

IDB JK-Grade 6 Survey
English to Simplified Chinese

VALUING VOICES IDENTITY MATTERS- JK-Grade 6 Survey	倾听你的心声 - 身份认同的重要性：幼儿园至 6 年级学生调查问卷
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November 2019	2019 年 11 月
Dear Parents and Guardians:	尊敬的各位家长与监护人：
<p>The Ottawa-Carleton District School Board (OCDSB) has a strong commitment to improving equity of access and opportunity for all students. We recognize the need for data to better understand our students and how they are being served. The <i>Valuing Voices – Identity Matters!</i> Student Survey will gather information about the OCDSB student population (Kindergarten through Grade 12) in order to:</p>	<p>渥太华-卡尔顿教育局（OCDSB）热忱地致力于帮助全体学生更公平地获取发展机遇。我们认为有必要收集相关数据，来帮助我们更好地了解学生群体，了解他们所获得的服务。我们将通过本次“倾听你的心声 – 身份认同的重要性”学生调查，向 OCDSB 学区学生（幼儿园至 12 年级）收集信息，以便：</p>
<ul style="list-style-type: none"> • better understand the unique and diverse characteristics of the student population; 	<ul style="list-style-type: none"> • 更好地了解学生群体的独特性和多样性；
<ul style="list-style-type: none"> • identify and respond to barriers to student learning and well-being; and 	<ul style="list-style-type: none"> • 找出影响孩子们学习和身心健康的障碍，并作出响应；并且
<ul style="list-style-type: none"> • enhance our capacity to serve an increasingly diverse student population and client communities. 	<ul style="list-style-type: none"> • 增强我们为日益多样化的学生群体和客户社群提供服务的能力。
<p>As a parent or guardian of a child in Kindergarten to Grade 6 in the OCDSB, you are invited to complete this survey on behalf of your child. The survey is both voluntary and confidential. You may choose to skip any or all questions should you choose to do so. Each survey contains a unique identifier that will allow research staff at the District office to link survey responses to other data in order to answer questions about:</p>	<p>由于您是 OCDSB 下辖学校幼儿园至 6 年级孩子的父母或监护人，请您代表孩子完成本次调查。调查完全自愿，严格保密。任何或全部问题均可跳过不答。每份调查问卷都包含一个特殊的标识符号，教育局的研究人员可通过该符号将问卷内容与其他数据相关联，从而鉴识以下问题：</p>
<ul style="list-style-type: none"> • Achievement Gaps – whether certain groups of students achieve at the same rate; 	<ul style="list-style-type: none"> • 成就差距 – 特定群体的学生取得成就的速率是否协同；
<ul style="list-style-type: none"> • Suspension and Expulsion Rates – whether certain groups of students are suspended or expelled at a higher rate; 	<ul style="list-style-type: none"> • 停学率与开除率 – 特定群体学生的停学率或开除率是否更高；
<ul style="list-style-type: none"> • Streaming – whether certain groups of students are over or under-represented in particular programs or streams (e.g., academic versus applied courses; English with Core French versus Elementary 	<ul style="list-style-type: none"> • 课程编班 – 特定群体的学生在特定项目或班级（例如学术与应用类课程、英法并重课程与初级法语沉浸课程）的人数是否过多或过少；

French Immersion);	
<ul style="list-style-type: none"> • Sense of Belonging - whether certain groups of students feel more engaged/disengaged at school; and 	<ul style="list-style-type: none"> • 归属感 - 特定群体的学生在校内是否有参与感；以及
<ul style="list-style-type: none"> • Feeling Safe at School – whether certain groups of students feel more or less safe at school. 	<ul style="list-style-type: none"> • 在校安全感 – 特定群体的学生在校时是否更有安全感，或更没有安全感。
Results from the survey will be reported at an aggregate level and in such a way as to maintain confidentiality. If you have any questions or require accessibility support, please contact valuingvoices@ocdsb.ca .	调查结果将以汇总形式进行报告，以确保私密性。若您有任何疑问，或希望获得无障碍支持，请联络： valuingvoices@ocdsb.ca 。
Your participation is greatly appreciated!	衷心感谢您的参与！
<i>This information is collected under the authority of the Education Act, R.S.O. 1990, Sections 169.1, 170 (1) and 171 (1), the Antiracism Act 2017, and in accordance with Section 29 (2) of the Municipal Freedom of Information and Protection of Privacy Act. Questions or concerns about the collection, use or disclosure of personal information should be directed to the Freedom of Information Officer, Ottawa-Carleton District School Board, 613-596-8211 ext. 8310.</i>	本次信息收集以《安大略省教育法案》（修订版，1990）第169.1、170（1）、171（1）条及《反种族主义法案》（2017）为执行依据，且符合《市政信息自由和隐私保护法案》第29（2）条的规定。若您对个人信息的收集、使用或披露有任何疑问或顾虑，请直接与渥太华-卡尔顿教育局的信息自由官员联系，电话：613-596-8211 转8310。
Q1. What is the first language(s) your child learned to speak? Select all that apply:	Q1. 您孩子最先学会说的语言是？请选择所有适用项：
<i>(The online version of this question contains 76 language options to choose from)</i>	<i>(在线问卷中，本题包含76个语言选项)</i>
<input type="checkbox"/> Albanian	<input type="checkbox"/> 阿尔巴尼亚语
<input type="checkbox"/> American Sign Language	<input type="checkbox"/> 美国手语
<input type="checkbox"/> Arabic	<input type="checkbox"/> 阿拉伯语
<input type="checkbox"/> Bengali	<input type="checkbox"/> 孟加拉语
<input type="checkbox"/> Chinese	<input type="checkbox"/> 中文
<input type="checkbox"/> Croatian	<input type="checkbox"/> 克罗地亚语
<input type="checkbox"/> Dari	<input type="checkbox"/> 达利语
<input type="checkbox"/> Dutch	<input type="checkbox"/> 荷兰语
<input type="checkbox"/> English	<input type="checkbox"/> 英语
<input type="checkbox"/> Farsi	<input type="checkbox"/> 波斯语
<input type="checkbox"/> French	<input type="checkbox"/> 法语
<input type="checkbox"/> German	<input type="checkbox"/> 德语
<input type="checkbox"/> Greek	<input type="checkbox"/> 希腊语

