more growth than usual)
- 2. Has just started
- 3. Is definitely underway
- 4. Seems completed
- 98. I don't want to answer this question

9.6 [ALL] And how about the growth of body hair ("body hair" means under your armpits and pubic hair)? Would you say that your body hair has...?

(Choose one only)

PUB2_y15C

- 1. Not yet started growing
- 2. Has just started growing
- 3. Is definitely underway
- 4. Seems completed
- 98. I don't want to answer this question

9.7 [ALL] Have you noticed any skin changes, especially pimples?

(Choose one only)

PUB3_y15C

- 1. Not yet started showing changes
- 2. Has just started showing changes
- 3. Skin changes are definitely underway
- 4. Skin changes seem completed
- 98. I don't want to answer this question

9.8 [FOR FEMALES ONLY] Have your breasts begun to grow?*(Choose one only)*

PUB4_y15C

- 1. Not yet started growing
- 2. Have just started growing
- 3. Breast growth is definitely underway
- 4. Breast growth seems completed
- 98. I don't want to answer this question

9.9 [FOR FEMALES ONLY] Have you begun to menstruate? ("menstruate" means you have had at least one period)*(Choose one only)*

PUB5_y15C

- 1. Yes → **Go to 9.10**
- 0. No → **Go to 10.1**
- 98. I don't want to answer this question → **Go to 10.1**

9.10 [For FEMALES if 9.9 = 1] How old were you when you first menstruated, or had your first period?

PUB6_y15C

- Please enter your age in years _____ [6 to 15 as options]

9.11 [For FEMALES if 9.9 = 1] How often have you used free period products (pads or tampons) from school?*(Choose one only)*

PUB7_y15C

- 0. Never
- 1. Once
- 2. A few times
- 3. Often → **Go to 10.1**
- 4. Every period → **Go to 10.1**

9.12 [For FEMALES if 9.11 = 0,1, or 2] What are some of the reasons you have not often used the free period products from school?*(Choose all that apply)*

PUB13_1_y15C to PUB13_98_y15C

- 1. Prefer to use my own products
- 2. I can get these from home or elsewhere
- 3. My school does not have them
- 4. They are not in a convenient place to get them
- 97. Other _____ (open text box)
- 98. I don't want to answer this question.

[Note: 98 is an exclusive code]**[FEMALES GO TO 10.1]**

9.13 [FOR MALES ONLY] Have you noticed a deepening of your voice?

(Choose one only)

PUB8_y15C

- 1. Not yet started changing
- 2. Has just started changing
- 3. Voice change is definitely underway
- 4. Voice change seems completed
- 98. I don't want to answer this question

9.14 [FOR MALES ONLY] Have you begun to grow hair on your face?

(Choose one only)

PUB9_y15C

- 1. Not yet started growing hair
 - 2. Has just started growing hair
 - 3. Facial hair growth is definitely underway
 - 4. Facial hair growth seems completed
 - 98. I don't want to answer this question
-

10. Eating disorder Screen for Primary care (ESP)

The next questions ask you about your eating patterns and how you feel about this.

10.1 Are you satisfied with your eating patterns?

(Choose one only)

ESP1_y15C

- 1. Yes
- 0. No
- 98. I don't want to answer this question

10.2 Do you ever eat in secret?

(Choose one only)

ESP2_y15C

- 1. Yes
- 0. No
- 98. I don't want to answer this question

10.3 Does your weight affect the way you feel about yourself?

(Choose one only)

ESP3_y15C

- 1. Yes
- 0. No
- 98. I don't want to answer this question

10.4 Have any members of your family suffered with an eating disorder?

(Choose one only)

ESP4_y15C

- 1. Yes
- 0. No
- 98. I don't want to answer this question
- 99. I don't know

10.5 Do you currently suffer with or have you ever suffered in the past with an eating disorder?

(Choose one only)

ESP5_y15C

- 1. Yes
- 0. No
- 98. I don't want to answer this question

11. Life Satisfaction

This section of the questionnaire includes questions from the Cantril Self-Anchoring Striving Scale, which have been redacted for copyright purposes. Please contact the team at *Growing Up in New Zealand* (dataaccess@growingup.co.nz) for more information.

