



COPY ID NUMBERS FROM SUMMARY CONTACT SHEET	COUNTRY CODE		SAMPLE POINT NUMBER			ADDRESS NUMBER					INTERVIEWER NAME & NUMBER
ADDRESS:											
POSTAL CODE						TELEPHONE NUMBER					

EU Kids Online II April 2010

11-16 YEARS-OLD

HOW TO FILL IN THIS PART OF THE SURVEY

- Please **read each question carefully** and take your time to answer.
- Answer simply **by putting a tick** in the boxes next to the answers you want to give.
- PAPER ONLY: You may not need to answer all of the questions. Instructions in **"WORDS WRITTEN IN BOLD LIKE THIS"** are instructions to tell you which questions to answer.
- Please **make sure you read all the bits written in grey boxes**, these are really important in helping you to understand the questions.
- If you see **a question that you can't answer** or don't want to answer, just tick "don't know" or "prefer not to say" and go to the next question.
- Just **ask the interviewer** if you have any questions as you fill in the survey, however small.

This survey is all about you so it is really important that you are as honest as possible. Please don't worry about other people you know seeing your answers – that won't happen.



PRACTICE QUESTIONS

EVERYONE ANSWER THIS QUESTION

PLEASE READ: Here are some practice questions. The interviewer will help you understand what to do.

101. Have you ever played internet games (on your own or against the computer?)

PLEASE TICK ONE BOX ONLY

- | | | |
|---|-------------------|--------------------------|
| A | Yes | <input type="checkbox"/> |
| B | No | <input type="checkbox"/> |
| C | Don't know | <input type="checkbox"/> |
| D | Prefer not to say | <input type="checkbox"/> |

See question below

Answer question on next page

102. **If you answered yes**, how often have you played internet games in the PAST 12 MONTHS?

PLEASE TICK ONE BOX ONLY

- | | | |
|---|-------------------------------|--------------------------|
| A | Every day or almost every day | <input type="checkbox"/> |
| B | Once or twice a week | <input type="checkbox"/> |
| C | Once or twice a month | <input type="checkbox"/> |
| D | Less often | <input type="checkbox"/> |
| E | Don't know | <input type="checkbox"/> |



EVERYONE ANSWER THIS QUESTION

103. How true are these of you?

PLEASE TICK ONE BOX ON EVERY LINE

		Not true	A bit true	Very true
A	I find it easier to be myself on the internet than when I am with people face to face	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B	I talk about different things on the internet than I do when speaking to people face to face	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C	On the internet I talk about private things which I do not share with people face to face	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

End of practice questions



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SECTION A

About you

EVERYONE ANSWER THESE QUESTIONS

PLEASE READ: Here are some questions about what kind of a person you are

104.. How true is this of you?

PLEASE TICK ONE BOX ON EVERY LINE

		Not true	A bit true	Very true
A	I am confident that I can deal with unexpected problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C	I get a lot of headaches, stomach-aches or sickness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D	I get very angry and often lose my temper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E	I am usually on my own, I generally play alone or keep to myself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F	I usually do as I am told	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G	I worry a lot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H	It's easy for me to stick to my aims and achieve my goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A

B

C

D

E

F

G

H



105. How true is this of you?

PLEASE TICK ONE BOX ON EVERY LINE

Not true A bit true Very true

A	I have at least one good friend	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B	I fight a lot, I can make other people do what I want	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C	I am often unhappy, sad or tearful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D	Other people my age generally like me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F	I am nervous in new situations, I easily lose confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G	I am often accused of lying or cheating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H	Other children or young people pick on me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

106. How true is this of you?

PLEASE TICK ONE BOX ON EVERY LINE

Not true A bit Very true

A	I am easily distracted and find it difficult to concentrate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B	Other people my age often treat me as if I wasn't there	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C	If I am in trouble I can usually think of something to do	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D	I take things that are not mine from home, school or elsewhere	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E	I get on better with adults than with people my own age	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F	I can generally work out how to handle new situations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G	I have many fears, and I am easily scared	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A

B

C

D

E

F

G

H





107. How true is this of you?

PLEASE TICK ONE BOX ON EVERY LINE

		Not true	A bit true	Very true
A	I do dangerous things for fun	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B	I do exciting things, even if they are dangerous	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

108. In the PAST 12 MONTHS, have you done any of these things?

PLEASE TICK AS MANY BOXES AS NEEDED

A	Had so much alcohol that I got really drunk	<input type="checkbox"/>
B	<u>Missed school lessons without my parents knowing (playing truant, bunking off, skiving or wagging school)</u>	<input type="checkbox"/>
C	Had sexual intercourse	<input type="checkbox"/>
D	Been in trouble with my teachers for bad behaviour	<input type="checkbox"/>
E	Been in trouble with the police	<input type="checkbox"/>
F	None of these things	<input type="checkbox"/>
G	Prefer not to say	<input type="checkbox"/>

