2017 FAIRFAX COUNTY Youth Survey of 6th 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 the directions tell you that you may choose more than one. 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!!

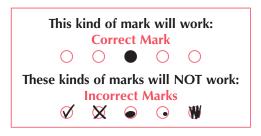
Mark the big **YES!!** if you think the statement is DEFINITELY TRUE for you. Mark the little **yes** if you think the statement is MOSTLY TRUE for you. Mark the little **no** if you think the statement is MOSTLY NOT TRUE for you. Mark the big **NO!!** if you think the statement is DEFINITELY NOT TRUE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

Example: Chocolate is the best ice cream flavor.

- NO!! no yes 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 fill the response completely.
- d. Make no stray marks on this form.





PLEASE DO NOT WRITE IN THIS AREA

	These questions ask for some general information about the people completing the survey. Please mark the response that best describes you.	8. Has your parent or guardian <u>ever</u> served in the military (Army, Navy, Air Force, Marines, Coast Guard, National Guard, and Reserves)? O Yes O No O Not Sure
	describes you.	
	1. How old are you? 10 or younger 11 12 13 14 or older	9. Do you have someone in your family (like a parent, brother, sister) who is <i>currently</i> in the military (Army, Navy, Air Force, Marines, Coast Guard, National Guard, and Reserves)? O Yes O No O Not Sure
•	2. What grade are you in?	The next section asks about your experiences at school.
	6th	35110011
	7th3. Are you:FemaleMale	10. Putting them all together, what were your grades like last year? Mostly Fs Mostly Ds Mostly Cs
		Mostly Bs
	4. What do you consider yourself to be?	Mostly As
	Select ONE only.	
	Hispanic or Latino	11. I think sometimes it is okay to cheat at school
-	Not Hispanic nor Latino	○ NO!! ○ no ○ yes ○ YES!!
	 5. What do you consider yourself to be? Select ONE OR MORE. American Indian or Alaskan native Asian Black or African-American Native Hawaiian or other Pacific Islander White 	How much do you agree or disagree with the following? 12. I can do well in school if I want to. Strongly Agree Agree Not Sure Disagree
	6. Think of where you live most of the time.	Strongly Disagree
	Which of the following people live there	
	with you? <i>Choose <u>ALL</u> that apply</i> .	13. I feel safe at my school.
	MotherOther adultsSister(s)StepmotherBrother(s)	○ NO!! ○ no ○ yes ○ YES!!
	 Stepmother Stepfather Grandmother(s) Brother(s) Stepsister(s) Stepbrother(s) 	14. My teacher notices when I am doing a good job and lets me know about it.
	Grandfather(s) Other children Foster parent	○ NO!! ○ no ○ yes ○ YES!!
	7. What language do you use most often at	15. The school lets my parents know when I have done something well.
	home? English Spanish Another Language	○ NO!! ○ no ○ yes ○ YES!!

The next section asks about your feelings and experiences in other parts of your life. Remember, your answers are confidential.		How important is each of the following to you in your life?
16.	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? O Yes No	 23 Accepting responsibility for my actions when I make a mistake or get in trouble. Extremely Important Quite Important Not Sure Somewhat Important Not Important
17.	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? 1	24 Doing my best even when I have to do a job I don't like. © Extremely Important © Quite Important © Not Sure © Somewhat Important © Not Important
10	Lignore rules that get in many year	How much do you agree or disagree with the following?
19.	I ignore rules that get in my way. Very false Somewhat false Somewhat true Very true There are lots of adults in my neighborhood I could talk to about something important. NO!! no yes YES!! My neighbors notice when I am doing a good job and let me know about it. NO!! no yes YES!!	 25 When things don't go well for me, I am good at finding a way to make things betted a strongly Agree
Du you	ring the past 30 days, on how many days did	Strongly Disagree
21.	carry a weapon such as a gun, knife, or club? O days O 1 day O 2 or 3 days	27I have much in life to be thankful for. Strongly Agree Agree Not Sure Disagree Strongly Disagree
22.	carry a weapon such as a gun, knife, or club on school property? O days O days O days O days O or more days O or 3 days	

