

OREGON HEALTHY TEENS SURVEY 2008

This survey was developed to learn about risks to students' health and safety. The information you provide will be used to help schools and communities develop ways to improve student health and safety in Oregon.

Your participation in this survey is voluntary.

DO NOT WRITE YOUR NAME ON THIS SURVEY.

The answers you give will be kept private. No one will know how you answer.

This is **NOT** a test. There are no right or wrong answers, and your participation in this survey is **VOLUNTARY**. If you are not comfortable answering a question, you can leave it blank.

Please **do** answer each question you are comfortable with answering. Just because a question is asked, that **does not** mean that we believe you have engaged in a particular behavior or that it is normal. Each question has a response to indicate if you **did not** engage in that behavior. If you don't always find an answer that fits exactly, use the one that comes closest. If you are not sure what a question means, just leave it blank.

Please fill in only **ONE** bubble or answer, **unless** the question specifically asks you to **"Select one or more responses."**

Marking Instructions:

Please mark your choice on the corresponding "Answer Sheet"

Fill in the bubbles completely. If you make a mistake, please erase your mistake, then fill in the correct response.

Proper Marks



Improper Marks



- What is your sex?
 - Female
 - Male
- In what grade are you?
 - 7th grade
 - 8th grade
 - 9th grade
 - 10th grade
 - 11th grade
 - 12th grade
 - Ungraded or other grade
- How old are you?
 - 12 years old or younger
 - 13 years old
 - 14 years old
 - 15 years old
 - 16 years old
 - 17 years old
 - 18 years old or older
- Are you Hispanic or Latino?
 - Yes
 - No
- What is your race? (**Select one or more responses.**)
 - American Indian or Alaska Native
 - Asian
 - Black or African American
 - Native Hawaiian or Other Pacific Islander
 - White
- What is the language you use most often at home?
 - English
 - Spanish
 - Another language
- Are you using the Spanish reference guide to complete the survey?
 - Yes
 - No
- How tall are you without your shoes on? Directions: Write your height in the shaded blank boxes. Fill in the matching circle below each number on the answer sheet.

Example

Height	
Feet	Inches
4	11
③	①
●	①
⑤	②
⑥	③
⑦	④
	⑤
	⑥
	⑦
	⑧
	⑨
	⑩
	●

- How much do you weigh without your shoes on? Directions: Write your weight in the shaded blank boxes. Fill in the matching circle below each number on the answer sheet.

Example

Weight Pounds		
0	9	5
●	①	①
①	①	①
②	②	②
③	③	③
	④	④
	⑤	●
	⑥	⑥
	⑦	⑦
	⑧	⑧
	●	⑨

The next 5 questions ask about health care issues.

- Would you say that in general your **physical health** is...
 - Excellent
 - Very good
 - Good
 - Fair
 - Poor
- Would you say that in general your **emotional and mental health** is...
 - Excellent
 - Very good
 - Good
 - Fair
 - Poor
- When did you last go to a doctor or nurse practitioner for a check-up or physical exam when you were not sick or injured?
 - During the past 12 months
 - Between 12 and 24 months ago
 - More than 24 months ago
 - Never
 - Not sure
- During the past 12 months, did you have any **physical** health care needs that were **not** met? (Count any situation where you thought you should see a doctor, nurse, or other health professional.)
 - Yes
 - No
- During the past 12 months, did you have any **emotional or mental health** care needs that were **not** met? (Count any situation where you thought you should see a counselor, social worker, or other mental health professional.)
 - Yes
 - No

For these next 4 statements, mark how true you feel each is for you.

15. I can do most things if I try.
A. Very much true
B. Pretty much true
C. A little true
D. Not at all true
16. There is at least one teacher or other adult in my school that really cares about me.
A. Very much true
B. Pretty much true
C. A little true
D. Not at all true
17. I volunteer to help others in my community.
A. Very much true
B. Pretty much true
C. A little true
D. Not at all true
18. I can work out my problems.
A. Very much true
B. Pretty much true
C. A little true
D. Not at all true

The next question asks about grades.

19. Putting them all together, what were your grades like last year?
A. Mostly A's
B. Mostly B's
C. Mostly C's
D. Mostly D's
E. Mostly F's
F. None of those grades
G. Not sure

The next 3 questions ask about oral health.