109. When I am bothered about something, I talk to ...

PLEASE TICK AS MANY BOXES AS NEEDED

A	My mother or father	<input type="checkbox"/>
B	My brother or sister	<input type="checkbox"/>
C	A friend	<input type="checkbox"/>
D	A teacher	<input type="checkbox"/>
E	Some one whose job it is to help children (e.g "police", "social worker", "adviser")	<input type="checkbox"/>
F	Another adult I trust	<input type="checkbox"/>
G	Someone else	<input type="checkbox"/>
H	No one	<input type="checkbox"/>
I	Don't know	<input type="checkbox"/>





110. In the PAST 12 MONTHS, have you seen or experienced something on the internet that has bothered you in some way? For example, made you feel uncomfortable, upset, or feel that you shouldn't have seen it.

PLEASE TICK ONE BOX ONLY

- | | | | |
|---|-------------------|--------------------------|--|
| A | Yes | <input type="checkbox"/> | } See question below
Go straight to section B |
| B | No | <input type="checkbox"/> | |
| C | Don't know | <input type="checkbox"/> | |
| D | Prefer not to say | <input type="checkbox"/> | |

111. If you answered yes, how often have you seen or experienced something on the internet that has bothered you in the PAST 12 MONTHS?

PLEASE TICK ONE BOX ONLY

- | | | |
|---|-------------------------------|--------------------------|
| A | Every day or almost every day | <input type="checkbox"/> |
| B | Once or twice a week | <input type="checkbox"/> |
| C | Once or twice a month | <input type="checkbox"/> |
| D | Less often | <input type="checkbox"/> |
| E | Don't know | <input type="checkbox"/> |



SECTION B

EVERYONE ANSWER THESE QUESTIONS

PLEASE READ: Sometimes children or teenagers say or do hurtful or nasty things to someone and this can often be quite a few times on different days over a period of time, for example. This can include:

- teasing someone in a way this person does not like
- hitting, kicking or pushing someone around
- leaving someone out of things

When people are hurtful or nasty to someone in this way, it can happen:

- face to face (in person)
- by mobile phones (texts, calls, video clips)
- on the internet (e-mail, instant messaging, social networking, chatrooms)

112. Has someone acted in this kind of hurtful or nasty way to you in the PAST 12 MONTHS?

PLEASE TICK ONE BOX ONLY

- | | | | |
|---|-------------------|--------------------------|------------------------------|
| A | Yes | <input type="checkbox"/> | Answer question on next page |
| B | No | <input type="checkbox"/> | |
| C | Don't know | <input type="checkbox"/> | Go straight to section C |
| D | Prefer not to say | <input type="checkbox"/> | |

A

B

C

D

E

F

G

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How did it happen...

ONLY ANSWER THE QUESTIONS ON THIS PAGE IF SOMEONE HAS DONE HURTFUL OR NASTY THINGS TO YOU IN THE LAST 12 MONTHS

EVERYONE ELSE GO TO STRAIGHT TO SECTION C

113. How often has someone acted in this kind of way towards you in the PAST 12 MONTHS?

PLEASE TICK ONE BOX ONLY

- A Every day or almost every day
- B Once or twice a week
- C Once or twice a month
- D Less often
- E Don't know

114. At any time during the last 12 months, has this happened ... ?

PLEASE TICK AS MANY BOXES AS NEEDED

- A In person face to face
- B By mobile phone calls, texts or image/video texts
- C Some other way
- D Don't know

115. At any time during the last 12 months has this happen on the internet?

PLEASE TICK ONE BOX ONLY

- A Yes **Answer questions on next page**
- B No **Go straight to section C**
- C Don't know **Go straight to section C**





What happened when on the internet...

ONLY ANSWER THE QUESTIONS ON THIS PAGE IF SOMEONE HAS DONE NASTY OR HURTFUL THINGS TO YOU ON THE INTERNET IN THE LAST 12 MONTHS

EVERYONE ELSE GO TO STRAIGHT TO SECTION C

116. And in which ways has this happened to you in the LAST 12 MONTHS?

PLEASE TICK AS MANY BOXES AS NEEDED

- A On a social networking site
 - B By instant messaging
 - C In a chatroom
 - D By email
 - E In a gaming website
 - F Some other way on the internet
 - G Don't know
-





117. And can I just check, which of these things have happened in the LAST 12 MONTHS?

PLEASE TICK AS MANY BOXES AS NEEDED

- A** Nasty or hurtful messages (eg words, pictures or videos) were sent to me on the internet
- B** Nasty or hurtful messages (eg words, pictures or videos) about me were passed around or posted on the internet where others could see
- C** I was left out or excluded from a group or activity on the internet
- D** I was threatened on the internet
- E** Other nasty or hurtful things on the internet
- F** Something else
- G** Don't know
- H** Prefer not to say

