Questionnaire Youth Health Monitor 2026

GGD Brabant-Zuidoost (Englisch version)

Hi! Thank you for taking part in the Youth Health Monitor.

Just a few tips and extra information before you start filling in the questionnaire:

- Completing the questionnaire is voluntary. If you do not want to answer a question, you may skip it.
- There are no wrong answers. **Your opinion and your experiences** are what counts.
- You're supposed to give only **one** answer to most of the questions, but for some you're allowed to give **multiple answers**.
- Your answers are saved immediately, even if you stop filling in the questionnaire before you get to the end. Do you want to delete your answer to a question? Then go back to that question by clicking on "<" (back), clear the answer and click on ">" (next).
- After completing the questionnaire, you will be directed to a page with websites that provide more information about the topics of the questionnaire.
- Everything you fill in remains **confidential**. Your teachers, classmates, parents, friends or anyone else will not find out what you enter. You can find more information about your privacy (rights) and on how we handle your **data in the privacy statement.**

Best of luck!

GEZONDHEIDS
MONITOR
JEUGD 2026

BACKGROUND QUESTIONS

Question 1. What class/year are you in?
Year in Dutch secondary school system / IB programme year
❑ 1 / MYP 2
❑ 2 / MYP 3
❑ 3 / MYP 4
❑ 4 / MYP 5
❑ 5 / DP 1
❑ 6 / DP 2

Question 2. What level of education are you currently following?
You may give more than one answer.
❑ Practical secondary education
❑ Vmbo-b (pre-vocational secondary education, basic programme)
❑ Vmbo-k (pre-vocational secondary education, middle-management programme)
❑ Vmbo-g (pre-vocational secondary education, combined programme)
❑ Vmbo-t (pre-vocational secondary education, theoretical programme)
❑ Havo (senior general secondary education)
❑ Vwo (atheneum, gymnasium; pre-university education)
❑ Other type of education

Question 3. What is your age?
❑ 12 or younger
❑ 13
❑ 14
❑ 15
❑ 16
❑ 17
❑ 18 or older

Question 4. Are you...?
❑ A boy
❑ A girl
❑ Different than a boy or girl

Question 5a. What are the 4 digits of your postal code?
We mean the home address where you spend most of your time. Note: Do you live in Belgium? Then enter 0111.
_____

Question 5b. What are the 2 letters of your postal code?
Enter the letters that correspond to the postal code you provided in the previous question.
_____

Pop-up for question 5:
No one (including your parents/guardians and your school) can use your postal code to find out who you are. We ask for your postal code so we can determine which municipality you live in. This helps us monitor the health of young people in your municipality.

[Doorverwijzing: Als 4 cijfers ingevuld zijn bij vraag 5, dan vraag 6 en 7 overslaan.]

Question 6. Which province do you live in?
We mean the province where you spend most of your time.
____ [dropdown menu with all provinces]

Pop-up for question 6:
No one (including your parents/guardians and your school) can use your answer to find out who you are. We ask this so we can determine which region you live in. This helps us monitor the health of young people in your region.

Question 7. What is your place of residence?
We mean the place where you spend most of your time.
____ [dropdown menu with all places of residence by province]

Pop-up for question 7:
No one (including your parents/guardians and your school) can use your answer to find out who you are. We ask for your place of residence so we can determine which municipality you live in. This helps us monitor the health of young people in your municipality.

HEIGHT AND WEIGHT

Question 8. How much do you weigh?
(without clothes)

I weigh ☐☐☐ kilograms

Question 9. How tall are you?
(without shoes)

I am ☐☐☐ centimeters

AT HOME

Question 10. With whom do you live most days of the week?
❑ With both my parents
❑ About half the time with one of my parents and the other half with my other parent (co-parents)
❑ With one of my parents and their partner
❑ With one of my parents
❑ Other than the above (such as foster parents, other family members, boarding school, I live on my own)

Question 11. Do you struggle to make ends meet at home?
With home we mean the family you live with most of the time.
❑ No, not at all
❑ No, we're not struggling but we do have to be careful
❑ Yes, a little bit
❑ Yes, a lot

To what extent do you agree with the following statement?

Question 12. My parents/carers have clear rules about what I may and may not do
❑ Completely disagree
❑ Disagree
❑ Neither agree nor disagree
❑ Agree
❑ Completely agree

To what extent do you agree with the following statement?

