## 2017 FAIRFAX COUNTY Youth Survey of 8th, 10th, and 12th Grade Students

Thank you for agreeing to participate in this study. These questions ask your opinion about a number of things concerning you, your friends, your family, your neighborhood, and your community.

DO NOT write your name on this survey. Your individual answers to the survey are anonymous, which means that no one will know how you answered. Student answers will be summarized in a report that will not include anyone's name. This survey is completely voluntary. You can skip any questions that you do not want to answer.

Be sure to read the instructions below before you begin. Thank you very much.

## INSTRUCTIONS

- 1. This is not a test, so there are no right or wrong answers.
- 2. All of the questions should be answered by marking one of the answer spaces unless otherwise noted. If you do not find an answer that fits exactly, use the one that comes closest. If any question does not apply to you, or you are not sure what it means, just leave it blank.
- 3. For questions that have the following answers: NO!! no yes YES!!

Mark the big **YES!!** if you think the statement is DEFINITELY TRUE for you. Mark the little **yes** if you think the statement is MOSTLY TRUE for you. Mark the little **no** if you think the statement is MOSTLY NOT TRUE for you. Mark the big **NO!!** if you think the statement is DEFINITELY NOT TRUE for you.

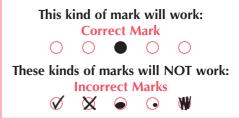
*Example:* Chocolate is the best ice cream flavor.

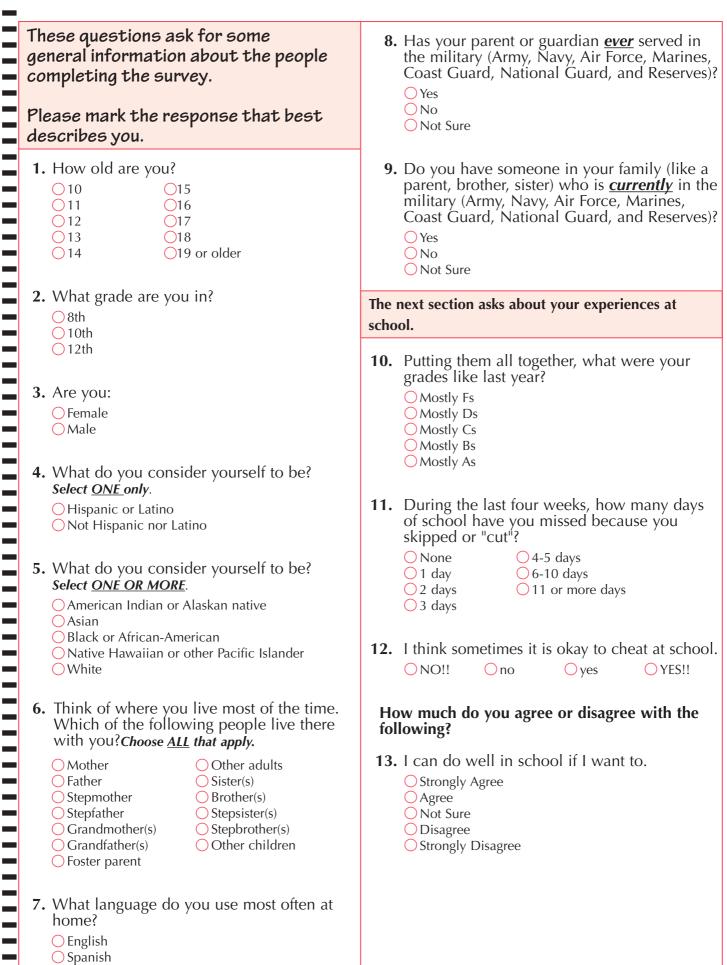
 $\bigcirc$  NO!!  $\bigcirc$  no  $\bigcirc$  yes  $\bigcirc$  YES!!

4. Your answers will be read automatically by a scanner and computer. Please follow these instructions carefully.

## MARKING INSTRUCTIONS

- a. Use a No. 2 pencil or a blue or black pen only.
- b. Do not use pens with ink that soaks through the paper.
- c. Make solid marks that <u>fill the response completely</u>.
- d. Make no stray marks on this form.





