

2011

# YOUTH DATA SURVEY

8th, 10th, and 12th grade students from Harrisonburg City and Rockingham County Schools



# Youth Data Survey 2011

8<sup>th</sup>, 10<sup>th</sup> and 12<sup>th</sup> grade students  
from Harrisonburg City and  
Rockingham County

A project supporting the Healthy Community Council's  
Community assessment mission.

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Surveys  
**PRIDE Survey**  
**Rockingham County/Harrisonburg Youth Survey**

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## **Introduction**

### Background

The Office on Children and Youth (OCY) at James Madison University's Institute for Innovation in Health and Human Services (IIHHS) is pleased to present the Youth Data Survey 2011 for Harrisonburg and Rockingham County. The OCY has been working with the community since 1996 to provide key data about local youth risk behaviors and produce data which enables the community to develop priority areas around youth issues. Administered by the OCY, the Youth Data Survey (YDS) is a collaborative effort between many community partners including: United Way, Harrisonburg City and Rockingham County Public Schools, Eastern Mennonite High School, James Madison University, Healthy Community Council, Rockingham Memorial Hospital Community Health, and the Strong Families-Great Youth Coalition. Over 50 agency representatives and community volunteers assist with the administration of the survey every two years. The goal of the YDS is to examine the current as well as longitudinal trends around local youth risk behaviors with an approach that taps into the larger community question of what assets we need in our community to help people successfully navigate from infancy to adulthood. The objectives of the YDS for the community are the following: produce reliable information on risk behaviors; assess needs; ascertain gaps in service; assist in determining priority areas; allow agencies access to local data in order to write successful state, federal, and foundation grant applications to address the identified needs; and evaluate progress over time on the impact agency programs have on the local youth. The ultimate goal is to improve the quality of life for the children and youth in Harrisonburg and Rockingham County.

Every two years in October the survey is administered to approximately half of all 8<sup>th</sup>, 10<sup>th</sup>, and 12<sup>th</sup> graders in Harrisonburg City and Rockingham County. The students complete two surveys: one is the nationally recognized Pride Survey; and the other is the locally created Youth Data Survey based in part on the national Youth Risk Behavior Survey. Every 10 years a committee comprised of local agency representatives and interested community members evaluate the survey and make any necessary additions and revisions. JMU students assist OCY staff and help secure and train agency representatives and community volunteers to administer the survey. This report would not be possible without the support of our local schools, community organizations and many dedicated volunteers.

The survey was administered during the last week of October 2011 to youth in Harrisonburg City and Rockingham County. Surveys were completed by 2,170 students (1062 females and 1099 males) between the ages of 13 and 19.

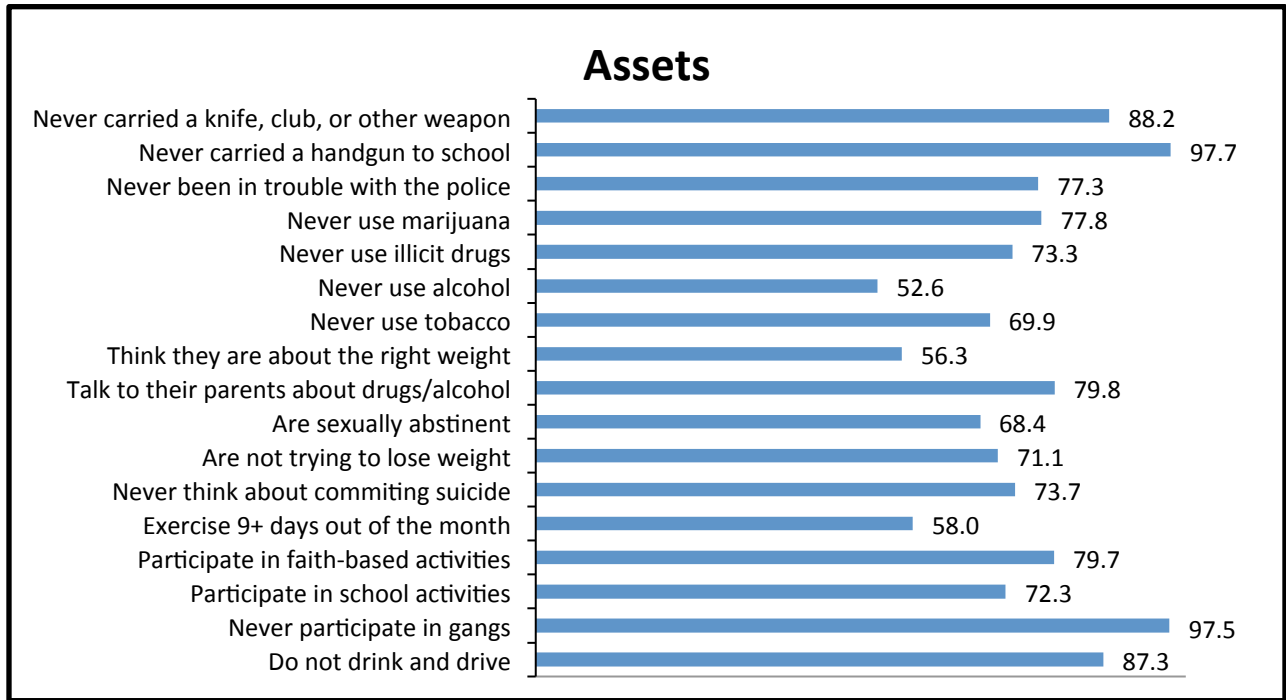
### Navigation

This report presents information on key issues affecting the youth in our community. The Quick Facts section gives an overview of the assets and risk factors present in our youth. The data is then presented by categories for a more detailed investigation of assets and risk factors. We have added some new features to the report for 2011; the report has been condensed by including multiple charts on each page; Infographics (visual representation of data) are included on sexuality, alcohol use, drug and tobacco use, and health and wellness. Following the categories you will find some supporting data on parents. The final section includes Topical Fact Sheets that provide at-a-glance information on selected risk factors. The surveys are included in the appendix for your reference.

### Additional Information

In addition to the data presented in this report, the OCY is available to make specialized presentations or reports for any interested group. Please contact Kim Hartzler-Weakley at 568-7083 or hartzlkm@jmu.edu with requests. Also, archived data from all administrations of the Youth Data Survey (1997-2009) is available on the OCY web site ([www.theocy.org](http://www.theocy.org)).

# Quick Facts on Our Youth 2011



## Risk Factors

### Sexual Activity

Of sexually active youth (31.2%)  
 54.8% - Use condoms  
 11.9% - No method  
 8.3% - Use withdrawal  
 18.4% - Use birth control pill  
 6.6% - Use birth control shot

### Alcohol Use

1.5% - Daily  
 9.5% - Weekly  
 21.7% - Monthly  
 47.3% - Annually

### Tobacco Use

8.8% - Daily  
 14.0% - Weekly  
 19.0% - Monthly  
 30.1% - Annually

### Illicit Drug Use

5.6% - Daily  
 10.8% - Weekly  
 16.4% - Monthly  
 26.7% - Annually

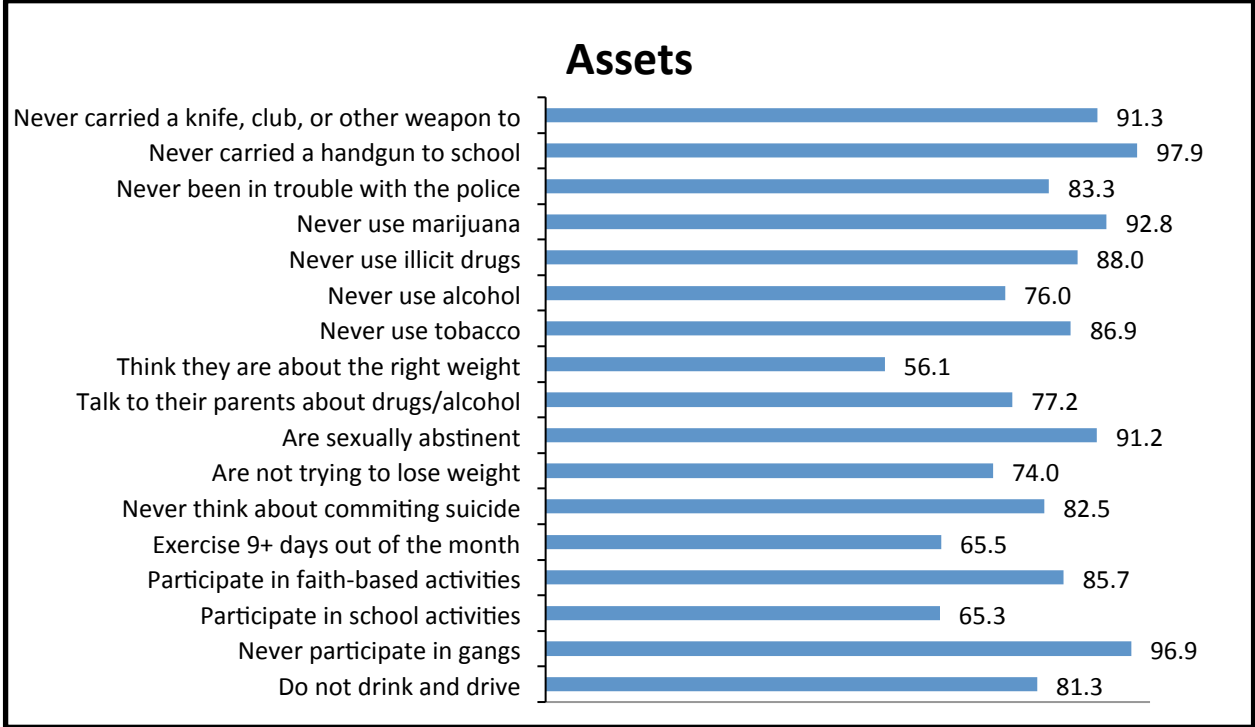
### Gang Activity

1.1% - Participate a lot  
 0.8% - Often  
 1.5% - Sometimes  
 2.1% - Seldom

### Dangerous Weight Loss

1.2% - Vomit  
 1.0% - Use pills  
 0.5% - Both Vomit and pills

# Quick Facts on Our 8<sup>th</sup> Graders 2011



## Risk Factors

### Sexual Activity

Of sexually active 8<sup>th</sup> Graders (8.8% of total)

- 60.0% - Use condoms
- 28.0%- Use no method
- 4.0%- Use withdrawal
- 1.9% - Use birth control pill
- 5.7%- Use birth control shot

### Tobacco Use

- 2.0% - Daily
- 4.8% - Weekly
- 6.6% - Monthly
- 13.1% - Annually

### Alcohol Use

- 1.5% - Daily
- 4.5% - Weekly
- 7.6% - Monthly
- 24.0%- Annually

### Illicit Drug Use

- 2.0% - Daily
- 3.8% - Weekly
- 6.2% - Monthly
- 11.9% - Annually

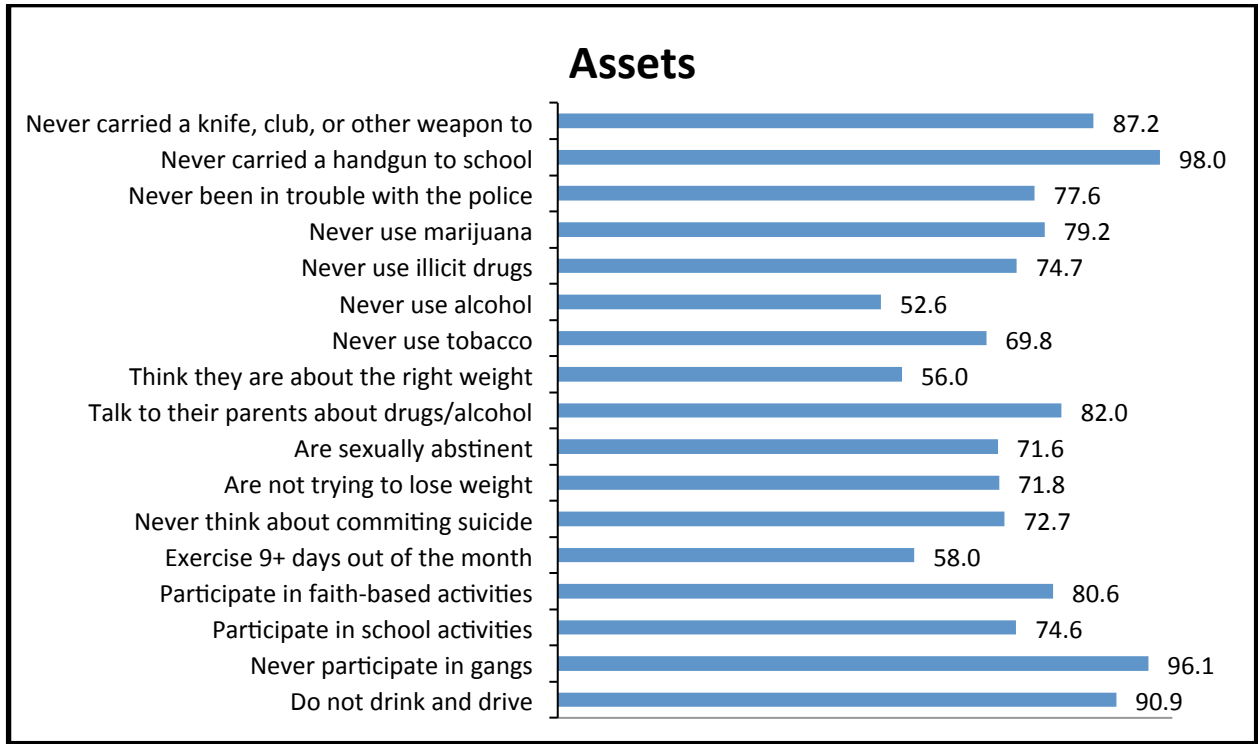
### Gang Activity

- 0.9% - Participate a lot
- 0.4% - Often
- 0.9% - Sometimes
- 2.9% - Seldom

### Dangerous Weight Loss

- 1.1% - Vomit
- 0.5% - Use Pills
- 0.4% - Both Vomiting and Pills

# Quick Facts on Our 10<sup>th</sup> Graders 2011



## Risk Factors

### Sexual Activity

Of sexually active 10<sup>th</sup> graders (28.2% of total)  
 63.7% - Use condoms  
 12.8% - Use no method  
 8.9% - Use withdrawal  
 10.1% - Use birth control pill  
 4.4% - Use birth control shot

