1. 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.

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

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

4. 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.

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

---

**PREVENTION NEEDS ASSESSMENT SURVEY**

**School District: **

**Charter School Letter: **

**School Number: **

**What is the ZIP code where you live?**

---

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

2. What grade are you in?
   - 6th
   - 7th
   - 8th
   - 9th
   - 10th
   - 11th
   - 12th

3. What is your race? (Mark ALL that apply.)
   - American Indian or Alaska Native
   - Asian
   - Black or African American
   - Hispanic or Latino
   - Native Hawaiian or Other Pacific Islander
   - White

4. Are you:  
   - Male
   - Female

5. Some people describe themselves as transgender when their sex at birth does not match the way they think or feel about their gender. Are you transgender?
   - No, I am not transgender
   - Yes, I am transgender
   - I am not sure if I am transgender
   - I do not know what this question is asking

6. Which of the following best describe you?
   - Heterosexual (straight)
   - Bisexual
   - Gay or lesbian
   - Not sure/Other

7. 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

8. Think of where you live most of the time. Which of the following people live there with you? (Mark ALL that apply.)
   - Mother
   - Stepmother
   - Father
   - Stepfather
   - Grandparent(s)
   - Aunt
   - Uncle
   - Other Adult(s)
   - Foster Parent(s)
   - Brother(s)
   - Sister(s)
   - Stepbrother(s)
   - Stepfather(s)
   - Stepsister(s)
   - Other Children

9. 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
   - Does not apply
   - Completed college or professional school after college
   - Graduate or professional school after college
   - Don't know

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

11. How important do you think the things you are learning in school are going to be for your later life?
    - Very important
    - Quite important
    - Fairly important
    - Slightly important
    - Not at all important

12. How interesting are most of your courses to you?
    - Very interesting and stimulating
    - Quite interesting
    - Fairly interesting
    - Slightly interesting
    - Not at all interesting

---

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

---

**PLEASE DO NOT WRITE IN THIS AREA**

---

**SERIAL**
23. How often do you feel that the school work you are assigned is meaningful and important?

<table>
<thead>
<tr>
<th>Almost always</th>
<th>Often</th>
<th>Sometimes</th>
<th>Seldom</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

24. How often do you feel that the school work you are assigned is meaningful and important?

- Definitely Yes
- Somewhat Yes
- Somewhat No
- Definitely No

25. During the last 12 months, how often (if at all) have you been threatened or harassed over the internet, by email, or by someone using a cell phone?

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

26. During the last 12 months, how often (if at all) have you been picked on or bullied by a student ON SCHOOL PROPERTY?

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

27. During the last 4 weeks, how many (if any) whole days of school have you missed because you skipped or "cut"?

- None
- 1 day
- 2 days
- 3 days
- 4-5 days
- 6-10 days
- 11 or more days

28. During the past 30 days, on how many days (if any) 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
- 2 or 3 days
- 4 or 5 days
- 6 or more days

29. How safe do you feel in each of the following areas at your school (before and after school)?

<table>
<thead>
<tr>
<th>Very safe</th>
<th>Somewhat safe</th>
<th>Somewhat unsafe</th>
<th>Very unsafe</th>
</tr>
</thead>
</table>
| a. Playgrounds or fields
| b. Lunchroom/Cafeteria
| c. Classrooms
| d. Bathrooms
| e. Parking lots
| f. Stairs and hallways
| g. On the school bus

30. How worried, if at all, are you about the possibility of each of the following things happening at your school?

<table>
<thead>
<tr>
<th>Very worried</th>
<th>Somewhat worried</th>
<th>Not too worried</th>
<th>Not at all worried</th>
</tr>
</thead>
</table>
| a. Getting bullied
| b. Gun violence or active shooter situation
| c. Suicide by a student
| d. Gang activity
| e. Students using alcohol or drugs
| f. Earthquake/Fire