<input type="checkbox"/> Gujarati	<input type="checkbox"/> 古吉拉特语
<input type="checkbox"/> Hebrew	<input type="checkbox"/> 希伯来语
<input type="checkbox"/> Hindi	<input type="checkbox"/> 印地语
<input type="checkbox"/> Hungarian	<input type="checkbox"/> 匈牙利语
<input type="checkbox"/> Indigenous language(s)	<input type="checkbox"/> 原住民语言
(please specify): _____	(请具体说明): _____
<input type="checkbox"/> Italian	<input type="checkbox"/> 意大利语
<input type="checkbox"/> Korean	<input type="checkbox"/> 韩语
<input type="checkbox"/> Malayalam	<input type="checkbox"/> 马拉雅拉姆语
<input type="checkbox"/> Polish	<input type="checkbox"/> 波兰语
<input type="checkbox"/> Portuguese	<input type="checkbox"/> 葡萄牙语
<input type="checkbox"/> Punjabi	<input type="checkbox"/> 旁遮普语
<input type="checkbox"/> Russian	<input type="checkbox"/> 俄语
<input type="checkbox"/> Serbian	<input type="checkbox"/> 塞尔维亚语
<input type="checkbox"/> Somali	<input type="checkbox"/> 索马里语
<input type="checkbox"/> Spanish	<input type="checkbox"/> 西班牙语
<input type="checkbox"/> Tagalog	<input type="checkbox"/> 他加禄语
<input type="checkbox"/> Tamil	<input type="checkbox"/> 泰米尔语
<input type="checkbox"/> Ukrainian	<input type="checkbox"/> 乌克兰语
<input type="checkbox"/> Urdu	<input type="checkbox"/> 乌尔都语
<input type="checkbox"/> Vietnamese	<input type="checkbox"/> 越南语
<input type="checkbox"/> Not sure	<input type="checkbox"/> 不确定
<input type="checkbox"/> A language(s) not listed (please specify): _____	<input type="checkbox"/> 以上未列出的语言 (请具体说明): _____

Q2. Does your child identify as First Nations, Métis, and/or Inuit? Select all that apply:	Q2. 您孩子的自我身份认同，是否为第一民族、梅蒂人和/或因纽特人？请选择所有适用项：
<input type="checkbox"/> No	<input type="checkbox"/> 否
<input type="checkbox"/> Yes, First Nations	<input type="checkbox"/> 是，第一民族
<input type="checkbox"/> Yes, Métis	<input type="checkbox"/> 是，梅蒂人
<input type="checkbox"/> Yes, Inuit	<input type="checkbox"/> 是，因纽特人
If yes, you may provide additional information about the nation, territory, region, or community to which your child belongs:	如回答“是”，您可以提供有关孩子所属民族、领地、地区或社区的其他信息：
<hr/>	<hr/>
<hr/>	<hr/>
Q3. Does your child consider themselves a Canadian?	Q3. 您的孩子是否认为自己是加拿大人？
<input type="checkbox"/> Yes	<input type="checkbox"/> 是
<input type="checkbox"/> No	<input type="checkbox"/> 否
<input type="checkbox"/> Not sure	<input type="checkbox"/> 不确定
<i>Ethnic groups have a common identity, heritage, ancestry, or historical past, often with identifiable cultural, linguistic and/or religious characteristics.</i>	<i>族裔群体具有共同的身份、传承、血统或历史，往往拥有可识别的文化、语言及/或宗教特征。</i>
Q4. What is your child's ethnic or cultural origin(s)? Select all that apply	Q4. 您孩子的族裔或文化背景是？请选择所有适用项
<i>(The online version of this question contains 237 ethnic origins to choose from)</i>	<i>(在线问卷中，本题包含 237 个族裔选项)</i>
<input type="checkbox"/> Anishnaabe	<input type="checkbox"/> Anishnaabe 族
<input type="checkbox"/> Canadian	<input type="checkbox"/> 加拿大裔
<input type="checkbox"/> Chinese	<input type="checkbox"/> 华裔
<input type="checkbox"/> Colombian	<input type="checkbox"/> 哥伦比亚裔
<input type="checkbox"/> Cree	<input type="checkbox"/> 克里族
<input type="checkbox"/> Dutch	<input type="checkbox"/> 荷兰裔
<input type="checkbox"/> East Indian	<input type="checkbox"/> 东印度裔
<input type="checkbox"/> English	<input type="checkbox"/> 英裔
<input type="checkbox"/> First Nation	<input type="checkbox"/> 第一民族
<input type="checkbox"/> French	<input type="checkbox"/> 法裔