O Another Language

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<ul> <li>19. My teachers praise me when I have done well in school.</li> <li>NO!!</li> <li>no</li> <li>yes</li> <li>YES!!</li> <li>Never</li> <li>Less than once a month</li> <li>About once a month</li> <li>About once a month</li> <li>Once a week or more</li> </ul> 24volunteered to do community service? <ul> <li>Never</li> <li>I've done it, but not in the past year</li> <li>Once a week or more</li> </ul> 24volunteered to do community service? <ul> <li>Never</li> <li>I've done it, but not in the past year</li> <li>Once a week or more</li> </ul> 24volunteered to do community service? <ul> <li>Never</li> <li>I've done it, but not in the past year</li> <li>Less than once a month</li> <li>About once a month</li> <li>Once a week or more</li> </ul>		
<ul> <li>Conce a week or more</li> &lt;</ul>	<ul> <li>and bullying by other students is a problem at your school?</li> <li>Strongly Agree</li> <li>Agree</li> <li>Neutral</li> <li>Disagree</li> <li>Strongly Disagree</li> <li>15. My teacher notices when I am doing a good job and lets me know about it.</li> <li>NO!!</li> <li>no</li> <li>yes</li> <li>YES!!</li> <li>16. I feel safe at my school.</li> <li>NO!!</li> <li>no</li> <li>yes</li> <li>YES!!</li> <li>17. There are lots of chances for students at my school to talk with a teacher one-on-one.</li> <li>NO!!</li> <li>no</li> <li>yes</li> <li>YES!!</li> <li>18. The school lets my parents know when I have done something well.</li> <li>NO!!</li> <li>no</li> <li>yes</li> <li>YES!!</li> <li>19. My teachers praise me when I have done well in school.</li> </ul>	<ul> <li>computer for something that is not school work? (Count time spent on things such as Xbox, PlayStation, an iPad or other tablet, a smartphone, texting, YouTube, Instagram, Facebook or other social media.)</li> <li>Not at all</li> <li>Less than 1 hour per day</li> <li>1 hour per day</li> <li>2 hours per day</li> <li>3 hours per day</li> <li>4 hours per day</li> <li>5 or more hours per day</li> </ul> 22. Are there sports teams or other after-school activities for people your age available in your community? <ul> <li>NO!!</li> <li>no</li> <li>yes</li> <li>YES!!</li> </ul> How many times have you: 23participated in school or non-schoolbased activities after the regular school day ended (e.g., sports, clubs, art or music groups, student government, scouting, etc.)? <ul> <li>Never</li> <li>I've done it, but not in the past year</li> <li>Less than once a month</li> <li>About once a month</li> </ul>
time after school.       24volunteered to do community service?         On an average school day, how many hours do you:       1 kour part day         20watch TV?       Not at all         Less than 1 hour per day       2 hours per day         2 hours per day       3 hours per day         5 or more hours per day       5 or more hours per day         5 or more hours per day       25doing homework outside of school?         None       Half hour or less         Between a half hour and an hour         1 hour       2 hours         3 hours or more	○ NO!! ○ no ○ yes ○ YES!!	
<ul> <li>On an average school day, how many hours do you:</li> <li>20watch TV?</li> <li>Not at all</li> <li>Less than 1 hour per day</li> <li>2 hours per day</li> <li>3 hours per day</li> <li>4 hours per day</li> <li>5 or more hours per day</li> <li>5 or more hours per day</li> <li>2 hours per day</li> <li>3 hours or more hours per day</li> <li>4 hours per day</li> <li>5 or more hours per day</li> <li>6 hours per day</li> <li>7 hour per day</li> <li>9 hours or more</li> </ul>	The next section asks about how you spend your	
<ul> <li>On an average school day, how many hours do you:</li> <li>20watch TV?</li> <li>Not at all</li> <li>Less than 1 hour per day</li> <li>2 hours per day</li> <li>3 hours per day</li> <li>4 hours per day</li> <li>5 or more hours per day</li> <li>5 or more hours per day</li> <li>2 hours per day</li> <li>3 hours or more hours per day</li> <li>3 hours or more</li> </ul>	time after school.	,
	20watch TV? Not at all Less than 1 hour per day 1 hour per day 2 hours per day 3 hours per day 4 hours per day	<ul> <li>I've done it, but not in the past year</li> <li>Less than once a month</li> <li>About once a month</li> <li>Two or three times a month</li> <li>Once a week or more</li> </ul> On an average school day, how many hours do you spend: 25doing homework outside of school? <ul> <li>None</li> <li>Half hour or less</li> <li>Between a half hour and an hour</li> <li>1 hour</li> <li>2 hours</li> </ul>
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	26.	going to work? O None O Half hour or less	How important is each of the following to you in your life?
		<ul> <li>Half hour or less</li> <li>Between a half hour and an hour</li> <li>1 hour</li> <li>2 hours</li> <li>3 hours or more</li> </ul>	<ul> <li>33 Accepting responsibility for my actions when I make a mistake or get in trouble.</li> <li>Extremely Important</li> <li>Quite Important</li> <li>Not Sure</li> </ul>
	27.	staying after school to participate in a team, club, program, etc.?	<ul> <li>Somewhat Important</li> <li>Not Important</li> </ul>
	28.	<ul> <li>None</li> <li>Half hour or less</li> <li>Between a half hour and an hour</li> <li>1 hour</li> <li>2 hours</li> <li>3 hours or more</li> <li>participating in a team, club, program, etc.</li> </ul>	<ul> <li>34 Doing my best even when I have to do a job I don't like.</li> <li>Extremely Important</li> <li>Quite Important</li> <li>Not Sure</li> <li>Somewhat Important</li> <li>Not Important</li> </ul>
Ξ	20.	<ul> <li>Somewhere other than at school?</li> <li>None</li> <li>Half hour or less</li> </ul>	How much do you agree or disagree with the following?
		<ul> <li>Between a half hour and an hour</li> <li>1 hour</li> <li>2 hours</li> <li>3 hours or more</li> </ul>	<ul> <li>35 When things don't go well for me, I am good at finding a way to make things better.</li> <li>Strongly Agree</li> <li>Agree</li> <li>Not Sure</li> </ul>
	29.	How often do you attend religious services or activities? Never	O Disagree O Strongly Disagree
		<ul> <li>Rarely</li> <li>1-2 times a month</li> <li>About once a week or more</li> </ul>	<b>36.</b> I feel as if I can solve most problems in my life.
	exp	next section asks about your feelings and eriences in other parts of your life. Remember, your wers are confidential.	<ul> <li>Strongly Agree</li> <li>Agree</li> <li>Not Sure</li> <li>Disagree</li> <li>Strongly Disagree</li> </ul>
	30.	I ignore rules that get in my way. Very false Somewhat false Very true	<ul> <li>37I have much in life to be thankful for.</li> <li>Strongly Agree</li> <li>Agree</li> <li>Not Sure</li> <li>Disagree</li> </ul>
	31.	There are lots of adults in my neighborhood I could talk to about something important.	O Strongly Disagree How much do you do the following when you have a problem of any kind?
	32.	My neighbors notice when I am doing a good job and let me know about it. NO!! Ono Oyes OYES!!	<ul> <li>38. I try to find different solutions to the problem.</li> <li>A lot</li> <li>Sometimes</li> <li>A little</li> <li>Never</li> </ul>

