

TIGPS-2023 Questionnaire for Seventh-Grade Students (Full Survey)

(I) Personal and Family Background Information

s1. What is your sex (biological sex):

(01) Female (02) Male

s2. What year were you born:

R.O.C. _____ Year

s3. What is the marital status of your biological parents:

| | |
|---|--|
| <input type="checkbox"/> (01) Married and living together | <input type="checkbox"/> (02) Married but living apart due to work |
| <input type="checkbox"/> (03) Married but separated | <input type="checkbox"/> (04) Divorced and living apart |
| <input type="checkbox"/> (05) Divorced but living together | <input type="checkbox"/> (06) Not married but living together |
| <input type="checkbox"/> (07) Not married and living apart | <input type="checkbox"/> (08) Biological father deceased |
| <input type="checkbox"/> (09) Biological mother deceased | <input type="checkbox"/> (10) Both biological parents deceased |
| <input type="checkbox"/> (11) Other (please specify): _____ | <input type="checkbox"/> (-7) Not sure |

s4. Please answer the following questions about your primary caregiver (parent/guardian):

| | Primary Caregiver (1) | Primary Caregiver (2) |
|-----------------------------------|--|--|
| s4a. Relationship to you | <input type="checkbox"/> (01) Father <input type="checkbox"/> (02) Mother <input type="checkbox"/> (03) Stepfather or Adoptive Father <input type="checkbox"/> (04) Stepmother or Adoptive Mother <input type="checkbox"/> (05) Grandfather <input type="checkbox"/> (06) Grandmother <input type="checkbox"/> (07) Other (please specify): _____ | <input type="checkbox"/> (01) Father <input type="checkbox"/> (02) Mother <input type="checkbox"/> (03) Stepfather or Adoptive Father <input type="checkbox"/> (04) Stepmother or Adoptive Mother <input type="checkbox"/> (05) Grandfather <input type="checkbox"/> (06) Grandmother <input type="checkbox"/> (07) Other (please specify): _____ |
| s4b. Year of birth (ROC calendar) | R.O.C. _____ Year | R.O.C. _____ Year |
| s4c. Place of origin | <input type="checkbox"/> (01) Fukienese of Taiwan <input type="checkbox"/> (02) Hakka of Taiwan <input type="checkbox"/> (03) Mainland Chinese origin (descendants of migrants from mainland China) <input type="checkbox"/> (04) Aborigine (continue to A) <input type="checkbox"/> (05) Chinese nationality <input type="checkbox"/> (06) Hong Kong or Macao <input type="checkbox"/> (07) Other nationality (continue to B) <input type="checkbox"/> (08) Other (please specify): _____ <input type="checkbox"/> (-7) Not sure | <input type="checkbox"/> (01) Fukienese of Taiwan <input type="checkbox"/> (02) Hakka of Taiwan <input type="checkbox"/> (03) Mainland Chinese origin (descendants of migrants from mainland China) <input type="checkbox"/> (04) Aborigine (continue to A) <input type="checkbox"/> (05) Chinese nationality <input type="checkbox"/> (06) Hong Kong or Macao <input type="checkbox"/> (07) Other nationality (continue to B) <input type="checkbox"/> (08) Other (please specify): _____ <input type="checkbox"/> (-7) Not sure |
| s4d. Highest education | <input type="checkbox"/> (01) None / illiteracy <input type="checkbox"/> (02) Self-study / literacy | <input type="checkbox"/> (01) None / illiteracy <input type="checkbox"/> (02) Self-study / literacy |

| | | |
|--------------------|--|--|
| level | <input type="checkbox"/> (03) Elementary school <input type="checkbox"/> (04) Junior high school <input type="checkbox"/> (05) Senior high school / vocational senior high school <input type="checkbox"/> (06) Junior college (5-year or 2-year program) <input type="checkbox"/> (07) College or Institute of technology(2-year or 4-year) <input type="checkbox"/> (08) Master's degree <input type="checkbox"/> (09) Doctoral degree <input type="checkbox"/> (-7) Not sure | <input type="checkbox"/> (03) Elementary school <input type="checkbox"/> (04) Junior high school <input type="checkbox"/> (05) Senior high school / vocational senior high school <input type="checkbox"/> (06) Junior college (5-year or 2-year program) <input type="checkbox"/> (07) College or Institute of technology(2-year or 4-year) <input type="checkbox"/> (08) Master's degree <input type="checkbox"/> (09) Doctoral degree <input type="checkbox"/> (-7) Not sure |
| s4e. Health status | <input type="checkbox"/> (01) Very poor <input type="checkbox"/> (02) Poor <input type="checkbox"/> (03) Good <input type="checkbox"/> (04) Very good | <input type="checkbox"/> (01) Very poor <input type="checkbox"/> (02) Poor <input type="checkbox"/> (03) Good <input type="checkbox"/> (04) Very good |

A Which Indigenous group do you belong to:

(01)Amis (02)Atayal (03)Bunun (04)Paiwan (05)Rukai
(06)Pinuyumayan (07)Saysiyat (08)Cou (09)Thau (10)Yami
(11)Kavalan (12)Truku (13)Sediq (14)Sakiaya (15)Kanakanavu
(16)Hla'allua (-7)Not sure

B Which country are you from?

(01) Vietnam (02) Indonesia (03) Philippines (04) Thailand (05) Cambodia
(06) Myanmar (07) Malaysia (08) Japan (09) United States (10) Canada
(11) South Korea (12) Singapore (13) Other (please specify): _____

s5. Do you have any siblings? (01) Yes (02) No (skip to s8)

s6. How many siblings do you have?

s6a. older brothers (00)None (01)1 (02)2 (03)3 (04)4 (05)5 or more
 s6b. older sisters (00)None (01)1 (02)2 (03)3 (04)4 (05)5 or more
 s6c. younger brothers (00)None (01)1 (02)2 (03)3 (04)4 (05)5 or more
 s6d. younger sisters (00)None (01)1 (02)2 (03)3 (04)4 (05)5 or more

s7. To what extent do the following statements describe your relationship with your siblings?

| | Strongly disagree | Disagree | Agree | Strongly agree |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s7a. I get along well with my siblings, and we care for and share with each other. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s7b. I often have conflicts with my siblings. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s7c. My siblings and I often compare ourselves with one another. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s8. Who are you currently living with? **【Choose all that apply】**

