

The Statewide Healthy Kids Survey

Grades 7

This is a survey about school and health-related behaviors, experiences and attitudes. It includes questions about use of alcohol, tobacco, and other drugs; bullying and violence; and what you do at school and how you feel about it. **You will be able to answer whether or not you have done or experienced any of these things.**

You do not have to answer these questions, but your answers will be very helpful in improving school and health programs.

Please do not write your name on this form or the answer sheet. Do not identify yourself in any other way.

Please mark all of your answers on the answer sheet. Do not write on the questionnaire. Mark only one answer unless told to ***“Mark All That Apply.”***

This survey asks about things you may have done during different periods of time, such as during your **lifetime** (did you ever do something), or the past **12 months, six months, or 30 days**. Each question provides different information. Please pay careful attention to these time periods.

Thank you for completing this survey!

The Statewide Healthy Kids Survey

Begin by writing the name of your school at the top of your answer sheet.

Next we would like some background information about you.

1. **How old are you?**

A) 10 years old or younger	F) 15 years old
B) 11 years old	G) 16 years old
C) 12 years old	H) 17 years old
D) 13 years old	I) 18 years old or older
E) 14 years old	

2. **What is your sex?**

A) Male	
B) Female	

3. **What grade are you in?**

A) 6th grade	F) 11th grade
B) 7th grade	G) 12th grade
C) 8th grade	H) Other grade
D) 9th grade	I) Ungraded
E) 10th grade	

4. **How do you describe yourself? (Mark All That Apply.)**

A) American Indian or Alaska Native	E) Hispanic or Latino/Latina
B) Native Hawaiian or Pacific Islander	F) White or Caucasian (non-Hispanic)
C) Asian or Asian American	G) Other
D) Black or African American (non-Hispanic)	

5. **If you are Asian or Pacific Islander, which groups best describe you? (Mark All That Apply.) If you are not of Asian/Pacific Islander background, mark "A. Does not apply."**

A) Does not apply; I am not Asian or Pacific Islander	G) Korean
B) Asian Indian	H) Laotian
C) Cambodian	I) Vietnamese
D) Chinese	J) Native Hawaiian, Guamanian, Samoan, or other Pacific Islander
E) Filipino	K) Other Asian
F) Japanese	

6. **If you are Hispanic or Latino/Latina, which groups best describe you? (Mark All That Apply.) If you are not of Hispanic background, mark "A. Does not apply."**

A) Does not apply; I am not Hispanic or Latino/Latina	D) Cuban
B) Central American	E) Mexican
C) South American	F) Puerto Rican
	G) Other Hispanic

The Statewide Healthy Kids Survey

The next questions ask about the use of alcohol, tobacco, marijuana, and other drugs *without a doctor's order* (prescription for medical reasons).

Keep the following definitions in mind.

- **One drink of ALCOHOL**, or alcoholic drink (beverage), means one regular size can/bottle of beer or wine cooler, one glass of wine, one mixed drink, or one shot glass of liquor.
- Questions about alcohol do **not** include drinking a few sips of wine for religious purposes.
- **DRUG** means any substance, including pills and medications, used to get “high”(“loaded”, “stoned”, or “wasted”) other than alcohol or tobacco.

During your *life*, how many times have you used or tried the following substances without a doctor's order?

		<u>Number of Times</u>					
		<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4-6</u>	<u>7 or more</u>
7.	A cigarette, even one or two puffs	A	B	C	D	E	F
8.	A whole cigarette	A	B	C	D	E	F
9.	Smokeless tobacco (dip, chew or snuff such as Redman, Skoal, or Beechnut)	A	B	C	D	E	F
10.	One full drink of alcohol (such as a can of beer, glass of wine, wine cooler, or shot of liquor)	A	B	C	D	E	F
11.	Marijuana (pot, weed, grass, hash)	A	B	C	D	E	F
12.	Inhalants (things you sniff, huff, or breathe to get high such as glue, paint, aerosol sprays, gasoline, poppers, gases)	A	B	C	D	E	F
13.	Any other illegal drug or pill to get “high” (such as methamphetamine, cocaine, LSD, ecstasy, downers)	A	B	C	D	E	F

During your *life*, how many times have you been ...

		<u>Number of Times</u>					
		<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4-6</u>	<u>7 or more</u>
14.	very drunk or sick after drinking alcohol?	A	B	C	D	E	F
15.	“high” (loaded, stoned, or wasted) from using drugs?	A	B	C	D	E	F
16.	drunk on alcohol or “high” on drugs on school property?	A	B	C	D	E	F

The Statewide Healthy Kids Survey

During the past six months, how many times did you use these substances without a doctor's order?