The next section asks about your family. When answering these questions, please think about the people you consider to be your family; for example,	<b>45.</b> When I am not at home, one of my parents knows where I am and who I am with.	
parents, stepparents, grandparents, aunts, uncles, etc.	○ NO!! ○ no ○ yes ○ YES!!	
How wrong do your parents feel it would be for you to:	<b>46.</b> My family has clear rules about alcohol and drug use.	
<b>39.</b> drink beer, wine, or hard liquor (for	○ NO!! ○ no ○ yes ○ YES!!	
example, vodka, whiskey, or gin) regularly (at least once or twice a month)?	<b>47.</b> People in my family often insult or yell at each other.	
<ul> <li>Very wrong</li> <li>Wrong</li> <li>A little bit wrong</li> </ul>	○ NO!! ○ no ○ yes ○ YES!!	
O Not wrong at all	<b>48.</b> My parent has had his/her body hurt from	
<b>40.</b> smoke cigarettes?	actions (such as punching, kicking, choking, shoving, and pulling of hair) by a spouse/partner.	
⊖ Wrong	○ NO!! ○ no ○ yes ○ YES!!	
<ul> <li>A little bit wrong</li> <li>Not wrong at all</li> </ul>	<b>49.</b> If I had a personal problem, I could ask my mom or dad for help.	
<b>41.</b> smoke marijuana?	○ NO!! ○ no ○ yes ○ YES!!	
<ul> <li>Very wrong</li> <li>Wrong</li> </ul>		
<ul> <li>A little bit wrong</li> <li>Not wrong at all</li> </ul>	<b>50.</b> My parents ask me what I think before most family decisions affecting me are made.	
	○ NO!! ○ no ○ yes ○ YES!!	
<ul> <li>42. How many times have you changed homes since kindergarten?</li> <li>None</li> <li>1-2 times</li> <li>3-4 times</li> <li>5-6 times</li> <li>7 or more times</li> </ul>	The next section asks about things you might have done, or that might have happened to you. Some of the questions are about bullying. Bullying is when 1 or more students tease, threaten, spread rumors about, hit, shove, or hurt another student over and over again. Bullying is any aggressive and unwanted behavior that is intended to harm, intimidate, or humiliate the victim; involves a real or perceived power imbalance between the aggressor or aggressors and victim; and is repeated over time or causes severe emotional	
<b>43.</b> During the past 30 days, how often did you go hungry because there was not enough food in your home?	trauma. It is not bullying when 2 students of about the same strength or power argue or fight or tease each other in a friendly way. "Bullying" does not include ordinary teasing, horseplay, argument, or peer conflict.	
<ul> <li>Never</li> <li>Rarely</li> <li>Sometimes</li> </ul>	Remember, your answers are confidential.	
<ul> <li>Most of the time</li> <li>Always</li> </ul>	<b>51.</b> During the past 12 months, have you ever bullied someone else <b>on school property</b> ?	
<b>44.</b> I feel safe in my neighborhood, or the area around where I live.	○ Yes ○ No	
○ NO!! ○ no ○ yes ○ YES!!	<b>52.</b> During the past 12 months, have you ever bullied someone else <b>away from school property</b> ?	
	○ Yes ○ No	

