

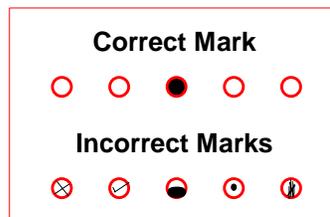
# Pennsylvania Youth Survey

Thank you for agreeing to participate in this survey. The survey asks your opinion about a number of things in your life, including your friends, your family, your neighborhood and your community. Your answers to these questions will be confidential and anonymous. This means your answers will stay secret. Your name will never be asked. Please do not write your name on this survey form.

**This survey is completely voluntary. You may skip any question.**

## Instructions

1. This is not a test, so there are no right or wrong answers.
2. Each question should be answered by marking only one of the answer spaces. If you don't find an answer that fits exactly, use one that comes closest. If any question does not apply to you, or you are not sure of what it means, just leave it blank.
3. Your answers will be read by a computer. Please follow these instructions carefully.
  - Use a #2 pencil only.
  - Make heavy marks inside the circles.
  - Completely erase any answer you want to change.
  - Make no other markings or comments on the answer pages.
4. Some of the questions have the following format:



Please fill in the circle for the word that best describes how you feel. **NO!** **no** **yes** **YES!**

EXAMPLE: Pepperoni pizza is one of my favorite foods.

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.

## THE SURVEY BEGINS WITH ITEM ONE, BELOW

### 1. How old are you?

- 10    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. Are you? Female   Male

### 4. What do you consider yourself to be? (Choose all that apply)

- White  
 Black or African American  
 American Indian/Native American, Eskimo or Aleut  
 Spanish/Hispanic/Latino  
 Asian or Pacific Islander  
 Other

### 5. What is the language you use most often at home?

- English  
 Spanish  
 Another language

### 6. Think of where you live most of the time. Which of the following people live there with you? (Choose all that apply)

- |                                      |                                     |                                     |
|--------------------------------------|-------------------------------------|-------------------------------------|
| <input type="radio"/> Mother         | <input type="radio"/> Stepmother    | <input type="radio"/> Foster mother |
| <input type="radio"/> Grandmother    | <input type="radio"/> Aunt          | <input type="radio"/> Father        |
| <input type="radio"/> Stepfather     | <input type="radio"/> Foster father | <input type="radio"/> Grandfather   |
| <input type="radio"/> Uncle          | <input type="radio"/> Other adults  | <input type="radio"/> Brother(s)    |
| <input type="radio"/> Stepbrother(s) | <input type="radio"/> Sister(s)     | <input type="radio"/> Stepsister(s) |
| <input type="radio"/> Other children |                                     |                                     |



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

**a. Smoked cigarettes?**

- No or very little chance
- Little chance
- Some chance
- Pretty good chance
- Very good chance

**b. Began drinking alcoholic beverages regularly, that is, at least once or twice a month?**

- No or very little chance
- Little chance
- Some chance
- Pretty good chance
- Very good chance

**c. Smoked marijuana?**

- No or very little chance
- Little chance
- Some chance
- Pretty good chance
- Very good chance

**d. Carried a handgun?**

- No or very little chance
- Little chance
- Some chance
- Pretty good chance
- Very good chance

8. **How interesting are most of your courses to you?**

- Very dull
- Slightly dull
- Fairly interesting
- Quite interesting
- Very interesting and stimulating

9. **How important do you think the things you are learning in school are going to be for your later life?**

- Not at all important
- Slightly important
- Fairly important
- Quite important
- Very important

10. **During the LAST FOUR WEEKS, how many whole days have you missed because you skipped or "cut"?**

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

11. **How often do you feel that the schoolwork you are assigned is meaningful and important?**

- Never
- Seldom
- Sometimes
- Often
- Almost always

12. **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

13. **Are your school grades better than the grades of most students in your class?**

- NO!
- no
- yes
- YES!