### Tobacco Use

7.7% - Daily  
 12.1% - Weekly  
 17.1% - Monthly  
 30.2% - Annual

### Alcohol Use

1.1% - Daily  
 7.7% - Weekly  
 19.3% - Monthly  
 47.5% - Annual

### Illicit Drug Use

4.3% - Daily  
 9.8% - Weekly  
 12.2% - Monthly  
 22.8% - Annual

### Gang Activity

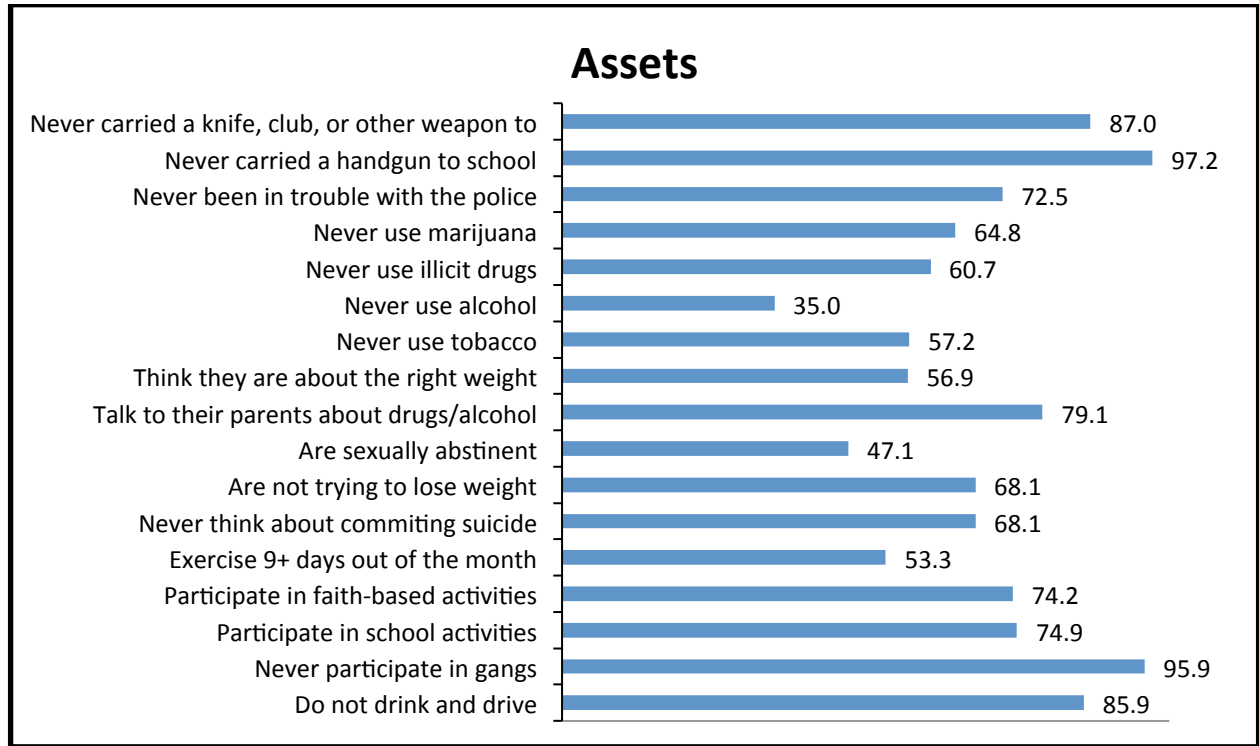
0.8% - Participate a lot  
 0.8% - Often  
 2.1% - Sometimes  
 2.1% - Seldom

### Dangerous Weight Loss

1.0% - Vomit  
 0.7% - Use Pills  
 0.6% - Both Vomiting and Pills



# Quick Facts on Our 12<sup>th</sup> Graders 2011



## Risk Factors

### Sexual Activity

Of sexually active 12<sup>th</sup> graders (52.4% of total)  
 48.7% - Use condoms  
 8.9% - Use no method  
 8.6% - Use withdrawal  
 25.8% - Use birth control pill  
 8.1% - Use birth control shot