		Number of Times						
		0 times	1 to 2 times	A few times	Once a month	Once a week	A few times a week	Once a day or more
17.	An alcoholic drink	A	B	C	D	E	F	G
18.	Marijuana (pot, weed, grass, hash, bud)	A	B	C	D	E	F	G
19.	Inhalants (things you sniff, huff, or breathe to get high such as glue, paint, aerosol sprays, gasoline, poppers, gases)	A	B	C	D	E	F	G
20.	Metabene (rollers, wagon wheels)	A	B	C	D	E	F	G
21.	Any other illegal drug or pill to get "high" (such as methamphetamine, cocaine, LSD, ecstasy, downers)	A	B	C	D	E	F	G

MAKE SURE YOU ARE NOW ON #22 ON THE ANSWER SHEET.

About how old were you the first time you did any of these things?

		Years of Age									
		Never	10 or younger	11	12	13	14	15	16	17	18 or older
22.	Had a drink of an alcoholic beverage (other than a sip or two)	A	B	C	D	E	F	G	H	I	J
23.	Smoked part or all of a cigarette	A	B	C	D	E	F	G	H	I	J
24.	Used smokeless tobacco or other tobacco products	A	B	C	D	E	F	G	H	I	J
25.	Used marijuana or hashish	A	B	C	D	E	F	G	H	I	J
26.	Used any other illegal drug, or pill to get "high"	A	B	C	D	E	F	G	H	I	J

During the past 30 days, on how many days did you use ...

		0 days	1 day	2 days	3-9 days	10-19 days	20-30 days
27.	cigarettes?	A	B	C	D	E	F
28.	smokeless tobacco (chew or snuff)?	A	B	C	D	E	F
29.	at least one drink of alcohol?	A	B	C	D	E	F
30.	five or more drinks of alcohol in a row, that is, within a couple of hours?	A	B	C	D	E	F
31.	marijuana (pot, weed, grass, hash)?	A	B	C	D	E	F
32.	inhalants (things you sniff, huff, or breathe to get high)?	A	B	C	D	E	F
33.	any other illegal drug or pill to get "high"?	A	B	C	D	E	F

The Statewide Healthy Kids Survey

During the past 30 days, on how many days **on school property** did you ...

		Happened on School Property					
		0 days	1 day	2 days	3 - 9 days	10 - 19 days	20 - 30 days
34.	smoke cigarettes?	A	B	C	D	E	F
35.	have at least one drink of alcohol?	A	B	C	D	E	F
36.	smoke marijuana?	A	B	C	D	E	F
37.	use any other illegal drug or pill to get "high"?	A	B	C	D	E	F
38.	How do you like to drink alcohol?						
	A) I don't drink alcohol						
	B) Just a sip or two						
	C) Enough to feel it a little						
	D) Enough to feel it moderately						
	E) Until I feel it a lot or get really drunk						
39.	In your <u>life</u> , how many times have you ridden in a car driven by someone who had been drinking alcohol?						
	A) Never						
	B) 1 time						
	C) 2 times						
	D) 3 to 6 times						
	E) 7 or more times						

How much do people risk harming themselves physically and in other ways when they do the following?

		How Much Risk or Harm			
		Great	Moderate	Slight	None
40.	Smoke cigarettes occasionally	A	B	C	D
41.	Smoke 1-2 packs of cigarettes each day	A	B	C	D
42.	Drink alcohol occasionally	A	B	C	D
43.	Have five or more drinks of an alcoholic beverage once or twice a week	A	B	C	D
44.	Smoke marijuana occasionally	A	B	C	D
45.	Smoke marijuana once or twice a week	A	B	C	D

How difficult is it for students in your grade to get any of the following substances if they really want them?

		Very Difficult	Fairly Difficult	Fairly Easy	Very Easy	Don't Know
46.	Cigarettes	A	B	C	D	E
47.	Alcohol	A	B	C	D	E
48.	Marijuana	A	B	C	D	E

MAKE SURE YOU ARE NOW ON #49 ON THE ANSWER SHEET.

The Statewide Healthy Kids Survey

49. How do *most* kids at your school who drink alcohol usually get it? (*Mark all that apply.*)
- A) At school
 - B) At parties or events outside school
 - C) At their own home
 - D) From adults at friends' homes
 - E) From friends or another teenager
 - F) Get adults to buy it for them
 - G) Buy it themselves at a store (convenience store, liquor store, grocery, mini mart)
 - H) At bars, clubs, or gambling casinos
 - I) Other
 - J) Don't know

How do you feel about someone your age doing the following?