Question 13. My parents/carers spend a lot of time with me
❑ Completely disagree
❑ Disagree
❑ Neither agree nor disagree
❑ Agree
❑ Completely agree

Answer the following question for the parents/carers you live with (most of the time).

Question 14. If you are not at home, do your parents/carers know where you are?
❑ No, never
❑ Yes, sometimes
❑ Yes, usually
❑ Yes, always

Question 15. How many days in the last week did you get home after 10 pm?
❑ 0 days
❑ 1 day
❑ 2 days
❑ 3 days
❑ 4 days
❑ 5 days
❑ 6 days
❑ 7 days

Question 16. How often do you hang out with friends at someone's house in the evening without an adult present?

❑ Never or almost never
❑ Less than once a month
❑ 1–3 times a month
❑ 1–3 times a week
❑ 4 times a week or more

Question 17. Do your parents/carers have contact with the parents/carers of your friends?

❑ No, no contact, they don't know them
❑ No, no contact, but they know some of them
❑ Yes, they have contact with some of them
❑ Yes, they have contact with most of them

HEALTH

Question 18. How is your health in general?

❑Very good
❑Good
❑Okay
❑Poor
❑Very poor

FEELING GOOD

Question 19. How happy do you feel most of the time?

❑ 
❑ 
❑ 
❑ 
❑ 

Question 20. How is your mental health usually?

With this question, we mean how you generally feel.

❑ Very good
❑ Good
❑ Fair
❑ Poor
❑ Very poor

The next question is about how you have been feeling during the past 2 weeks.

Question 21. Did you feel cheerful and happy?
❑ All the time
❑ Most of the time
❑ More than half of the time
❑ Less than half of the time
❑ Sometimes
❑ Never

The next question is about how you have been feeling during the past 2 weeks.

Question 22. Did you feel calm and relaxed?
❑ All the time
❑ Most of the time
❑ More than half of the time
❑ Less than half of the time
❑ Sometimes
❑ Never

The next question is about how you have been feeling during the past 2 weeks.

Question 23. Did you feel active and full of energy?
❑ All the time
❑ Most of the time
❑ More than half of the time
❑ Less than half of the time
❑ Sometimes
❑ Never

The next question is about how you have been feeling during the past 2 weeks.

Question 24. Did you wake up feeling rested and refreshed?
❑ All the time
❑ Most of the time
❑ More than half of the time
❑ Less than half of the time
❑ Sometimes
❑ Never

The next question is about how you have been feeling during the past 2 weeks.

Question 25. Did you engage in activities that interest you on a daily basis?
❑ All the time
❑ Most of the time
❑ More than half of the time
❑ Less than half of the time
❑ Sometimes
❑ Never

How true is the following statement for you?

Question 26. I usually recover quickly from a difficult time
□ Not true at all
□ Not true
□ Neither true nor false
□ True
□ Very true

How true is the following statement for you?

Question 27. I can cope well with stressful situations.
□ Not true at all
□ Not true
□ Neither true nor false
□ True
□ Very true

Question 28. How much confidence do you have in your future?
□ 1 No confidence at all
□ 2
□ 3
□ 4
□ 5
□ 6
□ 7
□ 8
□ 9
□ 10 A whole lot of confidence

Question 29. How often have you felt lonely the past 4 weeks?
□ Never
□ Hardly ever
□ Sometimes
□ Often
□ (Almost) all the time

CONCERNS AT HOME

Question 30. Is someone in your home suffering from a serious physical and/or mental illness or disability for more than 3 months?
For instance from cancer, heart disease, blindness, paralysis, depression, burnout, intellectual disability, or Down syndrome.
You can give more than one answer.
□ Yes, me
□ Yes, someone else in my home
□ No

Question 31. Is someone in your home suffering from an addiction [pop-up] to alcohol, drugs or gambling for more than 3 months (smoking tobacco doesn't count)?
You can give more than one answer.
□ Yes, me
□ Yes, someone else in my home
□ No

[Pop-up: 'Addiction means that you can't do without a certain substance, for instance alcohol or drugs. You know that it is bad for you, but you keep using.']