14. **Which of the following activities for people your age are available in your community? (Choose all that apply.)**

- Sports teams
- Scouting
- Boys and girls clubs
- 4-H clubs
- Service clubs



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	NO!	no	yes	YES!
15. There are lots of adults in my neighborhood I could talk to about something important.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. Teachers ask me to work on special classroom projects.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. There are lots of chances for students in my school to talk with a teacher one-on-one.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. I have lots of chances to be part of class discussions or activities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. My teacher(s) notices when I am doing a good job and lets me know about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. I feel safe at my school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. The school lets my parents know when I have done something well.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. My teachers praise me when I work hard in school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. In my school, students have lots of chances to help decide things like class activities and rules.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. There are lots of chances for students in my school to get involved in sports, clubs, and other school activities outside of class.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

25. How wrong do you think it is for someone your age to:	Not at all wrong	A little bit wrong	Wrong	Very wrong
a. Stay away from school all day when their parents think they are at school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Take a handgun to school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Steal anything worth more than \$5?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Pick a fight with someone?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Attack someone with the idea of seriously hurting them?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

26. Now, thinking back over the past year in school, how often did you:	Never	Seldom	Sometimes	Often	Almost always
a. Enjoy being in school?	<input type="radio"/>				
b. Hate being in school?	<input type="radio"/>				
c. Try to do your best work in school?	<input type="radio"/>				

27. How wrong do you think it is for someone your age to:	Not at all wrong	A little bit wrong	Wrong	Very wrong
a. Drink beer, wine or hard liquor (for example, vodka, whiskey, or gin) regularly?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Smoke cigarettes?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Smoke marijuana?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Use LSD, cocaine, amphetamines or another illegal drug?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

28. How wrong do your parents feel it would be for <u>you</u> to:	Not at all wrong	A little bit wrong	Wrong	Very wrong
a. Drink beer, wine or hard liquor (for example, vodka, whiskey, or gin) regularly?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Pick a fight with someone?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Smoke cigarettes?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Smoke marijuana?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Steal anything worth more than \$5?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Draw graffiti, or write things or draw pictures on buildings or other property (without the owner's permission)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



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29. How old were you when you first:

a. Smoked marijuana?

- Never have
- 10 or younger
- 11
- 12
- 13
- 14
- 15
- 16
- 17 or older

b. Smoked a cigarette, even just a puff?

- Never have
- 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)?

- Never have
- 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?

- Never have
- 10 or younger
- 11
- 12
- 13
- 14
- 15
- 16
- 17 or older

30. 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

31. On how many occasions (if any) have you had beer, wine, or hard liquor during the past 30 days?

- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

32. On how many occasions (if any) have you used marijuana during the past 30 days?

- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

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

a. Take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day?

- No risk
- Slight risk
- Moderate risk
- Great risk

b. Smoke one or more packs of cigarettes per day?

- No risk
- Slight risk
- Moderate risk
- Great risk

c. Try marijuana once or twice?

- No risk
- Slight risk
- Moderate risk
- Great risk

d. Smoke marijuana regularly?

- No risk
- Slight risk
- Moderate risk
- Great risk



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34. How much do each of the following statements describe your neighborhood?	NO!	no	yes	YES!
a. If a kid smoked marijuana in your neighborhood, would he or she be caught by the police?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Crime and/or drug selling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Fights	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Lots of empty or abandoned buildings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Lots of graffiti	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. I feel safe in my neighborhood.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. 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?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

35. Think of your <u>four best friends</u> (the friends you feel closest to). In the past year (12 months), how many of your best friends have:	None	1	2	3	4
a. Smoked cigarettes?	<input type="radio"/>				
b. Used marijuana?	<input type="radio"/>				
c. Used LSD, cocaine, amphetamines, or other illegal drugs?	<input type="radio"/>				
d. Been suspended from school?	<input type="radio"/>				
e. Carried a handgun?	<input type="radio"/>				
f. Sold illegal drugs?	<input type="radio"/>				
g. Been arrested?	<input type="radio"/>				
h. Dropped out of school?	<input type="radio"/>				
i. Been a member of a gang?	<input type="radio"/>				
j. Stolen or tried to steal a motor vehicle such as a car or motorcycle?	<input type="radio"/>				
k. Tried beer, wine, or hard liquor (for example, vodka, whiskey, or gin) when their parents didn't know about it?	<input type="radio"/>				