(01) Biological father (02) Biological mother

| | |
|---|--|
| <input type="checkbox"/> (03) Adoptive father / Stepfather | <input type="checkbox"/> (04) Adoptive mother / Stepmother |
| <input type="checkbox"/> (05) Married brother | <input type="checkbox"/> (06) Married sister |
| <input type="checkbox"/> (07) Unmarried brother | <input type="checkbox"/> (08) Unmarried sister |
| <input type="checkbox"/> (09) Brother's spouse | <input type="checkbox"/> (10) Sister's spouse |
| <input type="checkbox"/> (11) Paternal grandfather | <input type="checkbox"/> (12) Paternal grandmother |
| <input type="checkbox"/> (13) Maternal grandfather | <input type="checkbox"/> (14) Maternal grandmother |
| <input type="checkbox"/> (15) Paternal uncle and aunt (father's elder brother and his spouse) | |
| <input type="checkbox"/> (16) Paternal uncle and aunt (father's younger brother and his spouse) | |
| <input type="checkbox"/> (17) Paternal aunt and her spouse | |
| <input type="checkbox"/> (18) Maternal uncle and aunt (mother's brother and his spouse) | |
| <input type="checkbox"/> (19) Maternal aunt and her spouse | <input type="checkbox"/> (20) Cousins (older) |
| <input type="checkbox"/> (21) Cousins (younger) | <input type="checkbox"/> (22) Caregiver or domestic helper |
| <input type="checkbox"/> (23) Other (please specify): _____ | |

s9. To what extent do the following statements describe your family life?

| | Strongly disagree | Disagree | Agree | Strongly agree |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s9a. Family members discuss matters together when making decisions. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s9b. My family enjoys spending leisure time together. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s9c. When there are family activities, everyone in my family participates. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s9d. Family members accept one another's friends. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s9e. When I experience setbacks, I can always find comfort from my family. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s9f. When I need help or advice, I can rely on my family. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s10. How would you describe your family's financial situation?

(01) Very poor (02) Poor (03) Well-off (04) Very well-off

s11. Do you have any religious belief at present?

| | | | |
|---|---|---|----------------|
| <input type="checkbox"/> (01) No religious belief | | | |
| <input type="checkbox"/> (02) Folk religion | <input type="checkbox"/> (03) Buddhism | <input type="checkbox"/> (04) Taoism | |
| <input type="checkbox"/> (05) Yiguan Dao | <input type="checkbox"/> (06) Catholicism | <input type="checkbox"/> (07) Christianity: _____ | (Denomination) |
| <input type="checkbox"/> (08) Islam | <input type="checkbox"/> (09) Other (please specify): _____ | | |

s12. During the past year, how often have your parents interacted with you?

| | Never | Occasionally | Sometimes | Often |
|---------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s12a. Criticized or blamed you. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

| | | | | |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s12b. Understood you and affirmed your ideas. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s12c. Showed care and concern for you. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s12d. Shared their experiences to help you solve problems. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s12e. Were indifferent to you or did not pay attention to you. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s12f. Frequently had conflicts with you, leading to a tense relationship. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s12g. Knew where you were and what you did in your daily life. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s12h. Were inconsistent in discipline (sometimes punished you for the same behavior and sometimes did not). | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s12i. Used physical punishment when disciplining you. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s12j. Communicated their thoughts and expectations about issues related to you. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

(II) School Life and Academics

s13. How satisfied are you with your current school life?

(01) Very dissatisfied (02) Dissatisfied (03) Satisfied (04) Very satisfied

s14. To what extent do you agree with the following statements about your school?

| | Strongly disagree | Disagree | Agree | Strongly agree |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s14a. I like my school. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s14b. I do not feel that I am part of my school. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s14c. I am proud of my school. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s15. To what extent do the following statements describe the situation at your school?

| | Strongly disagree | Disagree | Agree | Strongly agree |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s15a. Truancy or skipping classes is a serious problem among students at my school. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s15b. Smoking or drinking alcohol is a serious problem among students at my school. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s16. To what extent do the following statements describe the current situation in your class?

| | Strongly disagree | Disagree | Agree | Strongly agree |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s16a. My classmates are always willing to help when I need it. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s16b. I do not like interacting with my classmates. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s16c. I am always willing to help when my classmates need it. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s16d. Students in our class care for one another like a family. (01) (02) (03) (04)

s16e. Compared with other classes, students in our class trust one another the most. (01) (02) (03) (04)

s17. What is your seat number in class? Seat number: _____

s18. The following questions ask about your interactions with classmates online and in real life. Please write down the seat numbers of the classmates you like most and least, you may select up to five classmates for each question.

s18a. Which classmates do you **like** to interact with online (e.g., playing games together, talking on the phone, chatting)?

(1) _____ 、 (2) _____ 、 (3) _____ 、 (4) _____ 、 (5) _____

s18b. Which classmates do you **dislike** interacting with online?

(1) _____ 、 (2) _____ 、 (3) _____ 、 (4) _____ 、 (5) _____

s18c. Which classmates do you **like** to interact with in real life (not online) (e.g., working in the same group, eating together, discussing schoolwork, sharing personal thoughts)?

(1) _____ 、 (2) _____ 、 (3) _____ 、 (4) _____ 、 (5) _____

s18d. Which classmates do you **dislike** interacting with in real life (not online)?

(1) _____ 、 (2) _____ 、 (3) _____ 、 (4) _____ 、 (5) _____

s19. Are you able to keep up with your schoolwork?

(01) I am far behind and find it very difficult to keep up.

(02) I am somewhat behind, but may be able to catch up.

(03) I am only slightly behind and can catch up quickly.

(04) I can keep up with most of my schoolwork.

(05) I am ahead of the expected pace.

s20. Approximately how was your average academic performance last semester?

(1) Ranked within the top 5 in the class (2) Ranked 6th to 10th in the class

(3) Ranked 11th to 20th in the class (4) Ranked 21st to 30th in the class

(5) Ranked below 30th in the class. (-7) I don't know

s21. What expectations do your parents have for your academic performance?

1. At least among the top students in the class 2. At least above average

3. At about the class average level 4. No specific expectations

5. Other (please specify): _____ (-7) I don't know

s22. Since entering Grade 7, have you attended in any private tutoring outside of school (including one-on-one tutoring or cram schools)?

(01) Yes (continue to s22a) (02) No (skip to s23)

s22a. Which subjects do you receive tutoring in? **【Choose all that apply】**

(01) Mathematics (02) English (03) Biology (04) Chinese (Mandarin)
(05) Social studies (history, geography, civics)
(06) Information technology / Computer studies (07) Other (please specify): _____

s23. To what extent do your parents (or guardians) have the following expectations for your future development? Please rate the level of expectation on a scale from 1 to 10.

s23a. They expect my academic achievement to make them proud.

| | | | | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

No at all

Very much

s23b. They expect me to have a high-paying job in the future.

| | | | | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

No at all

Very much

s23c. They expect me to contribute to the family's financial support in the future.

| | | | | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

No at all

Very much

s23d. They expect me to bring honor to the family in the future.

| | | | | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

No at all

Very much

s24. To what extent do the following statements describe your parents' (or guardians') situation?

| | Strongly disagree | Disagree | Agree | Strongly agree |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s24a. My parents know who my main teachers at school are. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s24b. My parents are aware of my learning situation at school (e.g., whether I can keep up with the coursework). | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s24c. My parents know what I am currently learning at school (e.g., how far the class has progressed). | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s24d. My parents attend parent-teacher meetings or school events. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s24e. My parents contribute time or money to support class activities or facilities. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s24f. My parents volunteer at my school. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s24g. My parents spend time helping me with my schoolwork. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s24h. My parents check my school communication notebook | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s24i. My parents purchase supplementary learning materials for me (e.g., practice books or test papers). (01) (02) (03) (04)

s24j. My parents search online for learning materials or educational platforms for me. (01) (02) (03) (04)

s25. Does your class have any of the following online group chats (e.g., LINE, Facebook groups)?

s25a. A group chat for classmates only (not including the homeroom teacher).