<input type="checkbox"/> Filipino	<input type="checkbox"/> 菲律宾裔
<input type="checkbox"/> German	<input type="checkbox"/> 德裔
<input type="checkbox"/> Guyanese	<input type="checkbox"/> 圭亚那裔
<input type="checkbox"/> Haudenosaunee	<input type="checkbox"/> Haudenosaunee 族
<input type="checkbox"/> Inuit	<input type="checkbox"/> 因纽特族
<input type="checkbox"/> Iranian	<input type="checkbox"/> 伊朗裔
<input type="checkbox"/> Irish	<input type="checkbox"/> 爱尔兰裔
<input type="checkbox"/> Italian	<input type="checkbox"/> 意大利裔
<input type="checkbox"/> Jamaican	<input type="checkbox"/> 牙买加裔
<input type="checkbox"/> Jewish	<input type="checkbox"/> 犹太裔
<input type="checkbox"/> Korean	<input type="checkbox"/> 韩裔
<input type="checkbox"/> Lebanese	<input type="checkbox"/> 黎巴嫩裔
<input type="checkbox"/> Métis	<input type="checkbox"/> 梅蒂族
<input type="checkbox"/> Mi'kmaq	<input type="checkbox"/> Mi'kmaq 族
<input type="checkbox"/> Ojibwé	<input type="checkbox"/> 奥吉布瓦族
<input type="checkbox"/> Pakistani	<input type="checkbox"/> 巴基斯坦裔
<input type="checkbox"/> Polish	<input type="checkbox"/> 波兰裔
<input type="checkbox"/> Portuguese	<input type="checkbox"/> 葡萄牙裔
<input type="checkbox"/> Scottish	<input type="checkbox"/> 苏格兰裔
<input type="checkbox"/> Somali	<input type="checkbox"/> 索马里裔
<input type="checkbox"/> Sri Lankan	<input type="checkbox"/> 斯里兰卡裔
<input type="checkbox"/> Ukrainian	<input type="checkbox"/> 乌克兰裔
<input type="checkbox"/> Another ethnicity not listed (please specify):	<input type="checkbox"/> 以上未列出的族裔（请具体说明）：
<hr/>	<hr/>
<p><i>People are often described as belonging to a certain “race” based on how others see and behave toward them. These ideas about who belongs to what race are usually based on physical features such as skin colour. Ideas about race are often imposed on people by others in ways which can affect their life experiences and how they are treated. Race is often confused with ethnicity, but there can often be several ethnicities within a racialized group.</i></p>	<p>人们通常会根据他人对自己的看法和行为，来描述自己属于哪个“种族”。生理特征（例如肤色）常被用作种族的界定因素。人们常会把自己对种族的判别观点强加到别人身上，后者的生活经历和所受待遇可能会因此受到影响。种族和族裔这两个概念常被混作一谈，但在同一个种族群体中，可能存在数个族裔。</p>