36. How wrong would most adults (over 21) in your neighborhood think it was for kids your age:	Not at all wrong	A little bit wrong	Wrong	Very wrong
a. To use marijuana?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. To drink alcohol?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. To smoke cigarettes?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Very hard	Sort of hard	Sort of easy	Very easy
37. If you wanted to get some marijuana, how easy would it be for you to get some?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38. If you wanted to get a handgun, how easy would it be for you to get one?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
39. 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?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
40. If you wanted to get some cigarettes, how easy would it be for you to get some?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
41. If you wanted to get a drug like cocaine, LSD, or amphetamines, how easy would it be for you to get some?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Very false	Somewhat false	Somewhat true	Very true
42. I like to see how much I can get away with.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
43. I ignore rules that get in my way.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
44. I do the opposite of what people tell me, just to get them mad.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



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45. How many times have you done the following things?

a. Done what feels good no matter what.

- Never
- I've done it, but not in the past year
- Less than once a month
- About once a month
- 2 or 3 times a month
- Once a week or more

b. Done something dangerous because someone dared you to do it.

- Never
- I've done it, but not in the past year
- Less than once a month
- About once a month
- 2 or 3 times a month
- Once a week or more

c. Done crazy things even if they are a little dangerous.

- Never
- I've done it, but not in the past year
- Less than once a month
- About once a month
- 2 or 3 times a month
- Once a week or more

46. Have you ever belonged to a gang?

- Yes
- No

47. If you have ever belonged to a gang, did that gang have a name?

- Yes
- No
- I have never belonged to a gang.

48. How old were you when you first belonged to a gang?

- Never have
- 10 or younger
- 11
- 12
- 13
- 14
- 15
- 16
- 17 or older

49. This year at school, how often have other students:

a. Told lies or spread false rumors about you?

- Not at all
- Only once or twice
- 2 or 3 times a month
- About once a week
- Several times a week

b. Taken money or other things from you or damaged your things?

- Not at all
- Only once or twice
- 2 or 3 times a month
- About once a week
- Several times a week

c. Threatened or forced you to do things you did not want to do?

- Not at all
- Only once or twice
- 2 or 3 times a month
- About once a week
- Several times a week

d. Used the Internet or a cell phone to threaten or embarrass you by posting or sending mean or hurtful messages or photos of you?

- Not at all
- Only once or twice
- 2 or 3 times a month
- About once a week
- Several times a week

50. In the past 12 months, did anyone on the Internet ever try to get you to talk online about sex, look at sexual pictures, or do something else sexual when you did not want to?

- Yes
- No



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51. This year at school, how often have you been:

a. Called mean names, made fun of, or teased in a hurtful way?

- Not at all
- Only once or twice
- 2 or 3 times a month
- About once a week
- Several times a week

b. Left out of things on purpose by other students, excluded from their group of friends, or completely ignored?

- Not at all
- Only once or twice
- 2 or 3 times a month
- About once a week
- Several times a week

c. Hit, kicked, pushed, shoved around, or locked indoors?

- Not at all
- Only once or twice
- 2 or 3 times a month
- About once a week
- Several times a week

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

- NO!
- no
- yes
- YES!

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

- NO!
- no
- yes
- YES!

54. I think sometimes it's okay to cheat at school.

- NO!
- no
- yes
- YES!

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

- NO!
- no
- yes
- YES!