118. Thinking now about the LAST TIME this happened to you, how upset were you about what happened (if at all)?

PLEASE TICK ONE BOX ONLY

- A** Very upset
- B** Fairly upset
- C** A bit upset
- D** Not at all upset
- E** Don't know





119. How long did you feel like that for?

PLEASE TICK ONE BOX ONLY

- A I got over it straight away
 - B I felt like that for a few days
 - C I felt like that for a few weeks
 - D I felt like that for a couple of months or more
 - E Don't know
-

120. Did you do any of these things afterwards?

PLEASE TICK AS MANY BOXES AS NEEDED

- A Hope the problem would go away by itself
 - B Try to fix the problem
 - C Feel a bit guilty about what went wrong
 - D Try to get the other person to leave me alone
 - E Try to get back at the other person
 - F None of these things
 - G Don't know
-





121. Did you talk to anyone about what happened?

PLEASE TICK ONE BOX ONLY

- A Yes
- B No
- C Prefer not to say

122. If you answered yes, who did you talk to about it?

PLEASE TICK AS MANY BOXES AS NEEDED

- A My mother or father
- B My brother or sister
- C A friend
- D A teacher
- E Some one whose job it is to help children (e.g. "police", "social worker", "adviser")
- F Another adult I trust
- G Someone else
- H Don't know





123. Still thinking about that time, did you do any of these things?

PLEASE TICK AS MANY BOXES AS NEEDED

- A I stopped using the internet for a while
- B I deleted any messages from the other person
- C I changed my privacy/contact settings
- D I blocked the person from contacting me
- E I reported the problem (eg clicked on a 'report abuse' button, contact an internet advisor or "Internet service provider (ISP)")
- F None of these things
- G Don't know

124. And which, if any, of the things you did helped you?

PLEASE TICK AS MANY BOXES AS NEEDED

-
-
-
-
-
-
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Please go back through the above question and double check that you have entered a response for 124. in the right hand column



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SECTION C

EVERYONE ANSWER THESE QUESTIONS

125. Have you acted in a way that might have felt hurtful or nasty to someone else in the PAST 12 MONTHS?

PLEASE TICK ONE BOX ONLY

- | | | | |
|---|-------------------|--------------------------|-----------------------------------|
| A | Yes | <input type="checkbox"/> | } Go straight to section D |
| B | No | <input type="checkbox"/> | |
| C | Don't know | <input type="checkbox"/> | |
| D | Prefer not to say | <input type="checkbox"/> | |
- Answer questions on next page**



How did it happen...

ONLY ANSWER THE QUESTIONS IN THIS SECTION IF YOU MIGHT HAVE DONE SOMETHING HURTFUL OR NASTY TO SOMEONE IN THE LAST 12 MONTHS

EVERYONE ELSE GO TO STRAIGHT TO SECTION D

126. If you answered yes, how often have you acted in this kind of way in the PAST 12 MONTHS?

PLEASE TICK ONE BOX ONLY

- A Every day or almost every day
- B Once or twice a week
- C Once or twice a month
- D Less often
- E Don't know

127. In which of the following ways have you acted like this in the PAST 12 MONTHS? ...

PLEASE TICK AS MANY BOXES AS NEEDED

- A In person face to face
- B By mobile phone calls, texts or image/video texts
- C On the internet
- D Other way(s)
- E Don't know



SECTION D

EVERYONE ANSWER THESE QUESTIONS

PLEASE READ: In the past year, you will have seen lots of different images – pictures, photos, videos. Sometimes, these might be obviously sexual – for example, showing people naked or people having sex.

You might never have seen anything like this, or you may have seen something like this on a mobile phone, in a magazine, on the TV, on a DVD or on the internet.

128. Have you seen ANYTHING of this kind in the PAST 12 MONTHS?

PLEASE TICK ONE BOX ONLY

- | | | | |
|---|-------------------|--------------------------|-----------------------------------|
| A | Yes | <input type="checkbox"/> | } Go straight to section E |
| B | No | <input type="checkbox"/> | |
| C | Don't know | <input type="checkbox"/> | |
| D | Prefer not to say | <input type="checkbox"/> | |
- Answer questions on next page**



How did it happen...