12. Resilience

This section of the questionnaire includes questions from the Connor-Davidson Resilience Scale (CD-RISC), which have been redacted for copyright purposes. Please contact the team at *Growing Up in New Zealand* (dataaccess@growingup.co.nz) for more information.

13. Well-being

This section of the questionnaire includes questions from the Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS) 7-item, which have been redacted for copyright purposes. Please contact the team at *Growing Up in New Zealand* (dataaccess@growingup.co.nz) for more information.

How you feel and how you act

14. Depression

Below is a list of the ways you might have felt or acted. Please tell us how much you have felt this way during the past week.

<i>(Choose one only for each row)</i>		Variable name	0. Not at all	1. A little	2. Some	3. A lot
14.1	I was bothered by things that usually don't bother me	<i>DS1_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.2	I felt like I couldn't pay attention to what I was doing	<i>DS2_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.3	I felt down and unhappy	<i>DS3_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.4	I felt like I was too tired to do things	<i>DS4_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.5	I felt like something good was going to happen	<i>DS5_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.6	I felt scared	<i>DS6_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.7	I didn't sleep as well as I usually sleep	<i>DS7_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.8	I was happy	<i>DS8_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.9	I felt lonely, like I didn't have any friends	<i>DS9_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.10	It was hard to get started doing things	<i>DS10_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. Anxiety

This section of the questionnaire includes questions from the PROMIS/NIH toolbox fear tool, which have been redacted for copyright purposes. Please contact the team at *Growing Up in New Zealand* (dataaccess@growingup.co.nz) for more information.

16. Impulsivity

These questions are asking about how often you behave in different ways. For the following statements, please indicate how often you did the following:

<i>(Choose one only for each row)</i>	Variable name	1. Almost never	2. About once a month	3. About 2–3 times a month	4. About once a week	5. At least once a day
16.1 I forgot something I needed for school	IS1_y15C	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16.2 I interrupted other children people while they were talking	IS2_y15C	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16.3 I said something rude	IS3_y15C	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16.4 I couldn't find something because my bedroom was messy	IS4_y15C	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16.5 I lost my temper at home or at school	IS5_y15C	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16.6 I did not remember what my teacher told me to do	IS6_y15C	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16.7 My mind wandered when I should have been listening	IS7_y15C	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16.8 I talked back to my teacher or parent when I was upset	IS8_y15C	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

17. Social Emotional Health

Please tell us how true each statement is of you.

<i>(Choose one only for each row)</i>	Variable name	1. Not at all true	2. A little true	3. Pretty much true	4. Very much true
17.1 I accept responsibility for my actions.	<i>ER1_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17.2 When I make a mistake, I admit it.	<i>ER2_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17.3 I can deal with being told no.	<i>ER3_y15C</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

18. Self-harm and suicide

We are now going to ask some questions about people trying to hurt or harm themselves or attempt suicide. Remember you don't have to answer these questions if you don't want to.

18.1 Have any of your friends died by suicide?

(Choose all that apply)

SHM1_0_y15C to SHM1_98_y15C

- 0. No
- 1. Yes - within the last year
- 2. Yes - more than a year ago
- 3. Not sure
- 98. I don't want to answer this question

[Note: 0, 3, and 98 are exclusive codes]

Thank you for answering these questions. If these questions have been upsetting, remember you can talk to your friends, family, school counsellor, health staff, Youthline (free text 234) or Gumboot Friday (24/7 free txt or call 1737). There are also other services and professionals that may be able to help listed at the end of the survey. In an emergency call 111.

18.2 Have any members of your family died by suicide?

(Choose all that apply)

SHM2_0_y15C to SHM2_98_y15C

- 0. No
- 1. Yes - within the last year
- 2. Yes - more than a year ago
- 3. Not sure
- 98. I don't want to answer this question

[Note: 0, 3, and 98 are exclusive codes]

Thank you for answering these questions. If these questions have been upsetting, remember you can talk to your friends, family, school counsellor, health staff, Youthline (free text 234) or Gumboot Friday (24/7 free txt or call 1737). There are also other services and professionals that may be able to help listed at the end of the survey. In an emergency call 111.