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

<table>
<thead>
<tr>
<th>Great risk</th>
<th>Moderate risk</th>
<th>Slight risk</th>
<th>No risk</th>
</tr>
</thead>
</table>
| a. smoke one or more packs of cigarettes per day?
| b. try marijuana once or twice?
| c. smoke marijuana regularly?
| d. take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day?
| e. have five or more drinks of an alcoholic beverage once or twice each weekend?
| f. have five or more drinks of an alcoholic beverage once or twice a week?
| g. smoke marijuana once or twice a week?
| h. use prescription drugs that are not prescribed to them?
| i. smoke 1-5 cigarettes per day?
| j. use vape products such as e-cigarettes, vape pens, mods, or pod vapes like JUUL or Puff Bars?
32. If ever, how old were you when you first:

a. used marijuana (grass, pot, cannabis, weed) or hashish (hash, hash oil)?

b. smoked a cigarette, even just a puff?

c. used a vape product (e-cigarettes, vape pens, mods, or pod vapes like JUUL or Puff Bars)?

d. had more than a sip or two of beer, wine, or hard liquor (for example, vodka, whiskey, or tequila)?

e. began drinking alcoholic beverages regularly, that is, at least once or twice a month?

f. sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high?

g. got suspended from school?

h. got arrested?

i. carried a handgun?

j. attacked someone with the idea of seriously hurting them?

k. used LSD (acid) or other hallucinogens (like PCP, mescaline, "shrooms" or psilocybin)?

l. used cocaine (like cocaine powder) or "crack" (cocaine in chunk or rock form)?

m. used phencyclidine (pox, px, breeze)?

n. used methamphetamine (meth, speed, crank, crystal meth)?

o. used prescription stimulants or amphetamines (such as Adderall, Ritalin, or Dexedrine) without a doctor telling you to take them?

p. used prescription sedatives including barbiturates or sleeping pills (such as phenobarbital, Tuinal, Seconal, Ambien, Lunesta, or Sonata) without a doctor telling you to take them?

q. used prescription tranquilizers (such as Librium, Valium, Xanax, Ativan, Soma, or Klonopin) without a doctor telling you to take them?

r. used narcotic prescription drugs (such as OxyContin, methadone, morphine, codeine, Demerol, Vicodin, Percocet) without a doctor telling you to take them?

s. used heroin?

33. Think back over the last two weeks. If any, how many times have you had five or more alcoholic drinks in a row?

- None
- 1 to 2 times
- 3-5 times
- 6-9 times
- 10 or more times

34. My parents expect me to eat dinner at home with my family.

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

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

37. People in my family have serious arguments.

38. My parents have set clear rules and expectations with me about NOT drinking ANY alcohol.

39. Sometimes, I think that life is not worth it.

40. At times, I think I am no good at all.

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

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

43. If ever, how many times in the past year (12 months) have you:

a. been suspended from school?

b. carried a handgun?

c. sold illegal drugs?

d. stolen or tried to steal a motor vehicle such as a car or motorcycle?

e. participated in clubs, organizations or activities at school?

f. been arrested?

g. done extra work on your own for school?

h. attacked someone with the idea of seriously hurting them?

i. been drunk or high at school?

j. volunteered to do community service?

k. taken a handgun to school?
On how many occasions (if any) have you:

<table>
<thead>
<tr>
<th>Question</th>
<th>Alcoholic Beverages</th>
<th>Marijuana</th>
<th>LSD</th>
<th>Cocaine</th>
<th>Glue</th>
<th>Meth</th>
<th>Stimulants</th>
<th>Sedatives</th>
<th>Tranquilizers</th>
<th>Steroids</th>
<th>Systemic Anabolic Steroids</th>
</tr>
</thead>
<tbody>
<tr>
<td>44. had alcoholic beverages (beer, wine, or hard liquor) to drink in your lifetime -- more than just a few sips?</td>
<td>✔️</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>45. had beer, wine, or hard liquor to drink during the past 30 days?</td>
<td>✔️</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>46. used marijuana (grass, pot, cannabis, weed) or hashish (hash, hash oil) during the past 30 days?</td>
<td>✔️</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>47. used LSD (acid) or other hallucinogens (like PCP, mescaline, &quot;shrooms&quot; or psilocybin) during the past 30 days?</td>
<td>✔️</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>48. used cocaine (like cocaine powder) or &quot;crack&quot; (cocaine in chunk or rock form) during the past 30 days?</td>
<td>✔️</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>49. 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>✔️</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>50. used phenoxydine (pox, px, breeze) during the past 30 days?</td>
<td>✔️</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>51. used methamphetamines (meth, speed, crank, crystal meth) in the past 30 days?</td>
<td>✔️</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>52. used prescription stimulants or amphetamines (such as Adderall, Ritalin, or Dexedrine) without a doctor telling you to take them, during the past 30 days?</td>
<td>✔️</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>53. used prescription sedatives including barbiturates or sleeping pills (such as phenobarbital, Tuinal, Seconal, Ambien, Lunesta, or Sonata) without a doctor telling you to take them, during the past 30 days?</td>
<td>✔️</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>54. used prescription tranquilizers (such as Librium, Valium, Xanax, Ativan, Soma, or Klonopin) without a doctor telling you to take them, during the past 30 days?</td>
<td>✔️</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>55. used narcotic prescription drugs (such as OxyContin, methadone, morphine, codeine, Demerol, Vicodin, Percocet) without a doctor telling you to take them, during the past 30 days?</td>
<td>✔️</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>56. used heroin during the past 30 days?</td>
<td>✔️</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>57. used steroids or anabolic steroids (such as Anadrol, Oxandrin, Durabolin, Equipoise or Depotesterone) in the past 30 days?</td>
<td>✔️</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Answer questions 58 to 63 for both alcohol and drugs.

<table>
<thead>
<tr>
<th>Question</th>
<th>Alcohol</th>
<th>Drugs</th>
</tr>
</thead>
<tbody>
<tr>
<td>In the past 12 months:</td>
<td>Don't use</td>
<td>Don't use</td>
</tr>
<tr>
<td>58. have you spent more time using alcohol or drugs than you intended?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>59. have you neglected some of your usual responsibilities because of using alcohol or drugs?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>60. have you wanted to cut down on your alcohol or drug use?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>61. has anyone objected to your alcohol or drug use?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>62. did you frequently find yourself thinking about using alcohol or drugs?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>63. did you use alcohol or drugs to relieve feelings such as sadness, anger, or boredom?</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

### 65. Have you ever tried:
- a. cigarettes, even just one puff?
- b. cigars, cigarillos, or little cigars, even a puff?
- c. tobacco in a hookah or waterpipe?
- d. vape products containing nicotine (such as e-cigarettes, vape pens, mods, or pod vapes like JUUL or Puff Bars)?
- e. vape products containing marijuana?
- f. chewing tobacco, snuff, dip, or snus (moist smokeless tobacco usually sold in small pouches)?
- g. nicotine pouches like Zyn, On, and Velo?
- h. nicotine lozenges (small hard or soft tablets containing nicotine that slowly dissolve in the mouth such as Velo or Roque)?