### Tobacco Use

15.3% - Daily  
 23.1% - Weekly  
 30.6% - Monthly  
 42.8% - Annual

### Alcohol Use

2.0% - Daily  
 15.5% - Weekly  
 35.5% - Monthly  
 65.1% - Annually

### Illicit Drug Use

9.9% - Daily  
 17.0% - Weekly  
 25.9% - Monthly  
 39.3% - Annual

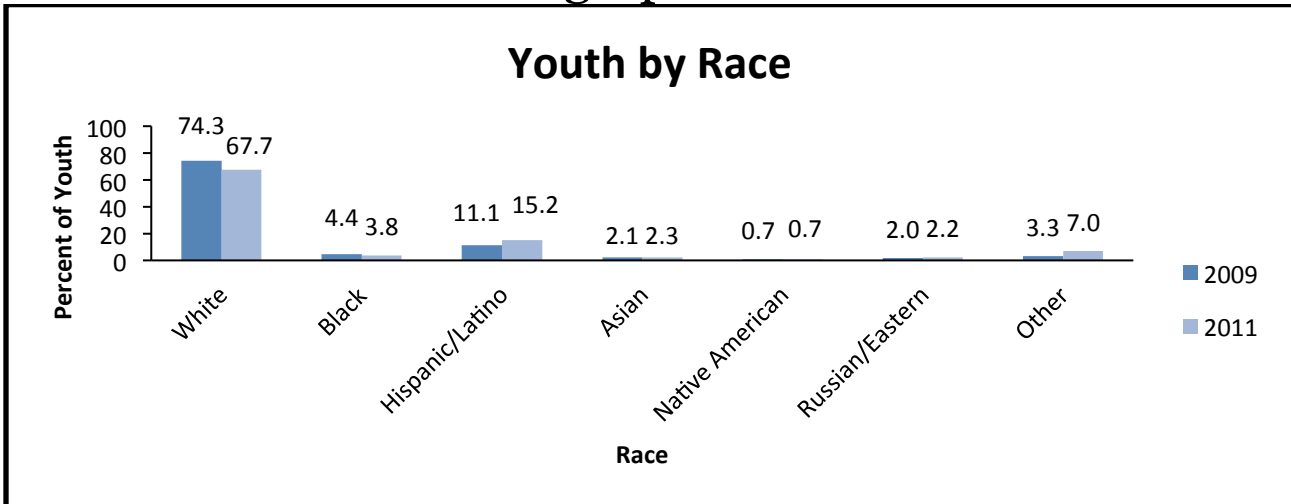
### Gang Activity

1.5% - Participate a lot  
 1.1% - Often  
 1.4% - Sometimes  
 1.4% - Seldom

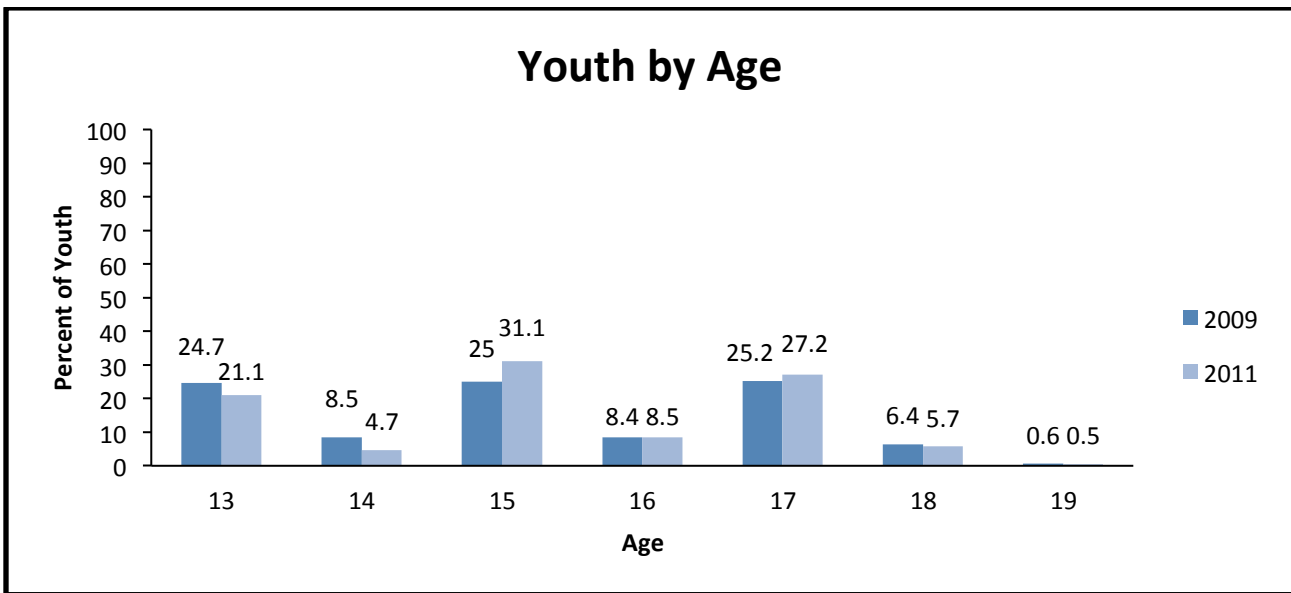
### Dangerous Weight Loss

1.4% - Vomit  
 1.9% - Use Pills  
 0.4% - Both Vomiting and Pills

# Demographics 2011

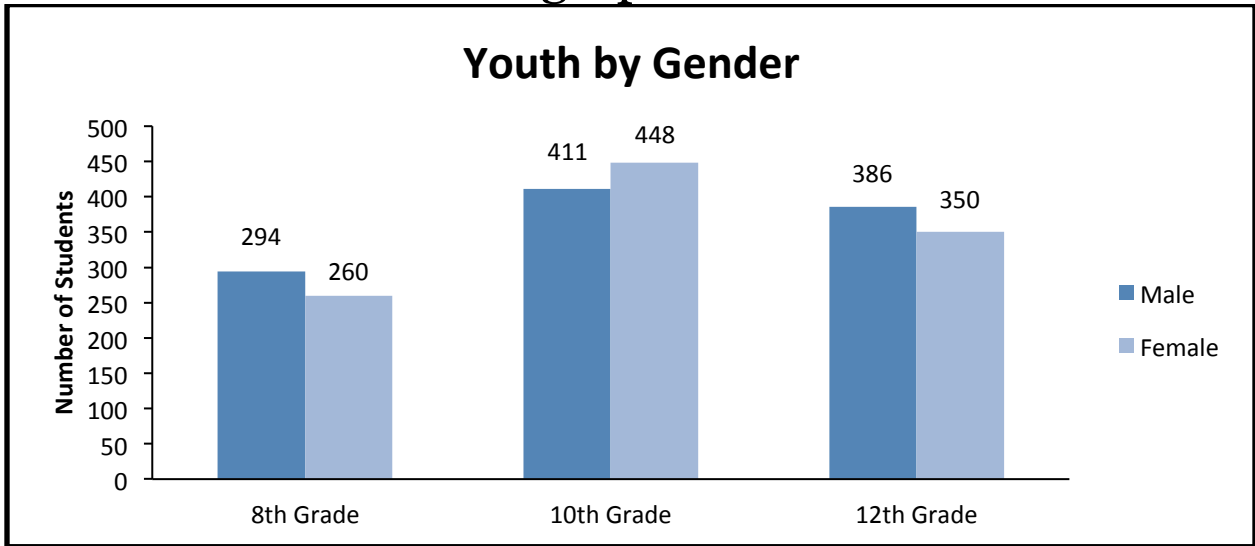


Source: Rockingham County/Harrisonburg Youth Survey

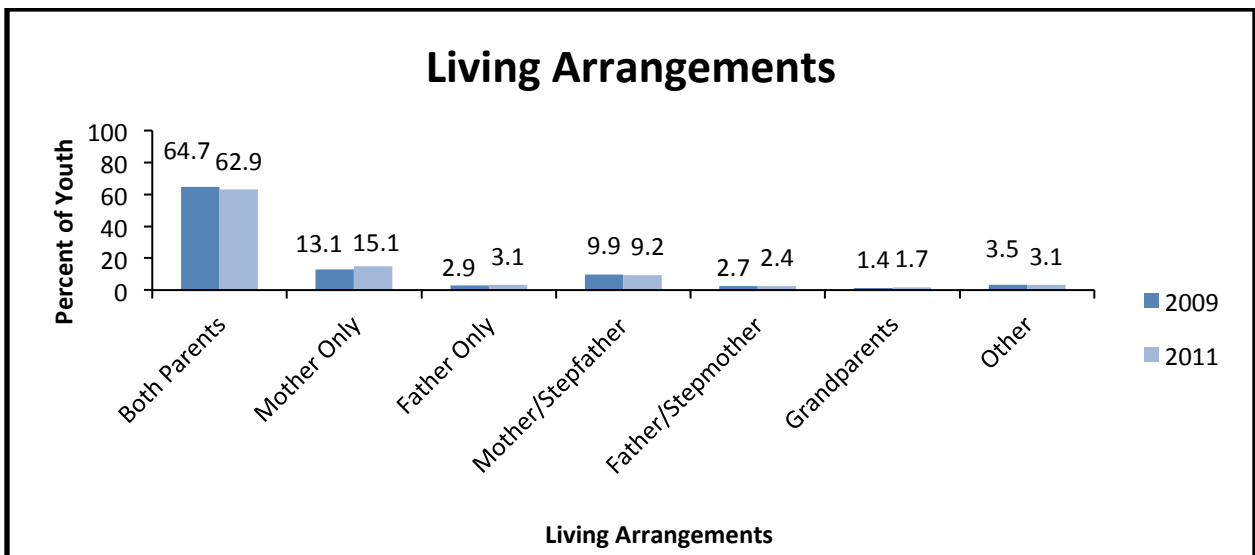


Source: Rockingham County/Harrisonburg Youth Survey

# Demographics 2011



Source: PRIDE Survey

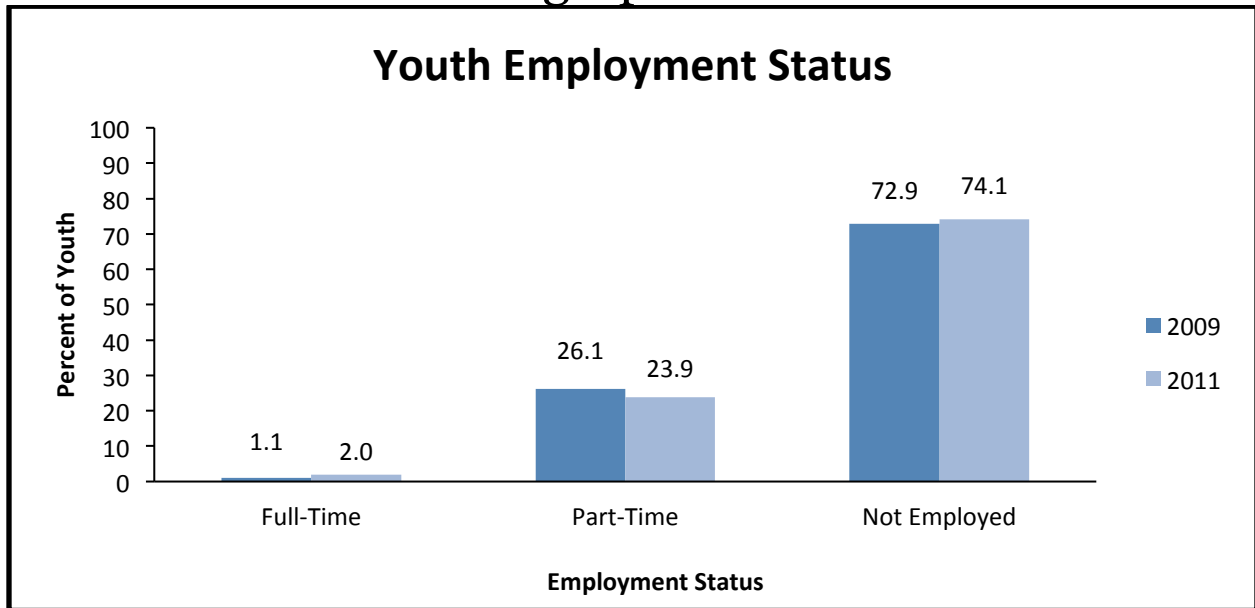


Source: Rockingham County/Harrisonburg Youth Survey

**What the numbers and other information told us:**

The majority of teens still live with both parents, although the number has decreased by 1.8% since 2009.

# Demographics 2011



Source: PRIDE Survey

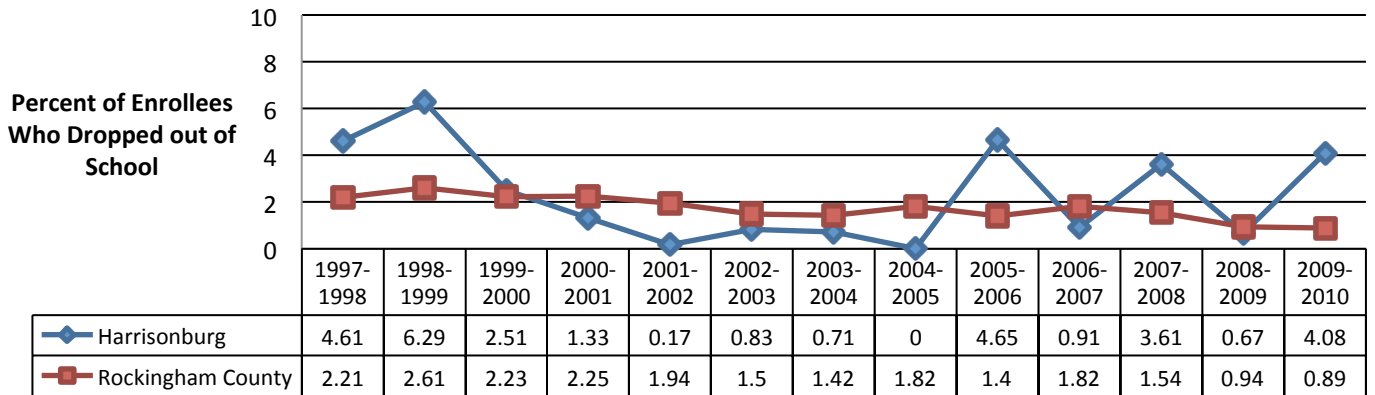
#### What the numbers and other information told us:

The majority of youth are not employed (74.1%), an increase from 2009.

25.9% of youth are employed (full or part time), a decrease from 27.2% in 2009.

# Education 2011

## School Dropouts for Harrisonburg Public Schools and Rockingham County Public Schools

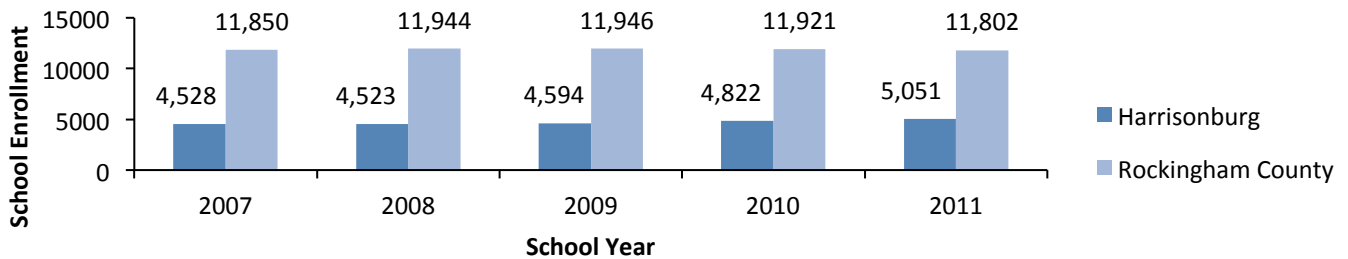


Source: Virginia Department of Education

**What the numbers and other information told us:**

Harrisonburg's dropout rate rose sharply for the 2009-2010 school year, while Rockingham County's dropout rate slightly decreased.

## Enrollment for Harrisonburg Public Schools and Rockingham County Public Schools (Ages 5-19)

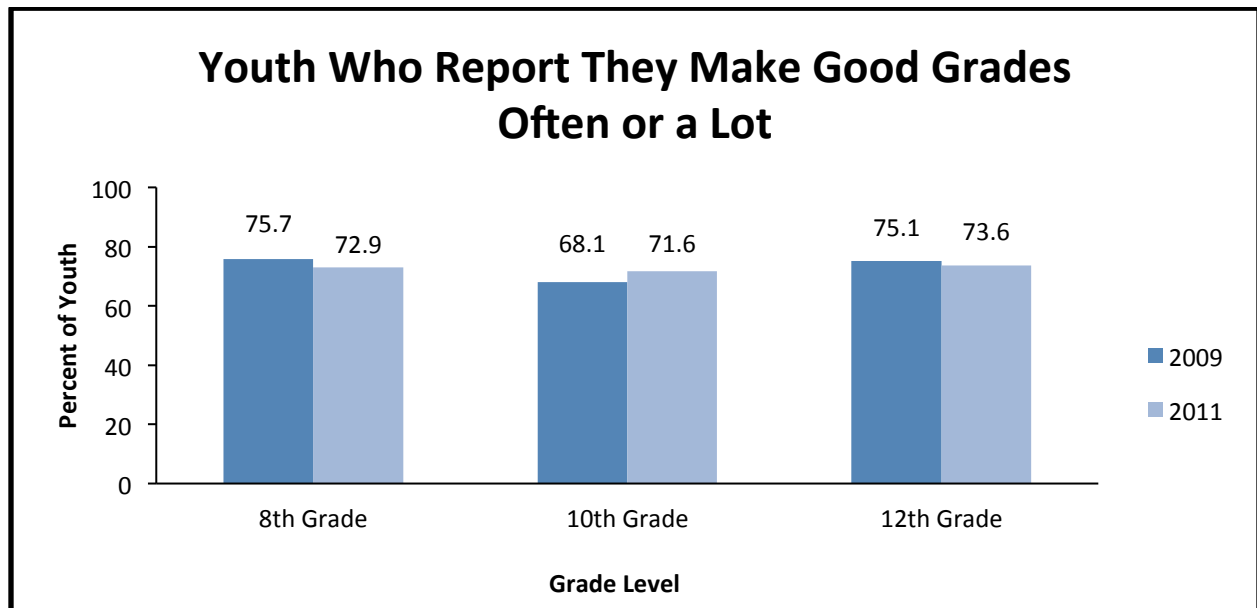


Source: Virginia Department of Education

**What the numbers and other information told us:**

Since 2009 Rockingham County has seen a decline in the number of students enrolled in public schools. Harrisonburg has seen a steady incline in enrollment since 2008.

## Education 2011



Source: PRIDE survey

**What the numbers and other information told us:**

8<sup>th</sup> and 12<sup>th</sup> graders show a decrease in percentage of who make good grades often or a lot, while 10<sup>th</sup> graders show an increase.

THE FACTS ON

# Teen Sex

**54.8%**

OF TEENS WHO ARE SEXUALLY ACTIVE SAY THAT THEY USE CONDOMS— THE MOST POPULAR BIRTH CONTROL CONTRACEPTIVE.

**68.4%**

OF TEENS SAY THAT THEY ARE SEXUALLY ABSTINENT.

SOURCES:  
 - 2011 YOUTH DATA SURVEY (WWW.THEOCY.ORG)  
 - VIRGINIA CENTER FOR HEALTH STATISTICS  
 - HTTP://WWW.VOH.VIRGINIA.GOV/HEALTHSTATS/DOCUMENTS/2010/PDFS/TEENPREGAGE10.PDF  
 - THE NATIONAL CAMPAIGN TO PREVENT TEEN PREGNANCY (WWW.THENATIONALCAMPAIGN.ORG)



**13.2%**

OF TEENS SAY THEY DRANK ALCOHOL OR USED DRUGS BEFORE THE LAST TIME THEY HAD SEXUAL INTERCOURSE.

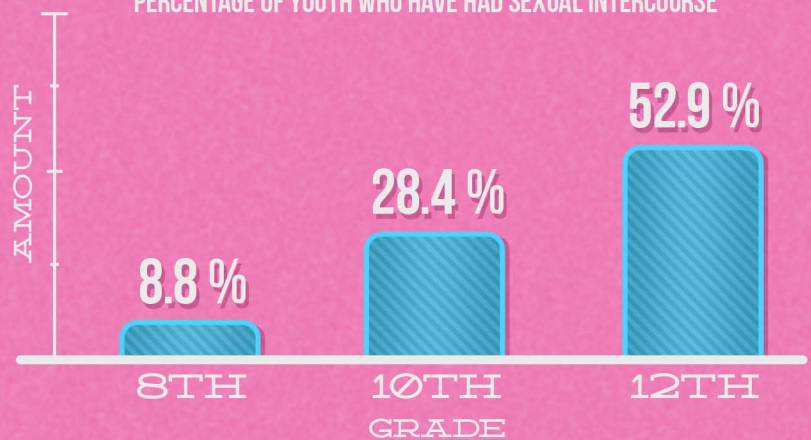
**x 3**

THE RATE OF TEEN\* PREGNANCY IN HARRISONBURG TRIPLES THE TEEN PREGNANCY RATE IN ALL OF VIRGINIA.

\*THIS RATE IS FOR 15-17 YEAR OLD GIRLS



PERCENTAGE OF YOUTH WHO HAVE HAD SEXUAL INTERCOURSE

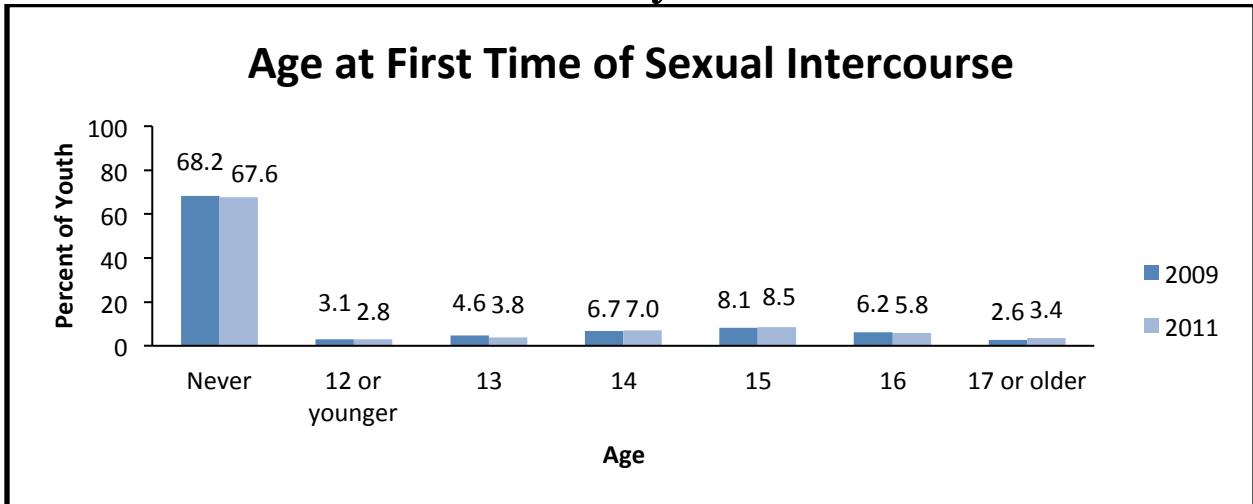


TEEN CHILDBEARING IN VIRGINIA COST TAXPAYERS AT LEAST \$215 MILLION IN 2008. IN HARRISONBURG AND ROCKINGHAM COUNTY ALONE, TEEN CHILDBEARING COST TAXPAYERS NEARLY \$3.5 MILLION.