(01) Yes (02) No

s25b. A group chat for classmates that includes the homeroom teacher.

(01) Yes (02) No

s26. Since entering Grade 7, has your homeroom teacher ever proactively contacted your parents or guardians?

(01) Yes (continue to s26a) (02) No (skip to s27) (-7) I don't know (skip to s27)

s26a. How often does your homeroom teacher contact your parents or guardians?

(01) Never (02) Occasionally (03) Sometimes (04) Often (-7) I don't know

s26b. Which parent or guardian does your homeroom teacher usually contact?

(01) My mother (02) My father (03) My grandmother (04) My grandfather

(05) Other parent or guardian (please specify): _____ (-7) I don't know

s27. Since entering Grade 7, have your parents or guardians ever proactively contacted your homeroom teacher?

(01) Yes (continue to s27a) (02) No (skip to s28) (-7) I don't know (skip to s28)

s27a. How often do your parents (or guardians) contact your homeroom teacher?

(01) Never (02) Occasionally (03) Sometimes (04) Often

s27b. Who usually contacts your homeroom teacher?

(01) My mother (02) My father (03) My grandmother (04) My grandfather

(05) Other parent or guardian (please specify): _____

(III) Online Life Experiences

s28. Regarding your internet use, how often have the following situations occurred between you and your father?

| | Never | Occasionally | Sometimes | Often | Not Applicable |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s28a. He sets rules about when I am allowed to use the internet and when I am not. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s28b. He prohibits me from accessing certain websites. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s28c. He limits the amount of time I spend online. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s28d. He talks with me about interesting or funny things that happen online. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s28e. He goes online with me to play games or watch shows. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |

| | | | | | |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s28f. He accompanies me when I go online to search for information or do homework. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s28g. He encourages me to use the internet. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s28h. He discusses my internet use and online experiences with me. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s28i. He believes that being skilled at using the internet will be beneficial for my future. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s28j. He worries that my internet use may cause health problems (e.g., eye or physical condition). | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s28k. He worries about the online risks I may face (e.g., harmful content, pornography, cyberbullying, scams). | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s28l. He worries that my academic performance may decline because of my internet use. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s28m. He asks me what I do online. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s28n. He knows who my friends are in the online world. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s28o. He checks my browsing history. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s28p. He nags me when I am using the internet. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s28q. He scolds or criticizes me because of my internet use. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s28r. He has conflicts with me because of my online shopping. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |

s29. Regarding your internet use, how often have the following situations occurred between you and your mother?

| | Never | Occasionally | Sometimes | Often | Not Applicable |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s29a. She sets rules about when I am allowed to use the internet and when I am not. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s29b. She prohibits me from accessing certain websites. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s29c. She limits the amount of time I spend online. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s29d. She talks with me about interesting or funny things that happen online. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |

| | | | | | |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s29e. She goes online with me to play games or watch shows. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s29f. She accompanies me when I go online to search for information or do homework. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s29g. She encourages me to use the internet. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s29h. She discusses with me how I use the internet and my experiences online. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s29i. She believes that being skilled at using the internet will be beneficial for my future. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s29j. She worries that my internet use may cause health problems (e.g., eye or physical fitness). | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s29k. She worries about the online risks I may face (e.g., harmful content, pornography, cyberbullying, scams). | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s29l. She worries that my academic performance may decline because of my internet use. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s29m. She asks me what I do online. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s29n. She knows who my friends are in the online world. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s29o. She checks my browsing history. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s29p. She nags me when I am using the internet. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s29q. She scolds or criticizes me because of my internet use. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |
| s29r. She has conflicts with me because of my online shopping. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (-4) |

s30. Who is primarily responsible for supervising your internet use?

(01) Father (2) Mother (3) Both parents (4) Stepfather or adoptive father
(5) Stepmother or adoptive mother (6) Grandfather (7) Grandmother
(8) I manage my internet use myself (9) Other person (please specify): _____

s31. Do you have any social media accounts?

(01) Yes (02) No any social media accounts (skip to s34)

s31a. Which social media platforms do you have accounts on? 【Choose all that apply】

(01) LINE (02) Facebook (03) Instagram (04) WeChat (05) Dcard
(06) Tiktok. (07) Rednote (08) PTT (09) Discord
(10) Other (please specify): _____

s32. Communication with Parents (parents combined as “parents/guardians”) via Instant Messaging:

s32a. How frequently do you usually communicate with them via instant messaging?

(01) Almost never (02) A few times a year (03) Once or twice a month
(04) Once or twice a week (05) Three or four times a month
(06) Three or four times a week (07) Almost every day
(-4) No such person, not applicable **(skip to s33)**

s32b. How satisfied are you with your instant messaging communication with them?

(01) Very dissatisfied (02) Dissatisfied (03) Satisfied (04) Very satisfied

s32c. To what extent do the following statements describe your instant messaging communication with them?

| | Strongly disagree | Disagree | Agree | Strongly agree |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s32c-1. It increases contact and the exchange of information between us. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s32c-2. It increases expressions of care and the sharing of personal thoughts and feelings between us. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s32c-3. It reduces face-to-face interactions between us. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s32c-4. It leads to conflicts or misunderstandings between us. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s33. Communication with Siblings via Instant Messaging:

s33a. How frequently do you usually communicate with them via instant messaging?

(01) Almost never (02) A few times a year (03) Once or twice a month
(04) Once or twice a week (05) Three or four times a month
(06) Three or four times a week (07) Almost every day
(-4) No such person, not applicable **(skip to s33)**

s33b. How satisfied are you with your instant messaging communication with them?

(01) Very dissatisfied (02) Dissatisfied (03) Satisfied (04) Very satisfied

s33c. To what extent do the following statements describe your instant messaging communication with them?

| | Strongly disagree | Disagree | Agree | Strongly agree |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s32c-1. It increases contact and the exchange of information between us. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s32c-2. It increases expressions of care and the sharing of personal thoughts and feelings between us. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s32c-3. It reduces face-to-face interactions between us. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s32c-4. It leads to conflicts or misunderstandings between us. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s34. Do you use the internet on weekdays (school days)?