Question 32. Have you ever experienced a divorce/separation of your parents/carers, or are you going through this now?
❑ No, never [→ Go to question 34]
❑ Yes

Question 33. To what extent is this divorce/separation causing you problems?
❑ No problems
❑ A few problems
❑ A fair amount of problems
❑ A lot of problems
❑ A whole lot of problems

SCHOOL

Question 34. How are you finding school?
❑ Great
❑ I like it
❑ It's okay
❑ I don't like it
❑ I hate it

Question 35. How many days have you not been to school during the past 4 weeks because you were ill?
Don't include school holidays in these 4 weeks.
❑ 0 school days
❑ 1 or 2 school days
❑ 3 or 4 school days
❑ 5 or more school days

Question 36. How many classes did you skip the past 4 weeks?
Don't include school holidays in these 4 weeks.
❑ 0 classes
❑ 1 or 2 classes
❑ 3 to 6 classes
❑ 7 to 15 classes
❑ 16 or more classes

To what extent do you agree with the following statement?

Question 37. I think going to school is a waste of time
❑ Strongly disagree
❑ Disagree
❑ Neither agree nor disagree
❑ Agree
❑ Strongly agree

PHYSICAL ACTIVITY AND SPORTS

Question 38. How often do you walk or cycle to school or your traineeship?
An e-bike or fat bike also counts.
❑ (Almost) never
❑ Less than 1 day a week
❑ 1 day a week
❑ 2 days a week
❑ 3 days a week
❑ 4 days a week
❑ 5 days a week

Question 39. How often do you do sports at a club or gym?
Like fitness, swimming, soccer, tennis, dancing.
❑ (Almost) never
❑ Less than 1 day a week
❑ 1 day a week
❑ 2 or 3 days a week
❑ 4, 5 or 6 days a week
❑ Every day

Question 40. How often do you do sports or are you physically active in your free time without a club or gym?
Like soccer on the street, cycling, running, inline skating, dancing at home and skateboarding
❑ (Almost) never
❑ Less than 1 day a week
❑ 1 day a week
❑ 2 or 3 days a week
❑ 4, 5 or 6 days a week
❑ Every day

Question 41. Think of an ordinary week. On which days of the week are you physically active at least 1 hour per day doing sports or something else?
Think of all kinds of sports or physical activities that you do during the day. Add these together.
For example: running, cycling to school or a traineeship, walking the dog, playing sports, and PE class. You may select more than one answer.
❑ Monday
❑ Tuesday
❑ Wednesday
❑ Thursday
❑ Friday
❑ Saturday
❑ Sunday
❑ None

[Als '(bijna) nooit' geantwoord op vraag 39, vraag 42 overslaan.]

Question 42. Do you ever see your trainer or coach smoking, vaping, or drinking alcohol during or after a training session?
❑ No, never
❑ Yes, sometimes
❑ Yes, (very) often

Question 43. What keeps you from doing (more) sports?
❑ I already get enough physical activity
❑ I don't enjoy it
❑ It is too expensive
❑ I'm not sure what I could do
❑ I am too busy (for example with homework, tests, or a part-time job)
❑ I am unsure whether I can do it well
❑ I don't have anyone to play sports with
❑ The sport I like is not available in my area
❑ Other, namely:

Question 44. Do you have a swimming certificate?
❑ No, I do not have a swimming certificate
❑ I have certificate A
❑ I have certificates A and B
❑ I have certificates A, B and C
❑ I have another swimming certificate, such as "Super Spetters"

FREE TIME

Question 45. On how many days per week are you active in your free time in a club, or organisation other than a sports club or gym?
For example: making music, acting, drawing/painting, scouting, or attending a church/mosque.
❑ (Almost) never [→ Go to question 47]
❑ Less than 1 day a week
❑ 1 day a week
❑ 2 or 3 days a week
❑ 4, 5 or 6 days a week
❑ Every day

Question 46. Do you ever see your supervisor or teacher smoking, vaping, or drinking alcohol at the club or organisation?
❑ No, never
❑ Yes, sometimes
❑ Yes, (very) often

STRESS AND PRESSURE

Question 47. How often do you feel stressed because of school or homework?
❑ Never
❑ Hardly ever
❑ Sometimes
❑ Often
❑ Very often

Question 48. How often do you feel stressed because of the situation at home *(like worries, problems or arguments at home)*?
❑ Never
❑ Hardly ever
❑ Sometimes
❑ Often
❑ Very often