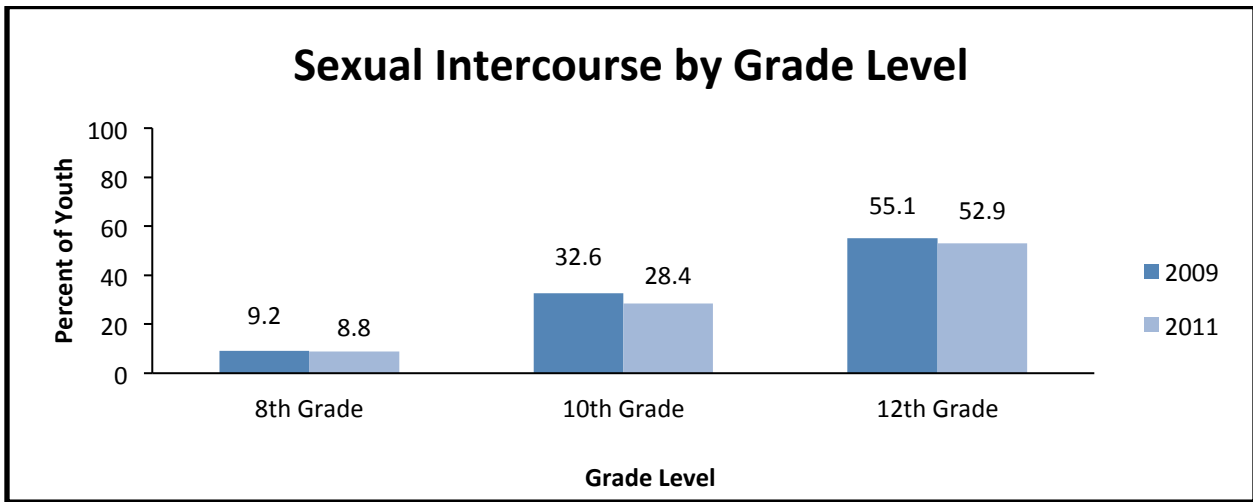
# Sexuality 2011



Source: Rockingham County/Harrisonburg Youth Survey

**What the numbers and other information told us:**

The number of youth remaining abstinent has decreased slightly from 68.2% in 2009 to 67.6% in 2011.



Source: Rockingham County/Harrisonburg Youth Survey

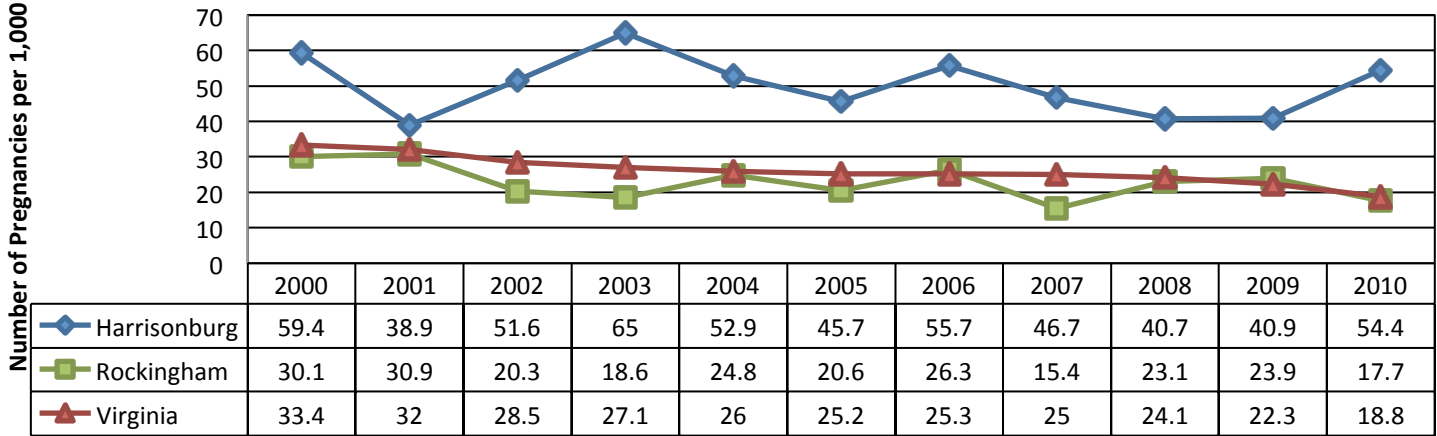
**What the numbers and other information told us:**

Sexual activity has decreased in 8<sup>th</sup>, 10<sup>th</sup>, and 12<sup>th</sup> graders. The most significant decrease is seen in 10<sup>th</sup> graders (4.2%).

68.4% of teens say that they are sexually abstinent. 74.1% of youth agree that abstinence is the only 100% effective way to prevent pregnancy and the spread of sexually transmitted infection(s). This number has decreased from 2009 (77%).

# Sexuality 2011

## Teen Pregnancy Rates per 1,000 Females Age 15-17



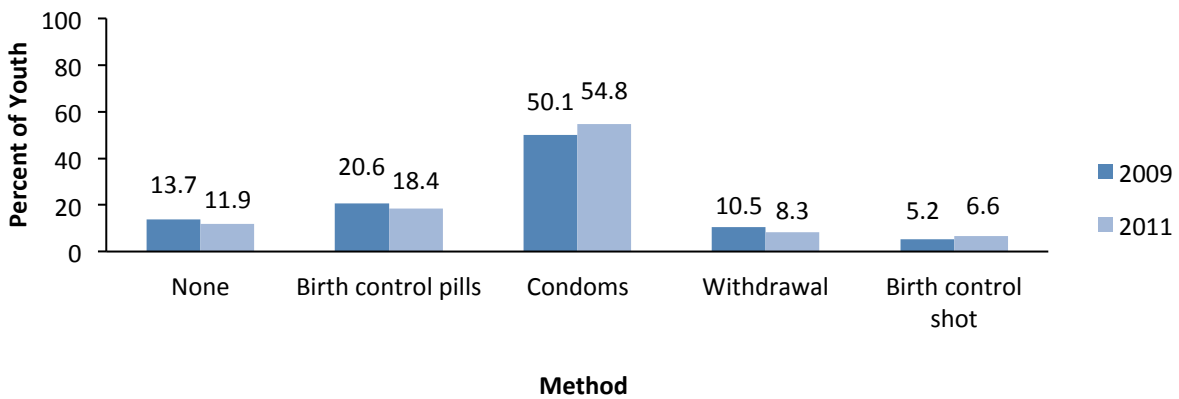
Source: Virginia Center for Health Statistics

### What the numbers and other information told us:

In 2010, the rate of teen pregnancy among females age 15-17 in Harrisonburg (54.4 per 1,000) triples the teen pregnancy rate among females age 15-17 in Virginia (18.8 per 1,000).

While the rate of teen pregnancy has been rising in Harrisonburg, it has been dropping in Virginia since 2006.

## Choice of Contraceptive Method



Source: Rockingham County/Harrisonburg Youth Survey

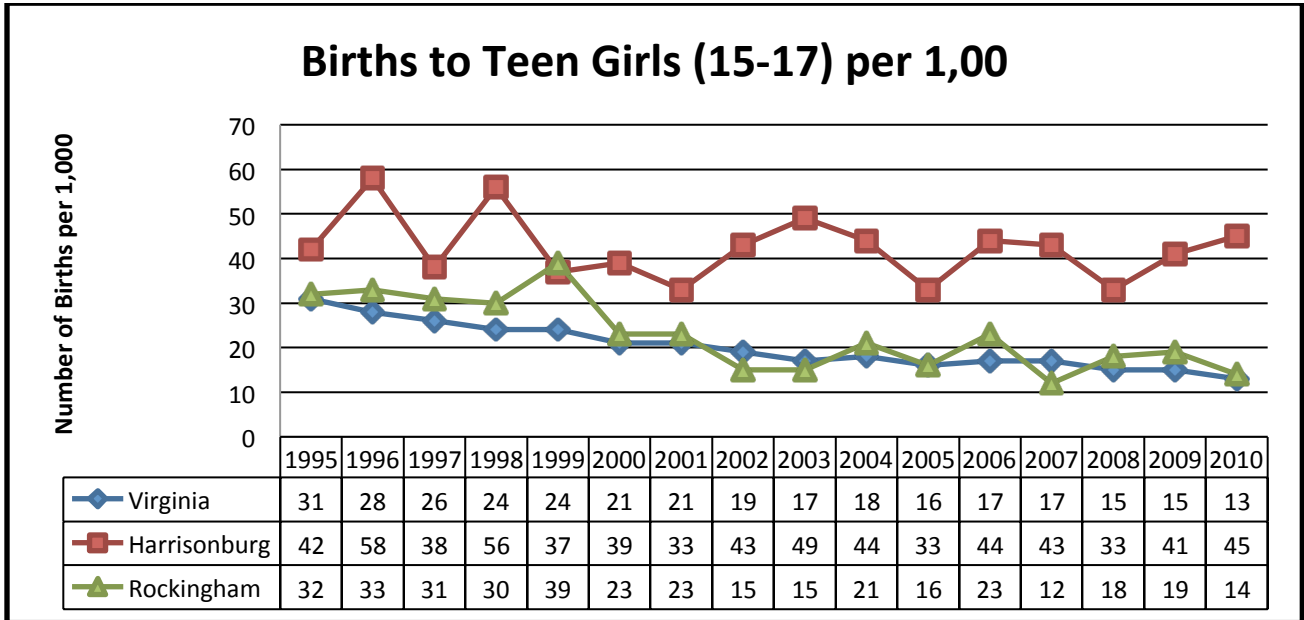
### What the numbers and other information told us:

11.9% of teens who are sexually active say that they do not use any form of protection.

There was a 4.7% increase in the use of condoms and a 1.4% increase in the use of birth control shots from 2009.

All other methods showed a decrease in use.

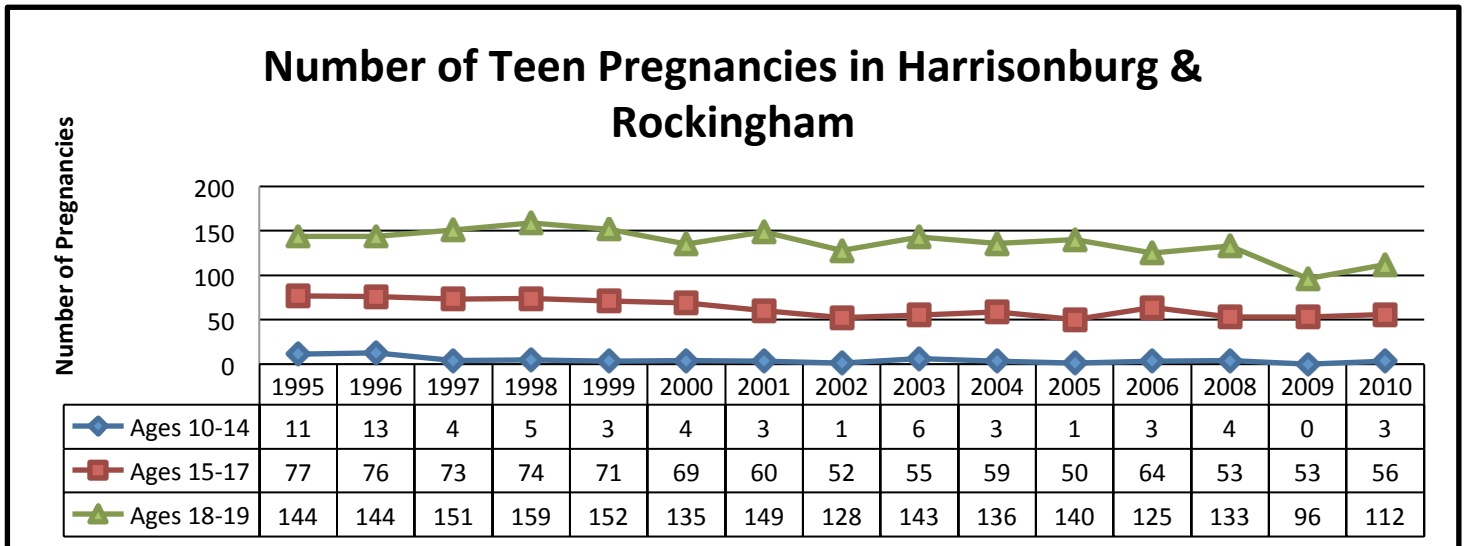
# Sexuality 2011



Source: Virginia Center for Health Statistics

**What the numbers and other information told us:**

In 2010, the rate of births to teen girls age 15-17 in Harrisonburg (45 per 1,000) is more than triple the birth rate among teen girls age 15-17 in Virginia (13 per 1,000).

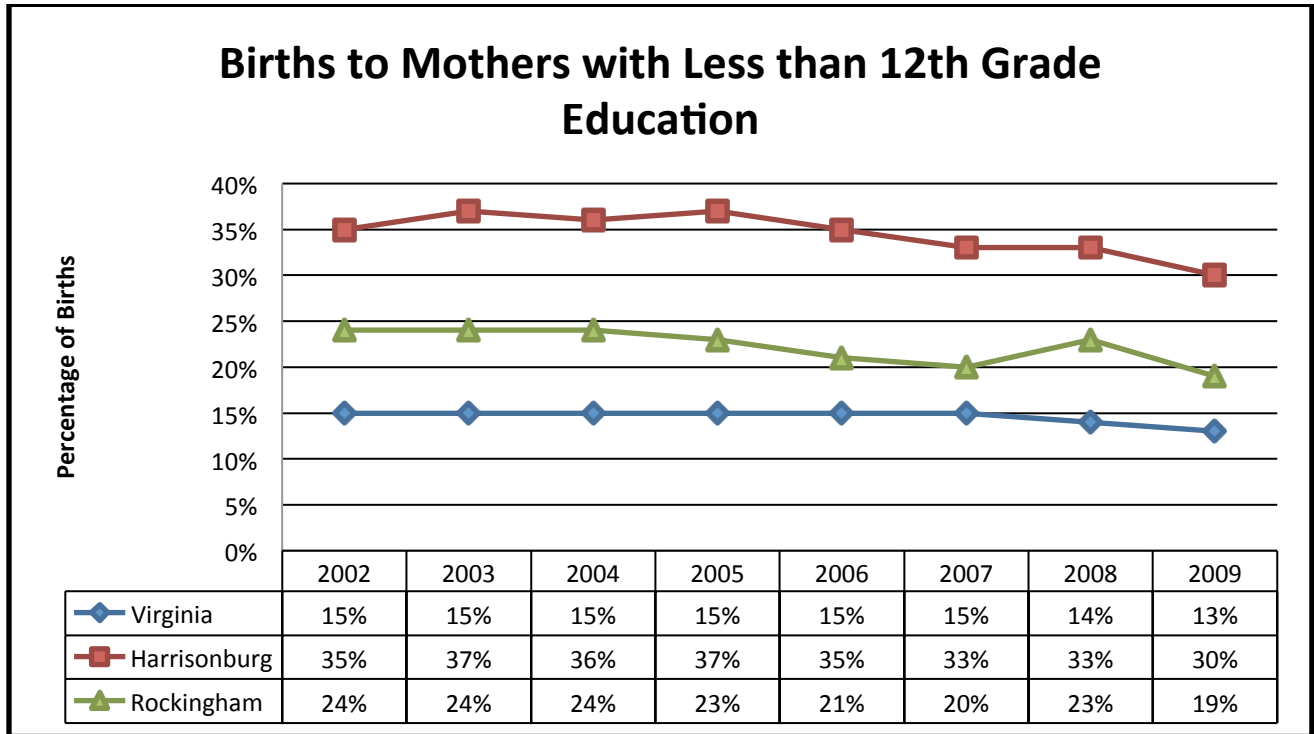


Source: Virginia Center for Health Statistics

**What the numbers and other information told us:**

Harrisonburg and Rockingham County experienced an increase in teen pregnancies for the 18-19 year old age group in 2010 after a large decrease in 2009.