<p>Q5. In our society, people are often described by their race or racial background. Which racial group(s) best describes your child? Select all that apply.</p>	<p>Q5. 在当今社会，人们常常会通过种族或种族背景来形容他人。以下哪一个（哪些）种族最能描述您孩子的情况？请选择所有适用项。</p>
<p><input type="checkbox"/> Black (African, Afro-Caribbean, African-Canadian descent)</p>	<p><input type="checkbox"/> 黑人（非洲裔、非洲加勒比裔、非洲加拿大裔）</p>
<p><input type="checkbox"/> East Asian (Chinese, Korean, Japanese, Taiwanese descent)</p>	<p><input type="checkbox"/> 东亚（华裔、韩裔、日裔、台裔）</p>
<p><input type="checkbox"/> Indigenous (First Nations, Métis, Inuit descent)</p>	<p><input type="checkbox"/> 原住民（第一民族、梅蒂人、因纽特人）</p>
<p><input type="checkbox"/> Latino/Latina/Latinx (Latin American, Hispanic descent)</p>	<p><input type="checkbox"/> 拉丁人（拉美裔、拉美西班牙裔）</p>
<p><input type="checkbox"/> Middle Eastern (Arab, Persian, West Asian descent, e.g. Afghan, Egyptian, Iranian, Lebanese, Turkish, Kurdish, etc.)</p>	<p><input type="checkbox"/> 中东人（阿拉伯裔、波斯裔、西亚裔，例如阿富汗、埃及、伊朗、黎巴嫩、土耳其、库尔德等）</p>
<p><input type="checkbox"/> South Asian (South Asian descent, e.g. East Indian, Pakistani, Bangladeshi, Sri Lankan, Indo-Caribbean, etc.)</p>	<p><input type="checkbox"/> 南亚人（南亚裔，例如东印度、巴基斯坦、孟加拉、斯里兰卡、印度-加勒比等）</p>
<p><input type="checkbox"/> Southeast Asian (Filipino, Vietnamese, Cambodian, Thai, Indonesian, other Southeast Asian descent)</p>	<p><input type="checkbox"/> 东南亚人（菲律宾裔、越南裔、柬埔寨裔、泰裔、印尼裔、其他东南亚裔）</p>
<p><input type="checkbox"/> White (European descent)</p>	<p><input type="checkbox"/> 白人（欧洲裔）</p>
<p>A racial group(s) not listed above (please specify below):</p>	<p>以上未列出的种族群体（请具体说明）：</p>
<p><i>People can be treated differently based on their religion, or perceived religion, which can lead to negative impacts and unequal outcomes. Islamophobia and antisemitism are examples of the way religion can be racialized. People can experience racism not only based on skin colour but also other perceived characteristics that are associated with religion.</i></p>	<p>人们会因自身宗教信仰或他人所认定的宗教信仰而遭受差别对待，从而导致负面影响和不平等的结果。伊斯兰恐惧症和反犹太主义就是宗教种族歧视的表现。除肤色外，人们还会因其他与宗教相关的可感知特征而受到种族歧视。</p>

Q6. What is your child's religion, creed and/or spiritual affiliation? Select all that apply.	Q6. 您孩子的宗教信仰、信条和/或灵性归属是什么？请选择所有适用项。
<input type="checkbox"/> Agnostic	<input type="checkbox"/> 不可知论
<input type="checkbox"/> Atheist	<input type="checkbox"/> 无神论
<input type="checkbox"/> Buddhist	<input type="checkbox"/> 佛教
<input type="checkbox"/> Christian	<input type="checkbox"/> 基督教
<input type="checkbox"/> Hindu	<input type="checkbox"/> 印度教
<input type="checkbox"/> Indigenous Spirituality	<input type="checkbox"/> 原住民灵性信仰
<input type="checkbox"/> Jewish	<input type="checkbox"/> 犹太教
<input type="checkbox"/> Muslim	<input type="checkbox"/> 穆斯林
<input type="checkbox"/> Sikh	<input type="checkbox"/> 锡克教
<input type="checkbox"/> Spiritual, but not religious	<input type="checkbox"/> 有灵性归属，但无宗教信仰
<input type="checkbox"/> No religious or spiritual affiliation	<input type="checkbox"/> 无宗教信仰，也无灵性归属
<input type="checkbox"/> Religion(s) or spiritual affiliation(s) not listed above (please specify below): _____	<input type="checkbox"/> 以上未列出的宗教信仰或灵性归属（请具体说明）： _____
<input type="checkbox"/> Not sure	<input type="checkbox"/> 不确定
<input type="checkbox"/> I do not understand this question	<input type="checkbox"/> 我不理解这一题
<i>Gender identity refers to a person's internal sense or feeling of being a woman, a man, both, neither or anywhere on the gender spectrum, which may or may not be the same as the person's sex assigned at birth (e.g. male, female, intersex) It is different from and does not determine a person's sexual orientation.</i>	<i>性别认同指的是一个人对自己性别描述的内心感知或感受，他们对自身的性别描述可以是女性、男性、双性、非男非女，或处于性别光谱上的任何节点。这一内心感知与其出生时的生理性别（男性、女性或双性）可能一致，也可能有别，但并不会决定一个人的性取向。</i>
Q7. What is your child's gender identity? Select all that apply.	Q7. 您孩子的性别认同是？请选择所有适用项。

