

## ArctiChildren InNet (2012-2014) Empowering School e-Health Model in the Barents region

## Questionnaire for school children in the Barents region

## **Background information**

Father

Working full time

Working part time

Unemployed

1. Gender *
Boy
2. Do you have sibling(s)? *
O Yes O No, I'm an only child
3. Class *
◎ 6. ◎ 7. ◎ 8. ◎ 9. ◎ 10.
4. Year of birth *
4. Teal of biltin
choose
5. Where do you live? *
O City, in the center
City, outside of the center
Countryside, population center in the countryside
Countryside, outside population center in the countryside
6. Family status *
<ul><li>Living with parents</li></ul>
Living with mother
Living with father
Living with mother and stepfather
<ul><li>Living with father and stepmother</li></ul>
Other (specify, what)
7. Are your parents at present? *

1 of 5

Mother

Working full time

Working part time

Unemployed

	ing else, what?	Something else, what?
Sport and	nd exercise exercise refers to for example runni try skiing, football, basketball and ic	ng, brisk walking, roller skating, cycling, dancing, skate boarding, swimming, skiing e hockey.
		you exercised (so that your heart beat has increased and you have sweat and rcise can consist of numerous ≥10 minute periods. *
◎ 0 ◎ 1	0 2 0 3 0 4 0 5 0 6 0 7	
9. How do	you assess your physical condition a	it present? *
Excellent	t	
Good		
Moderat	re	
Bad		
Social r	elationships	
10. How m	any good friends do you have? *	
Male	Female	
3 or mo	re 0 3 or more	
O 2	© 2	
1	0 1	
© 0	O 0	
11. How m	any friends do you have in the inter	net (e.g. facebook)? *
More the	an 500	
0 101-500	0	
50-100		
0 1-49		
<ul><li>1-49</li><li>0</li></ul>		
© 0	ever feel yourself lonely? *	
© 0		
<ul><li>0</li><li>12. Do you</li><li>Yes, ver</li><li>Yes, quit</li></ul>	y often te often	
<ul><li>0</li><li>12. Do you</li><li>Yes, ver</li><li>Yes, quit</li><li>Yes, sor</li></ul>	y often te often	
<ul><li>0</li><li>12. Do you</li><li>Yes, ver</li><li>Yes, quit</li></ul>	y often te often	
<ul><li>O</li><li>12. Do you</li><li>Yes, ver</li><li>Yes, quit</li><li>Yes, sor</li><li>No</li><li>13. How of</li></ul>	y often te often netimes Iten do you meet your friends after s	school? *
<ul> <li>O</li> <li>12. Do you</li> <li>Yes, ver</li> <li>Yes, quit</li> <li>Yes, sor</li> <li>No</li> <li>13. How of</li> <li>Every da</li> </ul>	y often te often netimes iten do you meet your friends after s	school? *
Yes, ver Yes, quit Yes, sor No  13. How of Every da 3-6 day:	y often te often netimes Iten do you meet your friends after s ay s a week	school? *
<ul> <li>O</li> <li>12. Do you</li> <li>Yes, ver</li> <li>Yes, quit</li> <li>Yes, son</li> <li>No</li> <li>13. How of</li> <li>Every da</li> <li>3-6 days</li> <li>1-2 days</li> </ul>	y often re often netimes  Ten do you meet your friends after s ay s a week s a week	school? *
<ul> <li>O</li> <li>12. Do you</li> <li>Yes, ver</li> <li>Yes, quit</li> <li>Yes, son</li> <li>No</li> <li>13. How of</li> <li>Every da</li> <li>3-6 days</li> <li>1-2 days</li> </ul>	y often te often netimes Iten do you meet your friends after s ay s a week	school? *
Yes, ver Yes, quit Yes, sor No  13. How of Every da 3-6 day: 1-2 day: Less tha Never	y often re often netimes  Ten do you meet your friends after s ay s a week s a week	
Yes, ver Yes, quit Yes, sor No  13. How of Every da 3-6 day: 1-2 day: Less tha Never	y often te often metimes  Iten do you meet your friends after s ay s a week s a week an once a week Iten are you in contact with your friends	
Yes, ver Yes, quit Yes, sor No  13. How of Every da 3-6 day: 1-2 day: Less tha Never	y often te often netimes  Iten do you meet your friends after s ay s a week s a week an once a week Iten are you in contact with your friends	
Yes, very yes, quite Yes, sore No  13. How of Every day 3-6 day: 1-2 day: Less that Never  14. How of Every day Every day Every day Every day	y often te often netimes  Iten do you meet your friends after s ay s a week s a week an once a week Iten are you in contact with your frien ay s a week	
Yes, ver Yes, quit Yes, sor No  13. How of Every da 3-6 day: Less tha Never  14. How of Every da 3-6 day: 1-2 day:	y often te often netimes  Iten do you meet your friends after s ay s a week s a week an once a week Iten are you in contact with your frien ay s a week	

