



## YOURLIFE-TDV SURVEY

### All questions

Firstly, we want to **thank you** for helping us in this study. This is an international study to learn more about teenagers your age.

This survey is **ANONYMOUS**. **You do not have to include your name**. Nobody will know who gave the answers.

Participation in this survey is **VOLUNTARY**. If you do not wish to respond, you may leave the room whenever you want, or you may remain there without replying to the survey until the others finish. None of these decisions will have any consequences for you. If you don't feel comfortable responding to one of the questions, you may pick the option "I'd prefer not to answer".

This is **NOT AN EXAM**. You will not be graded on this, but we encourage you to respond as honestly as possible. Check just **one reply box** for each question. If you are struggling to choose a reply, check the one that is **closest** to what you think or what you do most of the time.

Some questions include replies that mention unhealthy or unadvisable practices. We have included them because some people could be in those situations. Some questions may seem a little "strange" to you in your environment or circle (because they are being used in other countries with different cultures). Even in this case, try to reply as best you can.

Some questions may refer to your **parents**. Depending on your situation, these questions can refer to biological or adoptive parents, legal guardians or someone else who is responsible for you.

Answering this survey will take about 20/30 minutes.

Clicking on "Next" implies that you agree to participate in this survey.

## Thank you very much for your contribution!

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NOTE: In some cases, the question numbers consecutive. This is NOT a mistake. Some questions are asked on some surveys and not on others, depending on the age groups and the purpose of the study.

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**101 How old are you?**

- 10 or less
- 11
- 12
- 13
- 14
- 15
- 16
- 17
- 18
- 19
- 20
- 21
- 22
- 23
- 24
- 25 or more
- I'd prefer not to answer

**102. Gender**

- Male
- Female
- I'd prefer not to answer

**103. Last year...**

- I failed some classes
- I passed all classes
- I got good grades
- I'd prefer not to answer

**170. Please check with an X the box beside the response that you believe most applies to each question. Please answer the questions considering the past six months.**

	Not true	Somewhat true	Absolutely true	I'd prefer not to answer
I am restless, hyperactive, I cannot sit still for too long				
I move all the time, I move too much				
I get distracted easily, I struggle to concentrate				
I think things through before doing them				
I finish what I begin, I find it easy to concentrate				

**104. How old were you when you got your first cell phone?**

- I don't have a cell phone → Skip to question 106
- 7 or less
- 8
- 9
- 10
- 11
- 12

- 13
- 14
- 15
- 16 or more
- I'd prefer not to answer → Skip to question 106

**105. Your own cell phone:**

	NO	YES	I don't know	I'd prefer not to answer
Do you have a data plan on your phone (constant Internet connection)?				
Do you have a filter (a program that prevents you from accessing certain websites)?				

**106. WE WOULD LIKE YOU TO TELL US HOW YOU SPEND YOUR FREE TIME**

**107. In the past 12 months, how often have you taken part in the following activities?**

	Never	Less than 1 day per month	1-3 days per month	1-2 days per week	3 or more days per week	I'd prefer not to answer
Hang out outside, at a park, in shopping malls or other public spaces						
Play sports, go hiking, etc.						
Do charity work (collaborating with an NGO, charity association, etc.)						
Take part in artistic or cultural activities (play an instrument, sing, act, or paint, visit museums or go to a play, etc.).						
Go out at night partying (at a home, outside, at clubs, etc.).						
Gather at home or at a premises where your friends are alone, without any adults						
Do activities with your parents (play sports, go on outings or excursions, play games, etc.)						
Read something you enjoy						
Play videogames						

**108. In the past 12 months, have you consumed any of the following substances?**

	Never	Less than 1 day per month	1-3 days per month	1-2 days per week	3 or more days per week	I'd prefer not to answer
Smoked cigarettes (tobacco)						
Smoked pot or consume cannabis or marijuana						
Drank alcohol						
Consumed over 5 alcoholic drinks in few hours						
Took other drugs (cocaine, amphetamines, ecstasy, etc.)						