20. When did you last go to a dentist or dental hygienist for a check-up, exam, teeth cleaning, or other dental work?
A. During the past 12 months
B. Between 12 and 24 months ago
C. More than 24 months ago
D. Never
E. Not sure
21. Have you ever had a cavity?
A. Yes
B. No

22. In the *past year*, were you ever injured in your mouth area while playing sports? The mouth area could be your teeth, gums, lips, cheeks, tongue or jaw. **(Please mark *all* answers that apply.)**
A. I was not injured in the mouth while playing a sport
B. I was injured in the mouth playing an organized sport, like school, club or team sports
C. I was injured in the mouth playing a recreational sport I did on my own (with or without other people), like skateboarding or pickup basketball

The next 2 questions ask about asthma.

23. Has a doctor or nurse ever told you that you have asthma?
A. Yes
B. No
C. Not sure
24. Do you still have asthma?
A. I have never had asthma
B. Yes, I still have asthma
C. No, I no longer have asthma
D. Not sure

The next 2 questions ask about other health conditions.

25. Has a doctor, nurse, or other professional ever told you that you have one or more of the following: **(Please mark *all* that apply.)**
A. I do not have any of these conditions
B. A medical condition lasting more than a year, such as asthma, diabetes, cancer, heart problems or seizures
C. A physical condition, including developmental conditions (spina bifida, cerebral palsy, etc.), long-term injuries (spinal cord injury, etc.), or bone, joint, or muscle problems (arthritis, etc.)
D. Blindness or problem seeing (other than needing glasses or contacts) or deafness or problem hearing
E. An emotional condition such as depression or anxiety
F. A learning disorder, attention deficit disorder, ADHD, or severe learning disability such as mental retardation
26. Are you limited in any activities because of ANY disabilities or long-term health problems, including physical health, emotional, or learning problems?
A. Yes
B. No
C. Not sure

The next 10 questions ask about food you ate or drank during the past 7 days. Think about all the meals and snacks you had from the time you got up until you went to bed. Be sure to include food you ate at home, at school, at restaurants, or anywhere else.

27. During the past 7 days, how many times did you drink **100% fruit juices** such as orange juice, apple juice, or grape juice? (Do **not** count punch, Kool-Aid, sports drinks, or other fruit-flavored drinks.)
- A. I did not drink 100% fruit juice during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
28. During the past 7 days, how many times did you eat **fruit**? (Do **not** count fruit juice.)
- A. I did not eat fruit during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
29. During the past 7 days, how many times did you eat **green salad**?
- A. I did not eat green salad during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
30. During the past 7 days, how many times did you eat **potatoes**? (Do **not** count french fries, fried potatoes, or potato chips.)
- A. I did not eat potatoes during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
31. During the past 7 days, how many times did you eat **carrots**?
- A. I did not eat carrots during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
32. During the past 7 days, how many times did you eat **other vegetables**? (Do **not** count green salad, potatoes, or carrots.)
- A. I did not eat other vegetables during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
33. During the past 7 days, how many **glasses of milk** did you drink? (Include the milk you drank in a glass or cup, from a carton, or with cereal. Count the half pint of milk served at school as equal to one glass.)
- A. I did not drink milk during the past 7 days
 - B. 1 to 3 glasses during the past 7 days
 - C. 4 to 6 glasses during the past 7 days
 - D. 1 glass per day
 - E. 2 glasses per day
 - F. 3 glasses per day
 - G. 4 or more glasses per day
34. During the past 7 days, on how many days did you eat breakfast?
- A. 0 days
 - B. 1 day
 - C. 2 to 4 days
 - D. 5 to 6 days
 - E. 7 days
35. During the past 7 days, how many times did you drink a can, bottle, or glass of soda or pop, such as Coke, Pepsi, or Sprite? (Do **not** include diet soda or diet pop.)
- A. I did not drink soda or pop during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
36. During the past 7 days, how many days did you buy soft drinks at school?
- A. I did not buy soft drinks at school
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 or more days

The next 5 questions ask about physical activity.