### 66. How frequently (if ever) 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
### 67. During the past 30 days, on how many days did you:

<table>
<thead>
<tr>
<th>Event</th>
<th>0 days</th>
<th>1 or 2 days</th>
<th>3 to 5 days</th>
<th>6 to 9 days</th>
<th>10 to 19 days</th>
<th>20 to 29 days</th>
<th>All 30 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. smoke cigarettes?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. smoke cigars, cigarillos, or little cigars?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. smoke tobacco in a hookah or waterpipe?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. use vape products containing nicotine (such as e-cigarettes, vape pens, mods, or pod vapes like JUUL or Puff Bars)?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. use vape products containing marijuana?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. use chewing tobacco, snuff, dip, or snus (moist smokeless tobacco usually sold in small pouches)?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. use nicotine pouches like Zyn, On, and Velo?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h. use nicotine lozenges (small hard or soft tablets containing nicotine that slowly dissolve in the mouth such as Velo or Rogue)?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Event</th>
<th>Not wrong at all</th>
<th>A little bit wrong</th>
<th>Wrong</th>
<th>Very wrong</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. take a handgun to school?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. steal anything worth more than $5?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. pick a fight with someone?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. attack someone with the idea of seriously hurting them?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. stay away from school all day when their parents think they are at school?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. drink beer, wine, or hard liquor (for example, vodka, whiskey, or tequila) regularly?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. smoke cigarettes?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h. smoke marijuana?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. use LSD, cocaine, amphetamines, or another illegal drug?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 69. How wrong do your friends feel it would be for YOU to:

<table>
<thead>
<tr>
<th>Event</th>
<th>Not wrong at all</th>
<th>A little bit wrong</th>
<th>Wrong</th>
<th>Very wrong</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. have one or two drinks of an alcoholic beverage nearly every day?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. smoke tobacco?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. smoke marijuana?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. use prescription drugs not prescribed to you?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 70. How wrong do your parents feel it would be for YOU to:

<table>
<thead>
<tr>
<th>Event</th>
<th>Not wrong at all</th>
<th>A little bit wrong</th>
<th>Wrong</th>
<th>Very wrong</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. drink beer, wine, or hard liquor (for example, vodka, whiskey, or tequila) regularly?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. smoke cigarettes?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. smoke marijuana?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. steal something worth more than $5?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. draw graffiti, write things, or draw pictures on buildings or other property (without the owner’s permission)?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. pick a fight with someone?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. have one or two drinks of an alcoholic beverage nearly every day?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h. use prescription drugs not prescribed to you?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. use vape products such as e-cigarettes, vape pens, mods, or pod vapes like JUUL or Puff Bars?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 71. During the past year, did you drink alcohol at any of the following places? (Mark the number of times for each.)

<table>
<thead>
<tr>
<th>Event</th>
<th>0 times</th>
<th>1 or 2 times</th>
<th>3 to 5 times</th>
<th>6 or more times</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. At my home or someone else's home without any parent permission</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. At my home with my parents' permission</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. At someone else's home with their parents’ permission</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. In a car</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. At or near school</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. Someplace outside of town (for example, on public lands, in the desert, in a campground, etc.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. In another place________________________________</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 72. How wrong would most adults (over 21) in your neighborhood think it is for kids your age:

<table>
<thead>
<tr>
<th>Event</th>
<th>Not wrong at all</th>
<th>A little bit wrong</th>
<th>Wrong</th>
<th>Very wrong</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. to use marijuana?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. to drink alcohol?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. to smoke cigarettes?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. to use e-cigarettes, vape pens, mods, or pod vapes like JUUL or Puff Bars?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 73. In the past seven days, I have felt:

<table>
<thead>
<tr>
<th>Event</th>
<th>Always</th>
<th>Often</th>
<th>Sometimes</th>
<th>Rarely</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. left out.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. that people barely know me.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. isolated from others.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. that people are around me but not with me.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
74. Think of your four best friends (the friends you feel closest to). In the past year (12 months), how many (if any) 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>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>b. smoked cigarettes?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>c. tried beer, wine, or hard liquor (for example, vodka, whiskey, or tequila) when their parents didn’t know about it?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>d. made a commitment to stay drug-free?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>e. used marijuana?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>f. tried to do well in school?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>g. used LSD, cocaine, amphetamines, or other illegal drugs?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>h. been suspended from school?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>i. liked school?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>j. carried a handgun?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>k. sold illegal drugs?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>l. regularly attended religious services?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>m. stolen or tried to steal a motor vehicle such as a car or motorcycle?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>n. been arrested?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>o. dropped out of school?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