<ul><li>Yes, male</li><li>15. B. The</li></ul>	e person was
Yes, female  Younge	r than me
No About t	he same age as me
Slightly	older than me
Signification	antly older than me
16. Have you been bullied	during the last few months? *
In school	In the internet (e.g. facebook)
Never	Never
Once or twice	Once or twice
2 to 3 times a month	2 to 3 times a month
About once a week	About once a week
<ul><li>Numerous times a week</li></ul>	Numerous times a week
Sleeping and rest	
17. At what time do you	go to bed during school days? *
<ul><li>Earlier than 21.00</li></ul>	
Between 21.00-22.00	
Between 22.00-23.00	
<ul><li>Between 23.00-00.00</li><li>Between 00.00-1.00</li></ul>	
Later than 1.00	
18. How often do you fee	that you have slept enough? *
<ul><li>Every or almost every n</li></ul>	norning
<ul><li>3-5 mornings a week</li><li>1-2 mornings a week</li></ul>	
Hardly ever	
Use of internet	
19. How many hours do y	ou spend online (computer, mobile phone, tablet, game consoles) a day? *
School days	Weekends and holidays
Not at all	Not at all
	/ © Less than 1 hour per day
About 1-2 hours a day	About 1-2 hours a day
<ul><li>About 3-4 hours a day</li></ul>	About 3-4 hours a day
<ul><li>About 5-6 hours a day</li></ul>	About 5-6 hours a day
About 7-8 hours a day	About 7-8 hours a day
More than 8 hours a day	More than 8 hours a day
,	
20. Have you been partici	pating in online games with money during last few months? *
Once a week	
<ul><li>2-3 times a month</li><li>Once a month</li></ul>	
once a mondi	
Less than once a month	
<ul><li>Less than once a month</li><li>No</li></ul>	

## **Schooling**

21. Going to school is (scale: 1. strongly agree – 2. partly agree – 3. partly disagree – 4. strongly disagree) *				
	1	2	3	4
An opportunity to learn new things.		0		0
An opportunity to communicate with peer students and friends.	0	0	0	
A waste of time.			0	0
An opportunity to learn life skills (e.g. to discuss and listen other persons with respect, ability to tell and share own feelings, thoughts and opinions).	0	0	0	0
Other (please, specify). Select 1-4 from scale before writing	0		0	0
22. What do you think your teacher would say about your school achievement? *				
O Very good				
○ Good				
<ul><li>Average</li></ul>				
Bad				
<ul><li>Very bad</li></ul>				
23. What would you say about your school achievement? *				
Very good				
O Good				
<ul><li>Average</li></ul>				
O Bad				
<ul><li>Very bad</li></ul>				
24. My parents are interested in my schooling. *				
Strongly agree				
Partly agree				
O Partly disagree				
Strongly disagree				
25. Life events during the last 12 months. Mark which events you have experienced and judge whether the events w negative. If you answer "No", leave "negative/positive/do not know" boxes empty. *	ras p	osit	ive	or
No Yes Negative Positive Do not know				

	No	Yes	Negative F	ositive Do	not know
Moving inside town or municipality			0		0
Moving to another town or municipality				0	
Moving to a new school	0			0	
Serious illness in the family	0			0	
Marital separation in the family	0			0	
Marital divorce in the family	0			0	
Change in the economic situation of my family				0	
Starting a new hobby or leisure activity				0	
Disagreements with parents	0			0	
Disputes with fellow students at school	0			0	
Change in the school achievements				0	
Participation in an traffic accident	0			0	
Being object of an assault		0	0	0	0
Change in the circle of friends	0		0	0	0

26. How do you normally behave or think when you have problems, such as you get a bad mark at school. The rating scale is 1 to 5 such that 1=never, 2=hardly ever, 3=sometimes, 4=most of the time, 5=always \*

	1	2	3	4	5
Tell a friend or family member what happened					
Try to think of different ways to solve it					
Take it out on others because I feel sad or angry					
Become so upset that I can't talk to anyone		0		0	
Talk to somebody about how it made me to feel					
Change something so things will work out		0			
I forget the whole thing					
Worry too much about it					
Cry about		0			
I get involved in new activities					
Get help from a friend		0			
Tell myself it doesn't matter					
I worry that others will think badly about me					
I yell to let off steam					
I listen to music as a way to cope		0			
I know there are things I can do to make it					
I do something else to take my mind off the problem					

27. Number 10 describes your life situation as	"best possible/optimal"	and the 0 as	"worst possible"	. Mark on the scale from 0 to
10 your current life situation. *				

- 10
- 98
- 7
- 0 6
- 5
- 0 4
- 3
- 2
- 10
- 28. Mark the option that best describes your feelings during the last few months.  $\ast$

	Never	Sometimes	Often	Almost always
My life is going well			0	0
I would like to change several things in my life	0		0	0
What happens to me, feels good	0	0		0

29. It is important that students feel good physically, psychologically and socially to learn. How can, technology, such as mobile phones, apps and computers, be used to facilitate your well-being as a student in school?

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Submit