LOUISIANA CARING COMMUNITIES YOUTH SURVEY

** Thank you for agreeing to participate in this survey. The purpose of this survey is to learn how students in our schools feel about their community, family, peers, and school. The survey also asks about health behaviors.

** The survey is completely voluntary and anonymous. DO NOT put your name on the questionnaire.

** This is not a test, so there are no right or wrong answers. We would like you to work quickly so you can finish.

** All of the questions should be answered by completely filling in one of the answer spaces. 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. You can skip any question that you do not wish to answer.

** For questions that have the following answers: NO! no yes YES!
Mark (the BIG) NO! if you think the statement is DEFINITELY NOT TRUE for you.
Mark (the little) no if you think the statement is MOSTLY NOT TRUE for you.
Mark (the little) yes if you think the statement is MOSTLY TRUE for you.
Mark (the BIG) YES! if you think the statement is DEFINITELY TRUE for you.

Example: Chocolate is the best ice cream flavor.

NO! no yes YES!

In the example above, the student marked "yes" because he or she thinks the statement is mostly true.

** Please mark each question by completely filling in the circle or circles. ONLY USE A #2 PENCIL.

Please fill in the following information with the help of your teacher/survey assistant.

School Number: 

1. Are you: ○ MALE ○ FEMALE

2. How old are you?
   ○ 10 or younger ○ 12 ○ 14 ○ 16 ○ 18
   ○ 11 ○ 13 ○ 15 ○ 17 ○ 19 or older

3. What grade are you in?
   ○ 6th ○ 7th ○ 8th ○ 9th ○ 10th ○ 11th ○ 12th

4. Are you Hispanic or Latino? ○ Yes ○ No

5. What is your race? (Choose all that apply.)
   ○ American Indian or Alaska Native
   ○ Asian
   ○ Black or African American
   ○ Native Hawaiian or Other Pacific Islander
   ○ White
   ○ Unknown/Other _______________________

6. Think of where you live most of the time. Which of the following people live there with you? (Choose all that apply.)
   ○ Mother
   ○ Stepmother
   ○ Father
   ○ Stepmother
   ○ Foster Parent(s)
   ○ Grandparent(s)
   ○ Aunt
   ○ Other Adult(s)
   ○ Brother(s)
   ○ Stepbrother(s)
   ○ Sister(s)
   ○ Stepsister(s)
   ○ Other Children

7. Think of the adults you live with. What is the highest level of schooling any of them completed?
   ○ Completed grade school or less
   ○ Some high school
   ○ Completed high school
   ○ Some college
   ○ Completed college
   ○ Graduate or professional school after college
   ○ Don't know
   ○ Does not apply

The next section asks about your experiences at school.

8. Putting them all together, what were your grades like last year?
   ○ Mostly F's ○ Mostly B's
   ○ Mostly D's ○ Mostly A's
   ○ Mostly C's

PLEASE DO NOT WRITE IN THIS AREA

[SERIAL]
23. During the LAST FOUR WEEKS, how many whole days of school have you missed because you skipped or 'cut'?  
- None  
- 2 days  
- 4-5 days  
- 11 or more days  
- 1 day  
- 3 days  
- 6-10 days  

The next questions ask about your feelings and experiences in other parts of your life.

24. Think of your four best friends (the friends you feel closest to). In the past year (12 months), how many of your best friends have:  

<table>
<thead>
<tr>
<th>Number of friends</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. participated in clubs, organizations or activities at school?</td>
<td></td>
<td></td>
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<tr>
<td>b. smoked cigarettes?</td>
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<tr>
<td>c. tried beer, wine, or hard liquor (for example, vodka, whiskey, or gin) when their parents didn't know about it?</td>
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<td>d. made a commitment to stay drug-free?</td>
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<tr>
<td>e. used marijuana?</td>
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<tr>
<td>f. tried to do well in school?</td>
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<tr>
<td>g. used LSD, cocaine, amphetamines, or other illegal drugs?</td>
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<tr>
<td>h. been suspended from school?</td>
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<tr>
<td>i. liked school?</td>
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<tr>
<td>j. carried a handgun?</td>
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<tr>
<td>k. sold illegal drugs?</td>
<td></td>
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<tr>
<td>l. regularly attended religious services?</td>
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<tr>
<td>m. stolen or tried to steal a motor vehicle such as a car or motorcycle?</td>
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<tr>
<td>n. been arrested?</td>
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<tr>
<td>o. dropped out of school?</td>
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</tr>
</tbody>
</table>

