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**

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

<table>
<thead>
<tr>
<th>School District:</th>
<th>Charter School:</th>
<th>School Number:</th>
<th>What is the ZIP code where you live?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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? (Select one or more)
   - 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. 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
   - Stepmother
   - Stepfather
   - Foster Parent(s)
   - Other Adult(s)
   - Brother(s)
   - Other Children

8. 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

9. 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

10. 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

11. How interesting are most of your courses to you?
    - Very interesting and stimulating
    - Quite interesting
    - Fairly interesting
    - Slightly interesting
    - Not at all interesting
### 22. Now thinking back over the past year in school, how often did you:

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Seldom</th>
<th>Sometimes</th>
<th>Often</th>
<th>Almost always</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td>enjoy being in school?</td>
<td> </td>
<td> </td>
<td></td>
<td> </td>
</tr>
<tr>
<td>b.</td>
<td>hate being in school?</td>
<td> </td>
<td> </td>
<td></td>
<td> </td>
</tr>
<tr>
<td>c.</td>
<td>try to do your best work in school?</td>
<td> </td>
<td> </td>
<td></td>
<td> </td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>Slight risk</th>
<th>Moderate risk</th>
<th>No risk</th>
<th>Great risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td>smoke one or more packs of cigarettes per day?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td>try marijuana once or twice?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c.</td>
<td>smoke marijuana regularly?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d.</td>
<td>take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.</td>
<td>have five or more drinks of an alcoholic beverage once or twice each weekend?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f.</td>
<td>have five or more drinks of an alcoholic beverage once or twice a week?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g.</td>
<td>smoke marijuana once or twice a week?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h.</td>
<td>use prescription drugs that are not prescribed to them?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i.</td>
<td>smoke 1-5 cigarettes per day?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>j.</td>
<td>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>
</tr>
</tbody>
</table>
31. 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 phenoxydine (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?

32. 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

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

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

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

36. People in my family have serious arguments.

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

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

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

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

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

42. 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:

1. had alcoholic beverages (beer, wine, or hard liquor) to drink in your *lifetime* -- more than just a few sips?  
2. had beer, wine, or hard liquor to drink during the *past 30 days*?  
3. used marijuana (grass, pot, cannabis, weed) or hashish (hash, hash oil) during the *past 30 days*?  
4. used LSD (acid) or other hallucinogens (like PCP, mescaline, "shrooms" or psilocybin) during the *past 30 days*?  
5. used cocaine (like cocaine powder) or "crack" (cocaine in chunk or rock form) during the *past 30 days*?  
6. 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*?  
7. used phenoxydine (pox, px, breeze) during the *past 30 days*?  
8. used methamphetamines (meth, speed, crank, crystal meth) in the *past 30 days*?  
9. used prescription stimulants or amphetamines (such as Adderall, Ritalin, or Dexedrine) without a doctor telling you to take them, during the *past 30 days*?  
10. 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*?  
11. 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*?  
12. 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*?  
13. 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*?  
14. used heroin during the *past 30 days*?  
15. used steroid or anabolic steroids (such as Anadrol, Oxandrin, Durabolin, Equipoise or Depotesterone) in the *past 30 days*?

### Answer questions 59 to 64 for both alcohol and drugs.

**In the past 12 months:**

<table>
<thead>
<tr>
<th>Alcohol</th>
<th>Drugs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Don't use</strong></td>
<td><strong>Don't use</strong></td>
</tr>
<tr>
<td><strong>Yes</strong></td>
<td><strong>Yes</strong></td>
</tr>
<tr>
<td><strong>No</strong></td>
<td><strong>No</strong></td>
</tr>
</tbody>
</table>

1. have you spent more time using alcohol or drugs than you intended?  
2. have you neglected some of your usual responsibilities because of using alcohol or drugs?  
3. have you wanted to cut down on your alcohol or drug use?  
4. has anyone objected to your alcohol or drug use?  
5. did you frequently find yourself thinking about using alcohol or drugs?  
6. did you use alcohol or drugs to relieve feelings such as sadness, anger, or boredom?

### 63. 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 such as e-cigarettes, vape pens, mods, or pod vapes like JUUL or Puff Bars?  
- e. chewing tobacco, snuff, dip, or snus (moist smokeless tobacco usually sold in small pouches)?  
- f. nicotine pouches like Zyn, On, and Velo?