(01) Yes (02) No **(Skip to s36)**

s35. How much time do you spend on the following online activities on weekdays (school days)?

s35a. Completing schoolwork (e.g., searching for information needed to complete assignments)

(01) None (02) Less than 0.5 hour (03) 0.5–1 hour (04) 1–1.5 hours
(05) 1.5–2 hours (06) 2–2.5 hours (07) 2.5–3 hours (08) 3–3.5 hours
(09) 3.5–4 hours (10) 4–4.5 hours (11) 4.5–5 hours (12) More than 5 hours

s35b. Extracurricular learning (e.g., online courses, both paid and free)

(01) None (02) Less than 0.5 hour (03) 0.5–1 hour (04) 1–1.5 hours
(05) 1.5–2 hours (06) 2–2.5 hours (07) 2.5–3 hours (08) 3–3.5 hours
(09) 3.5–4 hours (10) 4–4.5 hours (11) 4.5–5 hours (12) More than 5 hours

s35c. Playing online games

(01) None (02) Less than 0.5 hour (03) 0.5–1 hour (04) 1–1.5 hours
(05) 1.5–2 hours (06) 2–2.5 hours (07) 2.5–3 hours (08) 3–3.5 hours
(09) 3.5–4 hours (10) 4–4.5 hours (11) 4.5–5 hours (12) More than 5 hours

s35d. Watching videos, listening to music, viewing memes, cartoons, or comics

(01) None (02) Less than 0.5 hour (03) 0.5–1 hour (04) 1–1.5 hours
(05) 1.5–2 hours (06) 2–2.5 hours (07) 2.5–3 hours (08) 3–3.5 hours
(09) 3.5–4 hours (10) 4–4.5 hours (11) 4.5–5 hours (12) More than 5 hours

s35e. Chatting with others (messaging)

(01) None (02) Less than 0.5 hour (03) 0.5–1 hour (04) 1–1.5 hours
(05) 1.5–2 hours (06) 2–2.5 hours (07) 2.5–3 hours (08) 3–3.5 hours
(09) 3.5–4 hours (10) 4–4.5 hours (11) 4.5–5 hours (12) More than 5 hours

s35f. Browsing information online based on personal interests

(01) None (02) Less than 0.5 hour (03) 0.5–1 hour (04) 1–1.5 hours
(05) 1.5–2 hours (06) 2–2.5 hours (07) 2.5–3 hours (08) 3–3.5 hours
(09) 3.5–4 hours (10) 4–4.5 hours (11) 4.5–5 hours (12) More than 5 hours

s36. Which of the following health-related topics have you searched for online? Choose all that apply

(01) Skin health (02) Body shape (03) Nutrition
(04) Sexuality education (05) Depression (06) Anxiety
(07) Stress management (08) Other (please specify): _____ (09) None

s37. When you encounter difficulties or feel worried in real life, how often do you go online to do the following?

| | Never | Occasionally | Sometimes | Often |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s37a. Chat with others to receive support or comfort. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s37b. Discuss problems with others in order to find ways to solve the difficulties. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s37c. Search for relevant information to try to solve the difficulties. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s37d. Browse information unrelated to the difficulties to distract myself. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s37e. Play games to reduce feelings of distress or stress. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s37f. Shop online to improve my mood or reduce feelings of stress. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s38. To what extent do the following statements describe your personal experiences and feelings?

| | Strongly disagree | Disagree | Agree | Strongly agree |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s38a. I like the image of myself that I present online. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s38b. I am able to present the best side of myself online. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s38c. I feel that I can become my ideal self in the online world | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s38d. I like the image of myself in real life. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s38e. I am able to present the best side of myself in real life. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s38f. I feel that I can become my ideal self in real life. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s38g. I often take on different roles in the online world. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s38h. I present different images of myself on different social media platforms (e.g., Facebook, Instagram). | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s38i. I enjoy having multiple identities or images of myself online. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s38j. The way I present myself online is different from who I am in real life. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s38k. I feel that I am a different person in the online world than in real life. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s38l. My words and behaviors online are very different from those in real life. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s38m. Compared with real life, I feel more relaxed and comfortable online. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s38n. I prefer my life online to my life in the real world. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s38o. If possible, I would like to stay online all the time. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s39. To what extent do you agree with the following statements?

| | Strongly disagree | Disagree | Agree | Strongly agree |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s39a. Not keeping up with my friends' online chats or jokes makes me feel anxious. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s39b. Missing online gatherings or interactions with my friends makes me feel distressed. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s39c. I frequently use the internet to keep track of what my friends are doing and where they are. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s39d. Missing online premieres, live streams, or events makes me feel distressed. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s40. Regarding your opinions expressed online, to what extent do you agree with the following statements?

| | Strongly disagree | Disagree | Agree | Strongly agree |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s40a. I often compare my life achievements with those of others online. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s40b. I often pay attention to other people's performance online and compare it with my own. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s40c. I often compare how popular I am with others online. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s40d. When I want to better understand certain things, I try to look at other people's opinions online. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s40e. I am always curious about how people online think or act when they encounter the same problems as I do. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s40f. I like to look at different perspectives and experiences shared by others online. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s41. Regarding your internet use, how well do the following statements describe your situation?

| | Strongly disagree | Disagree | Agree | Strongly agree |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s41a. When I want to go online but cannot, I feel restless and on edge. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s41b. If I do not go online for a period of time, I feel uncomfortable. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s41c. If I do not use the internet for more than a day, I feel very distressed. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s41d. I have noticed that the amount of time I spend online for leisure has been increasing. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s41e. On average, I spend much more time online for leisure each week than I used to. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s41f. The actual amount of time I spend online often exceeds what I originally planned. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s41g. My internet use has caused some negative effects on my studies or work. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s41h. My internet use has clearly harmed my physical or mental health. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s41i. My interactions with family members and friends have decreased due to my internet use. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s41j. I often stay up late using the internet for leisure, which results in poor energy or physical condition during the day. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

(IV) Peer Relationships and Bullying Behaviors

s42. To what extent do you agree with the following statements about your closest friend(s)?

| | Strongly disagree | Disagree | Agree | Strongly agree |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s42a. When I need help or advice, I can rely on them. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s42b. They sometimes cause trouble. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s42c. They care about me. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s42d. I often receive help from them. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s42e. When I feel frustrated, I can always receive comfort from them. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s43. Do you think **your friends in real life** can be trusted, or do you think you need to be careful when dealing with them?

(01) They can always be trusted (02) They can usually be trusted
 (03) I usually need to be careful (04) I always need to be careful

s44. Do you think **your friends in real life** would try to take advantage of you whenever they have the opportunity, or do they usually treat you fairly?