37. During the past 7 days, on how many days were you physically active for a total of **at least 60 minutes per day**? (Add up all the time you spend in any kind of physical activity that increases your heart rate and makes you breathe hard some of the time.)
A. 0 days
B. 1 day
C. 2 days
D. 3 days
E. 4 days
F. 5 days
G. 6 days
H. 7 days
38. In an average week when you are in school, on how many days do you go to physical education (PE) classes?
A. 0 days
B. 1 day
C. 2 days
D. 3 days
E. 4 days
F. 5 days
39. During an average physical education (PE) class, how many minutes do you spend actually exercising or playing sports?
A. I do not take PE
B. Less than 10 minutes
C. 10 to 20 minutes
D. 21 to 30 minutes
E. 31 to 40 minutes
F. 41 to 50 minutes
G. 51 to 60 minutes
H. More than 60 minutes
40. On an average school day, how many hours do you watch TV?
A. I do not watch TV on an average school day
B. Less than 1 hour per day
C. 1 hour per day
D. 2 hours per day
E. 3 hours per day
F. 4 hours per day
G. 5 or more hours per day
41. On an average school day, how many hours do you play video or computer games or use a computer for something that is not school work? (Include activities such as Nintendo, Game Boy, Play Station, X-box, computer games and the Internet.)
A. I do not play video or computer games or use a computer for something that is not school work
B. Less than 1 hour per day
C. 1 hour per day
D. 2 hours per day
E. 3 hours per day
F. 4 hours per day
G. 5 or more hours per day

The next question asks about body weight.

42. How do **you** describe your weight?
A. Very underweight
B. Slightly underweight
C. About the right weight
D. Slightly overweight
E. Very overweight
-

The next 9 questions ask about sad feelings and attempted suicide. Sometimes people feel so depressed about the future that they may consider attempting suicide, that is, taking some action to end their own life.

43. During the past 30 days, how much of the time have you been a very nervous person?
A. All of the time
B. Most of the time
C. A good bit of the time
D. Some of the time
E. A little of the time
F. None of the time
44. During the past 30 days, how much of the time have you felt calm and peaceful?
A. All of the time
B. Most of the time
C. A good bit of the time
D. Some of the time
E. A little of the time
F. None of the time
45. During the past 30 days, how much of the time have you felt downhearted and blue?
A. All of the time
B. Most of the time
C. A good bit of the time
D. Some of the time
E. A little of the time
F. None of the time
46. During the past 30 days, how much of the time have you been a happy person?
A. All of the time
B. Most of the time
C. A good bit of the time
D. Some of the time
E. A little of the time
F. None of the time
47. During the past 30 days, how much of the time have you felt so down in the dumps that nothing could cheer you up?
A. All of the time
B. Most of the time
C. A good bit of the time
D. Some of the time
E. A little of the time
F. None of the time

48. During the past 12 months, did you ever feel so sad or hopeless almost every day for **two weeks or more in a row** that you stopped doing some usual activities?
 A. Yes
 B. No
49. During the past 12 months, did you ever **seriously** consider attempting suicide?
 A. Yes
 B. No
50. During the past 12 months, how many times did you actually attempt suicide?
 A. 0 times
 B. 1 time
 C. 2 or 3 times
 D. 4 or 5 times
 E. 6 or more times
51. **If you attempted suicide** during the past 12 months, did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?
 A. **I did not attempt suicide** in the past 12 months
 B. Yes
 C. No

The next 18 questions ask about personal safety.

52. During the past 30 days, how many times did you **ride** in a car or other vehicle **driven by a teenager who had been drinking alcohol**?
 A. 0 times
 B. 1 time
 C. 2 or 3 times
 D. 4 or 5 times
 E. 6 or more times
53. During the past 30 days, how many times did you **ride** in a car or other vehicle **driven by a parent or other adult who had been drinking alcohol**?
 A. 0 times
 B. 1 time
 C. 2 or 3 times
 D. 4 or 5 times
 E. 6 or more times
54. During the past 30 days, on how many days did you **not** go to school because you felt you would be unsafe at school or on your way to or from school?
 A. 0 days
 B. 1 day
 C. 2 or 3 days
 D. 4 or 5 days
 E. 6 or more days
55. During the past 30 days, on how many days did you carry a **gun**?
 A. 0 days
 B. 1 day
 C. 2 or 3 days
 D. 4 or 5 days
 E. 6 or more days