ONLY ANSWER THE QUESTIONS ON THIS PAGE IF YOU HAVE SEEN ANY KIND OF SEXUAL IMAGE IN THE LAST 12 MONTHS

EVERYONE ELSE GO TO STRAIGHT TO SECTION E

129. How often have you seen these things in the PAST 12 MONTHS?

PLEASE TICK ONE BOX ONLY

- A Every day or almost every day
- B Once or twice a week
- C Once or twice a month
- D Less often
- E Don't know

130. In which, if any, of these places have you seen these kinds of things in the PAST 12 MONTHS?

PLEASE TICK AS MANY BOXES AS NEEDED

- A In a magazine or book
- B On television, film or video/DVD
- C By text (SMS), images (MMS) or otherwise on my mobile phone
- D By Bluetooth
- E Other
- F Don't know





131. Have you seen these kind of things on any websites in the PAST 12 MONTHS?

PLEASE TICK ONE BOX ONLY

- | | | | |
|---|-------------------|--------------------------|-----------------------------------|
| A | Yes | <input type="checkbox"/> | } Go straight to section E |
| B | No | <input type="checkbox"/> | |
| C | Don't know | <input type="checkbox"/> | |
| D | Prefer not to say | <input type="checkbox"/> | |
- Answer questions on next page**





What happened when on the internet...

ONLY ANSWER THE QUESTIONS ON THIS PAGE IF YOU HAVE SEEN ANY KIND OF SEXUAL IMAGES ON WEBSITES IN THE LAST 12 MONTHS_

EVERYONE ELSE GO TO STRAIGHT TO SECTION E

132. Which types of website have you seen things like this on in the LAST 12 MONTHS?

PLEASE TICK AS MANY BOXES AS NEEDED

- A On a social networking site
- B By images that pop-up accidentally
- C On a video-hosting site (e.g. Youtube)
- D On an adult/X-rated website
- E In a gaming website
- F On a peer to peer file-sharing website (e.g. limewire)
- G Some other type of website
- H Don't know





133. Which, if any, of these things have you seen on a website in the LAST 12 MONTHS?

PLEASE TICK AS MANY BOXES AS NEEDED

- A Images or video of someone naked
 - B Images or video of someone's "private parts"
 - C Images or video of people having sex
 - D Images or video of movies that show sex in a violent way
 - E Something else
 - F Don't know
 - G Prefer not to say
-





134. Seeing sexual images on the internet may be fine or may not be fine. In the LAST 12 MONTHS have you seen any things like this that have bothered you in any way? For example, made you feel uncomfortable, upset, or feel that you shouldn't have seen them.

PLEASE TICK ONE BOX ONLY

- | | | | |
|---|-------------------|--------------------------|-------------------------------------|
| A | Yes | <input type="checkbox"/> | <i>Answer question on next page</i> |
| B | No | <input type="checkbox"/> | |
| C | Don't know | <input type="checkbox"/> | <i>Go straight to section E</i> |
| D | Prefer not to say | <input type="checkbox"/> | |
-

A
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What happened when you were bothered by the things you saw...

ONLY ANSWER THE QUESTIONS IN THIS SECTION IF YOU HAVE SEEN ANY KIND OF SEXUAL IMAGES THAT BOTHERED YOU ON THE INTERNET IN THE LAST 12 MONTHS

EVERYONE ELSE GO TO STRAIGHT TO SECTION E

135. Thinking about the LAST TIME you were bothered by something like this, how upset did you feel about it (if at all)?

PLEASE TICK ONE BOX ONLY

- | | | |
|----------|------------------|--------------------------|
| A | Very upset | <input type="checkbox"/> |
| B | Fairly upset | <input type="checkbox"/> |
| C | A bit upset | <input type="checkbox"/> |
| D | Not at all upset | <input type="checkbox"/> |
| E | Don't know | <input type="checkbox"/> |
-





136. **Thinking about this time, how long did you feel like that for?**

PLEASE TICK ONE BOX ONLY

- | | | |
|---|--------------------------------|--------------------------|
| A | I got over it straight away | <input type="checkbox"/> |
| B | for a few days | <input type="checkbox"/> |
| C | for a few weeks | <input type="checkbox"/> |
| D | for a couple of months or more | <input type="checkbox"/> |
| E | Don't know | <input type="checkbox"/> |
-

137. **Did you do any of these things afterwards?**

PLEASE TICK AS MANY BOXES AS NEEDED

- | | | |
|---|--|--------------------------|
| A | Hope the problem would go away by itself | <input type="checkbox"/> |
| B | Try to fix the problem | <input type="checkbox"/> |
| C | Feel a bit guilty about what went wrong | <input type="checkbox"/> |
| F | None of these things | <input type="checkbox"/> |
| G | Don't know | <input type="checkbox"/> |
-

A

B

C

D

E

F

G

H





138. Again, thinking about this time, did you talk to anyone about what happened?

PLEASE TICK ONE BOX ONLY

- A Yes
- B No
- C Don't know

139. **If you answered yes**, who did you talk to about it?