**109. In the past 12 months, have you taken part in any of these activities?**

	NO	YES	I don't know	I'd prefer not to answer
Sending erotic/sexual images in which you appear				

Sending erotic/sexual images in which someone you know appears				
Receiving erotic/sexual images in which someone you know appears				
Asking someone to send you an erotic/sexual image of themselves				

**110. In the past 12 months, have you viewed pornography (videos or images)?**

- Never
- Less than 1 day per month
- 1-3 days per month
- 1-2 days per week
- 3 or more days per week
- I'd prefer not to answer

**111. On average, how much money do you spend per week on your personal expenses?**

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**112. These questions are related to thoughts and feelings about yourself and your personal relationships with others. Decide if these are true or not for you, on a scale of 1 (not true at all) to 6 (absolutely true):**

	Not at all true <span style="font-size: 1.2em;">→</span> Absolutely true					
	1	2	3	4	5	6
People tend to say I'm overly emotional						
I struggle to share my feelings with people that matter to me						
I often feel self-conscious when I'm with my family						
When someone close to me disappoints me, I shut them out for some time						
I tend to distance myself when people get too close to me						
My partner (or my best friend) would not tolerate it if I shared my real feelings about certain things						
Sometimes I'm overwhelmed by my feelings and I struggle to think clearly						

**113. Let's move on with more questions about you and your personal relationships with others:**

	Not at all true <span style="font-size: 1.2em;">→</span> Absolutely true					
	1	2	3	4	5	6
I usually feel uncomfortable when people get too close to me (physically)						
I am concerned about losing my independence in close personal relationships						
I am overly sensitive to criticism						
I frequently feel that my best friend (or my partner) wants too much from me						
If I've fought with my best friend (or my partner) I tend to think about it all day						
When one of my personal relationships is too intense, I feel the need to distance myself						
If someone is upset with or angry at me, I find it hard to let it go						

**114. Let's finish up with some questions about yourself and your personal relationships with others:**

	Not at all true <span style="font-size: 1.2em;">→</span> Absolutely true					
	1	2	3	4	5	6
I get easily hurt by others						

I frequently ask myself what sort of impression I cause
Usually, when things go wrong, speaking about them makes it worse
I experience things more intensely than others
If my best friend (or my partner) gave me the space I need, our personal relationship could be better
Discussions with my parents or my siblings make me feel terrible
Sometimes I feel physically ill after a disagreement with my best friend (or partner)
When I am upset, I lose control over my behavior

**115. Share with what frequency you've been in any of these situations:**

	Never $\longrightarrow$ Very frequently							
	0	1	2	3	4	5	6	I'd prefer not to answer
I have suffered some sort of physical or psychological aggression or harm (insulted, hit, ignored, etc.) by someone in my school/high school								
I have caused some sort of physical or psychological aggression or harm (insulted, hit, ignored, etc.) to someone in my school/high school								

**116. When you want information on issues related to love and sexuality, how frequently do you speak to or ask...?**

	Never $\longrightarrow$ Very frequently							
	0	1	2	3	4	5	6	I'd prefer not to answer
... your father								
... your mother								
... your friends								
... your boyfriend/girlfriend								
...the Internet								
...a trusted teacher								
...a professional from the healthcare center or youth center								

**117. State if YOUR PARENTS teach you...**

	NO	YES	I don't know	I'd prefer not to answer
... to identify violent behavior (physical or psychological) in a romantic relationship				
... that what's "inside" is more important than someone's physical appearance				
... that a man and a woman can work just as well in any profession				
... that men and women are equal in terms of dignity/value				
... that it's important to pick your life partner wisely				
... that it's best to hold off sexual relations until there is commitment				
... that it's best to hold off sexual relations until you marry				
... that you should have a condom close at hand in case you have sexual relations				