<input type="checkbox"/> Boy or man	<input type="checkbox"/> 男孩或男人
<input type="checkbox"/> Gender Fluid	<input type="checkbox"/> 性别流动
<input type="checkbox"/> Gender Non-conforming	<input type="checkbox"/> 性别不顺从
<input type="checkbox"/> Girl or woman	<input type="checkbox"/> 女孩或女人
<input type="checkbox"/> Non-Binary	<input type="checkbox"/> 非二元性别
<input type="checkbox"/> Questioning	<input type="checkbox"/> 性别存疑
<input type="checkbox"/> Trans boy or man	<input type="checkbox"/> 男性跨性别
<input type="checkbox"/> Trans girl or woman	<input type="checkbox"/> 女性跨性别
<input type="checkbox"/> Two-Spirit	<input type="checkbox"/> 双灵人
<input type="checkbox"/> Gender identity(ies) not listed above (please specify below): _____	<input type="checkbox"/> 以上未列出的性别认同（请具体说明）： _____
<input type="checkbox"/> Not sure	<input type="checkbox"/> 不确定
<input type="checkbox"/> I do not understand this question	<input type="checkbox"/> 我不理解这一题
<input type="checkbox"/> I prefer not to answer	<input type="checkbox"/> 不愿作答
<i>Sexual orientation refers to a person's sense of sexual attraction to the people of the same or different sex.</i>	<i>性取向是指一个人对同性或异性感到的性吸引力。</i>
Q8. What is your child's sexual orientation? Select all that apply	Q8. 您孩子的性取向是？请选择所有适用项
<input type="checkbox"/> Straight / heterosexual	<input type="checkbox"/> 异性恋
<input type="checkbox"/> Lesbian	<input type="checkbox"/> 女同性恋
<input type="checkbox"/> Gay	<input type="checkbox"/> 男同性恋
<input type="checkbox"/> Bisexual	<input type="checkbox"/> 双性恋
<input type="checkbox"/> Two-Spirit	<input type="checkbox"/> 双灵人
<input type="checkbox"/> Queer	<input type="checkbox"/> 酷儿
<input type="checkbox"/> Questioning	<input type="checkbox"/> 性向存疑
<input type="checkbox"/> Asexual	<input type="checkbox"/> 无性恋
<input type="checkbox"/> Pansexual	<input type="checkbox"/> 泛性恋
<input type="checkbox"/> A sexual orientation(s) not listed above (please specify): _____	<input type="checkbox"/> 以上未列出的性取向（请具体说明）： _____
<input type="checkbox"/> Not sure	<input type="checkbox"/> 不确定
<input type="checkbox"/> I do not understand this question	<input type="checkbox"/> 我不理解这一题
<input type="checkbox"/> I prefer not to answer	<input type="checkbox"/> 不愿作答
<i>Some people identify as having a disability because of a permanent or long-term health condition that makes it difficult for them to</i>	<i>某些人士因患永久性或长期性疾病，而难以在不够包容、无障碍措施不佳的环境中工作，他们会因此认为自己有残障。残障</i>

<i>function in an environment that is not fully inclusive and accessible. A person's disability may be diagnosed or not diagnosed. It may be hidden or visible. Some students who have disabilities may have a special plan at school to help them (an Individual Education Plan or IEP), but some do not.</i>	状况并不一定都能/都会得到确诊，很可能是隐蔽的、无法察觉的。部分残障学生可能会通过学校获得特殊计划（个人教育计划/IEP）的帮助，其他学生则无法得到这一支持。
Q9. Does your child have a disability?	Q9. 您的孩子有残障吗？
<input type="checkbox"/> Yes	<input type="checkbox"/> 有
<input type="checkbox"/> No	<input type="checkbox"/> 没有
<input type="checkbox"/> Not sure	<input type="checkbox"/> 不确定
<input type="checkbox"/> I do not understand this question	<input type="checkbox"/> 我不理解这一题
<input type="checkbox"/> I prefer not to answer	<input type="checkbox"/> 不愿作答
If yes, please select all that apply:	如有，请选择所有适用项：
<input type="checkbox"/> Addiction(s)	<input type="checkbox"/> 成瘾症
<input type="checkbox"/> Autism Spectrum Disorder	<input type="checkbox"/> 自闭症谱系障碍
<input type="checkbox"/> Blind or low vision	<input type="checkbox"/> 眼盲或视力低下
<input type="checkbox"/> Chronic pain	<input type="checkbox"/> 慢性疼痛
<input type="checkbox"/> Deaf or hard of hearing	<input type="checkbox"/> 耳聋或听障
<input type="checkbox"/> Developmental disability(ies)	<input type="checkbox"/> 发育障碍
<input type="checkbox"/> Learning disability(ies)	<input type="checkbox"/> 学习障碍
<input type="checkbox"/> Mental health disability(ies)	<input type="checkbox"/> 精神健康障碍
<input type="checkbox"/> Mobility	<input type="checkbox"/> 运动障碍
<input type="checkbox"/> Physical disability(ies)	<input type="checkbox"/> 肢体残疾
<input type="checkbox"/> Speech impairment	<input type="checkbox"/> 言语障碍
Any disability not listed above (please specify):	以上未列出的残障状况（请具体说明）：
Q10. Was your child born in Canada?	Q10. 您的孩子是否在加拿大出生？
<input type="checkbox"/> Yes	<input type="checkbox"/> 是
<input type="checkbox"/> No	<input type="checkbox"/> 否