25. What are the chances you would be seen as cool if you:  

<table>
<thead>
<tr>
<th>Very good chance</th>
<th>Pretty good chance</th>
<th>Some chance</th>
<th>Little chance</th>
<th>No or very little chance</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. smoked cigarettes?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. worked hard at school?</td>
<td></td>
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<tr>
<td>c. began drinking alcoholic beverages regularly, that is, at least once or twice a month?</td>
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<tr>
<td>d. defended someone who was being verbally abused at school?</td>
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<tr>
<td>e. smoked marijuana?</td>
<td></td>
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<tr>
<td>f. carried a handgun?</td>
<td></td>
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<tr>
<td>g. regularly volunteered to do community service?</td>
<td></td>
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</tbody>
</table>
26. How old were you when you first:

a. smoked marijuana?
[ ] 10 or younger
[ ] 11
[ ] 12
[ ] 13
[ ] 14
[ ] 15
[ ] 16
[ ] 17 or older

b. smoked a cigarette, even just a puff?
[ ] 10 or younger
[ ] 11
[ ] 12
[ ] 13
[ ] 14
[ ] 15
[ ] 16
[ ] 17 or older

c. had more than a sip or two of beer, wine, or hard liquor (for example, vodka, whiskey, or gin)?
[ ] 10 or younger
[ ] 11
[ ] 12
[ ] 13
[ ] 14
[ ] 15
[ ] 16
[ ] 17 or older

d. began drinking alcoholic beverages regularly, that is, at least once or twice a month?
[ ] 10 or younger
[ ] 11
[ ] 12
[ ] 13
[ ] 14
[ ] 15
[ ] 16
[ ] 17 or older

e. sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high?
[ ] 10 or younger
[ ] 11
[ ] 12
[ ] 13
[ ] 14
[ ] 15
[ ] 16
[ ] 17 or older

f. got suspended from school?
[ ] 10 or younger
[ ] 11
[ ] 12
[ ] 13
[ ] 14
[ ] 15
[ ] 16
[ ] 17 or older

g. got arrested?
[ ] 10 or younger
[ ] 11
[ ] 12
[ ] 13
[ ] 14
[ ] 15
[ ] 16
[ ] 17 or older

h. carried a handgun?
[ ] 10 or younger
[ ] 11
[ ] 12
[ ] 13
[ ] 14
[ ] 15
[ ] 16
[ ] 17 or older

i. attacked someone with the idea of seriously hurting them?
[ ] 10 or younger
[ ] 11
[ ] 12
[ ] 13
[ ] 14
[ ] 15
[ ] 16
[ ] 17 or older

27. How wrong do you think it is for someone your age to:

a. take a handgun to school?
[ ] Not at all
[ ] A little bit
[ ] Wrong
[ ] Very wrong

b. steal anything worth more than $5?
[ ] Not at all
[ ] A little bit
[ ] Wrong
[ ] Very wrong

c. pick a fight with someone?
[ ] Not at all
[ ] A little bit
[ ] Wrong
[ ] Very wrong

d. attack someone with the idea of seriously hurting them?
[ ] Not at all
[ ] A little bit
[ ] Wrong
[ ] Very wrong

e. stay away from school all day when their parents think they are at school?
[ ] Not at all
[ ] A little bit
[ ] Wrong
[ ] Very wrong

f. drink beer, wine, or hard liquor (for example, vodka, whiskey, or gin) regularly?
[ ] Not at all
[ ] A little bit
[ ] Wrong
[ ] Very wrong

g. smoke cigarettes?
[ ] Not at all
[ ] A little bit
[ ] Wrong
[ ] Very wrong

h. smoke marijuana?
[ ] Not at all
[ ] A little bit
[ ] Wrong
[ ] Very wrong

i. use LSD, cocaine, amphetamines, or another illegal drug?
[ ] Not at all
[ ] A little bit
[ ] Wrong
[ ] Very wrong