PLEASE TICK AS MANY BOXES AS NEEDED

- A My mother or father
- B My brother or sister
- C A friend
- D A teacher
- E Some one whose job it is to help children (e.g. "police", "social worker", "adviser")
- F Another adult I trust
- G None of these
- H Don't know





140. Again, thinking about this time, did you do any of these things?

PLEASE TICK AS MANY BOXES AS NEEDED

141. And which, if any, of the things you did helped you?

PLEASE TICK AS MANY BOXES AS NEEDED

- | | | | |
|---|--|--------------------------|--------------------------|
| A | I stopped using the internet for a while | <input type="checkbox"/> | <input type="checkbox"/> |
| B | I deleted any messages from the person who sent it to me | <input type="checkbox"/> | <input type="checkbox"/> |
| C | I changed my filter/contact settings | <input type="checkbox"/> | <input type="checkbox"/> |
| D | I blocked the person who had sent it to me | <input type="checkbox"/> | <input type="checkbox"/> |
| E | I reported the problem (eg clicked on a 'report abuse' button, contact an internet advisor or "Internet service provider (ISP)") | <input type="checkbox"/> | <input type="checkbox"/> |
| F | None of these things | <input type="checkbox"/> | <input type="checkbox"/> |
| G | Don't know | <input type="checkbox"/> | <input type="checkbox"/> |

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Please go back through the above question and double check that you have entered a response for 141. in the right hand column



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SECTION E

EVERYONE ANSWER THESE QUESTIONS

PLEASE READ: On some websites, people discuss things that may not be good for you. Here are some questions about these kinds of things.

142. In the PAST 12 MONTHS, have you seen websites where people discuss ...

PLEASE TICK ONE BOX ON EVERY LINE

	Yes	No	Don't know	Prefer not to say
A ways of physically harming or hurting themselves	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B ways of committing suicide	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C ways to be very thin (such as being anorexic or bulimic)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D hate messages that attack certain groups or individuals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E talk about or share their experiences of taking drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A

B

C

D

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143. In the PAST 12 MONTHS, has any of the following happened to you on the internet?

PLEASE TICK ONE BOX ON EVERY LINE

		Yes	No	Don't know
A	Somebody used my personal information in a way I didn't like	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B	The computer got a virus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C	I lost money by being cheated on the internet (we mean real money, rather than money in a computer game)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D	Somebody used my password to access my information or to pretend to be me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

144. In the PAST 12 MONTHS, how often, have these things happened to you?

PLEASE TICK ONE BOX ON EVERY LINE

		Very often	Fairly often	Not very often	Never/ almost never
A	I have gone without eating or sleeping because of the internet.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B	I have felt bothered when I cannot be on the internet.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C	I have caught myself surfing when I'm not really interested.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D	I have spent less time than I should with either family, friends or doing schoolwork because of the time I spent on the internet.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E	I have tried unsuccessfully to spend less time on the internet.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A
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COPY ID NUMBERS FROM SUMMARY CONTACT SHEET	COUNTRY CODE		SAMPLE POINT NUMBER			ADDRESS NUMBER				INTERVIEWER NUMBER

SECTION F

EVERYONE ANSWER THESE QUESTIONS

PLEASE READ: Here are some questions about the way you use the internet. Children and young people use the internet in lots of different ways.

Please think about all the different ways you use the internet, and the different places you may use it in.

When we talk about 'face to face' we mean talking to someone in person at the same place rather than on the internet, phone or webcam.

145. Have you done any of the following things in the PAST 12 MONTHS; if yes how often have you done each of these things?

PLEASE TICK ONE BOX ON EVERY LINE

	Yes				No	Don't know	Prefer not to say
	Every day or almost every day	Once or twice a week	Once or twice a month	Less often	Never/ not in the past year		
A Looked for new friends on the internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B Sent personal information (e.g. my full name, address or phone number) to someone that I have never met face to face..	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C Added people to my <i>friends list</i> or <i>address book</i> that I have never met face to face.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>





146 Have you done any of the following things in the PAST 12 MONTHS; if yes how often have you done each of these things?

PLEASE TICK ONE BOX ON EVERY LINE

	Yes				No Never/ not in the past year	Don't know	Prefer not to say
	Every day or almost every day	Once or twice a week	Once or twice a month	Less often			
A Pretended to be a different kind of person on the internet from what I really am....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B Sent a photo or video of myself to someone that I have never met face to face.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A

B

C

D

E

F

G

H



EVERYONE ANSWER THESE QUESTIONS

PLEASE READ: Next are some questions about the contact you might have had with people you have met online.

Remember to think about **ANY WAY** of using the internet (e.g. on a computer or mobile phone) and **ANY PLACE** where you use the internet (e.g. at home or school or somewhere else).

When we talk about 'face to face' we mean talking to someone in person at the same place rather than through the internet, on a phone or a webcam.

147. Can I just check, have you ever had contact on the internet with someone you have not met face to face before?

(This could have been by email, chat rooms, social networking sites, instant messaging or gaming sites)

PLEASE TICK ONE BOX ONLY

- | | | | |
|---|------------|--------------------------|--|
| A | Yes | <input type="checkbox"/> | } Answer 148
Go straight to section G |
| B | No | <input type="checkbox"/> | |
| C | Don't know | <input type="checkbox"/> | |

148. **If you answered yes**
And have you ever gone on to meet anyone face to face that you first met on the internet in this way?