### 64. 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

### 65. Have you ever belonged to a gang?

- No  
- No, but would like to  
- Yes, in the past  
- Yes, belong now  
- Yes, but would like to get out
66. During the past 30 days, on how many days did you:

   a. smoke cigarettes? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
   b. smoke cigars, cigarillos, or little cigars? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
   c. smoke tobacco in a hookah or waterpipe? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
   d. use vape products such as e-cigarettes, vape pens, mods, or pod vapes like JUUL or Puff Bars? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
   e. use chewing tobacco, snuff, dip, or snus (moist smokeless tobacco usually sold in small pouches)? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
   f. use nicotine pouches like Zyn, On, and Velo? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

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

   a. take a handgun to school? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
   b. steal anything worth more than $5? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
   c. pick a fight with someone? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
   d. attack someone with the idea of seriously hurting them? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
   e. stay away from school all day when their parents think they are at school? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
   f. drink beer, wine, or hard liquor (for example, vodka, whiskey, or tequila) regularly? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
   g. smoke cigarettes? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
   h. smoke marijuana? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
   i. use LSD, cocaine, amphetamines, or another illegal drug? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

68. 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? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

69. 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

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

   a. drink beer, wine, or hard liquor (for example, vodka, whiskey, or tequila) 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. use prescription drugs not prescribed to you? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
   i. use vape products such as e-cigarettes, vape pens, mods, or pod vapes like JUUL or Puff Bars? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

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

   ☐ No  ☐ Yes

72. If you used alcohol the past year (12 months), how did you get it? (Mark all that apply.)

   ☐ I did not use alcohol in the past year  ☐ I bought it myself from a store.
   ☐ I got it at a party.  ☐ I gave someone else money to buy it for me.
   ☐ I got it from someone I know age 21 or older.  ☐ I got it from someone I know under age 21.
   ☐ I got it from a family member or relative other than my parents.  ☐ I got it from home with my parents’ permission.
   ☐ I got it from home without my parents’ permission.  ☐ I got it in another way.

73. 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? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
   d. to use e-cigarettes, vape pens, mods, or pod vapes like JUUL or Puff Bars? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

74. In the past seven days, I have felt:

   a. left out. ☐ ☐ ☐ ☐ ☐ ☐ ☐
   b. that people barely know me. ☐ ☐ ☐ ☐ ☐ ☐ ☐
   c. isolated from others. ☐ ☐ ☐ ☐ ☐ ☐ ☐
   d. that people are around me but not with me. ☐ ☐ ☐ ☐ ☐ ☐ ☐
75. 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>
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</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>
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<tr>
<td>d. made a commitment to stay drug-free?</td>
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<tr>
<td>e. used marijuana?</td>
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<td></td>
<td></td>
</tr>
<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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<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>h. been suspended from school?</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>i. liked school?</td>
<td></td>
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<tr>
<td>j. carried a handgun?</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>k. sold illegal drugs?</td>
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<td></td>
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<td></td>
<td></td>
</tr>
<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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<td></td>
</tr>
<tr>
<td>n. been arrested?</td>
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<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>

76. Have any of your brothers or sisters ever:

<table>
<thead>
<tr>
<th>I don’t have any brothers or sisters</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. drunk beer, wine, or hard liquor (for example, vodka, whiskey, or tequila)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. smoked marijuana?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. smoked cigarettes?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. taken a handgun to school?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. been suspended or expelled from school?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>a. smoke one or more cigarettes a day?</th>
</tr>
</thead>
<tbody>
<tr>
<td>b. drank alcohol sometime in the past month?</td>
</tr>
<tr>
<td>c. used marijuana sometime in the past month?</td>
</tr>
<tr>
<td>d. used an illegal drug in the past month (not including marijuana)?</td>
</tr>
</tbody>
</table>

78. If I had to move, I would miss the neighborhood I now live in. | Definitely Yes | Somewhat Yes | Somewhat No | Definitely No |
79. My neighbors notice when I am doing a good job and let me know about it. |   |   |   |   |
80. I like my neighborhood. |   |   |   |   |
81. I’d like to get out of my neighborhood. |   |   |   |   |
82. There are people in my neighborhood who are proud of me when I do something well. |   |   |   |   |
83. There are people in my neighborhood who encourage me to do my best. |   |   |   |   |
84. Do you feel very close to your mother? |   |   |   |   |
85. Do you share your thoughts and feelings with your mother? |   |   |   |   |
86. Do you enjoy spending time with your mother? |   |   |   |   |
87. Do you feel very close to your father? |   |   |   |   |
88. Do you share your thoughts and feelings with your father? |   |   |   |   |
89. Do you enjoy spending time with your father? |   |   |   |   |
90. My parents ask me what I think before most family decisions affecting me are made. |   |   |   |   |
91. If I had a personal problem, I could ask my mom or dad for help. |   |   |   |   |
92. My parents give me lots of chances to do fun things with them. |   |   |   |   |
93. How often do your parents tell you they’re proud of you for something you’ve done?