Question 49. How often do you feel stressed because of your own problems *(like your health, arguments with other youngsters, secrets or debts)*?
❑ Never
❑ Hardly ever
❑ Sometimes
❑ Often
❑ Very often

Question 50. How often do you feel stressed because of what others think of you?
❑ Never
❑ Hardly ever
❑ Sometimes
❑ Often
❑ Very often

Question 51. How often do you feel stressed because of everything you have to do (*like school, homework, social media, job, sports*)?
❑ Never
❑ Hardly ever
❑ Sometimes
❑ Often
❑ Very often
Some adolescents feel pressured to meet expectations. They often feel like they have to do something right or better, like getting higher grades or fit the perfect picture.

Question 52. Do you feel pressured to meet your own expectations?
❑ No, never
❑ Yes, sometimes
❑ Yes, regularly
❑ Yes, often

Question 53. Do you feel pressured to meet someone else's expectations?
❑ No, never
❑ Yes, sometimes
❑ Yes, regularly
❑ Yes, often

[Als 'No,never' of 'Yes, sometimes' geantwoord op vraag 53, vraag 54 overslaan]

Question 54. You say you feel pressured to meet someone else's expectations. Who or what causes you to feel pressured?
You can give more than one answer.
❑ My parent(s)/carer(s)
❑ Teachers/school
❑ Friends
❑ Coach, trainer or instructor of my sport or hobby
❑ Social media
❑ Boyfriend/girlfriend
❑ Other

BULLYING

The following question is about bullying. By bullying, we mean repeatedly bothering or hurting someone in a way they do not like. Examples of bullying include name-calling, gossiping, sending unpleasant messages, taking someone's belongings, spitting, or excluding someone. Bullying can also take place online or through social media.

Question 55. How often have you been bullied during the past 3 months?
□ Never
□ Sometimes
□ Often

[Als 'Never' geantwoord op vraag 55, vraag 56 overslaan]

Question 56. Where have you been bullied in the past 3 months?
You may select more than one answer.
❑ Online or on social media
❑ At or around school
❑ At the sports club or other organisation
❑ In the neighbourhood where I live
❑ Somewhere else

PHYSICAL VIOLENCE

Question 57. How often has someone kicked, hit, or otherwise physically hurt you in the past 12 months?
We do not mean kicking or hitting as part of a sport, such as in judo or boxing.
❑ Never
❑ Once or twice
❑ 3 times or more

ALCOHOL

Question 58. Did you ever drink alcohol?
Non-alcoholic drinks (such as Radler 0.0%) don't count.
❑ Yes, a whole glass or more
❑ Yes, just a few sips
❑ No [→ Go to question 66]

Question 59. On how many days did you drink alcohol in the past 4 weeks?
❑ Never
❑ 1 or 2 days
❑ 3 to 5 days
❑ 6 to 9 days
❑ 10 days or more

[Als 'Never' geantwoord op vraag 59, vragen 60 en 62 overslaan]

Question 60. How often did you have 5 or more alcoholic beverages in the past 4 weeks at one event?
Like a party on one evening.
❑ Never
❑ 1 or 2 times
❑ 3 to 5 times
❑ 6 to 9 times
❑ 10 times or more

Question 61. How often in your whole life were you drunk or tipsy from drinking alcohol?
❑ Never
❑ 1 or 2 times
❑ 3 to 5 times
❑ 6 to 9 times
❑ 10 times or more

[Als 'Never' geantwoord op vraag 61, vraag 62 overslaan]

Question 62. How often in the past 4 weeks were you drunk or tipsy from drinking alcohol?
❑ Never
❑ 1 or 2 times
❑ 3 to 5 times
❑ 6 to 9 times
❑ 10 times or more

[Als 'Yes, a whole glass or more' is geantwoord bij vraag 58] OF
[Als 'Yes, just a few sips' is geantwoord bij vraag 58 én niet 'Never' bij vraag 59]:

Question 63. Where do you usually drink alcohol?
You can give more than one answer.
❑ At home
❑ With friends
❑ In a pub, bar, disco/club, cafeteria, restaurant, on a terrace
❑ At a concert or festival
❑ At a fair, summer party or tent party
❑ At a school party, school trip, field trip from school
❑ In the canteen of the sports club or at another club
❑ On the street, in a park or somewhere else outside (not on a terrace)
❑ In a shack, youth centre or shed
❑ Somewhere else