# Sexuality 2011



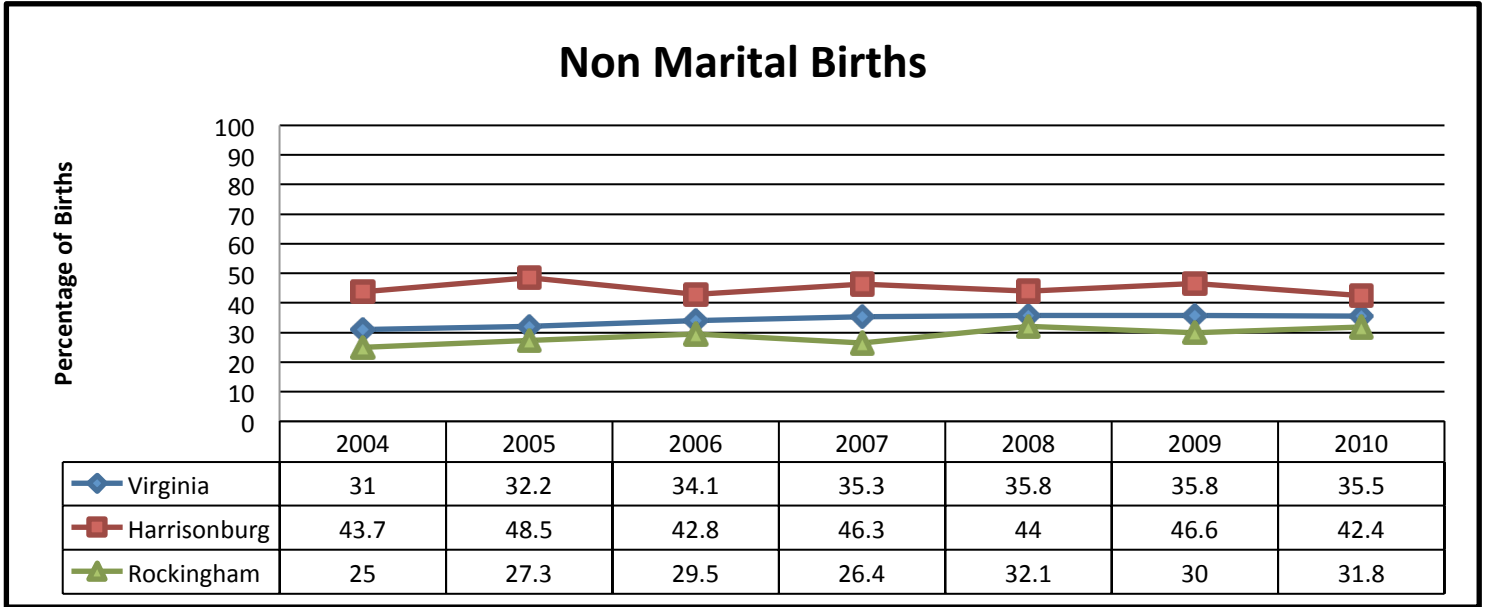
Source: Kids Count Data Center, Annie E. Casey Foundation

**What the numbers and other information told us:**

In 2009, the percentage of births to mothers with less than 12<sup>th</sup> grade education in Harrisonburg (30%) is more than double the percentage for the state of Virginia. The percentage of births to mothers with less than 12<sup>th</sup> grade education in Rockingham County is 6% higher than the percentage for the state of Virginia.

All births to mothers with less than 12<sup>th</sup> grade education for Virginia, Harrisonburg and Rockingham have slightly decreased since 2008.

# Sexuality 2011



Source: Virginia Center for Health Statistics

**What the numbers and other information told us:**

The non-marital birth rate in Harrisonburg has consistently been above the non-marital birth rate of Virginia since 2004.

Note: the figures provided for non-marital births should not be used as a proxy for unplanned pregnancies.





**23.2%**

OF TEENS FEEL IT IS VERY EASY TO GET ALCOHOL PRODUCTS.

 **15.1%**

TEENS SAY THAT THEIR FRIENDS DRINK ALCOHOL A LOT.

THE AVERAGE AGE AT FIRST DRINK IS



THE FACTS ON

# TEEN Alcohol use

**21.7%**

OF TEENS REPORT THEY USE ALCOHOL MONTHLY.



**58.5%**

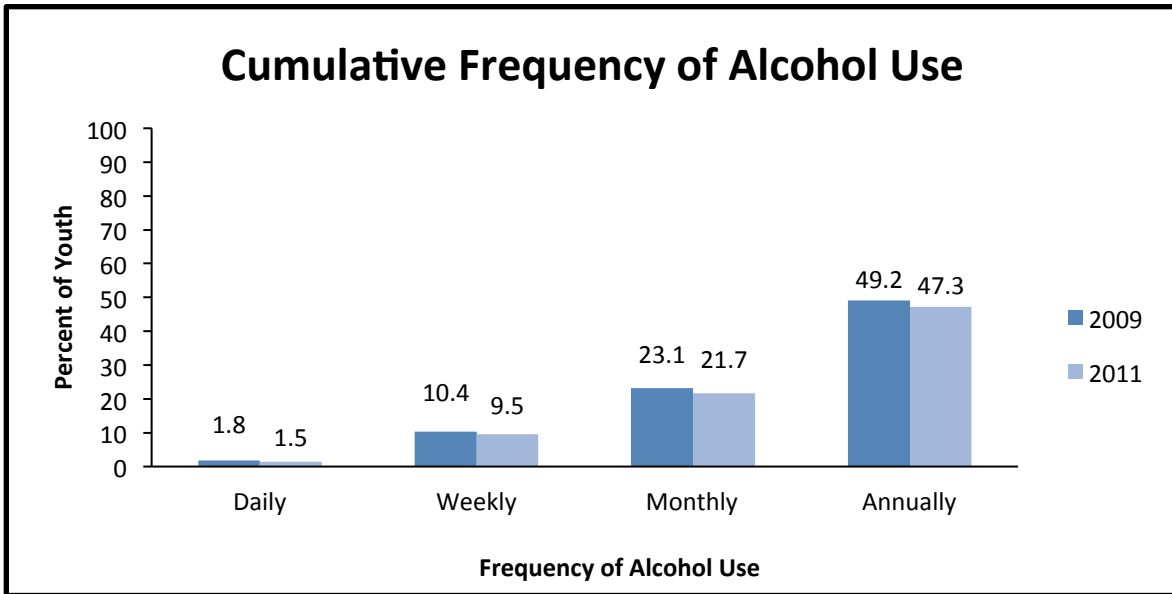
OF TEENS FEEL THAT THEIR PARENTS WOULD THINK THAT IT WOULD BE VERY WRONG IF THEY USED ALCOHOL.







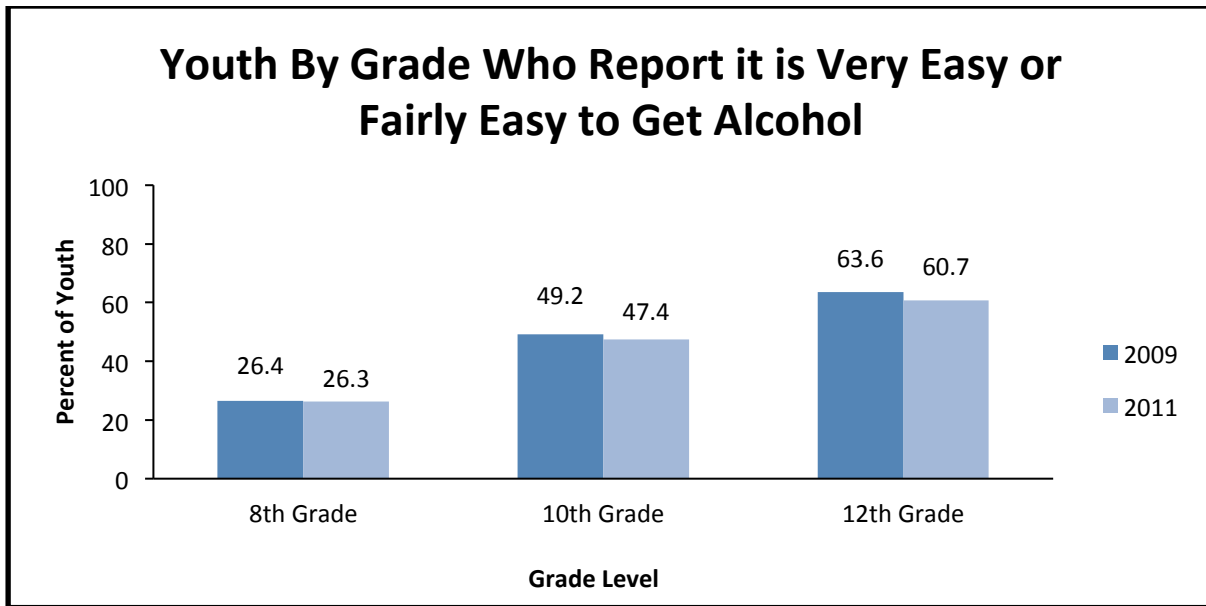
# Alcohol Use 2011



Source: PRIDE Survey

**What the numbers and other information told us:**

There has been a drop in the daily, weekly, monthly and annual use of alcohol since 2009.

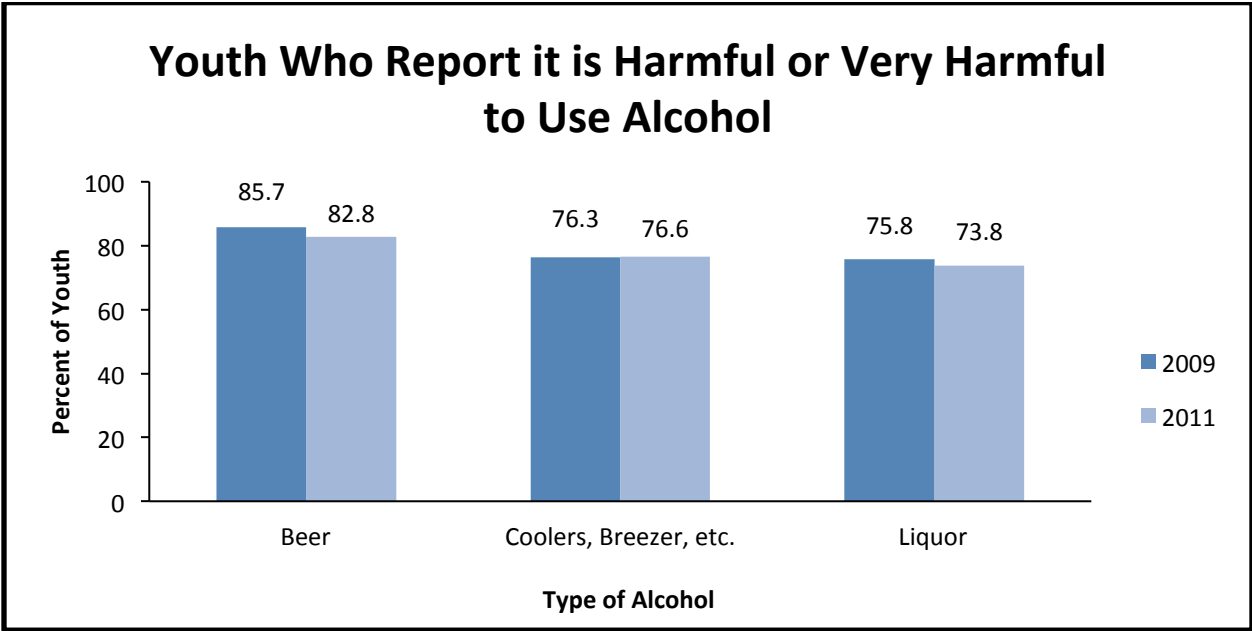


Source: PRIDE Survey

**What the numbers and other information told us:**

The number of youth reporting that it is very easy or fairly easy to get alcohol slightly decreased in 8<sup>th</sup>, 10<sup>th</sup>, and 12<sup>th</sup> graders.

# Alcohol Use 2011



Source: PRIDE Survey

**What the numbers and other information told us:**

Even though the percentage of youth that feel beer is harmful or very harmful has decreased since 2009 (by 2.9%) it is still thought to be more harmful than coolers, breezer, etc. and liquor.



**14%**

OF TEENS REPORT THEY USE TOBACCO WEEKLY.

**9.5%**

OF YOUTH SMOKE CIGARETTES WEEKLY, MAKING IT THE MOST POPULAR FORM OF TOBACCO USED WEEKLY

**30.1%**

OF TEENS REPORT THEY HAVE USED TOBACCO.



**24%**

OF TEENS REPORT THEY HAVE USED MARIJUANA.