<table>
<thead>
<tr>
<th>Never or almost never</th>
<th>Sometimes</th>
<th>Often</th>
<th>All the time</th>
</tr>
</thead>
</table>

94. If you wanted to get some cigarettes, how easy would it be for you to get some? | Very easy | Sort of easy | Sort of hard | Very hard |
95. If you wanted to get some beer, wine, or hard liquor (for example, vodka, whiskey, or tequila), how easy would it be for you to get some? |   |   |   |   |
96. If you wanted to get a drug like cocaine, LSD, or amphetamines, how easy would it be for you to get some? |   |   |   |   |
97. If you wanted to get a handgun, how easy would it be for you to get one? |   |   |   |   |
98. If you wanted to get some marijuana, how easy would it be for you to get some? |   |   |   |   |
99. If you wanted to get vape products such as e-cigarettes, vape pens, mods, or pod vapes like JUUL or Puff Bars, how easy would it be for you to get some? |   |   |   |   |
100. If you used a vape product such as e-cigarettes, vape pens, mods, or pod vapes like JUUL or Puff Bars in the past 12 months, what did you put in it? (Mark ALL that apply.)
- I did not use a vape product in the past 12 months
- E-juice with zero nicotine
- E-juice with nicotine
- Marijuana
- Other
- Not sure

101. 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?

102. 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

103. 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

104. 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

105. I do the opposite of what people tell me, just to get them mad.
- Very false
- Somewhat false
- Somewhat true
- Very true

106. I like to see how much I can get away with.
- Very false
- Somewhat false
- Somewhat true
- Very true

107. I ignore rules that get in my way.
- Very false
- Somewhat false
- Somewhat true
- Very true

108. 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

109. During the past 12 months, did you ever seriously consider attempting suicide?
- No
- Yes

110. During the past 12 months, did you make a plan about how you would attempt suicide?
- No
- Yes

111. 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

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

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

114. 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?

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

116. I feel safe in my neighborhood.

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

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

119. The rules in my family are clear.

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

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

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

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

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

125. 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?

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

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

128. If you skipped school, would you be caught by your parents?
129. What are the chances you would be seen as cool if you:

- smoked cigarettes? [ ] [ ] [ ] [ ] [ ]
- worked hard at school? [ ] [ ] [ ] [ ] [ ]
- began drinking alcoholic beverages regularly, that is, at least once or twice a month? [ ] [ ] [ ] [ ] [ ]
- defended someone who was being verbally abused at school? [ ] [ ] [ ] [ ] [ ]
- smoked marijuana? [ ] [ ] [ ] [ ] [ ]
- carried a handgun? [ ] [ ] [ ] [ ] [ ]
- regularly volunteered to do community service? [ ] [ ] [ ] [ ] [ ]

130. 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? [ ] [ ] [ ] [ ] [ ]
- 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? [ ] [ ] [ ] [ ] [ ]

131. 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

132. This past year, many youth and families in Utah were affected by the Coronavirus (also known as COVID-19). Did you experience any of the following due to the coronavirus or coronavirus symptoms? (Select one or more responses).
- I was sick with the coronavirus or coronavirus symptoms
- One or more people living in my home lost their job
- I had to move or change homes
- Skipped one or more meals because my family didn’t have enough money to buy food
- I felt anxious, sad, or hopeless
- People in my home were fighting a lot
- I had difficulty keeping up with school work because I didn’t have access to a reliable computer or internet service
- None of these

133. How much do you agree or disagree with the following statement: "My learning improved when my classes were taught online due to COVID-19?"
- Strongly agree
- Agree
- Neutral
- Disagree
- Strongly disagree
- I have not participated in online learning

134. 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)

135. 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

136. 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?
- I do not drive.
- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

137. 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

138. 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 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

139. 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

Thank you for completing the survey

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