18.3 During the last 12 months have you deliberately hurt yourself or done anything you knew might harm you (but not kill you)?

(Choose one only)

SHM3_y15C

- 0. No, never
- 1. Yes - once or twice
- 2. Yes - three or more times
- 98. I don't want to answer this question

Thank you for answering these questions. If these questions have been upsetting, remember you can talk to your friends, family, school counsellor, health staff, Youthline (free text 234) or Gumboot Friday (24/7 free txt or call 1737). There are also other services and professionals that may be able to help listed at the end of the survey. In an emergency call 111.

18.4 During the last 12 months have you seriously thought about killing yourself (attempting suicide)?

(Choose one only)

SHM4_y15C

- 0. No
- 1. Yes
- 98. I don't want to answer this question

Thank you for answering these questions. If these questions have been upsetting, remember you can talk to your friends, family, school counsellor, health staff, Youthline (free text 234) or Gumboot Friday (24/7 free txt or call 1737). There are also other services and professionals that may be able to help listed at the end of the survey. In an emergency call 111.

18.5 During the last 12 months have you made a plan about how you would kill yourself (attempt suicide)?

(Choose one only)

SHM5_y15C

- 0. No
- 1. Yes
- 98. I don't want to answer this question

Thank you for answering these questions. If these questions have been upsetting, remember you can talk to your friends, family, school counsellor, health staff, Youthline (free text 234) or Gumboot Friday (24/7 free txt or call 1737). There are also other services and professionals that may be able to help listed at the end of the survey. In an emergency call 111.

18.6 During the last 12 months have you tried to kill yourself (attempted suicide)?

(Choose one only)

SHM6_y15C

- 0. No → **Go to 19.1**
- 1. Yes → **Go to 18.7**
- 98. I don't want to answer this question → **Go to 19.1**

Thank you for answering these questions. If these questions have been upsetting, remember you can talk to your friends, family, school counsellor, health staff, Youthline (free text 234) or Gumboot Friday (24/7 free txt or call 1737). There are also other services and professionals that may be able to help listed at the end of the survey. In an emergency call 111.

18.7 Did this ever result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?

(Choose one only)

SHM7_y15C

- 0. No
- 1. Yes
- 98. I don't want to answer this question

Thank you for answering these questions. If these questions have been upsetting, remember you can talk to your friends, family, school counsellor, health staff, Youthline (free text 234) or Gumboot Friday (24/7 free txt or call 1737). There are also other services and professionals that may be able to help listed at the end of the survey. In an emergency call 111.

19. School / Education

The next questions ask about your experiences of school (including all types of schooling).

19.1 Thinking about the school that you went to last year, when did you start at that same school?

(Choose one only)

SS80_y15C

- 1. Year 0 / 1
- 2. Year 2
- 3. Year 3
- 4. Year 4
- 5. Year 5
- 6. Year 6
- 7. Year 7
- 8. Year 8
- 9. Year 9
- 10. Year 10
- 97. Other (please specify): _____
- 99. Don't know
- 95. Not applicable

19.2 Overall, was the last school year ~~Year 9~~ ...

(Choose one only)

SS81_y15C

- 1. Not as good as expected
 - 971. Please tell us why: _____
- 2. About what I expected
 - 972. Please tell us why: _____
- 3. Better than I expected
 - 973. Please tell us why: _____

19.3 Even though it may be a long way off, how far in school do you think you will go?

(Choose one only)

HD7_y15C

- 1. Leave before the end of secondary school (before the end of Year 13) → **Go to 19.7**
- 2. Finish secondary school (finish Year 13) → **Go to 19.7**
- 3. Finish secondary school and get a job straight away → **Go to 19.7**
- 4. Finish secondary school and then do some more study or training → **Go to 19.7**
- 5. Go to university → **Go to 19.7**
- 6. I have already left school. → **Go to 19.4**
- 97. Other (please specify): _____ → **Go to 19.7**
- 99. I don't know → **Go to 19.7**

[If option "6. I have already left school" is selected go to 19.4. Any other response option, go to 19.7]