56. During the past 30 days, on how many days did you carry a **weapon** other than a gun (such as a knife, club, or other weapon)?
 A. 0 days
 B. 1 day
 C. 2 or 3 days
 D. 4 or 5 days
 E. 6 or more days
57. During the past 30 days, on how many days did you carry a gun **on school property**?
 A. 0 days
 B. 1 day
 C. 2 or 3 days
 D. 4 or 5 days
 E. 6 or more days
58. During the past 12 months, how many times were you in a physical fight?
 A. 0 times
 B. 1 time
 C. 2 or 3 times
 D. 4 or 5 times
 E. 6 or 7 times
 F. 8 or 9 times
 G. 10 or 11 times
 H. 12 or more times
59. During the past 12 months, how many times were you in a physical fight **on school property**?
 A. 0 times
 B. 1 time
 C. 2 or 3 times
 D. 4 or 5 times
 E. 6 or 7 times
 F. 8 or 9 times
 G. 10 or 11 times
 H. 12 or more times

During the past 12 months, how many times:	0 times	1 or more times
60. Has someone threatened you with a weapon such as a gun, knife, or club on school property ?	A	B
61. Have you been suspended from school?	A	B
62. Has anyone offered, sold or given you an illegal drug on school property ?	A	B
63. Have you sold illegal drugs?	A	B
64. Have you stolen or tried to steal a motor vehicle such as a car or motorcycle?	A	B
65. Have you attacked someone with the idea of seriously hurting them?	A	B
66. Have you been arrested?	A	B
67. Have you stolen something worth more than \$10?	A	B
68. Have you been stopped by police?	A	B
69. Have you been in a fight with a weapon?	A	B

Harassment can include threatening, bullying, name-calling or obscenities, offensive notes or graffiti, unwanted touching, and physical attacks.

70. During the past 30 days, have you ever been harassed at school (or on the way to or from school) in relation to any of the following issues? **(Select one or more responses.)**
- A. Harassment about your race or ethnic origin
 - B. Unwanted sexual comments or attention
 - C. Harassment because someone thought you were gay, lesbian or bisexual
 - D. Harassment about your weight, clothes, acne, or other physical characteristics
 - E. Harassment about your group of friends
 - F. Other reasons
 - G. I have not been harassed

The next 3 questions ask about gambling.

71. During the last 12 months, have you ever felt bad about the amount you bet, or about what happens when you bet money?
- A. I don't bet for money
 - B. Yes
 - C. No
72. During the last 12 months, have you ever felt that you would like to stop betting money but didn't think you could?
- A. I don't bet for money
 - B. Yes
 - C. No
73. In total, how much money have you bet in any form (lottery, card games, bingo, Internet, sports, with friends) in the past three months?
- A. \$0
 - B. \$1 to \$10
 - C. \$11 to \$50
 - D. \$51 to \$100
 - E. \$101 to \$200
 - F. \$201 to \$500
 - G. Over \$500

The next 7 questions ask about sexual behavior.

74. Have you ever had sexual intercourse?
- A. Yes
 - B. No

75. How old were you when you had sexual intercourse for the first time?
- A. I have never had sexual intercourse
 - B. 11 years old or younger
 - C. 12 years old
 - D. 13 years old
 - E. 14 years old
 - F. 15 years old
 - G. 16 years old
 - H. 17 years old or older
76. During your life, with how many people have you had sexual intercourse?
- A. I have never had sexual intercourse
 - B. 1 person
 - C. 2 people
 - D. 3 people
 - E. 4 people
 - F. 5 people
 - G. 6 or more people
77. During the past 3 months, with how many people did you have sexual intercourse?
- A. I have never had sexual intercourse
 - B. I have had sexual intercourse, but not during the past 3 months
 - C. 1 person
 - D. 2 people
 - E. 3 people
 - F. 4 people
 - G. 5 people
 - H. 6 or more people
78. Did you drink alcohol or use drugs before you had sexual intercourse the **last time**?
- A. I have never had sexual intercourse
 - B. Yes
 - C. No
79. The **last time** you had sexual intercourse, did you or your partner use a condom?
- A. I have never had sexual intercourse
 - B. Yes
 - C. No
80. The **last time** you had sexual intercourse, what **one** method did you or your partner use to **prevent pregnancy**? (Select only **one** response.)
- A. I have never had sexual intercourse
 - B. No method was used to prevent pregnancy
 - C. Birth control pills
 - D. Condoms
 - E. Depo-Provera (injectable birth control)
 - F. Withdrawal
 - G. Some other method
 - H. Not sure

The next questions ask about tobacco use.