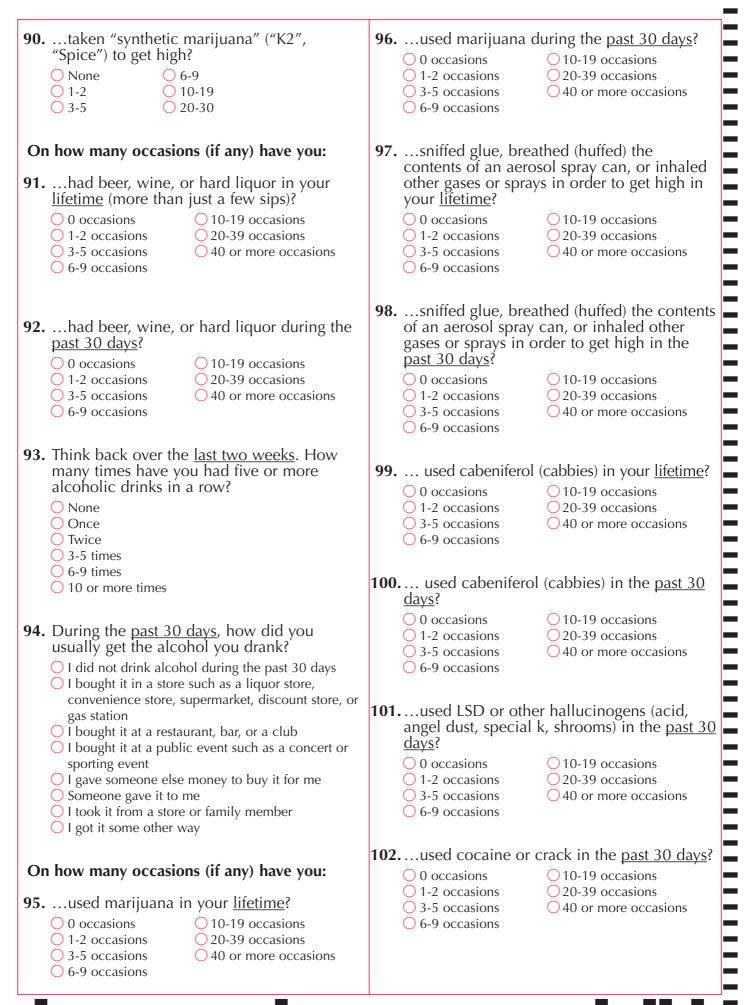
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Ξ	During the past 12 months, have <u>you</u> ever:	How many times in the past year has <u>anyone</u> done any of the following TO YOU:
	<b>53.</b> been bullied on school property?	,
	○ Yes ○ No	<b>60.</b> said something bad about your race or culture?
	<b>54.</b> been bullied away from school property?	Never10 to 19 times1 to 2 times20 to 29 times3 to 5 times30 to 39 times6 to 9 times40 or more times
	During the past 30 days, on how many days did you:	<b>61.</b> sexually harassed you?
	<ul> <li>55carry a weapon such as a gun, knife, or club?</li> <li>0 days</li> <li>1 day</li> </ul>	Never10 to 19 times1 to 2 times20 to 29 times3 to 5 times30 to 39 times6 to 9 times40 or more times
	<ul> <li>2 or 3 days</li> <li>4 or 5 days</li> <li>6 or more days</li> </ul>	<b>62.</b> How many times in the past year has a <u>parent or adult in your household</u> bullied, taunted, ridiculed, or teased you?
	<ul> <li>56carry a weapon such as a gun, knife, or club on school property?</li> <li>0 days</li> <li>1 day</li> <li>2 or 3 days</li> </ul>	Never10 to 19 times1 to 2 times20 to 29 times3 to 5 times30 to 39 times6 to 9 times40 or more times
	<ul> <li>4 or 5 days</li> <li>6 or more days</li> </ul>	<b>63.</b> Have you ever been physically forced to have sexual intercourse when you did not want to?
	<ul> <li>57. During the past 12 months, on how many days did you carry a gun? (Do not count the days when you carried a gun only for hunting or for a sport, such as target shooting.)</li> <li>0 days</li> <li>1 day</li> <li>2 or 3 days</li> <li>4 or 5 days</li> <li>6 or more days</li> </ul> How many times in the past year have you:	<ul> <li>Yes No</li> <li>64. During the past 30 days, how many times have you driven a car or other vehicle when you had been drinking alcohol?</li> <li>I did not drive a car or other vehicle during the past 30 days</li> <li>0 times</li> <li>1 time</li> <li>2 or 3 times</li> <li>4 or 5 times</li> <li>6 or more times</li> </ul>
		(F. During the past 20 days on how many days
	<ul> <li>58said something bad about someone's race or culture?</li> <li>Never</li> <li>10 to 19 times</li> <li>20 to 29 times</li> <li>3 to 5 times</li> <li>30 to 39 times</li> <li>6 to 9 times</li> <li>40 or more times</li> </ul> 59been suspended from school? <ul> <li>Never</li> <li>10 to 19 times</li> <li>20 to 29 times</li> <li>3 to 5 times</li> <li>20 to 29 times</li> <li>6 to 9 times</li> <li>40 or more times</li> </ul>	<ul> <li>65. During the past 30 days, on how many days did you text or e-mail while driving a car or other vehicle?</li> <li>I did not drive a car or other vehicle during the past 30 days</li> <li>0 days</li> <li>1 or 2 days</li> <li>3 to 5 days</li> <li>6 to 9 days</li> <li>10 to 19 days</li> <li>20 to 29 days</li> <li>All 30 days</li> </ul>

<ul> <li>73force you to do sexual things that you did not want to do? (Count such things as kissing, touching, or being physically forced to have sexual intercourse.)</li> <li>I did not date or go out with anyone during the past 12 months</li> <li>0 times</li> <li>1 time</li> <li>2 or 3 times</li> <li>4 or 5 times</li> <li>6 or more times</li> </ul>
The next section asks about electronic bullying, also known as cyberbullying. Electronic bullying is bullying through e-mail, chat rooms, texting, Instagram, Facebook, or other social media.
<ul> <li>74. During the past 12 months, have <u>you ever</u> <u>been</u> electronically bullied? (Count being bullied through texting, Instagram, Facebook, or other social media.)</li> <li>Yes</li> </ul>
<b>75.</b> How many times in the past year have <u>you</u>
been cyberbullied by a student who attends your school?         Never       10 to 19 times         0 1 to 2 times       20 to 29 times         0 3 to 5 times       30 to 39 times         0 6 to 9 times       40 or more times
<b>76.</b> How many times in the past year have <u>you</u>
cyberbullied a student <u>attending your school</u> ?
<ul> <li>Never 010 to 19 times</li> <li>1 to 2 times 20 to 29 times</li> <li>3 to 5 times 30 to 39 times</li> <li>6 to 9 times 40 or more times</li> </ul> 77. I have the right to say anything I want online, even if what I say hurts someone or violates someone's privacy.
Strongly Agree Agree Disagree Strongly Disagree