PLEASE TICK ONE BOX ONLY

- | | | | |
|---|-------------------|--------------------------|--|
| A | Yes | <input type="checkbox"/> | } Answer 149
Go straight to section G |
| B | No | <input type="checkbox"/> | |
| C | Don't know | <input type="checkbox"/> | |
| D | Prefer not to say | <input type="checkbox"/> | |





How did it happen...

ONLY ANSWER THE QUESTIONS IN THIS SECTION IF YOU HAVE MET SOMEONE FACE-TO-FACE THAT YOU FIRST MET ON THE INTERNET IN THE LAST 12 MONTHS

EVERYONE ELSE GO TO STRAIGHT TO SECTION G

149. And how many new people have you met in this way in the LAST 12 MONTHS, (if any)?

PLEASE TICK ONE BOX ONLY

- A 1-2
- B 3-4
- C 5-10
- D More than 10
- E Don't Know

150. In the LAST 12 MONTHS, which of these types of people have you met face to face that you first met on the internet?

PLEASE TICK AS MANY BOXES AS NEEDED

- A Someone who is a friend or family member of someone else I know in person face to face
- B Someone who had no connection with my life before I met them on the internet
- C Neither





How did it happen...

ONLY ANSWER THE QUESTIONS IN THIS SECTION IF YOU HAVE MET SOMEONE FACE-TO-FACE THAT YOU FIRST MET ON THE INTERNET IN THE LAST 12 MONTHS

EVERYONE ELSE GO TO STRAIGHT TO SECTION G

151. And thinking about any people you have gone on a meeting with in the LAST 12 MONTHS who you first met on the internet, in what ways did you first get in contact with them?

PLEASE TICK AS MANY BOXES AS NEEDED

- A On a social networking site
- B By instant messaging
- C In a chatroom
- D By email
- E In a gaming website
- F Some other way on the internet
- G Don't know

152. Face to face meetings with people that you first meet on the internet may be fine or not fine. In the LAST 12 MONTHS have you gone to a meeting with someone you met in this way that bothered you? For example, made you feel uncomfortable, upset, or feel that you shouldn't have been there?

PLEASE TICK ONE BOX ONLY

- A Yes **Answer question on next page**
 - B No
 - C Don't know
 - D Prefer not to say
- Go straight to section G**





What happened when you felt bothered...

ONLY ANSWER THE QUESTIONS IN THIS SECTION IF YOU HAVE GONE TO A MEETING WITH SOMEONE FROM THE INTERNET THAT MADE YOU FEEL BOTHERED IN SOME WAY IN THE LAST 12 MONTHS

EVERYONE ELSE GO TO STRAIGHT TO SECTION 6

153. Thinking about the LAST TIME you were bothered by meeting someone in this way, how old was the person you actually met?

PLEASE TICK ONE BOX ONLY

- A I met with someone about my age
- B I met with someone younger than me
- C I met with an older teenager (younger than 20 years old)
- D I met with an adult (aged 20 years or older)
- E Don't Know

154. And was that person male or female?

PLEASE TICK ONE BOX ONLY

- A Male – a boy or man
- B Female – a girl or women





155. And still thinking about that LAST TIME, did you talk to anyone about where you were going?

PLEASE TICK ONE BOX ONLY

- A Yes
- B No
- C Don't know

156. **If you answered yes**, who did you talk to about it?

PLEASE TICK ONE BOX ONLY

- A I told someone my age
- B I told an older teenager (aged under 18)
- C I told an adult I trust (aged 18 or over)
- D I told someone else
- E Don't know





157. **Did you take somebody with you when you went to that meeting?**

PLEASE TICK ONE BOX ONLY

- A Yes
- B No
- C Don't know

158. **If you answered yes, who did you take with you?**

PLEASE TICK ONE BOX ONLY

- A I went with someone about my age
- B I went with an older teenager (aged under 18)
- C I went with an adult I trust (aged 18 or over)
- D Don't know

159. **Still thinking about that time, which, if any of these things happened?**

PLEASE TICK AS MANY BOXES AS NEEDED

- A The other person said hurtful things to me
- B The other person hurt me physically
- C The other person did something sexual to me
- D Something else bad happened
- E Don't know
- F Prefer not to say





160. How upset did you feel about what happened (if at all)?

PLEASE TICK ONE BOX ONLY

- | | | |
|---|------------------|--------------------------|
| A | Very upset | <input type="checkbox"/> |
| B | Fairly upset | <input type="checkbox"/> |
| C | A bit upset | <input type="checkbox"/> |
| D | Not at all upset | <input type="checkbox"/> |
| E | Don't know | <input type="checkbox"/> |
-