During the past 30 days, on how many days did you ...	0 days	1 to 2 days	3 to 5 days	6 to 9 days	10 to 19 days	20 to 29 days	All 30 days
81. Smoke cigarettes ?	A	B	C	D	E	F	G
82. Use chewing tobacco, snuff, or dip , such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits or Copenhagen?	A	B	C	D	E	F	G
83. Smoke cigars, cigarillos, or little cigars ?	A	B	C	D	E	F	G
84. Smoke tobacco in a pipe ?	A	B	C	D	E	F	G
85. Smoke tobacco in a Hookah , also known as a waterpipe?	A	B	C	D	E	F	G
86. Smoke clove or kretek cigarettes?	A	B	C	D	E	F	G
87. Smoke bidis (or "beedies")? Bidis are small brown cigarettes that have tobacco wrapped in a leaf and tied with a thread.	A	B	C	D	E	F	G

88. During the past 30 days, on the days you smoked, how many cigarettes did you smoke **per day**?
- I did not smoke cigarettes during the past 30 days
 - Less than 1 cigarette per day
 - 1 cigarette per day
 - 2 to 5 cigarettes per day
 - 6 to 10 cigarettes per day
 - 11 to 20 cigarettes per day
 - More than 20 cigarettes per day
89. How old were you when you smoked a whole cigarette for the first time?
- I have never smoked a whole cigarette
 - 8 years old or younger
 - 9 years old
 - 10 years old
 - 11 years old
 - 12 years old
 - 13 years old
 - 14 years old
 - 15 years old
 - 16 years old
 - 17 years old or older
90. Have you ever tried smoking **flavored** cigarettes (made to taste like chocolate, candy, etc.)?
- Yes
 - No
91. Do you want to completely stop smoking cigarettes?
- I do not smoke now
 - Yes
 - No
92. During the past 12 months, did you ever **try** to stop smoking cigarettes?
- I did not smoke cigarettes in the past 12 months
 - Yes
 - No
93. Do you think that you will smoke a cigarette soon?
- Definitely yes
 - Probably yes
 - Probably not
 - Definitely not
94. At any time during the next year, do you think you will smoke a cigarette?
- Definitely yes
 - Probably yes
 - Probably not
 - Definitely not
95. If one of your best friends were to offer you a cigarette, would you smoke it?
- Definitely yes
 - Probably yes
 - Probably not
 - Definitely not
96. During the past 30 days, from which of the following sources did you get tobacco (cigarettes, chew, cigars)? **Please mark all that apply.**
- I did not get tobacco during the past 30 days
 - A store or gas station
 - Friends 18 or older
 - Friends under 18
 - Took from home without permission
 - A family member
 - The Internet
 - Some other source
97. If you wanted to get some tobacco (cigarettes, chew, cigars), how easy would it be for you to get some?
- Very easy
 - Sort of easy
 - Sort of hard
 - Very hard
98. Is there a rule against tobacco in your school?
- There is no rule
 - There is a rule, but it isn't enforced
 - There is a rule and it is sometimes enforced
 - There is a rule and it is strictly enforced
99. During the past 30 days, on how many days did you smoke cigarettes **on school property**?
- 0 days
 - 1 or 2 days
 - 3 to 5 days
 - 6 to 9 days
 - 10 to 19 days
 - 20 to 29 days
 - All 30 days