## IS IT HARMFUL?

THESE TEENS THINK SO:

CIGARETTES



82.8%

SMOKELESS



76.6%

CIGARS



73.8%

MARIJUANA



48.8%



**26.4%**

OF STUDENTS REPORT IT IS VERY EASY TO GET TOBACCO PRODUCTS

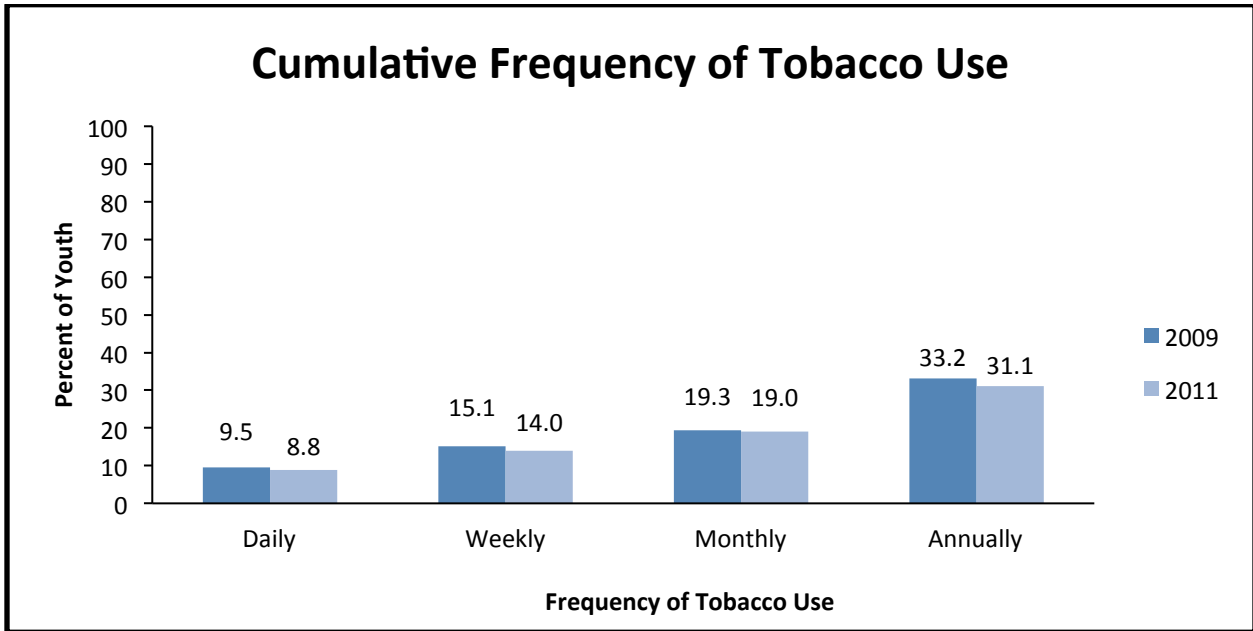
THE FACTS ON

TEEN  
**Drug and Tobacco use**





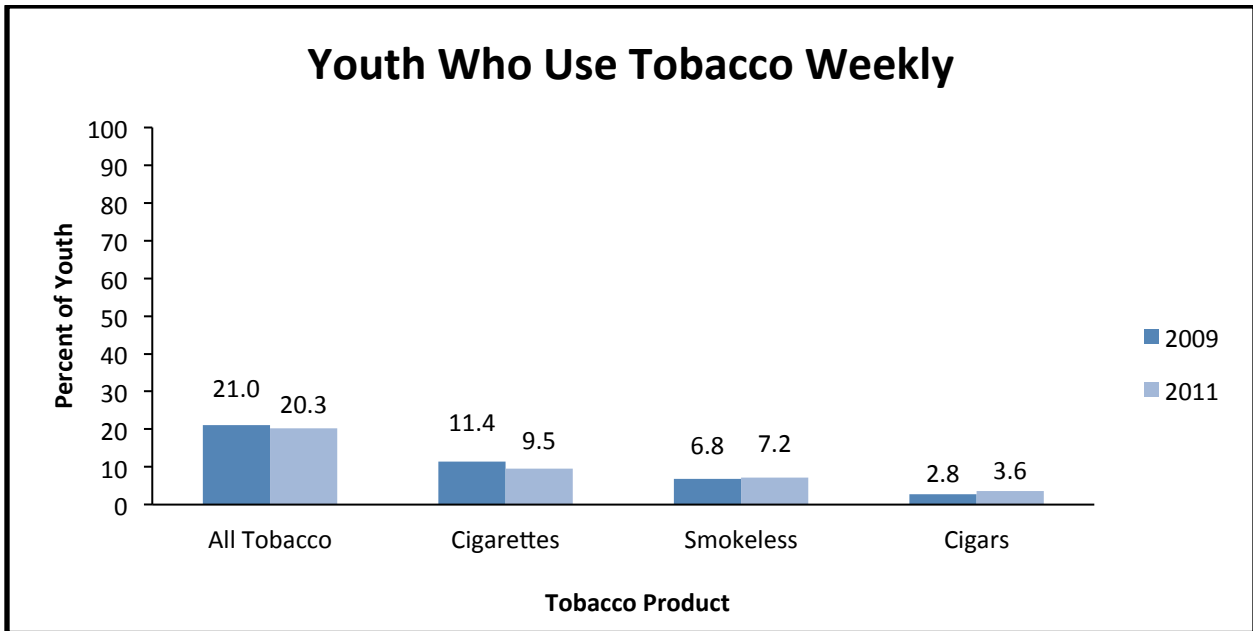
# Tobacco Use 2011



Source: PRIDE Survey

**What the number and other information told us:**

There has been a slight decrease in the overall use of tobacco in all grades from 2009.

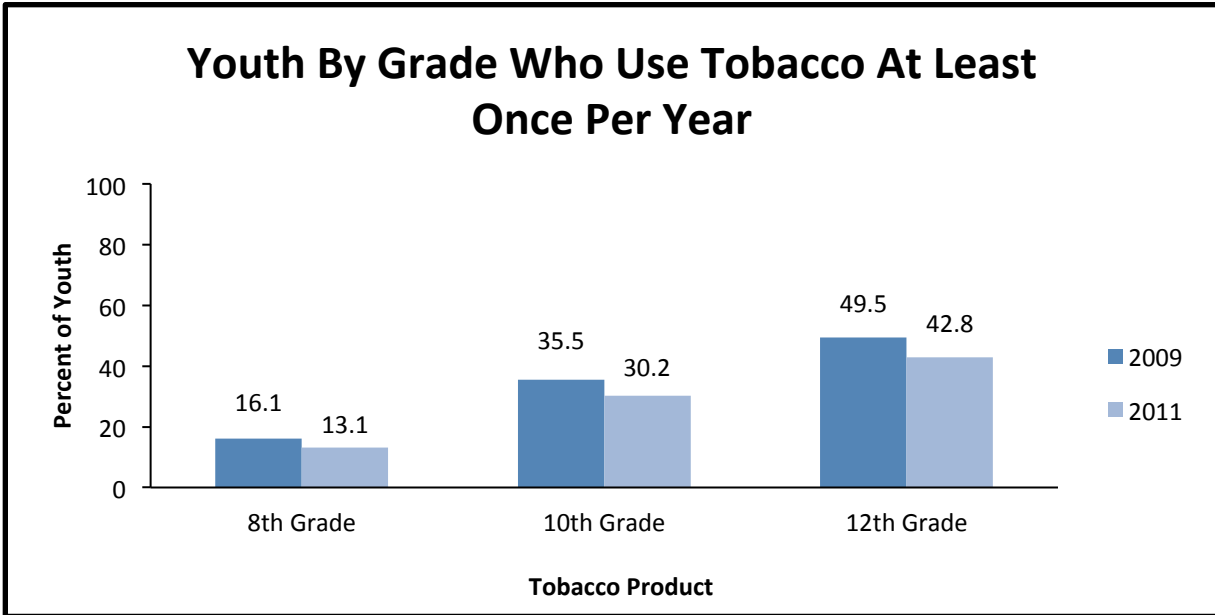


Source: PRIDE Survey

**What the numbers and other information told us:**

Cigarettes are the most popular form of tobacco used weekly followed by smokeless tobacco products.

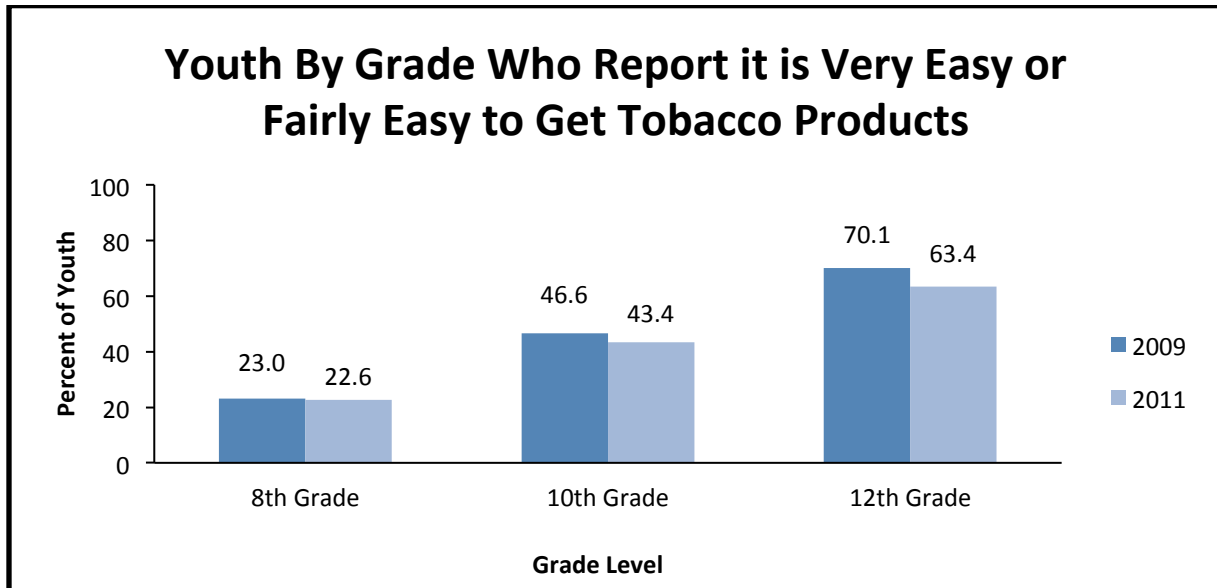
# Tobacco Use 2011



Source: PRIDE Survey

**What the numbers and other information told us:**

All grades have seen a significant decrease in the use of tobacco annually since 2009.

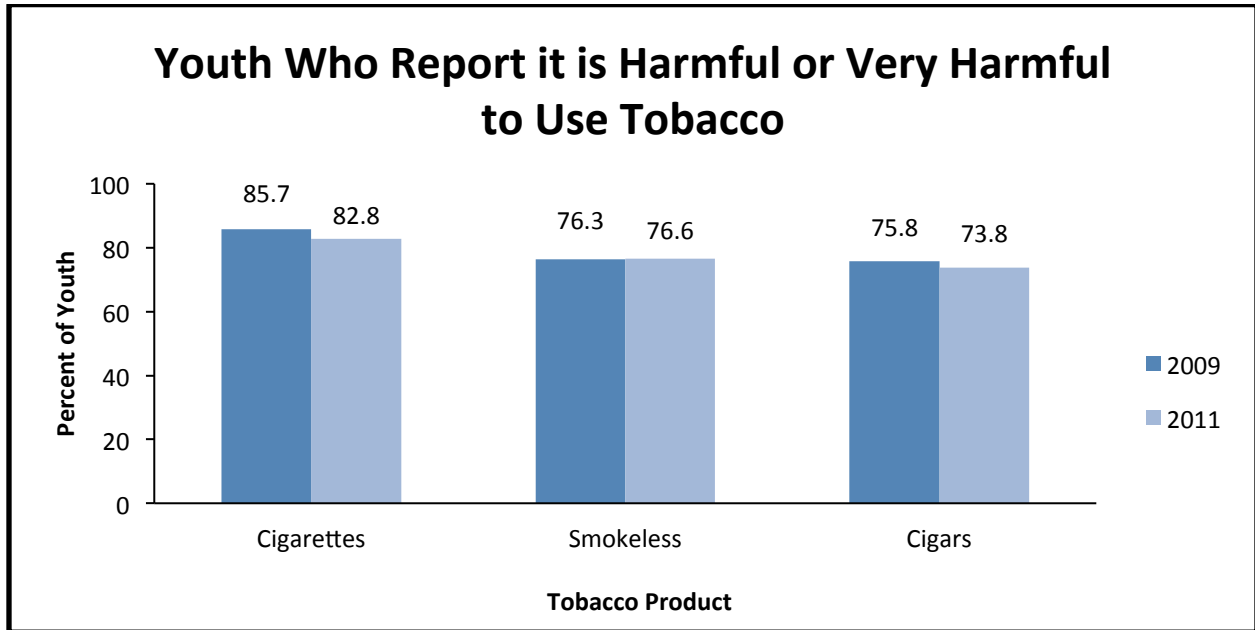


Source: PRIDE Survey

**What the numbers and other information told us:**

The ease of access to all types of tobacco products has slightly decreased among all grades.

# Tobacco Use 2011

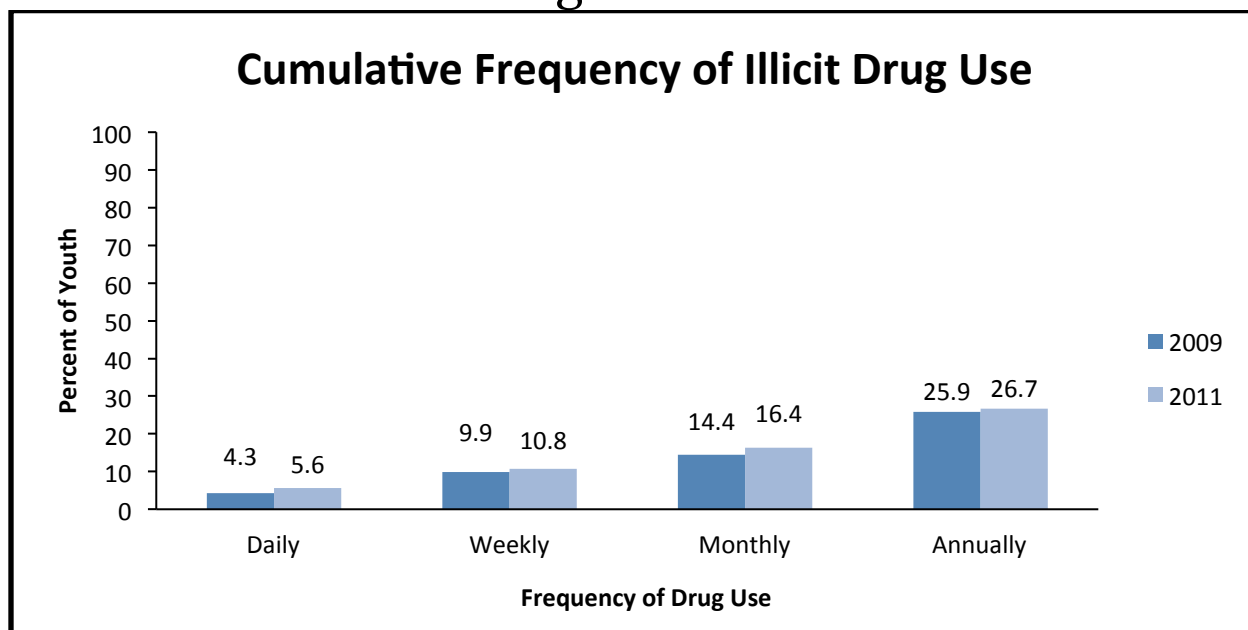


Source: PRIDE Survey

**What the numbers and other information told us:**

Most teens perceive tobacco use to be harmful to their health, there has been a slight decrease in the perception that cigarettes and cigars are harmful.