**118. State if your ELEMENTARY SCHOOL/HIGH SCHOOL teaches you (in workshops, classes, etc.)...**

	NO	YES	I don't know	I'd prefer not to answer
... to identify violent behavior (physical or psychological) in a romantic relationship				
... that what's "inside" is more important than someone's physical appearance				
... that a man and a woman can work just as well in any profession				
... that men and women are equal in terms of dignity/value				

**119. We would like to know your level of agreement with the following statements on love (from a minimum score of 0: “Completely disagree” to a maximum of 6: “Completely agree”)**

	Completely disagree						Completely agree		I'd prefer not to answer
	0	1	2	3	4	5	6		
Everlasting love is possible									
I would like to find everlasting love									
You can only be happy if you are in a romantic relationship									
Love dies when passion ends									
Love means feeling jealous									
Love means staying with someone who isn't good for you but needs you in order to change									
Love means giving up your own interests, friendships, etc., to devote yourself exclusively to your partner									
Love means making an effort to make the relationship work properly									

**120. Share YOUR PERSONAL OPINION on the following statements (from a minimum score of 0: “Completely disagree” to a maximum of 6: “Completely agree”)**

	Completely disagree						Completely agree		I'd prefer not to answer
	0	1	2	3	4	5	6		
Housework is not for men (cleaning, cooking, laundry, etc.)									
A man and a woman can work just as well in any profession									
Mothers should only work at home									
Men are unable to control their sexual impulses									
Women are unable to control their emotions									
In a couple, you should do what the guy says									
Men and women are equal in terms of dignity/value									

**121. How important are the following aspects for YOU when choosing a partner/someone to date? (We are referring to a “special” romantic relationship with someone, different to what you share with other friends).**

	Not important						Very important		I'd prefer not to answer
	0	1	2	3	4	5	6		
That they are handsome/pretty									
That they have a good body									
That they have money, a motorbike, a car, etc.									
That they are a good person, charitable, loyal, faithful									
That they are smart									
That they are sensitive									
That they have a good sense of humor									
That they are responsible, a good student, work hard									
That they want to wait until marriage to have sexual relations									
That we share hobbies or interests									
That we both have similar principles on important matters (values, faith...)									
That I can count on them when things get rough									



**128. How often have you had or have these feelings about your partner?**

	Never  Very frequently							I'd prefer not to answer
	0	1	2	3	4	5	6	
I have felt frightened/afraid of my partner								
I have felt trapped and unable to leave the relationship								
I have felt controlled, lacking freedom								

**129. State how much the following situations would bother you (from 0="not at all" to 6="a lot"):**

	Not at all  A lot							I'd prefer not to answer
	0	1	2	3	4	5	6	
That my partner trusts in other people aside from me.								
That my partner paid attention to other people in addition to paying attention to me.								
That my partner flirted with another person.								
That my partner hugged someone longer than normal.								
That another person paid attention to my partner.								
That another person hugged my partner longer than normal.								

**130. State how often YOUR PARTNER has displayed any of these behaviors with you:**

<b>frequently</b>	Never  Very							I'd prefer not to answer
	0	1	2	3	4	5	6	
They insult, criticize or shout at you (in person, over the phone, on social media)								
They don't allow you to speak to or see your family or friends								
They call or text you constantly to control what you're doing, where you are or who you're with								
They threaten to leave you when you fight								
They threaten to hurt you if you leave them								
They set the rules (schedules, dates, etc.) for your relationship without considering your opinion								
They have checked your phone without permission								
They control what you do on social media								

**131. Let's move on to the behavior that YOUR PARTNER has shown or currently shows towards you:**

<b>frequently</b>	Never  Very							I'd prefer not to answer
	0	1	2	3	4	5	6	
They have hit you, kicked you, pulled your hair or thrown something at you								
They have grabbed or pushed you forcefully								
They ruin or threaten to ruin things that you really like								
They force you to send erotic/sexual photos or videos of yourself								
They send you erotic/sexual photos or videos of themselves, even though you said you didn't want to receive them								
They say that they will leave you if you don't have sexual relations or perform other types of sexual acts with them								
They touch parts of your body sexually although you said you didn't want them to								
They force you to perform sexual acts								