PLEASE DO NOT WRITE IN THIS AREA

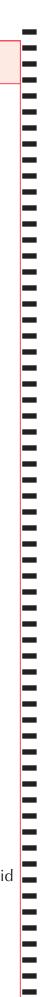
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The next section asks about your feelings during the past 12 months. Remember, your answers are confidential.	<b>84.</b> smoke marijuana regularly? ONo risk OSlight risk
During the past 12 months, did you ever:	O Moderate risk O Great risk
<ul> <li>78feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?</li> <li>Yes</li> <li>No</li> <li>79seriously consider attempting suicide?</li> <li>Yes</li> <li>No</li> </ul>	<ul> <li>85take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day?</li> <li>No risk</li> <li>Slight risk</li> <li>Moderate risk</li> <li>Great risk</li> </ul>
<ul> <li>80. During the past 12 months, how many times did you actually attempt suicide?</li> <li>0 times</li> <li>1 time</li> <li>2 or 3 times</li> <li>4 or 5 times</li> <li>6 or more times</li> </ul> 81. On a scale of 1 to 10 where 1 means you have "little or no stress" and 10 means you have "a great deal of stress," how would you rate your average level of stress during the past month? <ul> <li>1</li> <li>6</li> <li>2</li> <li>7</li> <li>3</li> <li>8</li> <li>4</li> <li>9</li> <li>5</li> <li>10</li> </ul>	<ul> <li>86. How frequently have you used smokeless tobacco (snuff, plug, dipping tobacco, chewing tobacco, snus, dissolvable tobacco) during the past 30 days?</li> <li>Never</li> <li>Once or twice</li> <li>Once in a while but not regularly</li> <li>About once a day</li> <li>More than once a day</li> </ul> 87. Have you ever smoked cigarettes in your lifetime? <ul> <li>Never</li> <li>Once or twice</li> <li>Once or twice</li> <li>Regularly in the past</li> <li>Regularly now</li> </ul>
The next section asks about your thoughts about and experiences with tobacco, alcohol, and other drugs.	<ul> <li>88. How often have you smoked cigarettes during the past 30 days?</li> <li>Not at all</li> <li>Less than one cigarette per day</li> </ul>
<ul> <li>How much do you think people risk harming themselves (physically or in other ways) if they:</li> <li>82smoke one or more packs of cigarettes</li> </ul>	<ul> <li>One to five cigarettes per day</li> <li>About one-half pack per day</li> <li>About one pack per day</li> <li>About one and one half packs per day</li> <li>Two or more packs per day</li> </ul>
<ul> <li>per day?</li> <li>No risk</li> <li>Slight risk</li> <li>Moderate risk</li> <li>Great risk</li> </ul>	<ul> <li>During the last 30 days, on how many days (if any) have you:</li> <li>89used electronic cigarettes (e-cigarettes)?</li> </ul>
<ul> <li>83try marijuana once or twice?</li> <li>No risk</li> <li>Slight risk</li> <li>Moderate risk</li> <li>Great risk</li> </ul>	None     6-9       1-2     10-19       3-5     20-30



1	103used methamp crank, or ice) in t	hetamine (speed, crystal, he past 30 days?	How old were you	u when you first:
	$\bigcirc$ 0 occasions $\bigcirc$ 1-2 occasions	$\bigcirc 10-19 \text{ occasions} \\ \bigcirc 20-39 \text{ occasions} \\ \bigcirc 20$	<b>110.</b> smoked a ci	garette, even just $\bigcirc$ 12