75. Have any of your brothers or sisters ever:

- ☐ Yes
- ☐ No

<table>
<thead>
<tr>
<th>Activity</th>
<th>☐</th>
<th>☐</th>
<th>☐</th>
<th>☐</th>
<th>☐</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. drunk beer, wine, or hard liquor (for example, vodka, whiskey, or tequila)?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>b. smoked marijuana?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>c. smoked cigarettes?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>d. taken a handgun to school?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>e. been suspended or expelled from school?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>f. used a vape product (e-cigarettes, vape pens, mods, or pod vapes like JUUL or Puff Bars)?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

77. I like to see how much I can get away with.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Very false</th>
<th>Somewhat false</th>
<th>Very true</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. drunk beer, wine, or hard liquor (for example, vodka, whiskey, or tequila)?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>b. smoked marijuana?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>c. smoked cigarettes?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>d. taken a handgun to school?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>e. been suspended or expelled from school?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>f. used a vape product (e-cigarettes, vape pens, mods, or pod vapes like JUUL or Puff Bars)?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

78. I ignore rules that get in my way.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Very false</th>
<th>Somewhat false</th>
<th>Very true</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. drunk beer, wine, or hard liquor (for example, vodka, whiskey, or tequila)?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>b. smoked marijuana?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>c. smoked cigarettes?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>d. taken a handgun to school?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>e. been suspended or expelled from school?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>f. used a vape product (e-cigarettes, vape pens, mods, or pod vapes like JUUL or Puff Bars)?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
101. Now think about all the students in your grade at your school. How many of them do you think:

- 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%)

a. smoke one or more cigarettes a day?  

b. drank alcohol sometime in the past month?  

c. used marijuana sometime in the past month?  

d. used an illegal drug in the past month (not including marijuana)?  

e. used a vape product (e-cigarettes, vape pens, mods, or pod vapes like JUUL or Puff Bars)?

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

- A little of the time  
- Most of the time  
- All of the time  
- None of the time

a. feel nervous?  

b. feel hopeless?  

c. feel restless or fidgety?  

d. feel so depressed that nothing could cheer you up?  

e. feel that everything was an effort?  

f. feel worthless?  

103. How often in the last 30 days (if at all) did you talk to an adult (parent, doctor, counselor, teacher, etc.) about feeling very sad, hopeless, or suicidal?

- I have not felt this way in the past 30 days  
- 0 times  
- 1 time  
- 2 to 4 times  
- 5 or more times

104. Do you think it’s OK to seek help and talk to a professional counselor, therapist, or doctor if you’ve been feeling very sad, hopeless, or suicidal?

- Yes  
- No  
- I think it’s OK for other people to seek help, but not for me to seek help

105. On an average school night, how many hours of sleep do you get?

- 4 hours or less  
- 5 hours  
- 6 hours  
- 7 hours  
- 8 hours  
- 9 hours  
- 10 or more hours  
- I don’t know

106. 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?

