

Review Copy - RAAPS-Older Child
(for upper elementary only)

1. Do you think that you need to lose weight?
2. Do you eat some fruits and vegetables every day?
3. Are you active after school or on weekends (walking, running, dancing, swimming, biking, playing sports) for **at least 1 hour, on at least 3 or more days each week?**
4. Do you watch TV, play video games, or spend time using a computer **for more than 2 hours every day?**
5. Do you know how to swim?
6. Do you **always** wear a seatbelt when you are riding in a car, truck, or van?
7. Do you **always** wear a helmet when you are biking, rollerblading, skateboarding, motorcycling, snowmobiling, skiing, or snowboarding?
8. **In the past month**, have your feelings been hurt by someone on the internet, by text, or in person?
9. Has anyone **ever abused** you (punched, slapped, kicked or beat you up)?
10. Has anyone **ever** touched you or asked you to touch them in places that you didn't want to or that made you feel uncomfortable?
11. Have you **ever** carried a weapon (gun, knife, club, other) to protect yourself?
12. Have you **ever** smoked a cigarette or tried any other kind of tobacco (cigars, hookah, chewing tobacco, dip, e-cigarettes, other)?
13. Have you **ever** ridden in a car with someone that was drunk, high, or driving while texting?
14. Have you **ever** drunk more than a few sips of alcohol (beer, wine coolers, liquor, other)?
15. Have you **ever** smoked marijuana (pot, grass) or sniffed inhalants ("huffed" household products)?
16. When you are angry, do you do things that could get you in trouble?
17. **On most days**, do you feel sad or alone?
18. **On most days**, do you worry a lot or feel like something bad is going to happen?
19. Have you **ever** felt like you didn't want to live anymore, thought about or tried to hurt or kill yourself?
20. Do you have a good friend that you can talk to about anything?
21. When you have a problem, do you have an adult in your life that you can talk to?

RAAPS-OC: Draft Public Health Questions

- In the last week, did you have any food to eat for breakfast on at least 3 days?
- In the last month, did you miss school because you had problems getting to school?
- In the last month, did you miss school because you had a hard time breathing, because you were coughing, or because you were wheezing?
- In the last month, have you felt bullied at school or felt bullied on the way to school?
- In the last month, was it ever hard to do your homework because you didn't have electricity?
- In the last year, have you ever had to stay somewhere else because you didn't have your own home to stay in?
- In the last year, did you always have running water where you stayed?
- In the last year, has reading been hard for you?
- Do you have fun books to read where you stay?

NOT FOR DISTRIBUTION