$\bigcirc$ 0 occasions $\bigcirc$ 10-19 occasions	<b>110.</b> smoked a cigarette, even just a puff?
<ul> <li>0 1-2 occasions</li> <li>0 3-5 occasions</li> <li>0 6-9 occasions</li> <li>0 10 15 occasions</li> <li>0 20-39 occasions</li> <li>0 40 or more occasions</li> </ul>	Never have121510 or younger1316111417 or older
<ul> <li>104taken steroids without a doctor's order in the past 30 days?</li> <li>0 occasions</li> <li>1-2 occasions</li> <li>3-5 occasions</li> <li>6-9 occasions</li> </ul>	<ul> <li>111had more than a sip or two of beer, wine, or hard liquor (for example, vodka, whiskey, or gin)?</li> <li>Never have</li> <li>12</li> <li>15</li> <li>10 or younger</li> <li>13</li> <li>16</li> <li>11</li> <li>14</li> <li>17 or older</li> </ul>
105used heroin in the past 30 days?0 occasions10-19 occasions1-2 occasions20-39 occasions3-5 occasions40 or more occasions6-9 occasions	<ul> <li>112began drinking alcoholic beverages regularly, that is, at least once or twice a month?</li> <li>Never have</li> <li>12</li> <li>15</li> <li>10 or younger</li> <li>13</li> <li>16</li> <li>11</li> <li>14</li> <li>17 or older</li> </ul>
<ul> <li>106taken painkillers (such as Oxycontin, Vicodin, Percoset, Codeine, and Opium) without a doctor's order in the past 30 days?</li> <li>0 occasions</li> <li>0 occasions</li> <li>1-2 occasions</li> <li>20-39 occasions</li> <li>3-5 occasions</li> <li>40 or more occasions</li> <li>6-9 occasions</li> </ul>	<ul> <li>113smoked marijuana?</li> <li>Never have</li> <li>12</li> <li>15</li> <li>10 or younger</li> <li>13</li> <li>16</li> <li>11</li> <li>14</li> <li>17 or older</li> </ul> How easy or hard would it be for you to get:
<ul> <li>107taken a prescription drug other than painkillers (such as Ritalin, Adderall, or Xanax) without a doctor's order in the past 30 days?</li> <li>0 occasions</li> <li>1-2 occasions</li> <li>3-5 occasions</li> <li>40 or more occasions</li> <li>6-9 occasions</li> </ul>	<ul> <li>114some beer, wine, or hard liquor (for example, vodka, whiskey, or gin)?</li> <li>Very hard</li> <li>Sort of hard</li> <li>Sort of easy</li> <li>Very easy</li> </ul> 115some cigarettes?
108used Ecstasy in the past 30 days?0 occasions10-19 occasions1-2 occasions20-39 occasions3-5 occasions40 or more occasions6-9 occasions40 or more occasions	<ul> <li>Very hard</li> <li>Sort of hard</li> <li>Sort of easy</li> <li>Very easy</li> <li>116drugs like cocaine, LSD, or amphetamines?</li> </ul>
<ul> <li>109taken over-the-counter drugs to get high in the past 30 days?</li> <li>0 occasions</li> <li>1-2 occasions</li> <li>3-5 occasions</li> <li>6-9 occasions</li> </ul>	<ul> <li>Very hard</li> <li>Sort of hard</li> <li>Sort of easy</li> <li>Very easy</li> </ul>

 PLEASE DO NOT WRITE IN THIS AREA



<b>117.</b> some marijuana? O Very hard	The next section asks about sexual behavior. Remember, your answers are confidential.
Sort of hard	
Sort of easy	<b>123.</b> Have you ever had sexual intercourse?
○ Very easy	○ Yes ○ No
How wrong do you think it is for someone your age to:	<b>124.</b> How old were you when you had sexual intercourse for the first time?
	O I have never had sexual intercourse
<b>118.</b> drink beer, wine, or hard liquor (for	11 years old or younger
example, vodka, whiskey, or gin) regularly	○ 12 years old
(at least once or twice a month)?	13 years old
O Very wrong	0 14 years old
O Wrong	0 15 years old
A little bit wrong	0 16 years old
○ Not wrong at all	○ 17 years old or older
<b>119.</b> smoke cigarettes?	<b>125.</b> During your life, with how many people
O Very wrong	have you had sexual intercourse?
⊖ Wrong	○ I have never had sexual intercourse
○ A little bit wrong	○ 1 person
○ Not wrong at all	O 2 people
	O 3 people
<b>120.</b> smoke marijuana?	0 4 people
	5 people
<ul> <li>Very wrong</li> <li>Wrong</li> </ul>	$\bigcirc$ 6 or more people
A little bit wrong	
<ul> <li>Not wrong at all</li> </ul>	
	<b>126.</b> During the past 3 months, with how many people have you had sexual intercourse?
<b>121</b> use LSD, cocaine, amphetamines, or	○ I have never had sexual intercourse
another illegal drug?	○ I have had sexual intercourse but not during the
Very wrong	past 3 months
Wrong	O 1 person
<ul> <li>A little bit wrong</li> <li>Not wrong at all</li> </ul>	2 people 3 people
	0 4 people
	$\bigcirc$ 5 people
<b>122.</b> How wrong would most adults in your	$\bigcirc$ 6 or more people
neighborhood, or the area around where	
you live, think it is for kids your age to use	
marijuana?	<b>127.</b> Did you drink alcohol or use drugs before
O Very wrong	you had sexual intercourse the last time?
O Wrong	O I have never had sexual intercourse
A little bit wrong	○ Yes
○ Not wrong at all	○ No
	<b>128.</b> The last time you had sexual intercourse, die
	you or your partner use a condom?
	O I have never had sexual intercourse
	○ Yes
	○ No