[Als 'Yes, just a few sips' is geantwoord bij vraag 58 én 'Never' bij vraag 59]

Question 63a. You indicated that you have ever had a few sips of alcohol. Where did you have those few sips of alcohol?
You can give more than one answer.
❑ At home
❑ With friends
❑ In a pub, bar, disco/club, cafeteria, restaurant, on a terrace
❑ At a concert or festival
❑ At a fair, summer party or tent party
❑ At a school party, school trip, field trip from school
❑ In the canteen of the sports club or at another club
❑ On the street, in a park or somewhere else outside (not on a terrace)
❑ In a shack, youth centre or shed
❑ Somewhere else

[Als 'Yes, a whole glass or more' is geantwoord bij vraag 58] OF
[Als 'Yes, just a few sips' is geantwoord bij vraag 58 én niet 'Never' bij vraag 59]:

Question 64. Where do you usually get the alcohol from?
You can give more than one answer.
❑ I buy it MYSELF
❑ I let others buy it (a friend, someone I know or a stranger)
❑ From a friend or someone I know
❑ From my parents/carers
❑ From other adults

[Als 'Yes, just a few sips' is geantwoord bij vraag 58 én 'Never' bij vraag 59]:

Question 64a. Where did you get those few sips of alcohol from?
You can give more than one answer.
❑ From my parents/carers
❑ From a friend or someone I know
❑ From my brother or sister
❑ From someone else
❑ I bought it myself
❑ I took it myself

[Als 'Yes, a whole glass or more' of 'Yes, just a few sips' op vraag 58]

Question 65. What do your parents/carers think about you drinking alcohol?
❑ They are fine with it
❑ They think I should drink less alcohol
❑ They discourage it
❑ They forbid it
❑ They don't say anything about it
❑ They don't know about it

[Als 'No' op vraag 58]

Question 66. What would your parents/carers think if you did drink alcohol?
❑ They would be fine with it
❑ They would discourage it
❑ They would forbid it
❑ They wouldn't say anything about it
❑ I don't know

SMOKING

Question 67. Have you ever smoked?
We mean cigarettes and hand-rolled cigarettes, not vapes (electronic cigarettes).
❑ Yes, a whole cigarette or more
❑ Yes, only a few puffs
❑ No [→ Go to question 69]

Question 68. How often do you smoke now?
❑ Every day
❑ At least once a week, but not every day
❑ Less than once a week
❑ I don't smoke any more

Question 69. Have you ever used a vape (e-cigarette)?
❑ Yes
❑ No [→ Go to question 71]

Question 70. How often do you vape now?
❑ Every day
❑ At least once a week, but not every day
❑ Less than once a week
❑ I don't vape any more

DRUGS

Question 71. Have you ever used weed or hashh?
❑ Yes
❑ No [→ Go to question 73]

Question 72. On how many days did you use weed or hash in the past 4 weeks?
❑ Never
❑ 1 or 2 days
❑ 3 to 5 days
❑ 6 to 9 days
❑ 10 days or more

SLEEP

Question 73. How well do you usually sleep?
❑ Very well
❑ Well
❑ Fair
❑ Poor
❑ Very poor

Question 74. How often do you feel sleepy or tired during the day because you do not sleep well?
❑ (Almost) never
❑ A few times per month
❑ A few times per week
❑ (Almost) every day

LIVING ENVIRONMENT AND SAFETY

Question 75. Do you ever feel unsafe during the day?
❑ Yes, often
❑ Yes, sometimes
❑ Hardly ever
❑ No

Question 76. Do you ever feel unsafe in the evening or during the night?
❑ Yes, often
❑ Yes, sometimes
❑ Hardly ever
❑ No

[Niet stellen als zowel vraag 75 als vraag 76 met 'No' zijn beantwoord]

Question 77. Where do you sometimes feel unsafe?
You can give more than one answer.
❑ At home
❑ In school
❑ On the streets in my neighbourhood
❑ On the streets outside my neighbourhood
❑ When I go out
❑ At a sports club or other organisation
❑ Somewhere else

ONLINE SAFETY

Question 78. Do you ever feel unsafe online?
For example on social media, in online games, or on online platforms.
❑ Yes, often
❑ Yes, sometimes
❑ Hardly ever
❑ No