28. Now think about all the students in your grade at your school. How many of them do you think:

a. smoke one or more cigarettes a day?
[ ] Almost all (91-100%)
[ ] Most (71-90%)
[ ] Half to most (51-70%)
[ ] Some to half (31-50%)
[ ] Some (11-30%)
[ ] Few (1-10%)
[ ] None (0%)

b. drank alcohol sometime in the past month?
[ ] Almost all (91-100%)
[ ] Most (71-90%)
[ ] Half to most (51-70%)
[ ] Some to half (31-50%)
[ ] Some (11-30%)
[ ] Few (1-10%)
[ ] None (0%)

c. used marijuana sometime in the past month?
[ ] Almost all (91-100%)
[ ] Most (71-90%)
[ ] Half to most (51-70%)
[ ] Some to half (31-50%)
[ ] Some (11-30%)
[ ] Few (1-10%)
[ ] None (0%)

d. used an illegal drug in the past month (not including marijuana)?
[ ] Almost all (91-100%)
[ ] Most (71-90%)
[ ] Half to most (51-70%)
[ ] Some to half (31-50%)
[ ] Some (11-30%)
[ ] Few (1-10%)
[ ] None (0%)

29. How many times in the past year (12 months) have you:

a. been suspended from school?
[ ] 1 to 2 times
[ ] 3 to 5 times
[ ] 6 to 9 times
[ ] 10 to 19 times
[ ] 20 to 29 times
[ ] 30 to 39 times
[ ] 40+ times

b. carried a handgun?
[ ] 1 to 2 times
[ ] 3 to 5 times
[ ] 6 to 9 times
[ ] 10 to 19 times
[ ] 20 to 29 times
[ ] 30 to 39 times
[ ] 40+ times

c. sold illegal drugs?
[ ] 1 to 2 times
[ ] 3 to 5 times
[ ] 6 to 9 times
[ ] 10 to 19 times
[ ] 20 to 29 times
[ ] 30 to 39 times
[ ] 40+ times

d. stolen or tried to steal a motor vehicle such as a car or motorcycle?
[ ] 1 to 2 times
[ ] 3 to 5 times
[ ] 6 to 9 times
[ ] 10 to 19 times
[ ] 20 to 29 times
[ ] 30 to 39 times
[ ] 40+ times

e. participated in clubs, organizations or activities at school?
[ ] 1 to 2 times
[ ] 3 to 5 times
[ ] 6 to 9 times
[ ] 10 to 19 times
[ ] 20 to 29 times
[ ] 30 to 39 times
[ ] 40+ times

f. been arrested?
[ ] 1 to 2 times
[ ] 3 to 5 times
[ ] 6 to 9 times
[ ] 10 to 19 times
[ ] 20 to 29 times
[ ] 30 to 39 times
[ ] 40+ times

g. done extra work on your own for school?
[ ] 1 to 2 times
[ ] 3 to 5 times
[ ] 6 to 9 times
[ ] 10 to 19 times
[ ] 20 to 29 times
[ ] 30 to 39 times
[ ] 40+ times

h. attacked someone with the idea of seriously hurting them?
[ ] 1 to 2 times
[ ] 3 to 5 times
[ ] 6 to 9 times
[ ] 10 to 19 times
[ ] 20 to 29 times
[ ] 30 to 39 times
[ ] 40+ times

i. been drunk or high at school?
[ ] 1 to 2 times
[ ] 3 to 5 times
[ ] 6 to 9 times
[ ] 10 to 19 times
[ ] 20 to 29 times
[ ] 30 to 39 times
[ ] 40+ times

j. volunteered to do community service?
[ ] 1 to 2 times
[ ] 3 to 5 times
[ ] 6 to 9 times
[ ] 10 to 19 times
[ ] 20 to 29 times
[ ] 30 to 39 times
[ ] 40+ times

k. taken a handgun to school?
[ ] 1 to 2 times
[ ] 3 to 5 times
[ ] 6 to 9 times
[ ] 10 to 19 times
[ ] 20 to 29 times
[ ] 30 to 39 times
[ ] 40+ times

30. Have you ever belonged to a gang?
[ ] No
[ ] Yes, belong now
[ ] No, but would like to
[ ] Yes, but would like to get out
[ ] Yes, in the past
31. How often have you done the following for money, possessions, or anything of value:

- gambled at a casino?
- played the lottery or lottery scratch-off tickets?
- bet on sporting events?
- bet money on horse races?
- played bingo for money or prizes?
- gambled on the internet?
- bet on dice games such as craps?
- bet on games of personal skill such as pool, darts, or bowling?
- bet on video poker or other gambling machines?

32. During the past 30 days, how many times did you DRIVE a car or other vehicle when you had been drinking alcohol?

- I do not drive.
- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

33. During the past 30 days, how many times did you RIDE in a car or other vehicle driven by someone who had been drinking alcohol?

- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

34. During the past 30 days, how often did you:

- feel nervous?
- feel hopeless?
- feel restless or fidgety?
- feel so depressed that nothing could cheer you up?
- feel that everything was an effort?
- feel worthless?

35. During the past 12 months, do you recall hearing, reading, or watching an advertisement about the prevention of substance use? (Choose all that apply.)

- No
- Yes, about alcohol use
- Yes, about tobacco use
- Yes, about drug use

36. During the past 12 months, have you talked with at least one of your parents about the dangers of tobacco, alcohol, or drug use? (Choose all that apply.)

- No
- Yes, about alcohol use
- Yes, about tobacco use
- Yes, about drug use

37. I think sometimes it’s okay to cheat at school.

- NO!
- no
- yes
- YES!

38. Sometimes I think that life is not worth it.

- NO!
- no
- yes
- YES!

39. At times I think I am no good at all.

- NO!
- no
- yes
- YES!

40. All in all, I am inclined to think that I am a failure.

- NO!
- no
- yes
- YES!

41. In the past year, have you felt depressed or sad MOST days, even if you felt okay sometimes?

- NO!
- no
- yes
- YES!

42. It is all right to beat up people if they start the fight.

- NO!
- no
- yes
- YES!

43. I think it is okay to take something without asking if you can get away with it.

- NO!
- no
- yes
- YES!

44. Are you currently taking any medication that was prescribed for you because you had problems with your behavior or emotions?

- Yes
- No

45. How much do you think people risk harming themselves (physically or in other ways) if they:

- smoke one or more packs of cigarettes per day?
- try marijuana once or twice?
- smoke marijuana regularly?
- take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day?
- have five or more drinks of an alcoholic beverage once or twice a week?
- smoke marijuana once or twice a week?
- use prescription drugs that are not prescribed to them?

46. Think back over the last two weeks. How many times have you had five or more alcoholic drinks in a row?

- None
- 3-5 times
- Once
- 6-9 times
- Twice
- 10 or more times
### On how many occasions (if any) have you:

<table>
<thead>
<tr>
<th>Question</th>
<th>OCCASIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>47. had alcoholic beverages (beer, wine, or hard liquor) to drink in your lifetime -- more than just a few sips?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>48. had beer, wine, or hard liquor to drink during the past 30 days?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>49. been drunk or very high from drinking alcoholic beverages during the past 30 days?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>50. used marijuana (grass, pot) or hashish (hash, hash oil) in your lifetime?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>51. used marijuana (grass, pot) or hashish (hash, hash oil) during the past 30 days?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>52. used LSD (acid) or other hallucinogens (like PCP, mescaline, peyote, &quot;shrooms&quot; or psilocybin) in your lifetime?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>53. used LSD (acid) or other hallucinogens (like PCP, mescaline, peyote, &quot;shrooms&quot; or psilocybin) during the past 30 days?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>54. used cocaine or crack in your lifetime?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>55. used cocaine or crack during the past 30 days?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>56. sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high in your lifetime?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>57. sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high during the past 30 days?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>58. used phenoxydine (pox, px, breeze) in your lifetime?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>59. used phenoxydine (pox, px, breeze) during the past 30 days?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>60. used methamphetamines (meth, speed, crank, crystal meth) in your lifetime?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>61. used methamphetamines (meth, speed, crank, crystal meth) in the past 30 days?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>62. used stimulants, other than methamphetamines (such as amphetamines, Adderall, Dexedrine, Ritalin, ) without a doctor telling you to take them, in your lifetime?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>63. used stimulants, other than methamphetamines (such as amphetamines, Adderall, Dexedrine, Ritalin) without a doctor telling you to take them, during the past 30 days?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>64. used sedatives (tranquilizers, such as Ativan, Klonopin, Valium, Xanax, barbiturates, or sleeping pills) without a doctor telling you to take them, in your lifetime?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>65. used sedatives (tranquilizers, such as Ativan, Klonopin, Valium, Xanax, barbiturates, or sleeping pills) without a doctor telling you to take them, during the past 30 days?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>66. used heroin or other opiates in your lifetime?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>67. used heroin or other opiates during the past 30 days?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>68. used narcotic prescription drugs (such as OxyContin, methadone, morphine, codeine, Demerol, Vicodin, Percocet, Suboxone) without a doctor telling you to take them, in your lifetime?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>69. used narcotic prescription drugs (such as OxyContin, methadone, morphine, codeine, Demerol, Vicodin, Percocet, Suboxone) without a doctor telling you to take them, during the past 30 days?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>70. used MDMA (X,E, &quot;Molly&quot;, or ecstasy) in your lifetime?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>71. used MDMA (X,E, &quot;Molly&quot;, or ecstasy) in the past 30 days?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>72. used synthetic marijuana or herbal incense products (such as K2, Spice, or Gold) in the past 30 days?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>73. used other synthetic drugs (such as Bath Salts like Ivory Wave or White Lightning) in the past 30 days?</td>
<td>0 1-2 3-5 6-9 10-19 20-39 40+</td>
</tr>
<tr>
<td>74. Have you ever used smokeless tobacco (chew, snuff, plug, dipping tobacco, or chewing tobacco)?</td>
<td>Never</td>
</tr>
<tr>
<td></td>
<td>Once or twice</td>
</tr>
<tr>
<td></td>
<td>Once in a while, but not regularly</td>
</tr>
<tr>
<td>75. How frequently have you used smokeless tobacco during the past 30 days?</td>
<td>Never</td>
</tr>
<tr>
<td></td>
<td>Once or twice</td>
</tr>
<tr>
<td></td>
<td>Once or twice per week</td>
</tr>
</tbody>
</table>
76. Have you ever smoked cigarettes?
   - Never
   - Regularly in the past
   - Regularly now
   - Once in a while, but not regularly