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How much do you do the following when you have a problem of any kind?	33. staying after school to participate in a team, club, program, etc.?
28. I try to find different solutions to the problem. A lot Sometimes A little Never	 None Half hour or less Between a half hour and an hour 1 hour 2 hours 3 hours or more
How many times have you:	34. participating in a team, club, program, etc. somewhere other than at school?
 29participated in school or non-school-based activities after the regular school day ended (e.g., sports, clubs, art or music groups, student government, scouting, etc.)? Never I've done it, but not in the past year Less than once a month About once a month Once a week or more 30volunteered to do community service? Never I've done it, but not in the past year Less than once a month About once a month About once a month Two or three times a month Once a week or more 	 None Half hour or less Between a half hour and an hour 1 hour 2 hours 3 hours or more On an average school day, how many hours do you: 35watch 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 5 or more hours per day
On an average school day, how many hours do you spend: 31doing homework outside of school? None Half hour or less Between a half hour and an hour 1 hour 2 hours 3 hours or more 32going to work? None Half hour or less Between a half hour and an hour 1 hour 2 hours 3 hours or more	 36play video or computer games or use a 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.) Not at all Less than 1 hour per day 1 hour per day 2 hours per day 3 hours per day 5 or more hours per day 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. 0 days 4 days 1 day 5 days 2 days 6 days 3 days 7 days

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 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.	 44. How many times in the past year has a parent or adult in your household bullied, taunted, ridiculed, or teased you? Never 10 to 19 times 20 to 29 times 3 to 5 times 6 to 9 times 40 or more times Cyberbullying is electronic bullying, such as through e-mail, chat rooms, texting, Instagram, Facebook, or other social media. 45. How many times in the past year have you
Remember, your answers are confidential.	<u>been</u> cyberbullied by a student who <u>attends</u> <u>your school</u> ?
38. During the past 12 months, have you ever bullied someone else on school property ? ○ Yes ○ No	Never 10 to 19 times 1 to 2 times 20 to 29 times 3 to 5 times 30 to 39 times 6 to 9 times 40 or more times
39. During the past 12 months, have you ever bullied someone else away from school property?YesNo	46. How many times in the past year have <u>you</u> cyberbullied a student <u>attending your school</u> ? One Never 10 to 19 times 20 to 29 times 3 to 5 times 30 to 39 times 40 or more times
During the past 12 months, have <u>you</u> ever:	o to a more ames
 40been bullied on school property? Yes No 41been bullied away from school property? Yes No 42. How many times in the past year have you 	 47. Do you agree or disagree that harassment and bullying by other students is a problem at your school? Strongly agree Agree Neutral Disagree Strongly disagree
said something bad about someone's race or culture?	The next section asks about your experiences with tobacco, alcohol, and other drugs.
Never 10 to 19 times 1 to 2 times 20 to 29 times 3 to 5 times 30 to 39 times 6 to 9 times 40 or more times	How much do you think people risk harming themselves (physically or in other ways) if they:
How many times in the past year has anyone done any of the following TO YOU: 43said something bad about your race or culture? Never 10 to 19 times 20 to 29 times 30 to 39 times 6 to 9 times 40 or more times	 48smoke one or more packs of cigarettes per day? No risk Slight risk Moderate risk Great risk 49try marijuana once or twice? No risk Slight risk Moderate risk Great risk

50.	smoke marijuana regularly?	57.	During the past 30 days, on how many days did you use marijuana?
	○ No risk ○ Slight risk		None
	Moderate risk		1-2 days
	Great risk		3-5 days 6-9 days
			10 or more days
51.	take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day?		
	O No risk	58.	Have you ever, even once in your lifetime,
	O Slight risk		sniffed glue, breathed (huffed) the contents
	Moderate risk		of an aerosol spray can, or inhaled other gases or sprays in order to get high?
	Great risk		Yes ONo
F 2	Have you over smalled discrettes?		
52.	Have you ever smoked cigarettes? Never	59.	During the past 30 days, on how many days
	Once or twice		did you sniff glue, breathe (huff) the contents
	Once in a while but not regularly		of an aerosol spray can, or inhale other gases or sprays in order to get high?
	Regularly in the past Regularly now		None
	Regularry now		1-2 days
53	How often have you smoked cigarettes		3-5 days
33.	during the past 30 days?		○ 6-9 days ○ 10 or more days
	O Not at all		o to or more days
	Less than one cigarette per day	60.	Have you ever, even once in your lifetime,
	One to five cigarettes per day About one-half pack per day		used cabeniferol ("cabbies")?
	About one pack per day		○ Yes ○ No
	More than one pack per day		
		61.	During the past 30 days, on how many days
54.	Have you ever, even once in your lifetime, had more than a sip or two of beer, wine, or		did you use cabeniferol ("cabbies")?
	hard liquor?		None 1-2 days
	○ Yes ○ No		3-5 days
			○ 6-9 days ○ 10 or more days
55.	During the past 30 days, on how many days		To or more days
	did you drink beer, wine, or hard liquor?	62	Have you ever, even once in your lifetime,
	○ None ○ 1-2 days	02.	used other illegal drugs (not counting
	3-5 days		alcohol, tobacco, or marijuana)?
	6-9 days		○ Yes ○ No
	10 or more days		
E 6	Have you over even once in your lifetime	63.	During the past 30 days, on how many days
30.	Have you ever, even once in your lifetime, smoked marijuana?		did you use other illegal drugs (not counting alcohol, tobacco, or marijuana)?
	○ Yes ○ No		○ None
			1-2 days
			3-5 days 6-9 days
			10 or more days
	_		