Question 79. In the past 12 months, have you seen or experienced anything online that bothered you or still bothers you?
❑ Yes, often
❑ Yes, sometimes
❑ Hardly ever
❑ No

LGBTI+

Question 80. Do you consider yourself to be LGBTI+?
By LGBTI+ we mean lesbian, gay, bisexual, transgender, and intersex. The plus indicates that there are also other ways in which you can experience gender and sexuality.
❑ Yes
❑ No [→ Go to question 82]
❑ I don't know (yet) [→ Go to question 82]

Question 81. How often do you feel that you can be yourself with others as an LGBTI+ person?
❑ Never
❑ Sometimes
❑ Usually
❑ Always

Question 82. What do you think about two girls/women or two boys/men being in love with each other?
❑ Completely okay
❑ Somewhat okay
❑ Not okay

SUPPORT FROM OTHERS

Question 83. Who can you turn to when you have a problem or something is bothering you?
You can give more than one answer.
❑ My parent(s) or carer(s)
❑ Other family members (like a brother, sister, grandparent, aunt)
❑ My friend(s)
❑ An adult at school (like a teacher, mentor or confidant)
❑ A healthcare professional (like a GP, psychologist, children's nurse)
❑ Someone else (like a youth worker, coach, neighbours)
❑ I have no one to turn to

STANDING UP FOR YOURSELF

The following questions are about standing up for yourself and making choices (for example about bullying, clothing, going out, smoking, alcohol use, and sexuality).

Please indicate to what extent you agree with the statement below.

Question 84. If someone does something I don't like I let them know
❑ Strongly disagree
❑ Disagree
❑ Neither agree nor disagree
❑ Agree
❑ Strongly agree

Please indicate to what extent you agree with the statement below.

Question 85. I'm good at saying no to my friends
❑ Strongly disagree
❑ Disagree
❑ Neither agree nor disagree
❑ Agree
❑ Strongly agree

Please indicate to what extent you agree with the statement below.

Question 86. I only do things I really want to do
❑ Strongly disagree
❑ Disagree
❑ Neither agree nor disagree
❑ Agree
❑ Strongly agree

Please indicate to what extent you agree with the statement below.

Question 87. I stand up for myself if someone calls me names, insults me or threatens me
❑ Strongly disagree
❑ Disagree
❑ Neither agree nor disagree
❑ Agree
❑ Strongly agree

Please indicate to what extent you agree with the statement below.

Question 88. I know what I want and what I don't want
❑ Strongly disagree
❑ Disagree
❑ Neither agree nor disagree
❑ Agree
❑ Strongly agree

Question 89. Have you ever had a sexual experience with someone <u>against your will</u>?
By sexual experience, we mean everything from kissing, intimate touching to sleeping with someone.
❑ Yes
❑ No

NEGATIVE THOUGHTS

Question 90. Have you ever seriously considered ending your life in the past 12 months?
❑ Never [→ Go to question 93]
❑ Hardly ever
❑ Sometimes
❑ A lot
❑ Very often

Would you like to talk to someone about thoughts of suicide? You can call 113 anonymously (available 24/7) or chat via 113.nl.

Question 91. Have you ever talked to someone about your thoughts of ending your life?
❑ Yes
❑ No

Would you like to talk to someone about thoughts of suicide? You can call 113 anonymously (available 24/7) or chat via 113.nl.

Question 92. Have you made an attempt to end your life in the past 12 months?
❑ Yes
❑ No

Would you like to talk to someone about thoughts of suicide? You can call 113 anonymously (available 24/7) or chat via 113.nl.

Message after the question about suicidal attempts (regardless of the answer):
If you have had thoughts about suicide or have made an attempt in the past year, it's important to talk to someone about it. Talking can help you feel relieved, and together you can look at what might help you. There may be someone in your surroundings with whom you feel safe. You can also chat anonymously with the 113 helpline via www.113.nl or call 113 (available 24/7). You can also discuss this with your general practitioner, who can help you find appropriate support.
Note: Because this questionnaire is anonymous, we are not able to contact you.

SOCIAL MEDIA

The following questions are about your experience with social media such as Snapchat, TikTok, YouTube, Instagram, WhatsApp, and Reddit.

