

# Environment and Wellbeing Web Questionnaire, Part C

## YOUR FAMILY AND FRIENDS

Text shown in a blue font (screen numbers, validation rules) are for information only: these pieces of text were not shown on screen for twins. The other sections of text, in a black font, are exactly as shown on screen.

### SCREEN 1

#### INTRODUCTION (text with voice-over)

This activity is a questionnaire about your relationship with your family and your friends. Simply click on the best answer for each question. There are no “right” or “wrong” answers – just answer according to how you think and feel.

## SCREEN 2

In your family, how do you make most of the decisions about the following topics?

	My parent(s) decide	My parents decide after discussing it with me	We decide together	I decide after discussing it with my parents	I decide all by myself
How late you can stay up on a school night	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Which friends you can spend time with	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Which after-school activities you take part in	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Whether you can go out to meet friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How you dress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What you do with your money	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What you watch on TV or whether you watch TV at all.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Whether you take part in religious training or education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

This next item is placed right at the bottom of the page away from the other items:

I would prefer not to answer these questions

### VALIDATION RULES for SCREEN 2:

- Require 4 items (1/2) to be answered before moving on.
- OR require that the final item (prefer not to answer) is ticked.
- If less than 4 items are answered AND 'prefer not to answer' item is not ticked, present the following pop-up text: "You haven't answered enough of the questions on this page. Please try to complete some more before moving on, or select 'prefer not to answer'."

### SCREEN 3

How much does a parent or another adult in your home know about...

	Doesn't know	Knows a little bit	Knows a lot	Knows everything
Who you spend time with?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How you spend your free time?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How you spend your money?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Where you go right after school?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Where you go throughout the day on the weekend?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Problems you are having at school?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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I would prefer not to answer these questions

#### VALIDATION RULES for SCREEN 3:

- Require 3 items (1/2) to be answered before moving on.
- OR require that the final item (prefer not to answer) is ticked.
- If less than 3 items are answered AND 'prefer not to answer' item is not ticked, present the following pop-up text: "You haven't answered enough of the questions on this page. Please try to complete some more before moving on, or select 'prefer not to answer'."

## SCREEN 4

Please think about the parent or guardian you spend the most time with when you answer these questions.

	Not true	Quite true	Very true
When I misbehave I am told off or shouted at.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When I misbehave Mum/Dad explains why what I have done is wrong.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When I misbehave I am smacked or slapped.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When I misbehave Mum/Dad is firm and calm with me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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### VALIDATION RULES for SCREEN 4:

- Require 2 items (1/2) to be answered before moving on.
- OR require that the final item (prefer not to answer) is ticked.
- If less than 2 items are answered AND 'prefer not to answer' item is not ticked, present the following pop-up text: "You haven't answered enough of the questions on this page. Please try to complete some more before moving on, or select 'prefer not to answer'."

SCREEN 5

Below are statements about your relationship with your friends. Please rate how true these statements are for you.

	Almost never or never true	←————→			Almost always or always true
I like to get my friends' point of view on things I'm concerned about.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My friends can tell when I'm upset about something.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When we discuss things, my friends care about my point of view.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Talking over my problems with friends makes me feel ashamed or foolish.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I wish I had different friends.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My friends understand me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My friends encourage me to talk about my difficulties.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My friends accept me as I am.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel the need to be in touch with my friends more often.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My friends don't understand what I'm going through these days.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel alone or apart when I am with my friends.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My friends listen to what I have to say.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel my friends are good friends.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My friends are fairly easy to talk to.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When I am angry about something, my friends try to be understanding.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My friends help me to understand myself better.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My friends care about how I am feeling.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel angry with my friends.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I can count on my friends when I need to get something off my chest.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I trust my friends.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

My friends respect my feelings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I get upset a lot more than my friends know about.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It seems as if my friends are irritated with me for no reason.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I can tell my friends about my problems and troubles.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If my friends know something is bothering me, they ask me about it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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I would prefer not to answer these questions

VALIDATION RULES for SCREEN 5:

- Require 8 items (1/3) to be answered before moving on.
- OR require that the final item (prefer not to answer) is ticked.
- If less than 8 items are answered AND 'prefer not to answer' item is not ticked, present the following pop-up text: "You haven't answered enough of the questions on this page. Please try to complete some more before moving on, or select 'prefer not to answer'."