	Neither Approve Nor Disapprove	Somewhat Disapprove	Strongly Disapprove
50. Smoking one or more packs of cigarettes a day	A	B	C
51. Having one or two drinks of any alcoholic beverage nearly every day	A	B	C
52. Trying marijuana or hashish once or twice	A	B	C
53. Using marijuana once a month or more	A	B	C
54. Carrying a weapon to school	A	B	C
55. How do you think your close friends would feel about you smoking one or more packs of cigarettes a day?			
A) Neither approve nor disapprove			
B) Somewhat disapprove			
C) Strongly disapprove			

Think about a group of 100 students, (or about three classrooms) in your grade. About how many students have done the following?

	Number of Students										
	<u>0</u> (none)	<u>10</u>	<u>20</u>	<u>30</u>	<u>40</u>	<u>50</u> (half)	<u>60</u>	<u>70</u>	<u>80</u>	<u>90</u>	<u>100</u> (all)
56. Smoke cigarettes at least once a month	A	B	C	D	E	F	G	H	I	J	K
57. Drink alcohol at least once a month	A	B	C	D	E	F	G	H	I	J	K
58. Ever tried marijuana	A	B	C	D	E	F	G	H	I	J	K
59. During the past 12 months, have you talked with at least one of your parents (or guardians) about the dangers of tobacco, alcohol, or drug use?											
A) No											
B) Yes											
60. During the past 12 months, have you heard, read, or watched any messages about not using alcohol, tobacco, or drugs?											
A) No											
B) Yes											

MAKE SURE YOU ARE NOW ON #61 ON THE ANSWER SHEET.

The Statewide Healthy Kids Survey

The next questions ask about violence, safety, harassment, and bullying.

During the past 12 months, how many times **on school property** have you ...

		Happened on School Property			
		0 times	1 time	2 to 3 times	4 or more times
61.	been pushed, shoved, slapped, hit, or kicked by someone who wasn't just kidding around?	A	B	C	D
62.	been threatened or injured with a weapon (gun, knife, club)?	A	B	C	D
63.	seen someone carrying a gun, knife, or other weapon?	A	B	C	D
64.	been afraid of being beaten up?	A	B	C	D
65.	been in a physical fight?	A	B	C	D
66.	had mean rumors or lies spread about you?	A	B	C	D
67.	had sexual jokes, comments, or gestures made to you?	A	B	C	D
68.	been made fun of because of your looks or the way you talk?	A	B	C	D
69.	had your property stolen or deliberately damaged, such as your car, clothing, or books?	A	B	C	D

During the past 12 months, how many times **on school property** were you harassed or bullied for any of the following reasons? ...

(You were **bullied** if *repeatedly* shoved, hit, threatened, called mean names, teased in a way you didn't like, or had other unpleasant things done to you. It is **not bullying** when two students of about the same strength quarrel or fight.)

		Happened on School Property			
		0 times	1 time	2 to 3 times	4 or more times
70.	Your race, ethnicity, or national origin	A	B	C	D
71.	Your religion	A	B	C	D
72.	Your gender (being male or female)	A	B	C	D
73.	Because someone thought you were gay or lesbian	A	B	C	D
74.	A physical or mental disability	A	B	C	D
75.	Any other reason	A	B	C	D

During the past 12 months, how many times have you ...

		0 times	1 time	2 to 3 times	4 or more
76.	been in a physical fight between groups of kids?	A	B	C	D
77.	used any weapon to threaten or bully someone?	A	B	C	D

The Statewide Healthy Kids Survey

During the past **12 months**, how often have you bet/gambled, even casually, for money or valuables in the following ways?

	Once a week or more	1 to 3 times a month	Less than once a month	Not at all
78. Card or dice games (such as poker, blackjack, or craps)	A	B	C	D
79. Personal skill games (such as pool, darts, coin tossing, video games)	A	B	C	D
80. Betting on sports	A	B	C	D
81. Lottery (scratch cards or numbers)	A	B	C	D
82. Bet or gambled in any other way	A	B	C	D

During the past **12 months**, how many times on school property have you ...