They take advantage of the fact that you have had alcohol or drugs to have sexual relations with you or perform any other sort of sexual act with you

They force you to send erotic/sexual photos or videos of yourself

132. Now, state how often YOU have shown any of these behaviors towards your partner:

frequently	Never  Very							I'd prefer not to answer
	0	1	2	3	4	5	6	
I insult, criticize or shout at them (in person, over the phone, on social media, etc.)								
I don't allow them to speak or see their family or friends								
I call or text them constantly to control what they're doing, where they are and who they're with								
I threaten to leave them when we fight								
I threaten to hurt them if they leave me								
I set the rules (schedules, dates, etc.) for our relationship without considering their opinion								
I have checked their phone without permission								
I control what they do on social media								

133. Let's continue with the behaviors that YOU have shown towards your partner:

frequently	Never  Very							I'd prefer not to answer
	0	1	2	3	4	5	6	
I have threatened to hurt them, harm them or throw something at them								
I have hit them, kicked them, pulled their hair or thrown something at them								
I have grabbed or pushed them forcefully								
I have ruined or threatened to ruin things that they really like								
I force them to send erotic/sexual photos or videos of themselves								
I send erotic/sexual photos or videos of myself, even though they said they didn't want to receive them								
I say that I will leave them if they don't have sexual relations or perform other types of sexual acts with me								
I touch parts of their body sexually although they said they didn't want me to								
I force them to perform sexual acts								
I take advantage of the fact that they have had alcohol or drugs to have sexual relations with them or perform any other sort of sexual act with them								

**\* NOTE: C13 does not include questions 134 to 149 (inclusive)**

134. From this moment onwards, "sexual relations/intercourse" refers to those in which there is penetration.

135. How many teenagers your age do you think have had sexual intercourse?

- Nobody or nearly nobody
- Less than half
- Half
- More than half

- All or nearly all
- I don't know
- I'd prefer not to answer

**136. Have you had sexual intercourse? “Sexual intercourse” is to be understood as complete sexual relations, with penetration.**

- No
- Yes → **Skip to question 139**
- I'd prefer not to answer → **Skip to question 150**

**137. If you haven't had sexual intercourse, how important are the following reasons for you?**

	Not at all important						Very important		I'd prefer not to answer
	0	1	2	3	4	5	6		
... I'm not at the right age									
... I don't feel ready									
... I haven't found the right person									
... I prefer to wait until I meet the person I'll share my life with									
... I prefer to wait until I'm married									
... I don't want to get pregnant or get someone else pregnant									
... I don't want to get HIV/AIDS or any other STD									
... My partner(s) didn't want to									
... My parents wouldn't approve									
... I am not financially independent									

**138. Which of these responses best describe your plans for the future in terms of having sexual intercourse?**

- I intend to wait until I marry
- I intend to wait until I am engaged to marry
- I intend to wait until I find someone I love
- I intend to have intercourse as soon as I have a chance
- I haven't thought about it yet
- I'd prefer not to answer

**\*NOTE: If you have checked any of the answers in question 138, skip to question 150**

**139. How old were you and your partner when you first had sexual intercourse?**

	10 or less	11	12	13	14	15	16	17	18	19	20 or more	I'd prefer not to answer
How old were YOU?												
How old was YOUR PARTNER?												

**140 Did you use a condom in that first sexual relation?**

- No

- Yes → *Skip to question 142*
- I don't remember → *Skip to question 142*
- I'd prefer not to answer → *Skip to question 142*

**141. If you didn't use a condom, what was your main reason?**

- Lack of information (for example, not knowing how to use it)
- We didn't have one because they are hard to get
- We didn't have one because it was unplanned
- We didn't want to use it (me, my partner or both of us)
- Other reasons
- I'd prefer not to answer