77. How frequently have you smoked cigarettes during the past 30 days?
   - Not at all
   - Less than one cigarette per day
   - One to five cigarettes per day
   - About one-half pack per day
   - About one pack per day
   - About one and one-half packs per day
   - Two packs or more per day

78. Have you ever tried electronic cigarettes, e-cigarettes, vape pens, or e-hookahs?
   - No
   - Yes

79. During the past 30 days, on how many days did you:
   a. smoke cigarettes?
   b. smoke tobacco in a hookah or waterpipe?
   b. use electronic cigarettes, e-cigarettes, vape pens, or e-hookahs?

80. How wrong would most adults (over 21) in your neighborhood think it is for kids your age:
   a. to use marijuana?
   b. to drink alcohol?
   c. to smoke cigarettes?

81. I feel safe in my neighborhood.

82. If a kid smoked marijuana in your neighborhood, would he or she be caught by the police?

83. If a kid drank some beer, wine, or hard liquor (for example, vodka, whiskey, or gin) in your neighborhood, would he or she be caught by the police?

84. If a kid carried a handgun in your neighborhood, would he or she be caught by the police?

85. If someone was drinking and driving in your neighborhood, would they get caught by the police?

86. If the police caught a kid drinking alcohol in your neighborhood, would he or she be in serious trouble?

87. If you wanted to get some cigarettes, how easy would it be for you to get some?

88. 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?

89. In your community, how easy would it be for someone under 21 to buy alcohol from a store?

90. If you wanted to get a drug like cocaine, LSD, or amphetamines, how easy would it be for you to get some?

91. If you wanted to get a handgun, how easy would it be for you to get one?

92. If you wanted to get some marijuana, how easy would it be for you to get some?

93. How wrong do your friends feel it would be for YOU to:
   a. have one or two drinks of an alcoholic beverage nearly every day?
   b. smoke tobacco?
   c. smoke marijuana?
   d. use prescription drugs not prescribed to you?

94. How do you feel about someone your age having one or two drinks of an alcoholic beverage nearly every day?
   - Neither approve nor disapprove
   - Somewhat disapprove
   - Strongly disapprove
   - Don't know or can't say

95. Have any of your brothers or sisters ever:
   - I don't have any brothers or sisters
   - Yes
   - No
   a. drunk beer, wine, or hard liquor (for example, vodka, whiskey, or gin)?
   b. smoked marijuana?
   c. smoked cigarettes?
   d. taken a handgun to school?
   e. been suspended or expelled from school?
96. How wrong do your parents feel it would be for YOU to:

- a. drink beer, wine, or hard liquor (for example, vodka, whiskey, or gin) regularly?
- b. smoke cigarettes?
- c. smoke marijuana?
- d. steal something worth more than $5?
- e. draw graffiti, write things, or draw pictures on buildings or other property (without the owner's permission)?
- f. pick a fight with someone?
- g. have one or two drinks of an alcoholic beverage nearly every day?
- h. smoke tobacco?
- i. use prescription drugs not prescribed to you?