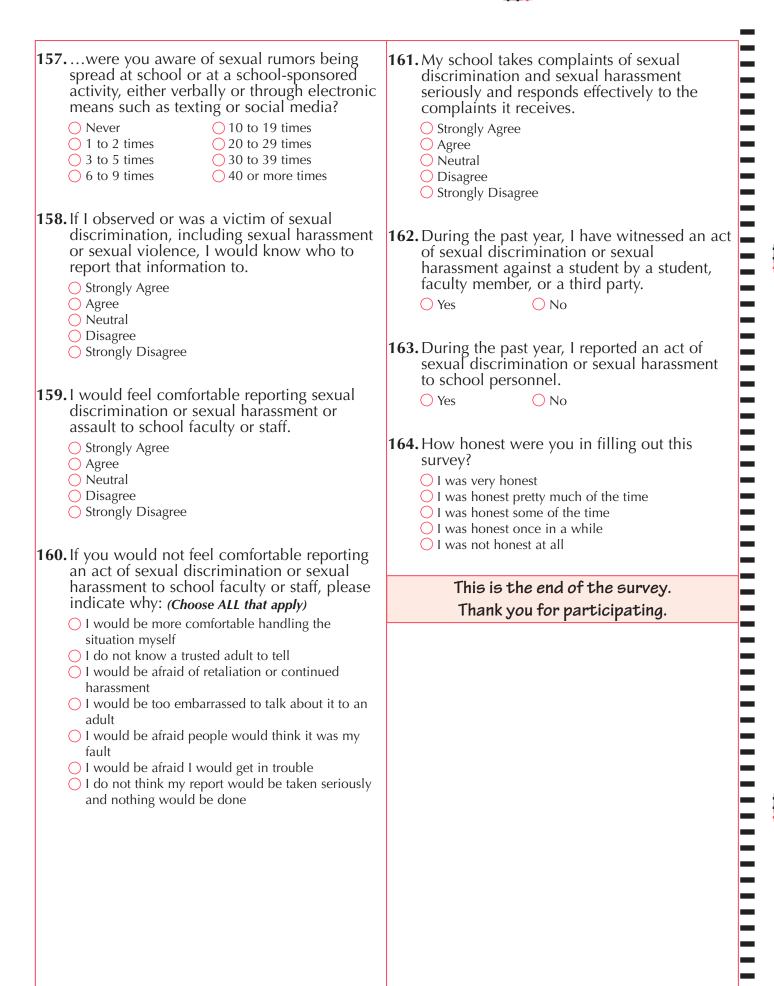
### **129.** The last time you had sexual intercourse, **133.**...eat fruit? (Do <u>not</u> count fruit juice.) what one method did you or your partner ○ I did not eat fruit during the past 7 days use to prevent pregnancy? Select only ONE $\bigcirc$ 1 to 3 times during the past 7 days response. $\bigcirc$ 4 to 6 times during the past 7 days ○ I have never had sexual intercourse $\bigcirc$ 1 time per day • No method was used to prevent pregnancy $\bigcirc$ 2 times per day O Birth control pills $\bigcirc$ 3 times per day Condoms $\bigcirc$ 4 or more times per day • An IUD (such as Mirena or ParaGard) or implant (such as Implanon or Nexplanon) **134.**...eat green salad? • A shot (such as Depo-Provera), patch (such as Ortho Evra), or birth control ring (such as O I did not eat green salad during the past 7 days NuvaRing) $\bigcirc$ 1 to 3 times during the past 7 days O Withdrawal or some other method $\bigcirc$ 4 to 6 times during the past 7 days O Not sure 0 1 time per day $\bigcirc$ 2 times per day $\bigcirc$ 3 times per day **130.** Have you ever had oral sex? $\bigcirc$ 4 or more times per day O Yes $\bigcirc$ No **135.**...eat potatoes? (Do <u>not</u> count french fries, **131.** Which of the following best describes you? fried potatoes, or potato chips.) O Heterosexual (straight) ○ I did not eat potatoes during the past 7 days Gay or lesbian $\bigcirc$ 1 to 3 times during the past 7 days O Bisexual $\bigcirc$ 4 to 6 times during the past 7 days $\bigcirc$ Not sure 0 1 time per day $\bigcirc$ 2 times per day $\bigcirc$ 3 times per day The next section asks about food you ate or drank during $\bigcirc$ 4 or more times per day 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 136....eat carrots? restaurants, or anywhere else. ○ I did not eat carrots during the past 7 days $\bigcirc$ 1 to 3 times during the past 7 days During the past 7 days, how many times did you: $\bigcirc$ 4 to 6 times during the past 7 days ○ 1 time per day **132.**...drink 100% fruit juices such as orange $\bigcirc$ 2 times per day juice, apple juice, or grape juice? (Do <u>not</u> $\bigcirc$ 3 times per day count punch, Kool-Aid, sports drinks, or $\bigcirc$ 4 or more times per day other fruit-flavored drinks.) ○ I did not drink 100% fruit juice during the past 7 days **137...**eat other vegetables? (Do <u>not</u> count green $\bigcirc$ 1 to 3 times during the past 7 days salad, potatoes, or carrots.) $\bigcirc$ 4 to 6 times during the past 7 days 0 1 time per day ○ I did not eat other vegetables during the past 7 days $\bigcirc$ 2 times per day $\bigcirc$ 1 to 3 times during the past 7 days $\bigcirc$ 3 times per day $\bigcirc$ 4 to 6 times during the past 7 days $\bigcirc$ 4 or more times per day $\bigcirc$ 1 time per day $\bigcirc$ 2 times per day $\bigcirc$ 3 times per day $\bigcirc$ 4 or more times per day