19.4 How long ago did you leave school?

(Choose one only)

SS82_y15C

- 1. Between 1 and 2 months ago
- 2. Between 2 and 6 months ago
- 3. Between 6 months and 1 year ago
- 4. 1-2 years ago
- 5. More than 2 years ago

19.5 Why did you leave school? _____

SS90_y15C

19.6 What are you doing now? _____

SS91_y15C

→ **School leavers to Go to 21.1**

[19.7-19.11 are to be answered by all participants other than those who have left school (option 6 in 19.3)]

19.7 In which year level are you currently placed at school?

(Choose one only)

YL_y15C

- 1. Year 9
- 2. Year 10
- 3. Year 11
- 4. Year 12
- 5. Year 13
- 97. Other (please specify): _____

19.8 How often is the following statement true for you? "I like school."*(Choose one only)*

CCQ2_y15C

- 0. Never
- 1. Sometimes
- 2. Often
- 3. Almost Always

19.9 What types of assessments do you think you will be asked to complete this year?*(Choose all that apply)*

SS92_1_y15C to SS92_99_y15C

- 1. Practical
- 2. Presentations
- 3. Assignments/Projects
- 4. In class tests
- 5. School exam/s
- 6. External exam/s
- 7. Trade certificate
- 8. University examination/assessment
- 97. Other (please specify): _____
- 96. None of the above.
- 99. I don't know

[Note: 96, 99 are exclusive codes]**19.10 How prepared do you think you are for this school year?***(Choose one only)*

YEAR_THIS_y15C

- 1. Very well prepared
- 2. Quite well prepared
- 3. Somewhat prepared
- 4. Not very well prepared
- 5. Not at all prepared
- 99. I don't know

19.11 Have you been granted any of the following special assessment conditions?

(Choose all that apply)

SS86_1_y15C to SS86_97_y15C

- 1. Use of computer
- 2. Use of text to speech and/or speech to text software
- 3. Separate room (small group or individual)
- 4. Extra Writing Time
- 5. Rest Breaks
- 6. Reader support
- 7. Writer/Typist
- 8. Sign language support
- 9. Braille Paper
- 10. Special paper (enlarged print or on coloured paper)
- 97. Other (please specify): _____
- 96. None of the above

[Note: 96 is an exclusive code]

20. Academic Resilience

[Those young people who have left school i.e., Option 6 question 19.3, should skip this section]

Please rate yourself on the following day-to-day challenges you may experience at school.

<i>(Choose one only for each row)</i>	Variable name	1. Strongly disagree	2. Disagree	3. Somewhat disagree	4. Neutral	5. Somewhat agree	6. Agree	7. Strongly agree
20.1 I don't let schoolwork stress get on top of me.	ACRES1_y15C	○	○	○	○	○	○	○
20.2 I'm good at dealing with setbacks at school (e.g. bad marks, negative feedback on my work).	ACRES2_y15C	○	○	○	○	○	○	○
20.3 I think I'm good at dealing with schoolwork pressures.	ACRES3_y15C	○	○	○	○	○	○	○
20.4 I don't let a bad mark affect my confidence.	ACRES4_y15C	○	○	○	○	○	○	○

21. Your money

Now some questions about whether you have any of your own money.

21.1 Do you have any money of your own?

(Choose one only)

CHMON1_y15C

- 1. Yes
- 0. No
- 99. I don't know

21.2 Do you sometimes get money for...

(Choose all that apply)

CHMON3_1_y15C to CHMON3_97_y15C

- 1. Good behaviour (e.g. finishing your homework)
- 2. Doing well at school
- 3. Pocket money/allowance
- 4. Special occasions (e.g. Birthdays, Christmas, New Year)
- 5. Doing a paid job
- 6. Selling your things
- 7. Doing chores/housework
- 8. Babysitting/looking after children
- 9. Winning prizes (e.g. events, competitions)
- 97. Other (please specify): _____
- 96. I have never had my own money → **Go to 22.1**

[Note: 96 is an exclusive code]

21.3 What do you do with your money?

(Choose all that apply)