56. Have you ever smoked cigarettes?

- Never
- Once or twice
- Once in a while but not regularly
- Regularly in the past
- Regularly now

57. Have you ever used smokeless tobacco (chew, snuff, plug, dipping tobacco, chewing tobacco)?

- Never
- Once or twice
- Once in a while but not regularly
- Regularly in the past
- Regularly now

58. How frequently have you used smokeless tobacco during the past 30 days?

- Never
- Once or twice
- Once or twice per week
- About once a day
- More than once a day

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

- None
- Once
- Twice
- 3-5 times
- 6-9 times
- 10 or more times

60. How many times in the past year (12 months) have you been drunk or high at school?

- Never
- 1 or 2 times
- 3 to 5 times
- 6 to 9 times
- 10 to 19 times
- 20 to 29 times
- 30 to 39 times
- 40+ times



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61. On how many occasions (if any) have you:	0	1 or 2	3 to 5	6 to 9	10 to 19	20 to 39	40 or more
a. Sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays in order to get high during the <u>past 30 days</u> ?	<input type="radio"/>						
b. Used cocaine during the <u>past 30 days</u> ?	<input type="radio"/>						
c. Used crack during the <u>past 30 days</u> ?	<input type="radio"/>						
d. Used heroin during the <u>past 30 days</u> ?	<input type="radio"/>						
e. Used derbisol during the <u>past 30 days</u> ?	<input type="radio"/>						
f. Used Ecstasy during the <u>past 30 days</u> ?	<input type="radio"/>						
g. Used hallucinogens (acid, LSD, shrooms) during the <u>past 30 days</u> ?	<input type="radio"/>						
h. Taken steroids without a doctor's orders during the <u>past 30 days</u> ?	<input type="radio"/>						
i. Used methamphetamine (meth, crystal meth, crank) during the <u>past 30 days</u> ?	<input type="radio"/>						
j. Used prescription pain relievers, such as Vicodin, OxyContin or Tylox, without a doctor's orders, during the <u>past 30 days</u> ?	<input type="radio"/>						
k. Used prescription tranquilizers, such as Xanax, Valium or Ambien, without a doctor's orders, during the <u>past 30 days</u> ?	<input type="radio"/>						
l. Used prescription stimulants, such as Ritalin or Adderall, without a doctor's orders, during the <u>past 30 days</u> ?	<input type="radio"/>						

62. On how many occasions (if any) have you:	0	1 or 2	3 to 5	6 to 9	10 to 19	20 to 39	40 or more
a. Sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays in order to get high in your <u>lifetime</u> ?	<input type="radio"/>						
b. Had beer, wine, or hard liquor in your <u>lifetime</u> ?	<input type="radio"/>						
c. Used marijuana in your <u>lifetime</u> ?	<input type="radio"/>						
d. Used cocaine in your <u>lifetime</u> ?	<input type="radio"/>						
e. Used crack in your <u>lifetime</u> ?	<input type="radio"/>						
f. Used heroin in your <u>lifetime</u> ?	<input type="radio"/>						
g. Used derbisol in your <u>lifetime</u> ?	<input type="radio"/>						
h. Used Ecstasy in your <u>lifetime</u> ?	<input type="radio"/>						
i. Used hallucinogens (acid, LSD, shrooms) in your <u>lifetime</u> ?	<input type="radio"/>						
j. Taken steroids without a doctor's orders in your <u>lifetime</u> ?	<input type="radio"/>						
k. Used methamphetamine (meth, crystal meth, crank) in your <u>lifetime</u> ?	<input type="radio"/>						
l. Used prescription pain relievers, such as Vicodin, OxyContin or Tylox, without a doctor's orders, in your <u>lifetime</u> ?	<input type="radio"/>						
m. Used prescription tranquilizers, such as Xanax, Valium or Ambien, without a doctor's orders, in your <u>lifetime</u> ?	<input type="radio"/>						
n. Used prescription stimulants, such as Ritalin or Adderall, without a doctor's orders, in your <u>lifetime</u> ?	<input type="radio"/>						



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63. How willing are you to try or use the drugs listed below. These are not questions about current or past use of these drugs.

a. ALCOHOL (beer, wine, coolers, hard liquor)