- (01) They almost always try to take advantage of me
- (02) They usually try to take advantage of me
- (03) They usually treat me fairly (04) They almost always treat me fairly

s45. Do you think **your friends in real life** are usually willing to help others, or do they mostly look out for themselves?

- (01) They are always willing to help others
- (02) They are willing to help others most of the time
- (03) They mostly look out for themselves
- (04) They always look out for themselves

s46. **Apart from your friends**, do you think the people you encounter in your daily life can be trusted, or do you think you need to be careful when dealing with them?

(01) They can always be trusted (02) They can usually be trusted
 (03) I usually need to be careful (04) I always need to be careful

s47. **Apart from your friends**, do you think the people you encounter in your daily life would try to take advantage of you whenever they have the opportunity, or do they usually treat you fairly?

- (01) They almost always try to take advantage of me
- (02) They usually try to take advantage of me
- (03) They usually treat me fairly (04) They almost always treat me fairly

s48. **Apart from your friends**, do you think the people you encounter in your daily life are usually willing to help others, or do they mostly look out for themselves?

- (01) They are always willing to help others
- (02) They are willing to help others most of the time

(03) They mostly look out for themselves
 (04) They always look out for themselves

s49. Since entering Grade 7, conflicts sometimes occur among classmates. When a classmate is being bullied, how often do you do the following?

| | Never | Occasionally | Sometimes | Often | Never happened |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s49a. When a classmate is being mocked or teased maliciously, I help the person who is being mocked. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (05) |
| s49b. When a classmate is being threatened or harassed, I protect the person who is being threatened. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (05) |
| s49c. When a classmate is deliberately excluded and cannot join a group or participate in activities, I try to prevent the exclusion. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (05) |
| s49d. When others mock a particular classmate, I do not join the conversation or forward such content to others. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (05) |
| s49e. When I know that a classmate is being threatened or harassed, I do not respond or take any action. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (05) |
| s49f. When someone is deliberately excluded and cannot join a group or participate in activities, I do not get involved. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (05) |
| s49g. When I receive embarrassing or inappropriate photos of a classmate from others, I do not forward them to anyone else. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (05) |
| s49h. When a classmate is being mocked or teased maliciously, I join in mocking that person. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (05) |
| s49i. When a classmate is being threatened or harassed, I also take part in these behaviors. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (05) |
| s49j. When a classmate is excluded and cannot join a group or participate in activities, I also avoid being in the same group with that classmate. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (05) |

s50. To what extent do you agree with the following statements?

| | Strongly disagree | Disagree | Agree | Strongly agree |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s50a. I believe that bullying is immoral. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s50b. I think that many classmates in our class tolerate bullying. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s51. Since entering Grade 7, have you ever experienced any of the following situations **in real life (not online)**, such as being verbally abused, maliciously mocked, having your belongings damaged or taken, being physically attacked, or being excluded from discussions or activities by others?

(01) Yes (02) No **(skip to s54)**

s51a. Since entering Grade 7, how often have you experienced the following situations **in real life (not online)?**

| | Never | Occasionally | Sometimes | Often |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s51a-1. I was insulted or threatened with swear words. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s51a-2. I was the target of rumors or negative talk. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s51a-3. I was excluded from discussions or activities, or others were told not to talk to me or associate with me. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s51a-4. I was mocked or teased about my appearance or behavior. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s51a-5. I was mocked or teased for liking someone. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s51a-6. My belongings were deliberately damaged or hidden on purpose. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s51a-7. I was extorted or forced to hand over my belongings. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s51a-8. I was physically attacked. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s51a-9. Other forms of bullying (please specify): _____ | | | | |

s51b. Who did this to you? **【Choose all that apply】**

- (01) Classmates from the same class
- (02) Students from the same school but a different class
- (03) Friends from a different school (04) Neighbors
- (05) Others (please specify): _____

s51c. How did you actually respond to these situations? **【Choose all that apply】**

- (01) Explain or clarify the situation (02) Asked the person involved to stop
- (03) Ignored the people or the situation
- (04) Engaged in other enjoyable or meaningful activities
- (05) Was so distressed that I could not carry out my daily responsibilities
- (06) Fought back or confronted the person involved
- (07) Told other classmates or friends (08) Told family members
- (09) Told a teacher (10) Avoided places where I might encounter the person

(11) Changed my email account, phone number, or blocked the person online so they could not contact me
 (12) Others (please specify): _____

s52. Since entering Grade 7, have you ever engaged in any of the following behaviors **in real life (not online)** toward others, such as verbally abusing or maliciously mocking someone, damaging or taking their belongings, physically attacking someone, or deliberately excluding someone from discussions or activities?

(01) Yes (02) No **(skip to s57)**

s52a. Since entering Grade 7, how often have you done the following to others **in real life (not online)?**

| | Never | Occasionally | Sometimes | Often |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s52a-1. Used swear words to insult or threaten someone. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s52a-2. Spread rumors or said bad things about someone. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s52a-3. Prevented someone from joining activities or discussions, or told others not to talk to or associate with that person. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s52a-4. Mocked or teased someone about their appearance or behavior. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s52a-5. Mocked or teased someone for liking someone else. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s52a-6. Deliberately damaged someone's belongings or hid them on purpose. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s52a-7. Extorted someone or forced them to hand over their belongings. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s52a-8. Physically attacked someone. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s52a-9. Other bullying behaviors (please specify): _____ | | | | |

s52b. Who did you do this to? **[Choose all that apply]**

(01) Classmates from the same class
 (02) Students from the same school but a different class
 (03) Friends from a different school (04) Neighbors
 (05) Others (please specify): _____

s53. Since entering Grade 7, have you ever experienced any of the following **online** behaviors from others, such as being verbally abused, maliciously mocked, excluded from discussions, having embarrassing videos spread, or having false information posted about you?

(01) Yes (02) No **(skip to s60)**

s53a. Since entering Grade 7, how often have you experienced the following situations **online?**

| | Never | Occasionally | Sometimes | Often |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s53a-1. I was insulted or threatened with swear words. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s53a-2. I was the target of rumors or negative talk. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

| | | | | |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s53a-3. I was excluded from discussions. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s53a-4. I was mocked or teased about my appearance or behavior. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s53a-5. I was mocked or teased for liking someone. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s53a-6. Embarrassing photos or videos of me were shared online. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s53a-7. My social media account or email was impersonated, and false information was spread online. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s53a-8. Other bullying behaviors (please specify): _____

s53b. Who did you do this to? 【Choose all that apply】

- (01) Classmates from the same class
- (02) Students from the same school but a different class
- (03) Friends from a different school
- (04) Neighbors
- (05) Others (please specify): _____

s53c. How did you actually respond to these situations? 【Choose all that apply】

- (01) Explain or clarify the situation
- (02) Asked the person involved to stop
- (03) Ignored the people or the situation
- (04) Engaged in other enjoyable or meaningful activities
- (05) Was so distressed that I could not carry out my daily responsibilities
- (06) Fought back or confronted the person involved
- (07) Told other classmates or friends
- (08) Told family members
- (09) Told a teacher
- (10) Avoided places where I might encounter the person
- (11) Changed my email account, phone number, or blocked the person online so they could not contact me
- (12) Others (please specify): _____

s54. Since entering Grade 7, have you ever engaged in any of the following online behaviors toward others, such as verbally abusing or maliciously mocking someone, excluding others from discussions, spreading embarrassing videos, or posting false information?