 PLEASE DO NOT WRITE IN THIS AREA

<ul> <li>138drink a can, bottle, or glass of soda or pop (such as Coke, Pepsi, or Sprite)? Do not include diet soda or diet pop.</li> <li>I did not drink soda or pop during the past 7 days</li> <li>I to 3 times during the past 7 days</li> <li>4 to 6 times during the past 7 days</li> <li>1 time per day</li> <li>2 times per day</li> <li>3 times per day</li> <li>4 or more times per day</li> </ul> 139drink a can, bottle, or glass of a sugar-	<ul> <li>During the past 30 days, did you:</li> <li>142go without eating for 24 hours or more (also called fasting) to lose weight or to keep from gaining weight?</li> <li>Yes</li> <li>No</li> <li>143take any diet pills, powders, or liquids without a doctor's advice to lose weight or to keep from gaining weight? <i>Do not include meal replacement products (such as Slim Fast)</i>.</li> <li>Yes</li> </ul>
<ul> <li>sweetened beverage such as lemonade, sweetened tea or coffee drinks, flavored milk, Snapple, or Sunny Delight? (Do not count soda or pop, sports drinks, energy drinks, or 100% fruit juice.)</li> <li>I did not drink sugar-sweetened beverages during the past 7 days</li> <li>I to 3 times during the past 7 days</li> </ul>	<ul> <li>144vomit or take laxatives to lose weight or to keep from gaining weight?</li> <li>Yes</li> <li>No</li> </ul> The next section asks about physical activity.
<ul> <li>4 to 6 times during the past 7 days</li> <li>4 to 6 times during the past 7 days</li> <li>1 time per day</li> <li>2 times per day</li> <li>3 times per day</li> <li>4 or more times per day</li> </ul>	145. 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.
<ul> <li>140did you drink a can, bottle, or glass of an energy drink, such as Red Bull or Jolt? (Do not count diet energy drinks or sports drinks such as Gatorade or PowerAde.)</li> <li>I did not drink energy drinks during the past 7 days</li> <li>1 to 3 times during the past 7 days</li> <li>4 to 6 times during the past 7 days</li> <li>1 time per day</li> <li>2 times per day</li> <li>3 times per day</li> <li>4 or more times per day</li> </ul>	<ul> <li>0 days</li> <li>3 days</li> <li>6 days</li> <li>1 day</li> <li>4 days</li> <li>7 days</li> <li>2 days</li> <li>5 days</li> </ul> <b>146.</b> On an average school night, how many hours of sleep do you get? <ul> <li>4 or less hours</li> <li>5 hours</li> <li>9 hours</li> <li>6 hours</li> <li>10 or more hours</li> <li>7 hours</li> </ul>
<ul> <li>141drink a can, bottle, or glass of a sports drink, such as Gatorade or PowerAde? (Do not count low-calorie sports drinks such as Propel or G2.)</li> <li>I did not drink sports drinks during the past 7 days</li> <li>I to 3 times during the past 7 days</li> <li>4 to 6 times during the past 7 days</li> <li>1 time per day</li> <li>2 times per day</li> <li>3 times per day</li> <li>4 or more times per day</li> </ul>	Think about the people who know you well. How do you think they would rate you on each of these?          People who know me would say this:         147. Giving up when things get hard for me is         ○ Not at all like me         ○ A little like me         ○ Quite like me         ○ Very much like me

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<ul> <li>148. Knowing how to say "no" when someone wants me to do things I know are wrong or dangerous is</li> <li>Not at all like me</li> <li>A little like me</li> <li>Somewhat like me</li> <li>Quite like me</li> <li>Very much like me</li> </ul> 149. Thinking through the possible good and bad results of different choices before I make decisions is <ul> <li>Not at all like me</li> <li>A little like me</li> <li>Somewhat like me</li> <li>A little like me</li> <li>Somewhat like me</li> <li>A little like me</li> <li>Somewhat like me</li> <li>Quite like me</li> <li>Quite like me</li> <li>Very much like me</li> <li>Very much like me</li> <li>How much do you agree or disagree with the following statements?:</li> </ul> 150. I get along well with students who are different from me. <ul> <li>Strongly Agree</li> <li>Agree</li> <li>Not Sure</li> <li>Disagree</li> <li>Strongly Agree</li> <li>Agree</li> <li>Not Sure</li> <li>Disagree</li> <li>Strongly Agree</li> <li>Agree</li> <li>Not Sure</li> <li>Disagree</li> <li>Strongly Disagree</li> </ul>	<ul> <li>153helped make sure that all people are treated fairly?</li> <li>Never</li> <li>Once</li> <li>5 or more times</li> <li>Twice</li> </ul> 154stood up for what you believed, even when it was unpopular to do so? <ul> <li>Never</li> <li>3-4 times</li> <li>Once</li> <li>5 or more times</li> </ul> The next section asks about sexual harassment and sexual discrimination. Sexual harassment is unwanted and unwelcome sexual behavior that interferes with someone's life at school or any school sponsored activity (like band, sports, field trips, bus rides, or school activities/clubs). Sexual harassment includes unwelcome sexual advances, regardless of sexual orientation; requests for sexual favors; spreading sexual harassment is NOT behaviors that a person likes or wants or is agreed to between two people (for example, kissing, touching, flirting that you both agree to). Sexual discrimination is a verbal, electronic or physical action that denigrates or shows hostility towards an individual because of his or her sex, sexual harassment and sexual discrimination may create an intimidating, hostile, or offensive learning environment for the victim and/or bystanders. How many times in the past year: 155has another student sexually harassed you
The next section asks about your experiences related to civic engagement.	0 1 to 2 times0 20 to 29 times0 3 to 5 times0 30 to 39 times0 6 to 9 times0 40 or more times
During the last 12 months, how many times have you:         152been a leader in a group or organization?         Over       3-4 times         Once       5 or more times         Twice	<ul> <li>156have you sexually harassed another students</li> <li>Never</li> <li>10 to 19 times</li> <li>20 to 29 times</li> <li>3 to 5 times</li> <li>30 to 39 times</li> <li>6 to 9 times</li> <li>40 or more times</li> </ul>

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