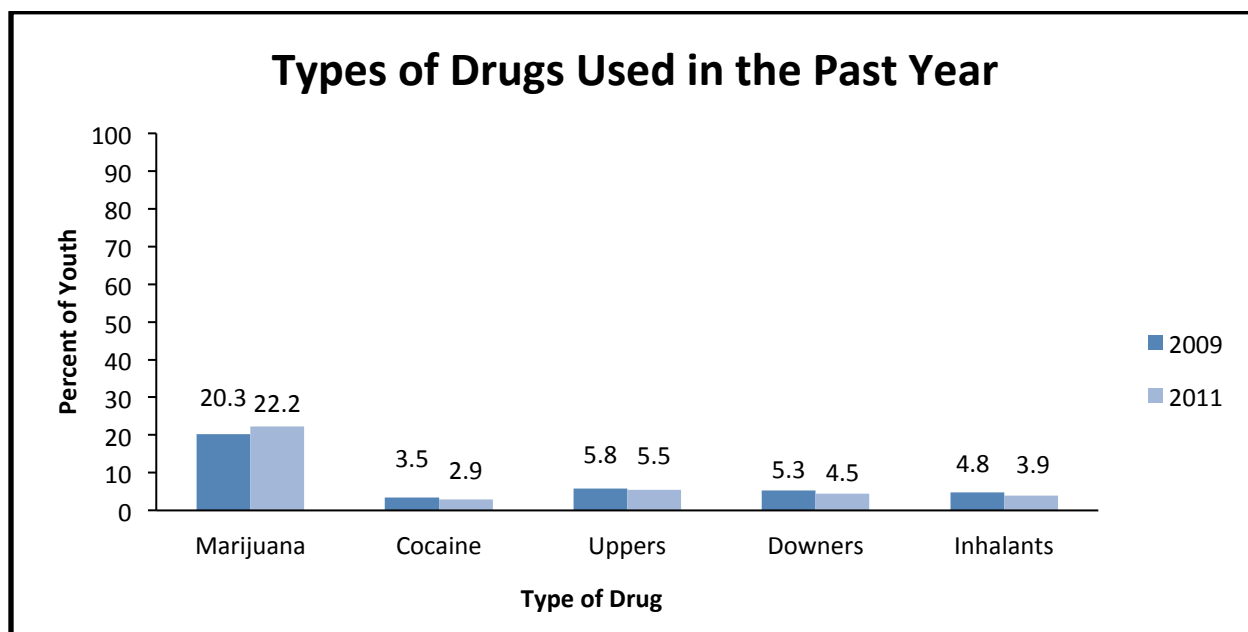
# Drug Use 2011



Source: PRIDE Survey

#### What the numbers and other information told us:

There was an increase in the daily, weekly, monthly and annual frequency of drug use since 2009 with the largest increase being monthly usage (2%).



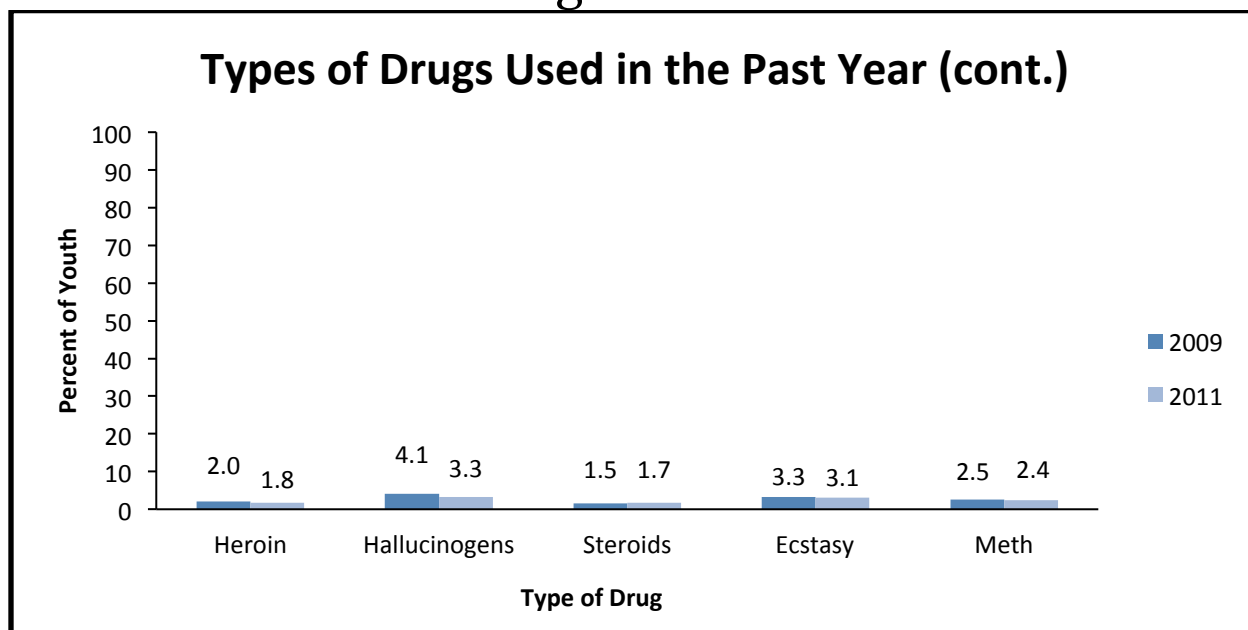
Source: PRIDE Survey

#### What the numbers and other information told us:

Marijuana remained the most used drug and its usage increased by 1.9% from 2009.



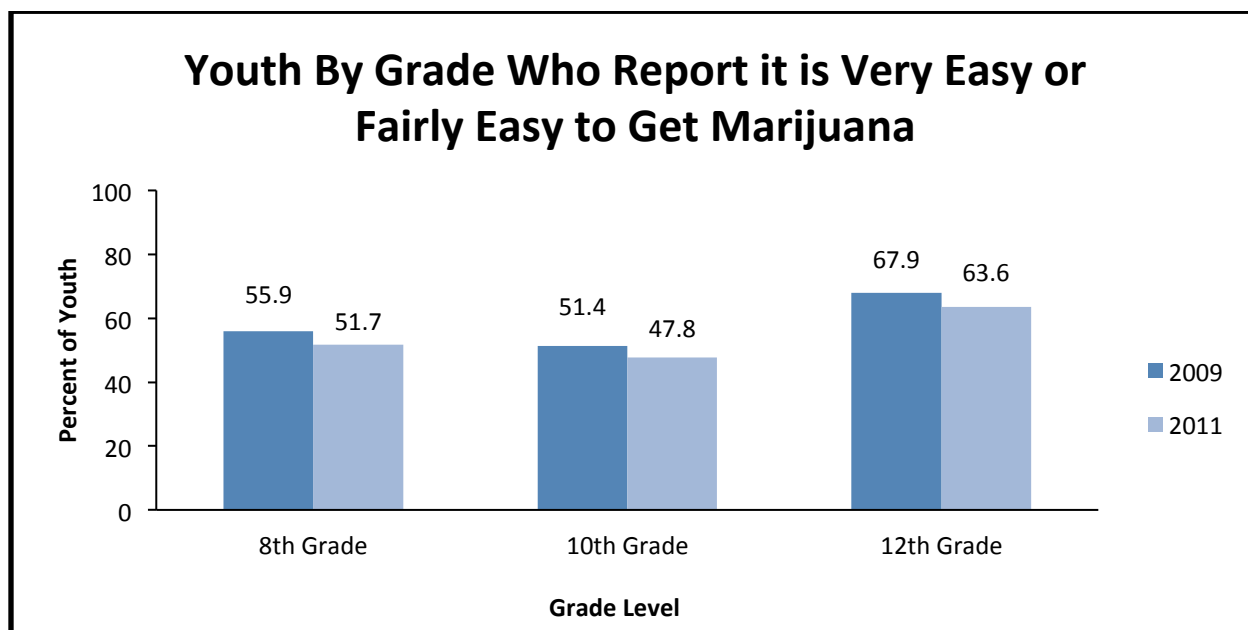
# Drug Use 2011



Source: PRIDE Surveys

**What the numbers and other information told us:**

There has been a slight decrease in the use of Heroin, Hallucinogens, Ecstasy, and Meth since 2009. There has been a slight increase in the use of steroids.

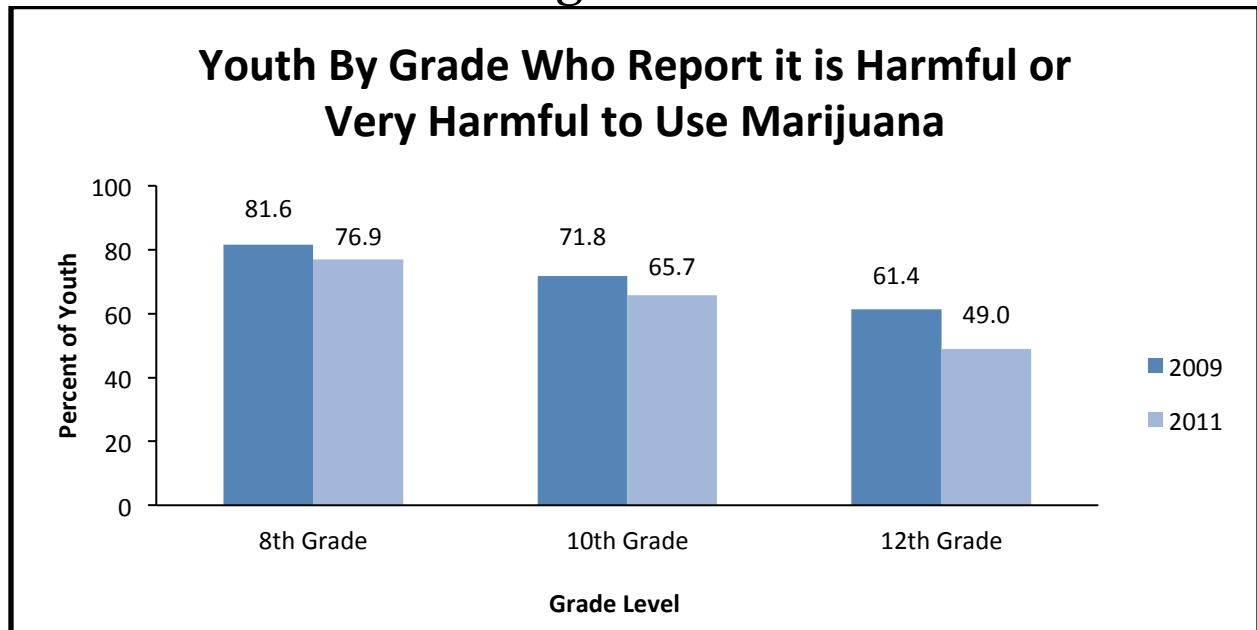


Source: PRIDE Survey

**What the numbers and other information told us:**

There has been a decrease in the number of students reporting that it is very easy or fairly easy to get marijuana

# Drug Use 2011



Source: PRIDE Survey

#### What the numbers and other information told us:

There was a drop in the percentage among all grade levels who view marijuana as harmful or very harmful. 48.8% of youth feel that using marijuana is very harmful to their health.

# Drug Use 2011

## Youth Nationwide Who Use Illicit Drugs

<b>PRIDE</b>	<b>Daily</b>	<b>Weekly</b>	<b>Monthly</b>	<b>Annually</b>
<b>2009</b>	4.8%	8.9%	12.3%	20.3%
<b>2011</b>	5.6%	10.7%	16.3%	26.7%

Source: PRIDE National Survey

## Harrisonburg/Rockingham Youth Data Survey

<b>PRIDE</b>	<b>Daily</b>	<b>Weekly</b>	<b>Monthly</b>	<b>Annually</b>
<b>2009</b>	4.3%	9.9%	14.4%	25.9%
<b>2011</b>	5.6%	10.8%	16.4%	26.7%

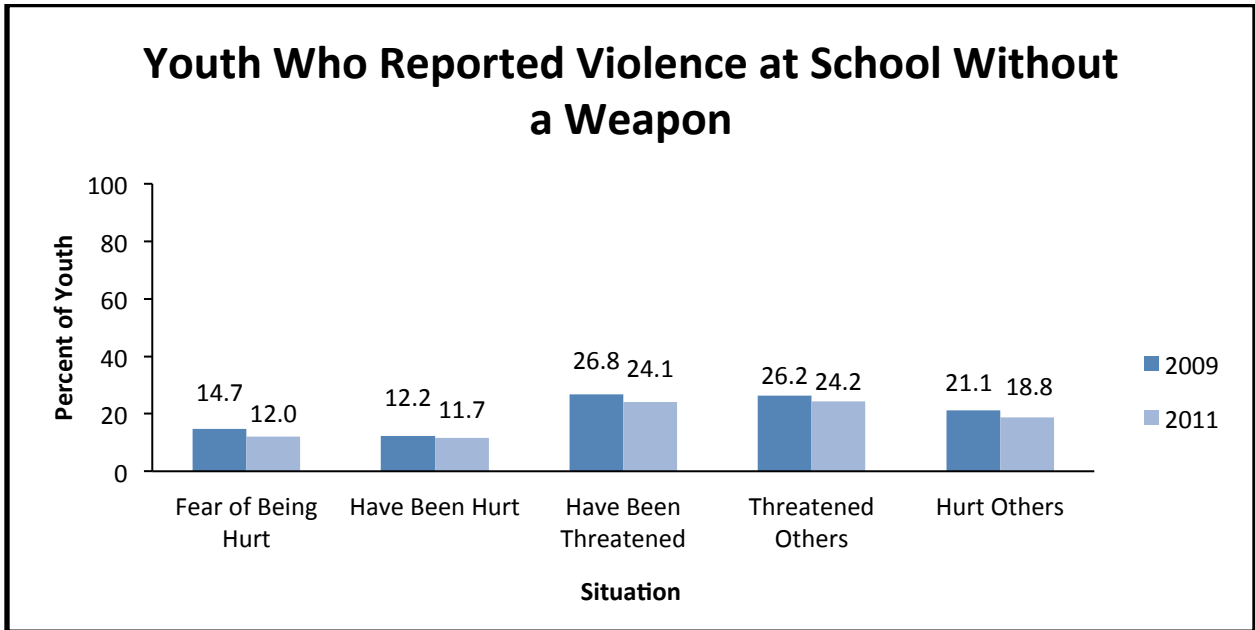
Source: PRIDE Survey

### **What the numbers and other information told us:**

Illicit drug use has increased slightly in Harrisonburg City/Rockingham County as well as nationally.