97. I feel safe at home where I live.

98. The rules in my family are clear.

99. People in my family often insult or yell at each other.

100. When I am not at home, one of my parents knows where I am and who I am with.

101. We argue about the same things in my family over and over.

102. If you drank some beer, wine, or hard liquor (for example, vodka, whiskey, or gin) without your parents' permission, would you be caught by your parents?

103. My family has clear rules about alcohol and drug use.

104. If you carried a handgun without your parents' permission, would you be caught by your parents?

105. If you skipped school, would you be caught by your parents?

106. My parents ask if I've gotten my homework done.

107. People in my family have serious arguments.

108. Would your parents know if you did not come home on time?

109. It is important to be honest with your parents, even if they become upset or you get punished.

110. Have you ever been impacted by someone's suicide?

111. If you marked "Yes" on q110 above, please rate on a scale of 1-5 how it impacted you.

112. Have you ever considered attempting suicide?

113. Have you ever attempted suicide?

114. Has there ever been a time in your life when you experienced a loss by suicide?

115. If you marked "Yes" to question 114 above, how long ago did the suicide happen?

116. If you marked "Yes" to question 114 above, was the loss a blood relative or friend? (Mark all that apply.)

117. If you marked "Yes" to question 114, have you spoken to anyone about your loss?

118. During the past 12 months, did you ever seriously consider attempting suicide?

119. During the past 12 months, did you make a plan about how you would attempt suicide?

120. During the past 12 months, how many times did you actually attempt suicide?

121. During the past 12 months, how many times did you do something to purposefully hurt yourself without wanting to die, such as cutting or burning yourself on purpose?
122. Has anyone in your family ever had severe alcohol or drug problems?
   - No
   - Yes

123. How wrong do you think it is for adults over 21 to drink alcohol in public?
   - Very wrong
   - A little bit wrong
   - Not wrong at all

124. How wrong do you think it is for adults over 21 to get drunk or be drunk in public?
   - Very wrong
   - A little bit wrong
   - Not wrong at all

125. During a typical week, how many days do all or most of your family eat at least one meal together? Number of days:
   - 0
   - 1
   - 2
   - 3
   - 4
   - 5
   - 6
   - 7

126. About how many adults (over 21) have you known personally who in the past year have:
   - used marijuana, crack, cocaine, or other drugs?
   - sold or dealt drugs?
   - done other things that could get them in trouble with the police, like stealing, selling stolen goods, mugging or assaulting others, etc.?
   - gotten drunk or high?

127. In the past 12 months:
   - Have you spent more time using alcohol or drugs than you intended?
   - No
   - Yes

128. Have you neglected some of your usual responsibilities because of using alcohol or drugs?

129. Have you wanted to cut down on your alcohol or drug use?

130. Has anyone objected to your alcohol or drug use?

131. Did you frequently find yourself thinking about using alcohol or drugs?

132. Did you use alcohol or drugs to relieve feelings such as sadness, anger, or boredom?

133. 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?
   - 0 days
   - 1 day
   - 4 or 5 days
   - 6 or more days
   - 2 or 3 days

134. During the past 12 months, how often have you been picked on or bullied by a student ON SCHOOL PROPERTY?
   - 0 days
   - 1 day
   - 4 or 5 days
   - 6 or more days
   - 2 or 3 days

135. Did you drink alcohol in the past year?
   - No (GO TO QUESTION 133)
   - Yes (GO TO QUESTION 132)

136. If you drank alcohol (not just a sip or taste) in the past year, how did you get it? (Mark the number of times for each).
   - 0 times
   - 1 or 2 times
   - 3 to 5 times
   - More than 5 times

   a. I bought it myself from a store, restaurant, bar, or club with fake ID.
   b. I bought it myself from a store, restaurant, bar, or club without fake ID.
   c. A stranger bought it for me.
   d. I got it from someone I know age 21 or older.
   e. I got it if from someone I know under age 21.
   f. I got it from a family member or relative other than my parents.
   g. I got it from home with my parents' permission.
   h. I got it from home without my parents' permission.
   i. I got it in another way.

137. How honest were you in filling out this survey?
   - I was very honest.
   - I was honest most of the time.
   - I was honest some of the time.
   - I was honest once in a while.
   - I was not honest at all.