If no, is your child currently:	如选择否，您孩子目前的身份是？
<input type="checkbox"/> a Canadian citizen	<input type="checkbox"/> 加拿大公民
<input type="checkbox"/> a member of an Indigenous community (e.g., First Nations, Inuit, Metis)	<input type="checkbox"/> 原住民（例如第一民族、因纽特人、梅蒂人）社群成员
<input type="checkbox"/> an international student (enrolled through a study permit)	<input type="checkbox"/> 国际学生（持学签抵加入学）
<input type="checkbox"/> a landed immigrant/permanent resident	<input type="checkbox"/> 已落地移民/永久居民
<input type="checkbox"/> a refugee claimant	<input type="checkbox"/> 难民申请人
<input type="checkbox"/> a conventional refugee	<input type="checkbox"/> 公约难民
<input type="checkbox"/> a member of a diplomatic family	<input type="checkbox"/> 外交家庭成员
<input type="checkbox"/> Not sure	<input type="checkbox"/> 不确定
<input type="checkbox"/> I do not understand this question	<input type="checkbox"/> 我不理解这一题

Q11. What is the total household income of your family for one year?	Q11. 您的家庭总计年收入是？
<input type="checkbox"/> <\$19,999	<input type="checkbox"/> 低于 \$19,999
<input type="checkbox"/> \$20,000 to \$39,999	<input type="checkbox"/> \$20,000 至 \$39,999
<input type="checkbox"/> \$40,000 to \$59,999	<input type="checkbox"/> \$40,000 至 \$59,999
<input type="checkbox"/> \$60,000 to \$79,999	<input type="checkbox"/> \$60,000 至 \$79,999
<input type="checkbox"/> \$80,000 to \$99,999	<input type="checkbox"/> \$80,000 至 \$99,999
<input type="checkbox"/> \$100,000 to \$119,000	<input type="checkbox"/> \$100,000 至 \$119,000
<input type="checkbox"/> \$120,000 to \$139,999	<input type="checkbox"/> \$120,000 至 \$139,999
<input type="checkbox"/> \$140,000 +	<input type="checkbox"/> \$140,000 以上
<input type="checkbox"/> I prefer not to answer	<input type="checkbox"/> 不愿作答
Q12. How many people live in your home on a regular basis?	Q12. 您家中一般有几人居住？
1	1
2	2
3	3
4	4
5 or more	5 人或更多
Under 18 years of age	18 岁以下
18 years of age and older	18 岁或以上
Q13. Thinking about your child's experience in school, please indicate your level of agreement with each of the following statements:	Q13. 思考一下您孩子在学校的经历，表明您对以下各项陈述的同意程度：
Strongly Agree	非常同意
Agree	同意
Disagree	不同意
Strongly Disagree	非常不同意
Not Sure	不确定
My child feels accepted by other students.	我的孩子感到自己被其他同学所接纳。
My child feels accepted by staff and adults in the school.	我的孩子感到自己被校内的教职员和成年人所接纳。
My child feels respected at school.	我的孩子感到自己在学校获得了尊重。
My child feels like their identity is welcomed at school.	我的孩子感到自己的身份认同在学校是受欢迎的。
My child feels like they are part of the school community.	我的孩子认为自己是学校社群中的一分子。

My child has the same opportunities for a quality education as other children.	我的孩子拥有与其他孩子同等的接受良好教育的机会。
Q14. In general, how often does your child:	Q14. 总体来说，孩子出现以下状况的频率是？
All the time	一直如此
Often	经常
Sometimes	有时
Rarely	很少
Never	从来没有
Not sure	不确定
Seem happy	看起来很开心
Seem to enjoy their daily activities	喜欢日常活动
Seem irritable or in a bad mood	表现出烦躁，心情不佳
Seem nervous or anxious	表现出紧张、焦虑
Seem tired in the morning	晨间疲惫
Complain of headaches/stomach aches	诉称头痛/胃痛
Not want to go to school	不想上学
<i>In the Ottawa-Carleton District School Board, our goal is to have every student leave our school district with the required characteristics and skills to be a 21st-century success story. The OCDSB exit outcomes listed below provide a target for every OCDSB student, regardless of program pathway.</i>	<i>渥太华-卡尔顿教育局的目标，是让每个学生在毕业时都能拥有在 21 世纪成功所需的必要品质和技能。无论孩子目前就读项目/专业的培养去向如何，以下列出的各项毕业成就，是适用于每位 OCDSB 学子的进取目标。</i>
Q15. How would you describe your child in terms of their:	Q15. 您如何评价孩子在以下各方面的表现？
Excellent	优秀
Good	好
Satisfactory	较好
Needs Improvement	有待改进
Not Sure	不确定
Academic Diversity (e.g., exposure and interest in a range of subjects)	学术多样性（例如：对不同课程/专业均有涉猎、感兴趣）
Creativity (e.g., imagination or coming up with new ideas)	创造力（例如：想象力或提出新想法）
Critical thinking (e.g., reasoning and connecting different ideas)	辩证思考能力（例如：逻辑推理能力，将不同观点并通串联的能力）
Collaboration (e.g., working with other people)	协作能力（例如：与他人合作的能力）
Communication (e.g., being able to express	沟通能力（例如：表达自身感受和想法的