- (01) Yes
- (02) No (skip to s63)

s54a. Since entering Grade 7, how often have you done the following to others online?

| | Never | Occasionally | Sometimes | Often |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s54a-1. Used swear words to insult or threaten someone. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s54a-2. Spread rumors or said bad things about someone. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s54a-3. Prevented someone from joining discussions. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s54a-4. Mocked or teased someone about their appearance or behavior. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s54a-5. Mocked or teased someone for liking someone. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

| | | | | |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s54a-6. Shared embarrassing photos or videos of someone online. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s54a-7. Used someone's social media account or email to spread false information to others. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s54a-8. Other bullying behaviors (please specify): _____

s54b. Who did you do this to? Choose all that apply

- (01) Classmates from the same class
- (02) Students from the same school but a different class
- (03) Friends from a different school
- (04) Neighbors
- (05) Others (please specify): _____

s55. In the past six months, have you done any of the following? Choose all that apply

- (01) Cheated on an exam
- (02) Run away from home
- (03) Skipped classes or played truant
- (04) Taken someone's belongings without permission
- (05) Deliberately damaged someone else's property
- (06) Intentionally injured someone
- (07) Smoked cigarettes (tobacco)
- (08) Used e-cigarettes
- (09) Drank alcohol
- (10) Chewed betel nut
- (11) Watched or listened to pirated music or videos
- (12) Downloaded illegal software
- (13) Stayed out late at night without returning home
- (14) None

(V) Digital Environment and Literacy

s56. How frequently do you use the following devices?

s56a. Computer (desktop or laptop)

- (00) Do not have this device
- (01) Almost never
- (02) A few times a year
- (03) Once or twice a month
- (04) Three or four times a month
- (05) Once or twice a week
- (06) Three or four times a week
- (07) Almost every day

s56b. Smartphone

- (00) Do not have this device
- (01) Almost never
- (02) A few times a year
- (03) Once or twice a month
- (04) Three or four times a month
- (05) Once or twice a week
- (06) Three or four times a week
- (07) Almost every day

s56c. Wearable devices (e.g., Apple Watch, Xiaomi Smart Band)

- (00) Do not have this device
- (01) Almost never
- (02) A few times a year
- (03) Once or twice a month
- (04) Three or four times a month
- (05) Once or twice a week
- (06) Three or four times a week
- (07) Almost every day

s56d. Tablet or e-reader (e.g., iPad, Kindle)

- (00) Do not have this device
- (01) Almost never
- (02) A few times a year
- (03) Once or twice a month
- (04) Three or four times a month
- (05) Once or twice a week
- (06) Three or four times a week
- (07) Almost every day

s56e. Gaming consoles (XBOX, PS5, Switch.....)

- (00) Do not have this device
- (01) Almost never
- (02) A few times a year

(03) Once or twice a month (04) Three or four times a month
(05) Once or twice a week (06) Three or four times a week (07) Almost every day

s57. How often do you experience the following situations?

| | Never | Occasionally | Sometimes | Often |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s57a. For me, the cost of purchasing digital devices (e.g., smartphones, computers, tablets) is too high. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s57b. There is no internet access where I live, or the signal is too weak. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s57c. For me, the cost of using the internet is too expensive. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s57d. For me, it is difficult to find a quiet or uninterrupted space to use the internet. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s58. To what extent do you agree with the following reasons for using a mobile phone or the internet?

| | Strongly disagree | Disagree | Agree | Strongly agree |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s58a. It is a good way to pass the time. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s58b. It helps me find and connect with people who share my interests or feel compatible with me. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s58c. It improves my performance in studying or completing tasks. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s58d. It helps me stay informed about the latest sports, concerts, or other entertainment events. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s58e. It allows me to share my ideas or things I have created. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s59. To what extent do the following statements describe your online learning behaviors?

| | Strongly disagree | Disagree | Agree | Strongly agree |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s59a. When studying or doing homework, I turn off unrelated websites, instant messaging, mobile apps, or notification sounds. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s59b. I am able to require myself to finish my homework or studying before visiting websites I like or using my phone. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s59c. I use dashboards on learning platforms to monitor my effort or performance (e.g., current | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

scores, missing assignments, video viewing records, or my performance compared with the class).

s59d. I use tools outside of learning platforms (e.g., Google Calendar for scheduling, Forest for focus, Notion for notes, Anki for flashcards) to plan my learning progress. (01) (02) (03) (04)

s60. Do the following statements apply to your use of computers and the internet?

| | No | Yes |
|--|-------------------------------|-------------------------------|
| s60a. I use location-based services to find information I need (e.g., maps, navigation, transportation, or restaurants). | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) |
| s60b. I regularly change my passwords (e.g., for my phone, tablet, computer, Instagram, TikTok, Dcard). | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) |
| s60c. My classmates, close friends, or family members know my passwords. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) |

s61. How much do you agree with the following statements about your use of media websites and digital platforms?

| | Strongly disagree | Disagree | Neutral | Agree | Strongly agree | I don't know |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s61a. I am able to identify appropriate keywords to find the most relevant answers. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (05) | <input type="checkbox"/> (-7) |
| s61b. I can quickly find websites that I have visited before. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (05) | <input type="checkbox"/> (-7) |
| s61c. I am clear about my purpose when visiting a specific website or using a specific app. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (05) | <input type="checkbox"/> (-7) |
| s61d. I understand which types of information can be shared publicly online and which should not. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (05) | <input type="checkbox"/> (-7) |
| s61e. I am able to judge whether the comments I post online are appropriate. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (05) | <input type="checkbox"/> (-7) |
| s61f. When posting content or sharing photos or videos, I adjust privacy settings depending on who I want to share them with. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) | <input type="checkbox"/> (05) | <input type="checkbox"/> (-7) |

s61g. I am able to find others' online videos or media content and remix or adapt them for my own creations.

(01) (02) (03) (04) (05) (07)

s61h. I am able to use online materials in accordance with copyright regulations (e.g., Creative Commons licenses).

(01) (02) (03) (04) (05) (07)

s61i. I am able to upload videos, webpages, or images that I have created to cloud storage platforms.