Question 93. Think of a typical day. How many hours per day do you spend on social media?
❑ Less than 1 hour per day
❑ 1 to 3 hours per day
❑ 4 to 6 hours per day
❑ More than 6 hours per day

Question 94. How often do you feel good because of social media?
❑ (Almost) never
❑ Sometimes
❑ Often

Question 95. How often do you feel bad because of social media?
❑ (Almost) never
❑ Sometimes
❑ Often

Question 96. How often are you distracted by social media?
For example from homework, household tasks, part-time job, or sports.
❑ (Almost) never
❑ Sometimes
❑ Often

Question 97. How often do you find it difficult to stop using social media?
❑ (Almost) never
❑ Sometimes
❑ Often

Question 98. How often do you lose sleep because of social media?
❑ (Almost) never
❑ Sometimes
❑ Often

Question 99. Do you consider yourself addicted to social media?
❑ Yes, very much
❑ Yes, a little
❑ No

HEARING

Question 100. Do you ever have hearing problems?
For example, a ringing in your ears, feeling deaf, not being able to hear properly.
❑ No, never
❑ Yes, sometimes
❑ Yes, often
❑ Yes, always

Question 101. Do you ever take action to reduce the risk of hearing damage?
You can give more than one answer.
❑ No, never **[** exclusive answer**]**
❑ Yes, I don't turn up the volume on my phone or speaker to maximum
❑ Yes, I regularly take a sound break when listening to music on my phone or speaker
❑ Yes, I use hearing protection (ear plugs) in places with loud music
❑ Yes, I keep enough distance from the sound box/speaker in places with loud music
❑ Yes, I regularly take a sound break in places with loud music

You have completed the Youth Health Monitor questionnaire and your answers have been saved.

Thank you very much once again!

Would you like to talk to someone from the GGD?
If you would like to talk to a youth doctor or nurse from the GGD, they are happy to help. This is free and confidential. You can call our Customer Contact Centre at: 088 – 0031 100, and they will refer you to the right person. If you prefer to email or chat, please visit: JouwGGD.nl.

Looking for more information?
This questionnaire covered many different topics.
If you would like to learn more about them, you can visit the Dutch websites below. You may be able to translate them using your browser's translation feature. Some websites also offer an English-language version that you can select on the site. Some helplines and chat services offer support in English. Other services primarily operate in Dutch, although some staff members or volunteers may also be able to speak English. If you would prefer to receive support in English, ask at the beginning of the conversation.

JouwGGD.nl
For videos and tips on all kind of topics, such as family & friends, feelings, sex & relationships, smoking/vaping, alcohol & drugs, your body, internet & mobile use, bullying & violence, school & future and health. You can also ask questions anonymously via email.

Kindertelefoon
For when you want to talk or chat about something. It is free and anonymous. You can call 0800-0432 or chat online. Available every day between 11:00 and 21:00.

Jongeren Hulp Online
For when you are struggling with something or just want to get something off your chest: there are over 20 helplines at Jongeren Hulp Online that offer you fast, anonymous and free support. Fast, anonymous and free help via chat, phone or email.

MIND
For when you're having mental problems, aren't feeling well, or if you are concerned about someone. An advisory consultation with tips to help you move forward is free. They will brainstorm with you and refer you if necessary. You can call Monday through Friday between 11:30 and 17:30 / 21:00, or chat, WhatsApp, and email via the website.

Sense
For all your questions about sex and relationships. You can chat, call, WhatsApp, or email. You can call Monday to Friday between 09:30 and 15:30 via the Sense information line: 085-7609712. Chatting is available via the website Monday to Friday between 11:30 and 17:30 / 21:00. You can also find information there about how to make an appointment for a personal consultation with a professional near you. - *English-language support available*

OFFLIMITS
For information and support if you have experienced something unpleasant online. You will

be listened to, receive practical help, and be guided on what to do next. You can call free of charge and anonymously at 020-2615275 or chat via the website. - *English-language support available*

Genderpraatjes
For young people with questions about gender and gender identity. You can chat via the website on school days between 15:00 and 17:00 and between 19:00 and 21:00.
You can also call every school day between 15:00 and 17:00 at 085-3037680. - *English-language support available*

113
For help if you're having suicidal thoughts or if you are concerned about someone. You can call 113 anonymously (available 24/7) or chat anonymously via the website. - *English-language support available*

You can now close this window.