- I would never use it
- I probably wouldn't use it
- I'm not sure whether or not I would use it
- I would like to try it or use it
- I would use it any chance I got

b. MARIJUANA (pot, hash, hemp, weed)

- I would never use it
- I probably wouldn't use it
- I'm not sure whether or not I would use it
- I would like to try it or use it
- I would use it any chance I got

c. COCAINE (coke, snow, blow, dust)

- I would never use it
- I probably wouldn't use it
- I'm not sure whether or not I would use it
- I would like to try it or use it
- I would use it any chance I got

d. HALLUCINOGENS (acid, trip, LSD, shrooms)

- I would never use it
- I probably wouldn't use it
- I'm not sure whether or not I would use it
- I would like to try it or use it
- I would use it any chance I got

e. INHALANTS (whippets, butane, paint thinner)

- I would never use it
- I probably wouldn't use it
- I'm not sure whether or not I would use it
- I would like to try it or use it
- I would use it any chance I got

64. How many times in the past year (12 months) have you been arrested?

- Never
- 1 or 2 times
- 3 to 5 times
- 6 to 9 times
- 10 to 19 times
- 20 to 29 times
- 30 to 39 times
- 40+ times

65. How old were you when you first got arrested?

- Never have
- 10 or younger
- 11
- 12
- 13
- 14
- 15
- 16
- 17 or older

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

a. Been offered, given, or sold an illegal drug on school property?

- Never
- Once
- 2 or 3 times
- 4 or 5 times
- 6 to 9 times
- 10 times or more

b. Sold illegal drugs?

- Never
- 1 or 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. Stolen or tried to steal a motor vehicle such as a car or motorcycle?

- Never
- 1 or 2 times
- 3 to 5 times
- 6 to 9 times
- 10 to 19 times
- 20 to 29 times
- 30 to 39 times
- 40+ times

67. Have you changed homes in the past year?

- Yes
- No

68. How many times have you changed homes since kindergarten?

- Never
- 1 or 2 times
- 3 or 4 times
- 5 or 6 times
- 7 or more times



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69. Have you changed schools (including changing from elementary to middle and middle to high school) in the past year?

- Yes
- No

70. How many times have you changed schools (including changing from elementary to middle and middle to high school) since kindergarten?

- Never
- 1 or 2 times
- 3 or 4 times
- 5 or 6 times
- 7 or more times

71. How often do you attend religious services or activities?

- Never
- Rarely
- 1-2 times a month
- About once a week or more

72. How often have you:

a. Driven a car while or shortly after drinking?

- I don't drive
- Never
- Before, but not in the past year
- About once or twice a year
- About once or twice a month
- About once or twice a week
- Almost every day

b. Driven a car while or shortly after smoking pot?

- I don't drive
- Never
- Before, but not in the past year
- About once or twice a year
- About once or twice a month
- About once or twice a week
- Almost every day

73. How many times in the past 30 days have you brought a weapon (such as a gun, knife, or club) to school?

- Never
- 1 or 2 times
- 3 to 5 times
- 6 to 9 times
- 10 to 19 times
- 20 to 29 times
- 30 to 39 times
- 40+ times

74. How old were you when you first carried a handgun?

- Never have
- 10 or younger
- 11
- 12
- 13
- 14
- 15
- 16
- 17 or older

75. How many times in the past year (12 months) have you attacked someone with the idea of seriously hurting them?

- Never
- 1 or 2 times
- 3 to 5 times
- 6 to 9 times
- 10 to 19 times
- 20 to 29 times
- 30 to 39 times
- 40+ times

76. How old were you when you first attacked someone with the idea of seriously hurting them?

- Never have
- 10 or younger
- 11
- 12
- 13
- 14
- 15
- 16
- 17 or older

77. How many times in the past year (12 months) have you been suspended from school?

- Never
- 1 or 2 times
- 3 to 5 times
- 6 to 9 times
- 10 to 19 times
- 20 to 29 times
- 30 to 39 times
- 40+ times