100. During the past 30 days, on how many days did you use **chewing tobacco, snuff, or dip on school property**?
- 0 days
 - 1 or 2 days
 - 3 to 5 days
 - 6 to 9 days
 - 10 to 19 days
 - 20 to 29 days
 - All 30 days
101. During the past 12 months, have you seen other students smoke on school property?
- Yes
 - No
102. During the past 12 months, have you seen teachers, staff, or other adults smoke on school property?
- Yes
 - No
103. During the past 12 months, have you seen teachers, staff, or other adults use chewing tobacco on school property?
- Yes
 - No
104. During the past 7 days, on how many days did you ride in a car with someone who was smoking cigarettes?
- 0 days
 - 1 to 2 days
 - 3 to 4 days
 - 5 to 6 days
 - 7 days
105. Does someone living in your house (other than you) smoke cigarettes?
- Nobody smokes
 - Someone smokes, but not inside the house
 - Someone smokes inside the house
106. Do you agree or disagree with the following statement: Cigarette companies deliberately advertise and promote cigarettes to encourage youth under 18 to smoke.
- Strongly agree
 - Somewhat agree
 - Somewhat disagree
 - Strongly disagree
 - Not sure

During the past 30 days, have you seen an advertisement promoting cigarettes:	Yes	No	Not sure
107. On a storefront or in a store?	A	B	C
108. In a magazine?	A	B	C

109. If you have a favorite, what is the brand of your favorite cigarette advertisement? **Mark only one answer.**
- I do not have a favorite
 - Marlboro
 - Camel
 - Kool
 - Virginia Slim
 - Winston
 - American Spirit
 - Other
110. Do you think the smoke from other people's cigarettes is harmful to you?
- Definitely yes
 - Probably yes
 - Probably not
 - Definitely not
111. During the last 12 months, have you been taught about tobacco in school?
- Yes
 - No
 - No sure
112. What percentage of youth in **your grade** do you think smoked cigarettes in the past 30 days?
- Less than 10%
 - 11% to 20%
 - 21% to 30%
 - 31% to 40%
 - 41% to 50%
 - 51% to 60%
 - 61% to 70%
 - More than 70%

The next 22 questions ask about drinking alcohol. This includes drinking beer, wine, wine coolers, and liquor such as rum, gin, vodka, or whiskey. For these questions, drinking alcohol does not include drinking a few sips of wine for religious purposes.

113. How old were you when you had more than a sip or two of beer, wine, or hard liquor (for example, vodka, whiskey, or gin) for the first time?
- I have never drank alcohol
 - 8 years old or younger
 - 9 years old
 - 10 years old
 - 11 years old
 - 12 years old
 - 13 years old
 - 14 years old
 - 15 years old
 - 16 years old
 - 17 years old or older
114. On how many occasions (if any) have you had beer or wine (non-religious) or hard liquor (for example, vodka, whiskey, or gin) to drink during the past 30 days?
- 0 occasions
 - 1 to 2 occasions
 - 3 to 5 occasions
 - 6 to 9 occasions
 - 10 or more occasions
115. During the past 30 days, on how many days did you have 5 or more drinks of alcohol in a row, that is, within a couple of hours?
- 0 days
 - 1 day
 - 2 days
 - 3 to 5 days
 - 6 to 9 days
 - 10 to 19 days
 - 20 or more days

116. During the past 30 days, on how many days did you have at least one drink of alcohol **on school property**?
- 0 days
 - 1 or 2 days
 - 3 to 5 days
 - 6 to 9 days
 - 10 to 19 days
 - 20 to 29 days
 - All 30 days
117. During the past 30 days, what type of alcohol did you **usually** drink? (Select only **one** response.)
- I did not drink alcohol during the past 30 days
 - I do not have a usual type
 - Beer
 - Flavored beverages, such as Smirnoff Ice, Bacardi Silver, and Hard Lemonade
 - Wine coolers, such as Bartles and Jaymes or Seagrams Wine
 - Wine
 - Liquor, such as vodka, rum, scotch, bourbon, or whiskey
 - Some other type
118. During your life, on how many days have you had at least one drink of alcohol?
- 0 days
 - 1 or 2 days
 - 3 to 9 days
 - 10 to 19 days
 - 20 to 39 days
 - 40 to 99 days
 - 100 or more days
119. If you wanted to get some beer, wine or hard liquor (for example, vodka, whiskey or gin), how easy would it be for you to get some?
- Very easy
 - Sort of easy
 - Sort of hard
 - Very hard
120. In the last 12 months, which of the following have you experienced? **Please mark all that apply.**
- I did not drink alcohol in the last 12 months
 - Missed school or class because of drinking alcohol
 - Gotten sick to your stomach because of drinking alcohol
 - Not been able to remember what happened while you were drinking alcohol
 - Later regretted something you did while drinking alcohol
 - Worried that you drank alcohol too much or too often