	Happened on School Property			
	0 times	1 time	2 to 3 times	4 or more
83. been offered, sold, or given an illegal drug?	A	B	C	D
84. carried a gun?	A	B	C	D
85. carried any other weapon (such as a knife or club)?	A	B	C	D
86. damaged school property on purpose?	A	B	C	D

87. How safe do you feel when you are at school?

- A) Very safe
- B) Safe
- C) Neither safe nor unsafe
- D) Unsafe
- E) Very unsafe

88. How safe do you feel when you are in the neighborhood where you live?

- A) Very safe
- B) Safe
- C) Neither safe nor unsafe
- D) Unsafe
- E) Very unsafe

89. During the past 12 months, how many times did other students spread mean rumors or lies about you on the internet (i.e., Facebook™, MySpace™, email, instant message)?

- A) 0 times (never)
- B) 1 time
- C) 2-3 times
- D) 4 or more times

90. Do you consider yourself a member of a gang?

- A) No
- B) Yes

The Statewide Healthy Kids Survey

91. During the past 12 months, did your boyfriend or girlfriend ever hit, slap, or physically hurt you on purpose?
 A) Does not apply; I didn't have a boyfriend or girlfriend during the past 12 months
 B) No
 C) Yes
92. During the past 12 months, did you ever feel so sad or hopeless almost everyday for two weeks or more that you stopped doing some usual activities?
 A) No
 B) Yes
93. In a normal school week, how many days are you home after school for at least one hour without an adult there?
 A) Never
 B) 1 day
 C) 2 days
 D) 3 days
 E) 4 days
 F) 5 days
94. Do you attend an after-school program for at least three days each week?
 A) No
 B) Yes
95. During the past 12 months, how would you describe the grades you mostly received in school?
 A) Mostly A's
 B) A's and B's
 C) Mostly B's
 D) B's and C's
 E) Mostly C's
 F) C's and D's
 G) Mostly D's
 H) Mostly F's
96. During the past 12 months, about how many times did you skip school or cut classes?
 A) 0 times
 B) 1-2 times
 C) A few times
 D) Once a month
 E) Once a week
 F) More than once a week

How strongly do you agree or disagree with the following statements about your school?

	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree
97. I feel close to people at this school.	A	B	C	D	E
98. I am happy to be at this school.	A	B	C	D	E
99. I feel like I am part of this school.	A	B	C	D	E
100. The teachers treat students fairly.	A	B	C	D	E
101. I feel safe in my school.	A	B	C	D	E

The Statewide Healthy Kids Survey

MAKE SURE YOU ARE NOW ON #102 ON THE ANSWER SHEET.

**Please mark how “true” you feel each of the following statements are:
*not true at all, a little true, pretty much true, or very much true.***

At my school, there is a teacher or some other adult ...

	Not at all true	A little true	Pretty much true	Very much true
102. who really cares about me.	A	B	C	D
103. who tells me when I do a good job.	A	B	C	D
104. who notices when I’m not there.	A	B	C	D
105. who always wants me to do my best.	A	B	C	D
106. who listens to me when I have something to say.	A	B	C	D
107. who believes that I will be a success.	A	B	C	D

At school, ...

	Not at all true	A little true	Pretty much true	Very much true
108. I do interesting activities.	A	B	C	D
109. I help decide things like class activities or rules.	A	B	C	D
110. I do things that make a difference.	A	B	C	D

The next statements are about what might occur *outside your school or home*, such as in your NEIGHBORHOOD, COMMUNITY, or with an ADULT other than your parents or guardian.

Outside of my home and school, there is an adult ...

	Not at all true	A little true	Pretty much true	Very much true
111. who really cares about me.	A	B	C	D
112. who tells me when I do a good job.	A	B	C	D
113. who notices when I am upset about something.	A	B	C	D
114. who believes that I will be a success.	A	B	C	D
115. who always wants me to do my best.	A	B	C	D
116. whom I trust.	A	B	C	D

The Statewide Healthy Kids Survey

Outside of my home and school, ...

	<u>Not at all true</u>	<u>A little true</u>	<u>Pretty much true</u>	<u>Very much true</u>
117. I am part of clubs, sports teams, church/temple, or other group activities.	A	B	C	D
118. I am involved in music, art, literature, sports or a hobby.	A	B	C	D
119. I help other people.	A	B	C	D

MAKE SURE YOU ARE NOW ON #120 ON THE ANSWER SHEET.

120. Did you eat breakfast today?
 A) No
 B) Yes
121. How many questions in this survey did you answer honestly?
 A) All of them
 B) Most of them
 C) Only some of them
 D) Hardly any

Thank you for completing this survey!