feelings, ideas)	能力)
Global Awareness (e.g., empathetic and responsive to the local and global community)	全球意识 (例如: 对当地及世界其他地区的群体是否具有同理心和因应技能)
Excellent	优秀
Good	好
Satisfactory	较好
Needs Improvement	有待改进
Not Sure	不确定
Digital Fluency (e.g., using technology to enhance learning)	科技应用能力 (例如: 利用科技手段促进学习)
Decision Making (e.g., making ethical decisions)	决策能力 (例如: 作出符合伦理道德的决策)
Goal Setting (e.g., self-motivation and sense of responsibility)	目标设定 (例如: 自我激励和责任感)
Resiliency (e.g., faces and overcomes challenges)	韧性 (例如: 面对和克服挑战的能力)
Q16. To what extent does your child feel a sense of belonging at school?	Q16. 孩子在学校的归属感有多强?
<input type="checkbox"/> Strong	<input type="checkbox"/> 强
<input type="checkbox"/> Moderate	<input type="checkbox"/> 一般
<input type="checkbox"/> Low	<input type="checkbox"/> 低
<input type="checkbox"/> Not sure	<input type="checkbox"/> 不确定
If strong is selected, what has helped to create a sense of belonging for your child at school? (150 words)	如选择“强”，有哪些因素帮助孩子建立起了这样的归属感? (150 字左右)
If moderate or low is selected, what would create a greater sense of belonging for your child at school? (150 words)	如选择“一般”或“低”，有哪些因素可以帮助孩子建立更强的归属感? (150 字左右)
Q17. Please indicate which of the following activities your child <u>currently participates in</u> and those they <u>would like to participate in</u> (select all that apply):	Q17. 请勾选孩子目前正在参加和希望参加的活动 (请选择所有适用项):
My child currently participates in these activities:	我的孩子目前参加以下活动:
in school	校内
outside school	校外
My child would like to participate in these activities, but is unable to do so:	我的孩子希望参加以下活动，但无法实现:

Arts (e.g., visual arts, drama, dance)	艺术（例如：视觉艺术、戏剧、舞蹈）
Cultural group activities	文化团体活动
Leadership programs	领导力培养项目
Music (e.g., band, choir)	音乐（例如：乐队、合唱团）
School clubs (e.g., chess, environment)	校园俱乐部（例如：国际象棋、环保）
School publications (e.g., yearbooks, newspapers, websites)	校园出版物（例如：年鉴、报刊、网站）
School special events (e.g., dances, concerts)	学校特殊活动（例如：舞会、音乐会）
Team sports (e.g., track and field, basketball, soccer, cricket, hockey).	团队体育项目（例如：田径、篮球、足球、板球、曲棍球/冰球）
Student council activities	学生理事会活动
Youth Programs, clubs or organizations (e.g., Cadets, Guides, Wabano After School Program)	青少年计划、俱乐部或组织（例如：少年军校、童子军、Wabano 课外计划）
Volunteer activities	志愿服务活动
[If “My child would like to participate in these activities, but is unable to do so” is selected for any activity],	[如果对于任何一项活动，您选择了“我的孩子希望参加以下活动，但无法实现”]，
What prevents your child from participating in extra curricular activities?	是什么因素让孩子无法参加这一课外活动？
<input type="checkbox"/> Ability/skill	<input type="checkbox"/> 能力/技巧
<input type="checkbox"/> Accessibility (e.g., physical barriers)	<input type="checkbox"/> 无障碍措施不到位（例如：身体障碍）
<input type="checkbox"/> Cost	<input type="checkbox"/> 费用
<input type="checkbox"/> Cultural reasons	<input type="checkbox"/> 文化因素
<input type="checkbox"/> Distance or location	<input type="checkbox"/> 路途较远或地点不便
<input type="checkbox"/> Family values	<input type="checkbox"/> 家庭价值观
<input type="checkbox"/> Time	<input type="checkbox"/> 时间
<input type="checkbox"/> Transportation	<input type="checkbox"/> 交通不便
Other (please specify below)	其他（请在下方具体说明）
Q18. At my child’s school, I feel people like my child are reflected positively in:	Q18. 我认为在学校里，像我孩子一样的学生，他们的身份和个性通过以下方式得到了积极的展现：
Strongly Agree	非常同意
Agree	同意

