

Biennial Statewide California Healthy Kids Survey Module

Please use Section F on the answer sheet

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

	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
F1. An alcoholic drink	A	B	C	D	E	F	G
F2. Marijuana (pot, weed, grass, hash, bud)	A	B	C	D	E	F	G
F3. Inhalants (things you sniff, huff, or breathe to get high)	A	B	C	D	E	F	G
F4. Methamphetamine or Amphetamines (meth, speed, crystal, crank, ice)	A	B	C	D	E	F	G
F5. Cocaine (any form—coke, crack, rock, base, snort)	A	B	C	D	E	F	G
F6. Metabene (rollers, wagon wheels)	A	B	C	D	E	F	G
F7. LSD or other psychedelics (acid, mescaline, peyote, mushrooms)	A	B	C	D	E	F	G
F8. Ecstasy (E, X, EXTC, MDMA)	A	B	C	D	E	F	G
F9. Any other illegal drug or pill to get "high"	A	B	C	D	E	F	G
F10. Two or more drugs at the same time (for example, alcohol with marijuana, ecstasy with mushrooms, cocaine with PCP)	A	B	C	D	E	F	G
F11. During the <u>past 12 months</u> , have you taken any steroids (roids) to build up muscle or increase performance or endurance? A) None, have used no steroids B) Some, have taken a few times C) Regularly, have been on a program of steroid use							
F12. During the <u>past 12 months</u> , did you use any banned performance-enhancing supplement that claims to build muscle or increase strength or endurance (andro, ephedrine, DHEA)? A) No B) Some, have taken a few times C) Regularly, have been on a program of supplement use							
F13. How do <i>most</i> kids at your school who drink alcohol usually get it? (<i>Mark All That Apply.</i>) 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 many times have you tried to quit or stop using ...

	Does not apply, never used	0 times	1 time	2 to 3 times	4 or more times
F14. cigarettes?	A	B	C	D	E
F15. alcohol?	A	B	C	D	E
F16. marijuana?	A	B	C	D	E

F17. Have you **ever** felt that you needed help (such as counseling or treatment) for your alcohol *or* other drug use?

- A) No, I never used alcohol or other drugs
- B) No, but I do use alcohol or other drugs
- C) Yes, I have felt that I needed help

F18. In your opinion, how likely is it that a student would find help at your school from a counselor, teacher, or other adult to **stop or reduce** using alcohol or other drugs?

- A) Very likely
- B) Likely
- C) Not likely
- D) Don't know

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

	0 times	1 time	2 to 3 times	4 or more times
F19. been in a physical fight between groups of kids?	A	B	C	D
F20. used any weapon to threaten or bully someone?	A	B	C	D
F21. sold drugs to someone?	A	B	C	D

F22. During the **past 12 months**, how many times have you gambled (bet) for money or valuables in any way?

- A) I have not gambled (bet) in the past 12 months
- B) 1 time
- C) 2 or 3 times
- D) 4 to 9 times
- E) 10 or more times

F23. 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