During the past 30 days, how many times did you get alcohol (beer, wine, or hard liquor) from each of the following sources?	None	1 or more times
121. Grocery stores	A	B
122. Convenience stores (such as 7-Eleven)	A	B
123. Gas stations	A	B
124. Friends 21 and older	A	B
125. Friends under 21	A	B
126. Took from home without permission	A	B
127. A parent	A	B
128. A brother or sister	A	B
129. Another family member	A	B
130. Through the Internet	A	B
131. By asking a stranger to buy it for me	A	B
132. Liquor store	A	B
133. Bar/Night Club or Restaurant	A	B
134. At a party	A	B

The next 4 questions ask about marijuana. Marijuana is also called grass or pot.

135. How old were you when you tried marijuana for the first time?
- I have never tried marijuana
 - 8 years old or younger
 - 9 years old
 - 10 years old
 - 11 years old
 - 12 years old
 - 13 years old
 - 14 years old
 - 15 years old
 - 16 years old
 - 17 years old or older
136. During the past 30 days, how many times did you use marijuana?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 or more times
137. During your life, how many times have you used marijuana?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 to 99 times
 - 100 or more times
138. If you wanted to get some marijuana, how easy would it be for you to get some?
- Very easy
 - Sort of easy
 - Sort of hard
 - Very hard

The next 32 questions ask about other drugs.

How much do you think people risk harming themselves (physically or in other ways) if they:	No risk	Slight risk	Moderate risk	Great risk
139. Smoke one or more packs of cigarettes per day?	A	B	C	D
140. Use chewing tobacco, snuff, or dip every day?	A	B	C	D
141. Try marijuana once or twice?	A	B	C	D
142. Smoke marijuana regularly?	A	B	C	D
143. Take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day?	A	B	C	D
144. Have five or more drinks of an alcoholic beverage once or twice a week?	A	B	C	D

During the past 30 days, how many times did you:	0 times	1 or more times
145. Sniff glue, breathe the contents of aerosol spray cans, or inhale any paints or sprays to get high?	A	B
146. Use prescription drugs (without a doctor's orders) to get high?	A	B
147. Use methamphetamines (also called speed, crystal, crank, or ice)?	A	B
148. Use any form of cocaine, including powder, crack, or freebase?	A	B
149. Use heroin or other opiates or narcotics?	A	B
150. Use ecstasy (also called MDMA)?	A	B
151. Use LSD or other hallucinogens or psychedelics?	A	B

During the past 12 months, how many times have you:	0 times	1 or more times
152. Used any form of cocaine, including powder, crack, or freebase?	A	B
153. Sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high?	A	B
154. Used heroin (also called smack, junk, or China White)?	A	B
155. Used methamphetamines (also called speed, crystal, crank, or ice)?	A	B
156. Used ecstasy (also called MDMA)?	A	B
157. Taken steroid pills or shots without a doctor's prescription?	A	B
158. Used a needle to inject any illegal drug into your body?	A	B

Think of your four best friends (the friends you feel closest to). IN THE PAST 12 MONTHS how many of your best friends have:	None	1 or more
159. Smoked cigarettes?	A	B
160. Tried beer, wine, or hard liquor (for example, vodka, whiskey, or gin)?	A	B
161. Used marijuana?	A	B
162. Used LSD, cocaine, amphetamines, or other illegal drugs?	A	B
163. Sold illegal drugs?	A	B
164. Carried a handgun?	A	B
165. Been members of a gang?	A	B
166. Dropped out of school?	A	B
167. Been suspended from school?	A	B
168. Stolen or tried to steal a motor vehicle such as a car or motorcycle?	A	B
169. Been arrested?	A	B

170. If you wanted to get a drug like cocaine, LSD, or amphetamines, how easy do you think it would be for you to get some?
- A. Very easy
 - B. Sort of easy
 - C. Sort of hard
 - D. Very hard

These next questions ask about education efforts.