161. How long did you feel like that for?

PLEASE TICK ONE BOX ONLY

- | | | |
|---|----------------------------------|--------------------------|
| A | I got over it straight away | <input type="checkbox"/> |
| B | I felt like that for a few days | <input type="checkbox"/> |
| C | I felt like that for a few weeks | <input type="checkbox"/> |
| D | Don't know | <input type="checkbox"/> |
-

162. Did you do any of these things afterwards?

PLEASE TICK ONE BOX ONLY

- | | | |
|---|---|--------------------------|
| A | Hope the problem would go away by itself | <input type="checkbox"/> |
| B | Try to fix the problem | <input type="checkbox"/> |
| C | Feel a bit guilty about what went wrong | <input type="checkbox"/> |
| D | Try to get the other person to leave me alone | <input type="checkbox"/> |
| E | Try to get back at the other person | <input type="checkbox"/> |
| F | None of these things | <input type="checkbox"/> |
| G | Don't know | <input type="checkbox"/> |
-





163. Again, still thinking about this time, did you talk to anyone about what happened?

PLEASE TICK ONE BOX ONLY

- A Yes
- B No
- C Don't know

164. If you answered yes, who did you talk to?

PLEASE TICK AS MANY BOXES AS NEEDED

- A My mother or father
- B My brother or sister
- C A friend
- D A teacher
- E Some one whose job it is to help children (e.g. "police", "social worker", "adviser")
- F Another adult I trust
- G Someone else
- H Don't know





165. Again, thinking about this time, did you do any of these things?

PLEASE TICK AS MANY BOXES AS NEEDED

- A I stopped using the internet for a while
- B I deleted any messages from the other person
- C I changed my privacy/contact settings
- D I blocked the person from contacting me
- E I reported the problem (eg clicked on a 'report abuse' button, contact an internet advisor or "Internet service provider (ISP)")
- F None of these things
- G Don't know

166. And which, if any, of the things you did helped you?

PLEASE TICK AS MANY BOXES AS NEEDED

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-
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Please go back through the above question and double check that you have entered a response for 166. in the right hand column

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+

A

B

C

D

E

F

G

H

+

SECTION G

EVERYONE ANSWER THESE QUESTIONS

PLEASE READ: People do all kinds of things on the internet. Sometimes, they may send sexual messages or images. By this we mean talk about having sex or images of people naked or having sex. Here are some questions about this. Think about **ANY WAY** in which you use the internet (not about mobile phone text messages).

167. In the **PAST 12 MONTHS**, have you seen or received sexual messages of any kind on the internet? This could be words, pictures or videos.

PLEASE TICK ONE BOX ONLY

- | | | | |
|---|--------------------------------|--------------------------|-----------------------------------|
| A | Yes | <input type="checkbox"/> | } Go straight to section H |
| B | No, never/not in the past year | <input type="checkbox"/> | |
| C | Don't know | <input type="checkbox"/> | |
| D | Prefer not to say | <input type="checkbox"/> | |
- See question on next page**



How did it happen...

ONLY ANSWER THE QUESTIONS IN THIS SECTION IF YOU HAVE SEEN OR RECEIVED A SEXUAL MESSAGE ON THE INTERNET IN THE LAST 12 MONTHS

EVERYONE ELSE GO TO STRAIGHT TO SECTION H

168. How often have you seen or received sexual messages of any kind on the internet in the PAST 12 MONTHS? This could be a words, pictures or videos.

PLEASE TICK ONE BOX ONLY

- A Every day or almost every day
- B Once or twice a week
- C Once or twice a month
- D Less often
- E Don't know

169. In the PAST 12 MONTHS, have any of these happened to you on the internet?

PLEASE TICK AS MANY BOXES AS NEEDED

- A I have been sent a sexual message on the internet
- B I have seen a sexual message posted where other people could see it on the internet
- C I have been asked to talk about sexual acts with someone on the internet
- D I have been asked on the internet for a photo or video showing my private parts
- E I have seen other people perform sexual acts
- F None of these things
- G Don't know
- H Prefer not to say





170. Thinking about the times in the LAST 12 MONTHS that you have seen or received a sexual message on the internet, how has this happened?

PLEASE TICK AS MANY BOXES AS NEEDED

- A On a social networking site
 - B By instant messaging
 - C In a chatroom
 - D By email
 - E In a gaming website
 - F By 'pop-up' (something that appears by accident)
 - G Some other way on the internet
 - H Don't know
-

A

B

C

D

E

F

G

H





171. And in the LAST 12 MONTHS has any sexual message that you have seen or received bothered you in any way? For example, made you feel uncomfortable, upset, or feel that you shouldn't have seen it?