**142. Were you pressured into your first sexual relation?**

- There was no pressure for either of us to have sexual relations
- Yes, I pressured the other person to have sexual relations
- Yes, the other person pressured me to have sexual relations
- I don't know/I can't remember
- I'd prefer not to answer

**143. Which of these statements best describes how this first sexual relation took place?**

- It was completely unexpected for me
- I expected it to happen soon, but I wasn't sure when
- I planned it beforehand (but we didn't plan it together)
- We planned it together, beforehand
- I don't know/I can't remember
- I'd prefer not to answer

**144. What opinion do you have regarding the first time you had sexual intercourse?**

- I waited too long, I wish I had waited LESS
- I believe it was the right moment
- It was too soon, I wish I had waited LONGER
- I don't know
- I'd prefer not to answer

**145. After your first sexual relation, please state if you felt...**

	NO	YES	I don't know	I'd prefer not to answer
... loved				
... sexually satisfied (I experienced physical				
... empty				
... used				
... disappointed (I expected it to be better)				

**146. How important have the following reasons for having your first sexual relation been to you?**

	Not at all important  Very important							I'd prefer not to answer
	0	1	2	3	4	5	6	
I felt a physical impulse								
I wanted to have fun/have a good time								
Most of my friends were doing it, I didn't want to be different								

I thought it was normal for someone my age to have sexual relations
I wanted to know what it was like (I was curious)
I wanted to express my love to the other person
I wanted to feel accepted, appreciated by the other person
I wanted to make the other person happy
I wanted to “get” that person
I thought my partner (boyfriend/girlfriend) would leave me if I refused
My partner (boyfriend/girlfriend) said they would leave me if I refused
I drank alcohol, smoked marijuana or did some other drug
I didn't know how to say no to the person who was insisting on it
I gave into the physical excitement of the moment (a kiss, petting, etc.), although it wasn't my initial intention
I gave into the physical excitement after viewing pornography/photos

**147. State if the other person did something violent or that you didn't like in any sexual relation you've had:**

- This has never happened to me.
- This has happened to me and I've always told the other person I didn't like what they were doing to me.
- This has happened to me and sometimes I haven't dared to tell the other person that I didn't like what they were doing to me.
- I'd prefer not to answer

**148. In the past 12 months, how often have you used a condom in your sexual relations?**

- Never
- Seldom
- About half of the times
- Almost always
- Always
- I don't remember
- I haven't had sexual relations in the past 12 months
- I'd prefer not to answer

**149. With how many different people have you had sexual relations in your life?**

- 1
- 2
- 3
- 4
- 5 or more
- I don't remember
- I'd prefer not to answer

**150. NOW WE WOULD LIKE TO LEARN MORE ABOUT YOUR FAMILY**

**151. How many siblings do you have? (Do not include yourself)**

- None
- 1
- 2
- 3 or more
- I'd prefer not to answer

**152. Who lives with you?**

	NO	YES	I'd prefer not to answer
Father			
Mother			
Another adult who's responsible for you (legal			
Sibling(s)			
Grandparent(s)			
Other people			

**153. About your parents... (In the event that one of them has passed away, please state their situations when they were both alive)**

- They live together but they've never married
- They are married
- They are separated/divorced, but neither of them remarried or have a stable partner
- They are separated/divorce and at least one has a stable partner or has remarried
- I don't know
- I'd prefer not to answer

**154. What is the highest level of studies your father has completed?**

- None
- Primary school (or equivalent) until they were 12/14
- Secondary education (or equivalent): until 16/18 years of age
- Higher non-university education (Higher-level vocational school)
- University degree (Minor or Major Degree)
- Postgraduate degree (Master, Doctorate)
- I don't know
- I'd prefer not to answer

**155. What is the highest level of studies your mother has completed?**

- None
- Primary school (or equivalent) until they were 12/14
- Secondary education (or equivalent): until 16/18 years of age
- Higher non-university education (Higher-level vocational school)
- University degree (Minor or Major Degree)
- Postgraduate degree (Master, Doctorate)
- I don't know