CHMON5_1_y15C to CHMON5_97_y15C

- 1. Save it
- 2. Invest it
- 3. Buy food/drinks for myself
- 4. Buy food/groceries for my family or whānau
- 5. Buy food/groceries for my friends
- 6. Buy gifts for my family or friends
- 7. Use it to pay for my phone or internet
- 8. Buy cards/games/toys/online purchases
- 9. Buy clothes/shoes
- 10. Going out (e.g. to the movies/concerts, bowling)
- 11. Give it to my family or whānau
- 12. Give it to charity
- 13. I can't use or access some or all of my money
- 14. Buy equipment for activities (e.g. sports equipment, art supplies)
- 15. Pay for household needs (e.g. power bills, petrol)
- 16. Pay for travel / transport (e.g. bus/train)
- 97. Other (please specify): _____

22. Screen-based Media

These questions are about your use of the internet and social media.

While using the internet and social media, how often have you come across these things?

<i>(Choose one only for each row)</i>	Variable name	1. Never	2. Occasionally	3. Often	4. I don't use the internet or social media
22.1 Bullying (of you or others)	TU88_2_y15C	○	○	○	○
22.2 Sexual images/videos	TU88_1_y15C	○	○	○	○
22.3 Violence	TU109_y15C	○	○	○	○
22.4 Contact from someone you don't know or shouldn't talk to	TU88_4_y15C	○	○	○	○
22.5 Peer pressure to watch certain things, play certain games, follow certain people e.g. YouTubers	TU88_9_y15C	○	○	○	○
22.6 Buying something by mistake	TU88_11_y15C	○	○	○	○
22.7 Advertisements promoting alcohol, tobacco smoke, vaping, snacks, or gambling	TU88_12_y15C	○	○	○	○
22.8 Information you knew was inaccurate, misleading, or intended to hurt someone	TU88_13_y15C	○	○	○	○

How would you rate your ability to decide whether information online or on social media is...

(Choose one only for each row)	Variable Name	1. Excellent	2. Very good	3. Good	4. Average	5. Poor	6. Very poor	7. I don't use the internet or social media
22.9 Accurate and reliable	TU88_14_y15C	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22.10 Trustworthy	TU88_15_y15C	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22.11 Subjective or biased	TU88_16_y15C	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22.12 Phishing (tricking others into providing personal information) or spam	TU88_17_y15C	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

23. Free time activities

In this section, please tell us about what you do in your free time, including before school, after school, evenings and on the weekend.

What do you do with your time outside of school during a typical weekday, but not during school holidays?

23.1 Before school/in the morning

(Choose all that apply)

AE141_1_y15C to AE141_97_y15C

- 1. Reading (e.g. books, magazines, kindle)
- 2. Online/video games
- 3. Listen to music
- 4. Watching shows (e.g. tv, phone, computer)
- 5. Household chores (e.g. getting food ready, dishes, washing)

- 6. Homework
- 7. Volunteering
- 8. Spend time with family/whānau
- 9. Spend time with my friends
- 10. Spend time relaxing
- 11. Community group or club (e.g. environmental, academic, religious, or cultural group)
- 12. Kapa Haka
- 13. Dance groups (e.g. cultural dance group, hip-hop)
- 14. Sports (e.g. rugby, cricket, waka ama, running, martial arts, bike riding)
- 15. Arts, crafts & technology (e.g. drawing, robotics)
- 16. Playing or making music (e.g. choir, band, orchestra, instrument lessons)
- 17. Spend time outdoors or with nature (e.g. go to the beach, hiking)
- 18. Help look after someone older than you (e.g. help them to eat or to get dressed)
- 19. Help look after someone younger than you (e.g. help them to eat or to get dressed)
- 20. Work
- 21. Exercise
- 97. Other, please tell us _____
- 96. None of these.

[96. is an exclusive option]

What do you do with your time outside of school during a typical weekday, but not during school holidays?