171. During the past 12 months, have you talked with at least one of your parents about the dangers of tobacco, alcohol, or drug use? By parents we mean your biological parents, adoptive parents, stepparents, or adult guardians – whether or not they live with you.
- A. Yes
 - B. No
172. During the past 12 months, have you had a special class about drugs or alcohol in school?
- A. Yes
 - B. No
173. During the past 12 months, have you seen or heard any alcohol or drug prevention messages from sources outside school such as posters, pamphlets, radio, or TV?
- A. Yes
 - B. No

The next 14 questions ask about family, friends, personal beliefs, and community.

Family

174. How wrong do your parents feel it would be for you to smoke cigarettes?
- A. Very wrong
 - B. Wrong
 - C. A little bit wrong
 - D. Not wrong at all


TURN THE PAGE

 Continued on the Back

175. How wrong do your parents feel it would be for you to drink beer, wine, or liquor (for example, vodka, whiskey, or gin) regularly?
 A. Very wrong
 B. Wrong
 C. A little bit wrong
 D. Not wrong at all
176. How wrong do your parents feel it would be for you to smoke marijuana?
 A. Very wrong
 B. Wrong
 C. A little bit wrong
 D. Not wrong at all

Friends and Personal Beliefs

177. How wrong do you think it is for someone your age to smoke cigarettes?
 A. Very wrong
 B. Wrong
 C. A little bit wrong
 D. Not wrong at all
178. How wrong do you think it is for someone your age to drink beer, wine, or hard liquor (for example, vodka, whiskey, or gin) regularly?
 A. Very wrong
 B. Wrong
 C. A little bit wrong
 D. Not wrong at all
179. How wrong do you think it is for someone your age to smoke marijuana?
 A. Very wrong
 B. Wrong
 C. A little bit wrong
 D. Not wrong at all
180. How wrong do you think it is for someone your age to use LSD, cocaine, amphetamines, or another illegal drug?
 A. Very wrong
 B. Wrong
 C. A little bit wrong
 D. Not wrong at all

Community

181. How wrong would most adults in your neighborhood, or the area around where you live, think it is for someone your age to smoke cigarettes?
 A. Very wrong
 B. Wrong
 C. A little bit wrong
 D. Not wrong at all
182. How wrong would most adults in your neighborhood, or the area around where you live, think it is for someone your age to drink beer, wine, or hard liquor (for example, vodka, whiskey, or gin) regularly?
 A. Very wrong
 B. Wrong
 C. A little bit wrong
 D. Not wrong at all

183. How wrong would most adults in your neighborhood, or the area around where you live, think it is for someone your age to smoke marijuana?
 A. Very wrong
 B. Wrong
 C. A little bit wrong
 D. Not wrong at all
184. If someone your age drank some beer, wine or hard liquor in your neighborhood, he or she would be caught by the police.
 A. Very much true
 B. Pretty much true
 C. A little true
 D. Not at all true
185. If someone your age tried to purchase alcohol at a store in your neighborhood, he or she would be asked for ID or proof of age.
 A. Very much true
 B. Pretty much true
 C. A little true
 D. Not at all true
186. If there were a party in your neighborhood where people your age were drinking, the police would come and break it up.
 A. Very much true
 B. Pretty much true
 C. A little true
 D. Not at all true
187. If someone your age asks people 21 or older in your neighborhood to buy alcohol for them, no one would buy it for them.
 A. Very much true
 B. Pretty much true
 C. A little true
 D. Not at all true

The next question refers to the “Choking Game,” also called *Knock Out, Space Monkey, Flatlining, or The Fainting Game.*

188. This is an activity that some youth participate in to get a high by cutting off blood and oxygen to the brain using a variety of methods. Which of the following is true for you? **(Please mark all that apply.)**
 A. I have never heard of the Choking Game
 B. I’ve heard of someone participating in the Choking Game
 C. I have helped someone else participate in the Choking Game
 D. I have participated in the Choking Game myself

THANK YOU FOR YOUR PARTICIPATION