Disagree	不同意
Strongly Disagree	非常不同意
Not sure	不确定
Pictures, posters and displays in school	校内的图片、海报和展示
Learning materials teachers use in class (e.g., books, videos/films)	教师在课堂上使用的学习资料（例如：书本、视频/影片）
Lessons or curriculum content	课堂内容或教学大纲内容
Extra-curricular activities (e.g., sports, clubs, art activities)	课外活动（例如：体育活动、俱乐部、艺术活动）
School events/activities (e.g., extra-curricular activities, cultural celebrations, religious/faith/ethnic activities)	学校活动（例如：课外活动、文化庆祝、宗教/信仰/民族活动）
Q19. At school, my child has opportunities to:	Q19. 孩子在学校里有机会：
Strongly Agree	非常同意
Agree	同意
Disagree	不同意
Strongly Disagree	非常不同意
Not sure	不确定
Express their identity	表达自己的身份认同
Learn about their own background and identity	学习与自身背景和身份认同相关的知识
Learn about the background and identity of others	学习与他人背景和身份认同相关的知识
Q20. Has your child experienced being stereotyped, prejudice or discrimination at school as a result of their:	Q20. 您的孩子是否由于以下因素而在学校遭受过他人的刻板印象、偏见或歧视：
Often	经常
Sometimes	有时
Rarely	很少
Never	从来没有
Not Sure	不确定
Appearance	外貌
Clothing	衣着

Disability	残障
Ethnic background	族裔背景
Family income	家庭收入
Family structure	家庭成员结构
First language	第一语言
Gender identity	性别认同
Grades or achievement level	成绩或学业水平
Indigenous background (e.g., First Nations, Metis, Inuit)	原住民背景（例如：第一民族、梅蒂人、因纽特人）
Race	种族
Religion or faith	宗教或信仰
Sexual orientation	性取向
Other reasons(Please specify)	其他原因（请具体说明）
Q21. Please indicate your level of agreement with each of the following statements regarding your child's sense of safety:	Q21. 以下是有关孩子安全感的陈述，请标明您的同意程度：
Strongly Agree	非常同意
Agree	同意
Disagree	不同意
Strongly Disagree	非常不同意
Not sure	不确定
My child feels safe in the classroom	孩子在课堂上感到安全
My child feels safe in the other parts of the school (e.g., gym, cafeteria, washroom, hallways)	孩子在学校其他地方（例如健身房、食堂、洗手间、走廊）感到安全
My child feels safe outside on school property (e.g., schoolyard, school parking lot)	孩子在学校的户外场所（例如校园中、学校停车场）感到安全
My child feels safe in the neighbourhood beside/around school	孩子在学校周边/附近感到安全
My child feels safe on their way to and from school	孩子在上学和放学途中感到安全

My child feels safe on the school bus	孩子在校车上感到安全
Bullying is when a person tries to hurt another person, and does it more than once. It can be physical, verbal, or social, and can also take place over the internet with emails or text messages. The bully is usually in a position of real or perceived power over the victim.	欺凌是指企图对他人造成伤害，且这种行为不止一次。欺凌有肢体、言语、社交等多种形式，也可在互联网上通过电子邮件或短信进行。相比于受害者，欺凌者通常有着更高的实际地位，或被视作拥有更高地位。
Q22. To the best of your knowledge in the past 4 weeks, how often has your child been:	Q22. 就您所知，在过去 4 周中，您的孩子遭遇以下情形的频率是？
All the time	一直如此
Often	经常
Sometimes	有时
Rarely	很少
Never	从来没有
Worried about being bullied	担心自己受欺凌
Physically bullied? (e.g., pushed, punched, or scared by someone).	身体欺凌 （例如：被他人推搡、殴打或惊吓）
Cyber bullied? (e.g., called names, teased, threatened by email, text messages, or social media).	网络欺凌 （例如：他人通过电子邮件、短信或在社交媒体上，说孩子的坏话、嘲弄、威胁）
Socially bullied? (e.g., excluded by others, had rumors spread about you, or had someone try to make you look bad).	社交欺凌 （例如：被他人排挤、散播谣言、被迫出丑）
Verbally bullied? (e.g., called names, teased, threatened, or received negative comments).	言语欺凌 （例如：被别人说坏话、嘲弄、威胁，或收到负面评价）
Q23 Do you have anything else you would like to share with us?	Q23 您还有什么希望与我们分享吗？
<input type="checkbox"/> Yes	<input type="checkbox"/> 是
<input type="checkbox"/> No	<input type="checkbox"/> 否
If yes, please share any additional comments (150 words)	如选择“是”，请在下方书写（150 字左右）。
Thank you for participation.	感谢您的参与。
The information you have provided will be extremely helpful as we work towards	我们希望尽力鉴别并消除本教育局体系中存在的障碍和偏见，更好地满足所有学生

identifying and removing barriers and bias in our system to better meet the needs of all students.	的需求，您提供的信息对此将非常有帮助。
We would like to reassure you that your responses will remain confidential.	再次强调，您的所有回复都将严格保密。
Preliminary results will be available in Spring 2020.	初步调查结果将于 2020 年春季公布。