23.2 After school

(Choose all that apply)

AE142_1_y15C to AE142_97_y15C

- 1. Reading (e.g. books, magazines, kindle)
- 2. Online/video games
- 3. Listen to music
- 4. Watching shows (e.g. tv, phone, computer)
- 5. Household chores (e.g. getting food ready, dishes, washing)
- 6. Homework
- 7. Volunteering
- 8. Spend time with family/whānau
- 9. Spend time with my friends
- 10. Spend time relaxing
- 11. Community group or club (e.g. environmental, academic, religious, or cultural group)
- 12. Kapa Haka
- 13. Dance groups (e.g. cultural dance group, hip-hop)
- 14. Sports (e.g. rugby, cricket, waka ama, running, martial arts, bike riding)
- 15. Arts, crafts & technology (e.g. drawing, robotics)
- 16. Playing or making music (e.g. choir, band, orchestra, instrument lessons)
- 17. Spend time outdoors or with nature (e.g. go to the beach, hiking)
- 18. Help look after someone older than you (e.g. help them to eat or to get dressed)
- 19. Help look after someone younger than you (e.g. help them to eat or to get dressed)
- 20. Work

- 21. Exercise
- 97. Other, please tell us _____
- 96. None of these.

[96. is an exclusive option]

What do you do with your time outside of school during a typical weekday, but not during school holidays?

23.3 In the evenings/after dinner

(Choose all that apply)

AE143_1_y15C to AE143_97_y15C

- 1. Reading (e.g. books, magazines, kindle)
- 2. Online/video games
- 3. Listen to music
- 4. Watching shows (e.g. tv, phone, computer)
- 5. Household chores (e.g. getting food ready, dishes, washing)
- 6. Homework
- 7. Volunteering
- 8. Spend time with family/whānau
- 9. Spend time with my friends
- 10. Spend time relaxing
- 11. Community group or club (e.g. environmental, academic, religious, or cultural group)
- 12. Kapa Haka
- 13. Dance groups (e.g. cultural dance group, hip-hop)
- 14. Sports (e.g. rugby, cricket, waka ama, running, martial arts, bike riding)
- 15. Arts, crafts & technology (e.g. drawing, robotics)
- 16. Playing or making music (e.g. choir, band, orchestra, instrument lessons)
- 17. Spend time outdoors or with nature (e.g. go to the beach, hiking)
- 18. Help look after someone older than you (e.g. help them to eat or to get dressed)
- 19. Help look after someone younger than you (e.g. help them to eat or to get dressed)
- 20. Work
- 21. Exercise
- 97. Other, please tell us _____
- 96. None of these.

[96. is an exclusive option]

What do you do with your time outside of school, but not during school holidays?**23.4 On a normal weekend***(Choose all that apply)*

AE144_1_y15C to AE144_97_y15C

- 1. Reading (e.g. books, magazines, kindle)
- 2. Online/video games
- 3. Listen to music
- 4. Watching shows (e.g. tv, phone, computer)
- 5. Household chores (e.g. getting food ready, dishes, washing)
- 6. Homework
- 7. Volunteering
- 8. Spend time with family/whānau
- 9. Spend time with my friends
- 10. Spend time relaxing
- 11. Community group or club (e.g. environmental, academic, religious, or cultural group)
- 12. Kapa Haka
- 13. Dance groups (e.g. cultural dance group, hip-hop)
- 14. Sports (e.g. rugby, cricket, waka ama, running, martial arts, bike riding)
- 15. Arts, crafts & technology (e.g. drawing, robotics)
- 16. Playing or making music (e.g. choir, band, orchestra, instrument lessons)
- 17. Spend time outdoors or with nature (e.g. go to the beach, hiking)
- 18. Help look after someone older than you (e.g. help them to eat or to get dressed)
- 19. Help look after someone younger than you (e.g. help them to eat or to get dressed)
- 20. Work
- 21. Exercise
- 97. Other, please tell us _____
- 96. None of these.