PLEASE TICK ONE BOX ONLY

- | | | | |
|---|-------------------|--------------------------|-----------------------------------|
| A | Yes | <input type="checkbox"/> | } Go straight to section H |
| B | No | <input type="checkbox"/> | |
| C | Don't know | <input type="checkbox"/> | |
| D | Prefer not to say | <input type="checkbox"/> | |
- Answer question on next page**





What happened when you felt bothered...

ONLY ANSWER THE QUESTIONS IN THIS SECTION IF YOU HAVE FELT BOTHERED AFTER RECEIVING A SEXUAL MESSAGE ON THE INTERNET IN THE LAST 12 MONTHS

EVERYONE ELSE GO TO STRAIGHT TO SECTION H

172. Thinking about the LAST TIME you were bothered by something like this, how upset did you feel about it (if at all)?

PLEASE TICK ONE BOX ONLY

- A Very upset
- B Fairly upset
- C A bit upset
- D Not at all upset
- E Don't know

173. How long did you feel like that for?

PLEASE TICK ONE BOX ONLY

- A I got over it straight away
- B I thought about it for a few days
- C I thought about it for a few weeks
- D I thought about it for a couple of months or more
- E Don't know





174. Did you do any of these things afterwards?

PLEASE TICK ONE BOX ONLY

- A Hope the problem would go away by itself
 - B Try to fix the problem
 - C Feel a bit guilty about what went wrong
 - D Try to get the other person to leave me alone
 - E Try to get back at the other person
 - F None of these things
 - G Don't know
-





175. Did you talk to anyone about what happened?

PLEASE TICK ONE BOX ONLY

- A Yes
- B No
- C Don't know

176. If you answered yes, who did you talk to about it?

PLEASE TICK AS MANY BOXES AS NEEDED

- A My mother or father
- B My brother or sister
- C A friend
- D A teacher
- E Another adult I trust
- F Some one whose job it is to help children (e.g. "police", "social worker", "adviser")
- G Someone else
- H Don't know





177. Again, thinking about this time, did you do any of these things?

PLEASE TICK AS MANY BOXES AS NEEDED

- A I stopped using the internet for a while
- B I deleted any messages from the other person
- C I changed my privacy/contact settings
- D I blocked the person from contacting me
- E I reported the problem (eg clicked on a 'report abuse' button, contact an internet advisor or "Internet service provider (ISP)")
- F None of these things
- G Don't know

178. And which, if any, of the things you did helped you?

PLEASE TICK AS MANY BOXES AS NEEDED

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-
-

Please go back through the above question and double check that you have entered a response for 178. in the right hand column

A
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F
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H



SECTION H

EVERYONE ANSWER THESE QUESTIONS

People do all kinds of things on the internet. Sometimes, they may send sexual messages or images. By this we mean talk about having sex or images of people naked or having sex.

179. In the PAST 12 MONTHS, have you sent or posted a sexual message (example: words, pictures or video) of any kind on the internet? This could be about you or someone else.

PLEASE TICK ONE BOX ONLY

- | | | | |
|---|-------------------|--------------------------|---|
| A | Yes | <input type="checkbox"/> | } See question on next page
Please go straight to the
backpage |
| B | No | <input type="checkbox"/> | |
| C | Don't know | <input type="checkbox"/> | |
| D | Prefer not to say | <input type="checkbox"/> | |

A

B

C

D

E

F

G

H



How did it happen...

ONLY ANSWER THE QUESTIONS IN THIS SECTION IF YOU HAVE POSTED OR SENT A SEXUAL MESSAGE ON THE INTERNET IN THE LAST 12 MONTHS

EVERYONE ELSE GO TO STRAIGHT TO THE BACK PAGE

180. **If you answered yes, how often have you done this in the PAST 12 MONTHS?**

PLEASE TICK ONE BOX ONLY

- A Every day or almost every day
 - B Once or twice a week
 - C Once or twice a month
 - D Less often
 - E Don't know
-





181. In the PAST 12 MONTHS, have you done any of these things on the internet ...?

PLEASE TICK AS MANY BOXES AS NEEDED

- A** I have sent someone a sexual message (eg words, pictures or videos) on the internet
 - B** I have posted a sexual message (eg words, pictures or videos) where other people could see it on the internet
 - C** I have talked about sexual acts with someone on the internet
 - D** I have asked someone on the internet to send me a photo or video showing their private parts
 - E** I have sent someone a photo or video showing my private parts
 - F** None of these things
 - G** Don't know
 - H** Prefer not to say
-



WELL DONE, YOU HAVE FINISHED THIS PART OF THE SURVEY.
THERE ARE NO MORE QUESTIONS THAT YOU NEED TO FILL IN
YOURSELF.

PLEASE TELL THE INTERVIEWER THAT YOU HAVE FINISHED AND
THEY WILL HAVE JUST A FEW MORE QUESTIONS THAT THEY
WOULD LIKE TO ASK YOU.