How easy or hard would it be for you to get:	69. drink a can, bottle, or glass of a sugar-sweetened beverage such as lemonade,		
64beer, wine, or hard liquor (for example, vodka, whiskey, or gin)?Very hardSort of hard	sweetened beverage such as femoliade, 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.)		
Sort of Hard Very easy	 I did not drink sugar-sweetened beverages during the past 7 days 1 to 3 times during the past 7 days 		
65. some cigarettes? ○ Very hard ○ Sort of hard	 4 to 6 times during the past 7 days 1 time per day 2 times per day 3 times per day 		
O Sort of easy O Very easy	○ 4 or more times per day		
The next section asks 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.	 70did 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.) I did not drink energy drinks during the past 7 days 		
During the past 7 days, how many times did you:	1 to 3 times during the past 7 days 4 to 6 times during the past 7 days 1 time per day		
66eat fruit? Do not count fruit juice.I did not eat fruit during the past 7 days1 to 3 times during the past 7 days	2 times per day3 times per day4 or more times per day		
 4 to 6 times during the past 7 days 1 time per day 2 times per day 3 times per day 4 or more times per day 	71drink 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.)		
67. eat vegetables?	 I did not drink sports drinks during the past 7 days 1 to 3 times during the past 7 days 4 to 6 times during the past 7 days 		
 I did not eat vegetables during the past 7 days 1 to 3 times during the past 7 days 4 to 6 times during the past 7 days 1 time per day 2 times per day 3 times per day 4 or more times per day 8drink a can, bottle, or glass of soda or 	1 time per day2 times per day3 times per day4 or more times per day		
	The next few questions ask about your family. When answering these questions, please think about the people you consider to be your family; for example, parents, stepparents, grandparents, aunts, uncles, etc.		
pop (such as Coke, Pepsi, or Sprite)? Do not include diet soda or diet pop.I did not drink soda or pop during the past 7 days	72. How many times have you changed homes since kindergarten?		
1 to 3 times during the past 7 days 4 to 6 times during the past 7 days 1 time per day 2 times per day 3 times per day 4 or more times per day	○ None○ 1-2 times○ 3-4 times○ 5-6 times○ 7 or more times		
. ,	73. My parents ask me what I think before most family decisions affecting me are made. ONO!! Ono Oyes OYES!!		

74. If I had a personal problem, I could ask my mom or dad for help.	80. Knowing how to say "no" when someone wants me to do things I know are wrong or		
○ NO!! ○ no ○ yes ○ YES!!	dangerous is		
	○ Not at all like me ○ A little like me		
75. People in my family often insult or yell at	Somewhat like me		
each other.	Ouite like me		
○ NO!! ○ no ○ yes ○ YES!!	○ Very much like me		
 76. During the past 30 days, how often did you go hungry because there was not enough food in your home? Never Rarely Sometimes Most of the time Always 	81. Thinking through the possible good and bad results of different choices before I make decisions is Not at all like me A little like me Somewhat like me Quite like me Very much like me		
The next section asks about your experiences related to civic engagement.	How much do you agree or disagree with the following statements?:		
During the last 12 months, how many times have you:	82. I get along well with students who are different from me.		
77been a leader in a group or organization?	Strongly Agree		
Never	○ Agree ○ Not Sure		
Once	O Disagree		
○ Twice	Strongly Disagree		
3-4 times 5 or more times			
o s of more times	83. I know how to disagree without starting an		
78helped make sure that all people are	argument or fight.		
treated fairly?	Strongly AgreeAgree		
○ Never	Not Sure		
Once	O Disagree		
○ Twice ○ 3-4 times	Strongly Disagree		
5 or more times	04 11		
	84. How honest were you in filling out this survey?		
Think about the people who know you well. How do you think they would rate you on each of these?	I was very honest I was honest pretty much of the time		
People who know me would say this:	I was honest some of the time I was honest once in a while I was not honest at all		
79. Giving up when things get hard for me is	VI was not nonest at an		
○ Not at all like me			
O A little like me			
○ Somewhat like me ○ Quite like me			
Very much like me	This is the end of the survey.		
	Thank you for participating.		
	Thank Jos for par violpavilly.		