- No  
- Yes

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

- No  
- Yes

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

- No  
- Yes

109. During the past 12 months, how many times (if any) did you actually attempt suicide?

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

110. My parents notice when I am doing a good job and let me know about it.

- Never or almost never  
- Sometimes  
- Often  
- All the time

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

- Definitely No  
- Somewhat No  
- No  
- Yes  
- Definitely Yes

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

- Definitely No  
- Somewhat No  
- No  
- Yes  
- Definitely Yes

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

- Definitely No  
- Somewhat No  
- No  
- Yes  
- Definitely Yes

114. I feel safe in my neighborhood.

- Never  
- Sometimes  
- Often  
- Always

115. My parents ask if I’ve gotten my homework done.

- Never  
- Sometimes  
- Often  
- Always

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

- No  
- Yes

117. The rules in my family are clear.

- Never  
- Sometimes  
- Often  
- Always

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

- Never  
- Sometimes  
- Often  
- Always

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

- Never  
- Sometimes  
- Often  
- Always

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

- Never  
- Sometimes  
- Often  
- Always

121. It is alright to beat up people if they start the fight.

- Never  
- Sometimes  
- Often  
- Always

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

- Never  
- Sometimes  
- Often  
- Always

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

- Never  
- Sometimes  
- Often  
- Always

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

- Never  
- Sometimes  
- Often  
- Always

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

- Never  
- Sometimes  
- Often  
- Always

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

- Never  
- Sometimes  
- Often  
- Always
127. What are the chances you would be seen as cool if you:

- smoked cigarettes? [Very good chance, Pretty good chance, Some chance, No or very little chance]
- worked hard at school? [Very good chance, Pretty good chance, Some chance, No or very little chance]
- began drinking alcoholic beverages regularly, that is, at least once or twice a month? [Very good chance, Pretty good chance, Some chance, No or very little chance]
- defended someone who was being verbally abused at school? [Very good chance, Pretty good chance, Some chance, No or very little chance]
- carried a handgun? [Very good chance, Pretty good chance, Some chance, No or very little chance]
- regularly volunteered to do community service? [Very good chance, Pretty good chance, Some chance, No or very little chance]

128. About how many adults (over 21), if any, have you known personally who in the past year have:

- used marijuana, crack, cocaine, or other drugs? [5 or more adults, 3-4 adults, 2 adults, 1 adult, 0 adults]
- sold or dealt drugs? [Very good chance, Pretty good chance, Some chance, No or very little chance]
- done other things that could get them in trouble with the police, like stealing, selling stolen goods, mugging, or assaulting others, etc? [Very good chance, Pretty good chance, Some chance, No or very little chance]
- gotten drunk or high? [Very good chance, Pretty good chance, Some chance, No or very little chance]

129. Has anyone in your family ever had severe alcohol or drug problems?

- No
- Yes

130. Which is your religious preference? (Choose the ONE religion with which you identify the most.)

- Catholic
- Protestant (such as Baptists, Presbyterians, or Lutherans)
- Jewish
- Another religion
- LDS (Mormon)
- No religious preference

131. This past year, did you experience any of the following? (Mark ALL that apply.)

- One or more people living in my home lost their job
- I had to move or change homes in the past year
- Skipped one or more meals because my family didn’t have enough money to buy food
- I had difficulty keeping up with schoolwork because I didn’t have access to a reliable computer or internet service
- I did not have a quiet place at home to study
- None of these

132. During the past 30 days, did you drive a car or other vehicle when you had been drinking alcohol? If so, how many times?

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

133. If you have felt very sad, hopeless, or suicidal in the past 30 days, whom did you talk to about it? (Mark ALL that apply.)

- I have not felt this way in the past 30 days
- I felt this way but did not talk to anyone about it
- Parent
- School Counselor
- Friend/Peer
- School Nurse
- Teacher
- Therapist
- Doctor
- Other adult
- Clergy (e.g. Bishop, Priest or Nun, Minister, Pastor)

134. During the past 12 months, how many times (if any) did someone you were dating or going out with physically hurt you on purpose? (Count such things as being hit, slammed into something, or injured with an object or weapon.)

- I did not date or go out with anyone during the past 12 months
- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

135. In the past 12 months, have you ever done something to purposefully hurt yourself without wanting to die, such as cutting or burning yourself on purpose? If so, how many times did you do so?

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

136. On an average school day, how many hours do you use an electronic device for something that is not school work? (Count time spent on things such as Xbox, PlayStation, texting, YouTube, Instagram, Facebook, or other social media.)

- 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

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.

Responses

Extra Questions
Start with 201

Thank you for completing the survey

Bach Harrison, L.L.C.
bach-harrison.com