(01) (02) (03) (04) (05) (07)

(VI) Life Experiences and Attitudes

s62. Overall, how satisfied are you with your life?

(01) Very dissatisfied (02) Dissatisfied (03) Satisfied (04) Very satisfied

s63. Overall, how happy have you been recently?

(01) Very unhappy (02) Unhappy (03) Happy (04) Very happy

s64. Overall, how would you rate your current health status?

(01) Pretty poor (02) Poor (03) Good (04) Pretty good

s65. How much do you agree with the following statements about yourself?

| | Strongly disagree | Disagree | Agree | Strongly agree |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s65a. I feel that I am a person of value. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s65b. I view myself in a positive and optimistic way. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s65c. I am satisfied with myself. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s66. How much do you agree with the following statements?

| | Strongly disagree | Disagree | Agree | Strongly agree |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s66a. I am willing to trust other people. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s66b. I believe that I am accepted by others. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s66c. I feel comfortable letting others rely on me. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s66d. I often worry that others do not genuinely like me. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s66e. When others do not support me, I feel bad about myself. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s66f. I care a great deal about my interactions | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

with others.

s66g. I am reluctant to share my experiences and feelings with others. (01) (02) (03) (04)

s66h. I prefer others to keep their distance from me. (01) (02) (03) (04)

s66i. I try to avoid becoming too close or friendly with others. (01) (02) (03) (04)

s67. On school days, what time do you usually:

s67a. Arrive at school? _____ hour _____ minute (Hour: 5, 6, ..., 10; Minute: 0, 5, 10, ..., 55)
s67b. Leave school? _____ hour _____ minute (Hour: 4,5,...10; Minute: 0, 5, 10, ..., 55)

s68. Over the past month, what have your usual sleep habits been? (Hour: 1, 2, ..., 24; Minute: 0, 5, 10, ..., 55)

s68a. Over the past month, on school days , what time do you usually go to bed?
_____ : _____ (a.m. / p.m.)

s68b. Over the past month, on school days, what time do you usually wake up?
_____ : _____ (a.m. / p.m.)

s68c. Over the past month, on non-school days, what time do you usually go to bed?
_____ : _____ (a.m. / p.m.)

s68d. Over the past month, on non-school days, what time do you usually wake up?
_____ : _____ (a.m. / p.m.)

s68e. Over the past month, how would you rate your overall sleep quality?
 (01) Very poor (02) Poor (03) Good (04) Very good

s69. Over the past month, how many of the following beverages did you consume per week on average?

s69a. Beverage carton, Tetra pak, or bottled sweetened beverages
 (01) None (02) 1-7 units (03) 8-14 units (04) 15-21 units
 (05) 22-28 units (06) 29-35 units (07) 36 units or more

s69b. Hand-shaken drinks
 (01) None (02) 1-2 units (03) 3-4 units (04) 5-6 units
 (05) 7-8 units (06) 9-10 units (07) 11 units or more

s70. On a typical school day, what activities do you usually do during the following time periods? Please select the activity number(s) from the activity list and fill them in.

You may select more than one activity for each time period. Please indicate the main activity(one**) and any secondary activity(ies) (**you may list more than one**).**

If the activity you did is not listed, please select “Other” and specify the activity.

| | Time | Main Activity | Secondary Activity |
|-----|----------------------|---------------|--------------------|
| | Evening | | |
| (1) | 18:00-19:00 | s70a | s70b. |
| (2) | 19:00-20:00 | s70c | s70d. |
| (3) | 20:00-21:00 | s70e. | s70f |
| (4) | 21:00-22:00 | s70g | s70h |
| (5) | 22:00-23:00 | s70i | s70j |
| (6) | 23:00-24:00 | s70k | s70l |
| | Early Morning | | |
| (7) | 24:00-1:00 | s70m | s70n |

| | | | |
|-----|-----------|------|------|
| (8) | 1:00-2:00 | s70o | s70p |
|-----|-----------|------|------|

School / Academic-Related Activities

- (1) After-school program, cram school, after-school care, or private tutoring
- (2) Doing homework, studying, or preparing for exams
- (3) Searching online for academic-related information, taking online courses, or reading extracurricular books
- (4) After-school program, cram school, after-school care, or private tutoring

Family, Household, and Personal Activities

- (5) Eating meals or having food
- (6) Commuting
- (7) Doing household chores
- (8) Sleeping
- (9) Personal hygiene activities (e.g., showering, brushing teeth, drying hair)
- (10) Caring for or looking after family members
- (11) Talking or chatting with family members, friends, or neighbors
- (12) Taking care of pets or playing with pets
- (13) Helping with a family business, farming, or factory work

Leisure and Entertainment Activities

- (14) Watching TV; playing console games (e.g., PS5, Switch); playing online games or mobile games
- (15) Using the internet to listen to music, watch videos, animations, comics, or browse information of personal interest
- (16) Chatting with others online (sending messages)
- (17) Managing or creating content for personal social media platforms (e.g., video editing, graphic design or photo editing, posting content, uploading photos, videos, or audio files)
- (18) Live streaming online
- (19) Online shopping
- (20) Going out for leisure activities or exercise
- (21) Others (please specify): _____

s71. To what extent do the following statements describe you?

| | Strongly disagree | Disagree | Agree | Strongly agree |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s71a. Even when I disagree with others, I am able to understand what they expect. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s71b. I am able to discuss differing opinions with others calmly. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s71c. Referring to others' opinions when making decisions makes me feel more confident. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s71d. I usually know what I want. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s71e. Achieving the goals I set for myself is not difficult for me. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s71f. I am confident in the decisions I make. | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s72. Please check the option that best describes how often you have experienced the following during the past 1–2 weeks.

| | Not at all or less than 1 day | 1–2 days during the past week | 3–4 days during the past week | 5–7 days during the past week | Nearly every day during the past two weeks |
|--|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--|
| s72a. I have had a poor appetite. | <input type="checkbox"/> (00) | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s72b. I have had difficulty sleeping. | <input type="checkbox"/> (00) | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s72c. I have felt sad. | <input type="checkbox"/> (00) | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s72d. I have felt that I am a bad person. | <input type="checkbox"/> (00) | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s72e. I have lost interest in things I usually enjoy. | <input type="checkbox"/> (00) | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s72f. I have felt that my movements are too slow. | <input type="checkbox"/> (00) | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s72g. I have felt tired all the time. | <input type="checkbox"/> (00) | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s72h. I have had difficulty concentrating on important things. | <input type="checkbox"/> (00) | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s72i. I have felt restless and on edge. | <input type="checkbox"/> (00) | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s72j. I have felt lonely. | <input type="checkbox"/> (00) | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s72k. I have felt nervous or anxious. | <input type="checkbox"/> (00) | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s72l. I have been unable to stop or control my worrying. | <input type="checkbox"/> (00) | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s73. Over the past two weeks, how often have you felt the following?

| | Never | Sometimes | Less than half of the time | More than half of the time | Most of the time |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| s73a. I felt cheerful and in good spirits. | <input type="checkbox"/> (00) | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s73b. I felt calm and relaxed. | <input type="checkbox"/> (00) | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s73c. I felt active and full of energy. | <input type="checkbox"/> (00) | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s73d. I woke up feeling refreshed and well rested. | <input type="checkbox"/> (00) | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |
| s73e. My daily life was filled with things that interested me. | <input type="checkbox"/> (00) | <input type="checkbox"/> (01) | <input type="checkbox"/> (02) | <input type="checkbox"/> (03) | <input type="checkbox"/> (04) |

s74. How would you describe your recent height growth?