[96. is an exclusive option]**23.5 Before school/in the morning who is usually with you?***(Choose all that apply, at least one)*

AE145_1_y15C to AE145_6_y15C

- 1. Parents/caregivers
- 2. Other family
- 3. Friends
- 4. Other people my age
- 5. Other adults (e.g. teacher, coaches, community or cultural group leader)
- 6. I am on my own

[6. is an exclusive option]

23.6 After school/in the afternoon who is usually with you?

(Choose all that apply, at least one)

AE146_1_y15C to AE146_6_y15C

- 1. Parents/caregivers
- 2. Other family
- 3. Friends
- 4. Other people my age
- 5. Other adults (e.g. teacher, coaches, community or cultural group leader)
- 6. I am on my own

[6. is an exclusive option]

23.7 In the evenings who is usually with you?

(Choose all that apply, at least one)

AE147_1_y15C to AE147_6_y15C

- 1. Parents/caregivers
- 2. Other family
- 3. Friends
- 4. Other people my age
- 5. Other adults (e.g. teacher, coaches, community or cultural group leader)
- 6. I am on my own

[6. is an exclusive option]

23.8 On a normal weekend who is usually with you?

(Choose all that apply, at least one)

AE148_1_y15C to AE148_6_y15C

- 1. Parents/caregivers
- 2. Other family
- 3. Friends
- 4. Other people my age
- 5. Other adults (e.g. teacher, coaches, community or cultural group leader)
- 6. I am on my own

[6. is an exclusive option]

23.9 Is there any activity that you WANT to do but you don't or can't?*(Choose one only)*

ACTW1_y15C

0. No → **Go to 24.1**
1. Yes → please tell us the main one: _____
- 1. Reading (e.g. books, magazines, kindle)
 - 2. Online/video games
 - 3. Listen to music
 - 4. Watching shows (e.g. tv, phone, computer)
 - 5. Household chores (e.g. getting food ready, dishes, washing)
 - 6. Homework
 - 7. Volunteering
 - 8. Spend time with family/whānau
 - 9. Spend time with my friends
 - 10. Spend time relaxing
 - 11. Community group or club (e.g. environmental, academic, religious, or cultural group)
 - 12. Kapa Haka
 - 13. Dance groups (e.g. cultural dance group, hip-hop)
 - 14. Sports (e.g. rugby, cricket, waka ama, running, martial arts, bike riding)
 - 15. Arts, crafts & technology (e.g. drawing, robotics)
 - 16. Playing or making music (e.g. choir, band, orchestra, instrument lessons)
 - 17. Spend time outdoors or with nature (e.g. go to the beach, hiking)
 - 18. Help look after someone older than you (e.g. help them to eat or to get dressed)
 - 19. Help look after someone younger than you (e.g. help them to eat or to get dressed)
 - 20. Work
 - 21. Exercise
 - 97. Other, please tell us _____

23.10 Thinking about this activity, why don't you do it?*(Choose all that apply)*

ACTW2_1_y15C to ACTW2_97_y15C

- 1. I don't have enough time
- 2. It costs too much
- 3. Problems getting there and back home
- 4. It's not available in my neighbourhood
- 5. My family doesn't want me to do it
- 6. Health problems (mental or physical health)
- 7. People would make fun of me
- 8. I'm afraid I won't be good at it
- 97. Other, please tell us _____

24. Hopes and Dreams

This section asks some questions about your thoughts for the future. You can say as much or as little as you like, and remember, there are no right or wrong answers.

24.1 What is the best thing about being {NAME}?

(Choose one only)

HD9_y15C

97. Please tell us _____
99. I don't know

24.2 Is there anything you are particularly worried about when you think about the next few years?

(Choose one only)

HD11_y15C

97. Please tell us _____
99. I don't know

24.3 What are you most looking forward to about the next few years?

(Choose one only)

HD3_y15C

97. Please tell us _____
99. I don't know

This is the last question!

As a young person, your voice matters, and we're interested in understanding where you feel listened to and who listens to you in your daily life. It could be at home, with friends, in your community, or another space (anything goes!). Please take a moment to reflect on the following question.

24.4 Where do you feel most listened to and heard in your life, and why?

(Choose one only)

HD13_y15C

97. Please tell us where: _____
971. Please tell us why: _____
99. I don't know

[Note: If 97 selected, then must answer 971]

END OF THE QUESTIONNAIRE – THANK YOU VERY MUCH
Ko tēnei te mutunga o ngā patai katoa – ngā mihi nui