**156. We would like to how your parents are with you. State the frequency:**

	Never  Very frequently							I'd prefer not to answer
	0	1	2	3	4	5	6	
Your parents help you when you feel insecure								
Your parents make efforts to be with you and help you								
Your parents limit the time you can watch TV, play videogames								
Your parents limit the money you spend								
Your parents control the books and magazines you read								
Your parents control the use of your mobile, tablet, Internet								
You feel your parents take an interest in you								
You feel supported and comforted by your parents								

**157. State how often your parents teach you or encourage you to...**

	Never  Very frequently							
	0	1	2	3	4	5	6	I'd prefer not to answer
... take initiative								
... express your opinions								
... listen to the ideas of others								
... improve, achieve your goals								
... not provide personal information (your own, of your family or friends) to other people on the Internet								
... not speak of things you know about your friends in public								
... not take pictures, record conversations or publish things on other people on the Internet without their permission								
... not lie or deceive on chats or social media								

**158. What is your religion or your religious beliefs?**

- I don't believe in God/I don't know if God exists → *Skip to question 161*
- I believe in God but I don't belong to any specific religion → *Skip to question 161*
- Catholicism
- Reformed / Evangelical
- Orthodox
- Other Christian religions
- Islam
- Hinduism
- Buddhism
- Ethnic religions
- Traditional Chinese religion (Tao, Confucianism)
- Shintoism
- Sikhism
- Judaism
- Others
- I'd prefer not to answer

**159. Mark how often:**

	Never	Almost never	Several times per year	Once a month	Once a week	More than once a week	I'd prefer not to answer
You go to church/the temple							
You pray							

**160. Do you agree with this statement: "My faith has an important influence in my life and I am willing to consider it in my decisions"?**

- Completely disagree
- Disagree
- Neutral
- Agree
- Completely agree
- I'd prefer not to answer

**161. The last 7 questions are for administrative purposes. Try to reply as best you can.**

**162. What was the largest pet you had as a child, before starting middle school/high school?**

- Rabbit
- Cat
- Hamster or guinea pig
- Bird
- Dog
- Fish or small tortoise
- Lizard, iguana, or other reptile
- Other/none
- I'd prefer not to answer

**163. Out of the places where you went on vacation as a child before starting middle school / high school, which brings back the fondest memories?**

- Camping
- Outdoors/mountain/country towns
- Beach
- Amusement/theme parks/water parks
- Other/none
- I'd prefer not to answer

**164. What food did you hate the most as a child, before starting middle school/high school?**

- I didn't hate any food
- Some vegetables
- Some fruits
- Some meats
- Brains, liver or kidneys
- Some fish or shellfish
- Cheese, milk or yogurt
- Legumes (lentils, chickpeas or beans)
- Some soups or purées
- Other
- I'd prefer not to answer

**165. Write the initial of your best childhood friend, before you started middle school/high school) (*only their initial*): [LETTER]**

**166. Of the following sports, which one was your favorite when you started middle school/high school?**

If your favorite one does not appear on the list, please pick your second favorite (we have eliminated soccer/football on purpose, because it would be chosen too often).

- Basketball
- Handball
- Horseback riding
- Skiing or snowboarding
- Gymnastics, dance, or ballet
- Athletics
- Swimming or water-polo
- Tennis, squash, other racket sport

- Volleyball
- Baseball
- Skating
- I don't like any of these sports
- I'd prefer not to answer

**167. What was your favorite color when you started middle school/high school?**

- White
- Red
- Pink
- Orange
- Yellow
- Green
- Blue
- Purple
- Other/none
- I'd prefer not to answer

**168. What was your favorite number when you started middle school/high school?**

- 0
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- Other/none
- I'd prefer not to answer

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**THANK YOU FOR PARTICIPATING!**

**We thank you for sharing this information with us.**

Although we have asked about certain activities that could put your health at risk (drinking alcohol, doing drugs, having sexual relations, etc.), this does not mean that teenagers should carry out any of these activities. The questions in this survey are strictly for research purposes.

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