(01) I have not started growing taller yet (02) I have grown a little taller
 (03) I have grown a lot taller
 (04) I feel that my height growth is mostly complete and I am unlikely to grow taller

s75. How would you describe the growth of your body hair (including underarm and pubic hair)?

(01) I have not started growing body hair yet
 (02) I have developed a small amount of body hair
 (03) My body hair is growing noticeably (04) My body hair is fully developed

s76. Have you noticed any changes in your skin (especially the development of pimples or acne)?

(01) No noticeable changes in skin.
 (02) Minor skin changes (a small number of pimples or acne).
 (03) Noticeable skin changes (pimples or acne appear from time to time).
 (04) Skin changes have become stable (pimples or acne are a regular condition).

s77. Over the past few months, have you noticed any weight gain?

(01) No noticeable weight gain (02) Slight weight gain
 (03) Noticeable weight gain (04) Significant weight gain

s78. Have you noticed any voice change? (For boys only. Girls, please select 01.)

(01) I am a girl.
 (02) No noticeable change yet (03) Slight voice change
 (04) Noticeable voice change (05) Voice has fully deepened

s79. Have you noticed any facial hair growth (e.g., beard)? (For boys only. Girls, please select 01.)

(01) I am a girl.
 (02) No noticeable growth yet (03) Slight growth
 (04) Rapid growth (05) Fully developed

s80. Have you noticed any breast development? (For girls only. Boys, please select 01.)

(01) I am a boy
 (02) Not started yet (03) Slight development
 (04) Noticeable development (05) Fully developed

s81. Have you started menstruating? (For girls only. Boys, please select 01.)

(01) I am a boy
 (02) Yes **(continue to s81a)** (03) Not yet

s81a. At what age did your first menstruation occur?

(01) Under 9 years old (02) 10 years old (03) 11 years old
 (04) 12 years old (05) 13 years old or older

s82. What is your current height? _____ cm

s83. What is your current weight? _____ kg

s84. Please select the option that best describes your current body type.

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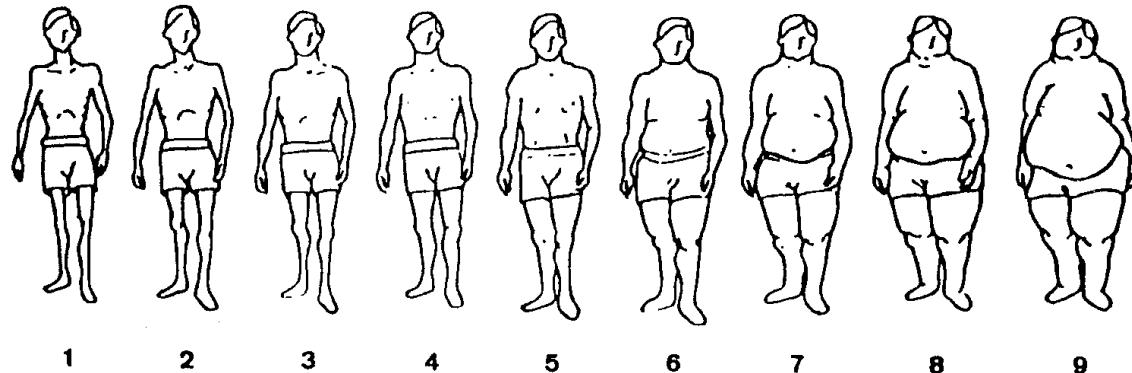
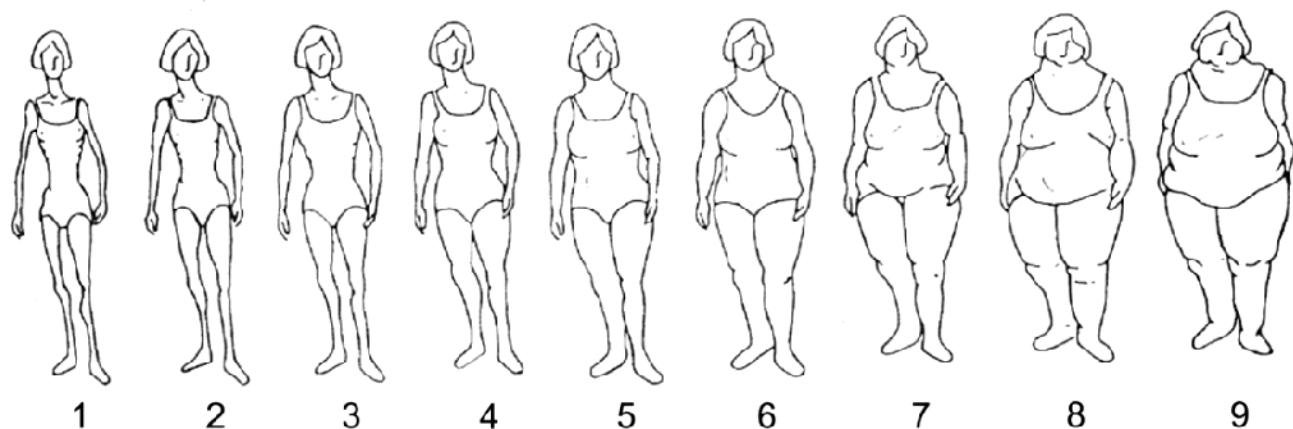


Figure 1. Stimulus figures for 'ideal' and 'aspired to' ratings (from Stunkard, Sorensen, & Schulzinger, 1983).



~Thank you very much for completing this questionnaire~

Thank you for your support and assistance!

Starting in August 2023, **NTD 200** digital gift vouchers will be sent out in batches to your email address or mobile phone. Would you be willing to participate in the additional questionnaire? Yes / No

(The additional questionnaire will take approximately 15–20 minutes to complete. Around mid-June, the QR code for the additional questionnaire will be sent to your email inbox. After you complete and submit it, you will receive one additional chance to enter the prize draw. The prizes include NTD 100 to NTD 500 digital gift vouchers, with a total of 1,800 winning opportunities. Please refer to the instructions in the additional questionnaire for details.)