78. How old were you when you first got suspended from school?

- Never have
- 10 or younger
- 11
- 12
- 13
- 14
- 15
- 16
- 17 or older



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79. In the past 12 months, how often have you:	Never	Once	2 or 3	4 or 5	6 to 9	10 times or more
a. Been threatened to be hit or beaten up on school property?	<input type="radio"/>					
b. Been attacked and hit by someone or beaten up on school property?	<input type="radio"/>					
c. Been threatened by someone with a weapon on school property?	<input type="radio"/>					
d. Been attacked by someone with a weapon on school property?	<input type="radio"/>					

	NO!	no	yes	YES!
80. In the past year have you felt depressed or sad MOST days, even if you feel OK sometimes?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
81. Sometimes I think that life is not worth it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
82. At times I think I am no good at all.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
83. All in all, I am inclined to think that I am a failure.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

84. In the past year, have you...	Yes	No
a. Bet money or anything of value on sporting events (includes participating in sports pools)?	<input type="radio"/>	<input type="radio"/>
b. Gambled for money or anything of value?	<input type="radio"/>	<input type="radio"/>
c. Bought lottery tickets?	<input type="radio"/>	<input type="radio"/>
d. Bet money using the Internet?	<input type="radio"/>	<input type="radio"/>
e. Bet money or anything of value on table games like poker or other card games, dice, backgammon, or dominoes?	<input type="radio"/>	<input type="radio"/>
85. In the last 30 days have you gambled for money or anything of value?	<input type="radio"/>	<input type="radio"/>

	NO!	no	yes	YES!
86. I like my neighborhood.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
87. If I had to move, I would miss the neighborhood I now live in.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
88. I'd like to get out of my neighborhood.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
89. My neighbors notice when I am doing a good job and let me know.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
90. There are people in my neighborhood who are proud of me when I do something well.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
91. There are people in my neighborhood who encourage me to do my best.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

92. 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
93. How often do your parents tell you they're proud of you for something you've done?  Never or almost never  Sometimes  Often  All the time
94. Has anyone in your family ever had a severe alcohol or drug problem?  Yes  No



95. About how many adults (over 21) have you known personally who in the past year have:	None	1	2	3 or 4	5 or more
a. Used marijuana, crack, cocaine, or other drugs?	<input type="radio"/>				
b. Sold or dealt drugs?	<input type="radio"/>				
c. Gotten drunk or high?	<input type="radio"/>				
d. Done other things that could get them in trouble with the police, like stealing, selling stolen goods, mugging or assaulting others, etc.?	<input type="radio"/>				

96. Have any of your brothers or sisters ever:	Yes	No	I don't have any brothers or sisters	
a. Drunk beer, wine or hard liquor (for example, vodka, whiskey or gin)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
b. Smoked marijuana?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
c. Smoked cigarettes?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
d. Taken a handgun to school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
e. Been suspended or expelled from school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

	NO!	no	yes	YES!
97. If you drank some beer or wine or liquor (for example, vodka, whiskey, or gin) without your parents' permission, would you be caught by your parents?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
98. The rules in my family are clear.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
99. When I am not at home, one of my parents knows where I am and who I am with.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
100. My family has clear rules about alcohol and drug use.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
101. My parents ask if I've gotten my homework done.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
102. Would your parents know if you did not come home on time?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
103. People in my family often insult or yell at each other.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
104. We argue about the same things in my family over and over.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
105. People in my family have serious arguments.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
106. Do you enjoy spending time with your:				
a. Mother?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Father?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
107. Do you feel very close to your:				
a. Mother?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Father?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
108. Do you share your thoughts and feelings with your:				
a. Mother?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Father?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
109. My parents ask me what I think before most family decisions affecting me are made.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
110. If I had a personal problem, I could ask my mom or dad for help.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
111. If you skipped school, would you be caught by your parents?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
112. If you carried a handgun without your parents' permission, would you be caught by your parents?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
113. My parents give me lots of chances to do fun things with them.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



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