The Harrisonburg/ Rockingham use of illicit drugs is about the same as the national average for daily, weekly, monthly, and annual use of illicit drugs.

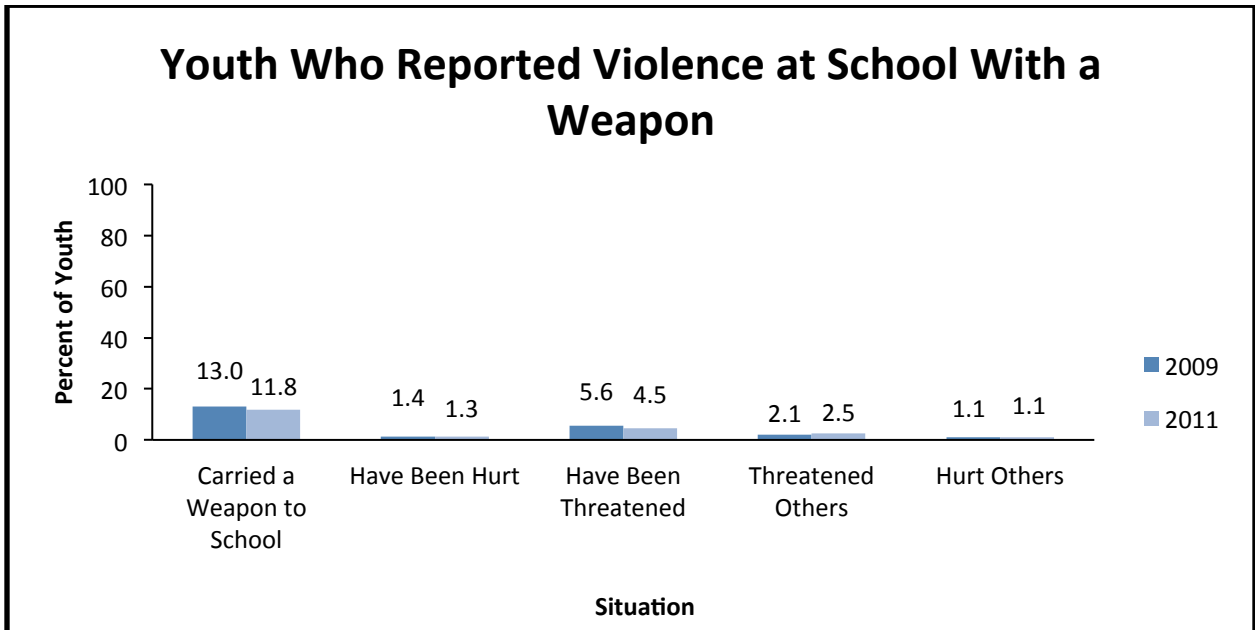
# Violence 2011



Source: PRIDE Survey

**What the numbers and other information told us:**

There was a slight decrease in students reporting violence at school without a weapon.

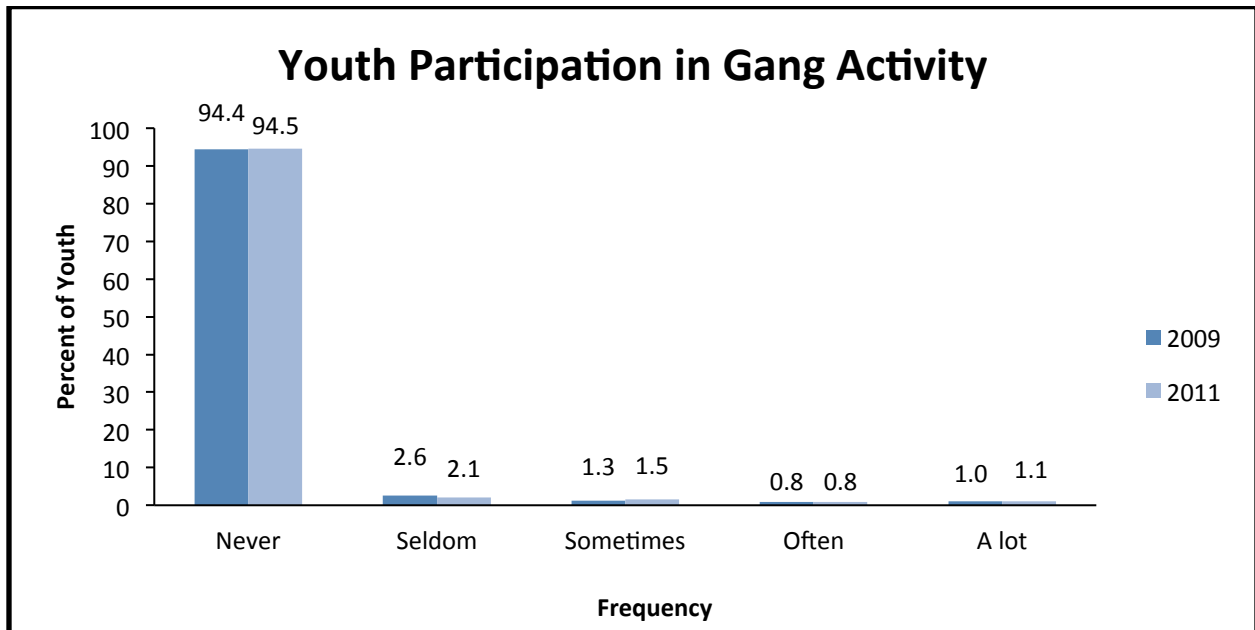


Source: PRIDE Survey

**What the numbers and other information told us:**

There was a slight decrease in violent situations when students reported carrying a weapon to school (1.2%).

# Violence 2011



Source: PRIDE Survey

#### What the numbers and other information told us:

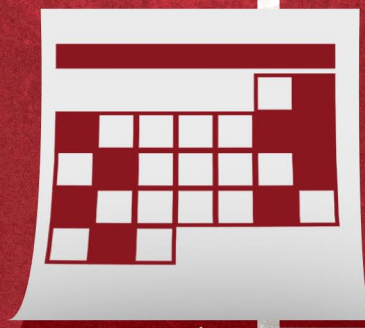
The majority of teens still do not participate in gang activity. The numbers have stayed relatively the same since 2009.



THE FACTS ON

# TEEN Health and Wellness

SOURCES:  
- 2011 YOUTH DATA SURVEY (WWW.THEOCY.ORG)



**57.5%**

OF TEENS SAY THEY HAVE EXERCISED 9 OR MORE DAYS IN THE LAST MONTH

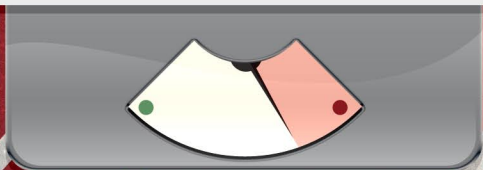


**56%**

OF TEENS SAY THEY ARE ABOUT THE RIGHT SIZE

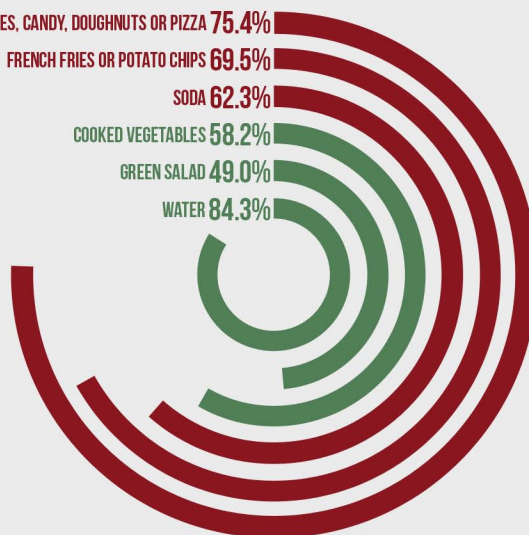
**26.2%**

OF TEENS SAY THEY ARE SLIGHTLY OVERWEIGHT



## WHAT TEENS REPORT EATING IN THE LAST WEEK

COOKIES, CANDY, DOUGHNUTS OR PIZZA 75.4%  
FRENCH FRIES OR POTATO CHIPS 69.5%  
SODA 62.3%  
COOKED VEGETABLES 58.2%  
GREEN SALAD 49.0%  
WATER 84.3%



**73.7%**

OF TEENS SAY THEY HAVE NEVER THOUGHT ABOUT COMMITTING SUICIDE.

**32.5%**

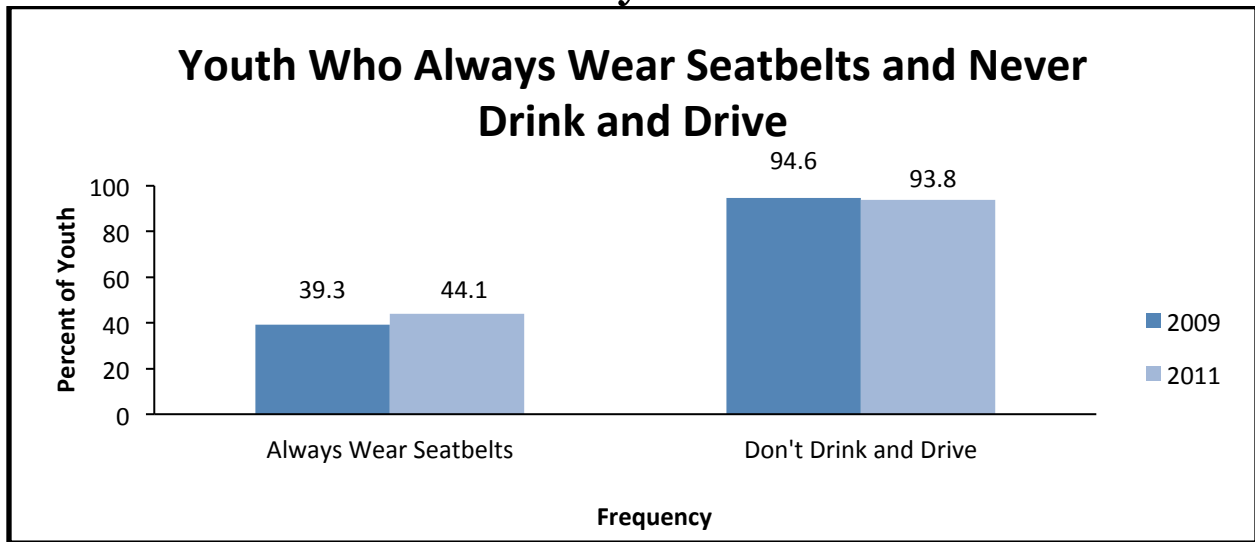
OF TEENS SAY THEY WOULD NOT TELL ANYONE IF THEY WERE SERIOUSLY THINKING ABOUT SUICIDE.







# Safety 2011

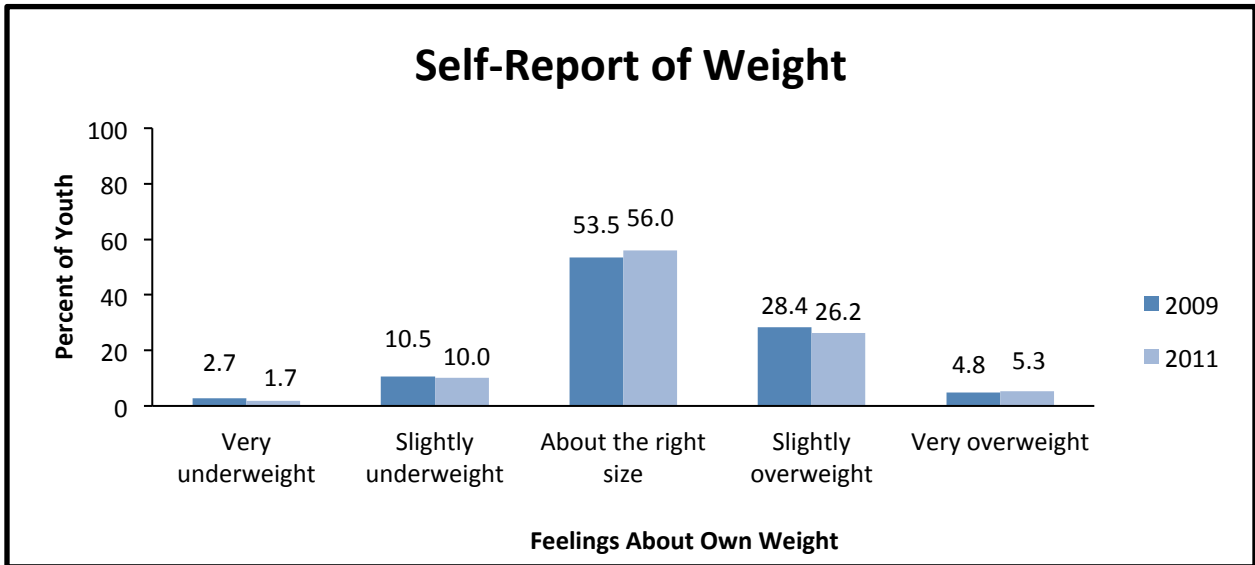


Source: PRIDE Survey

**What the numbers and other information told us:**

The percentage of teens who always wear a seatbelt increased, while those that don't drink and drive slightly decreased.

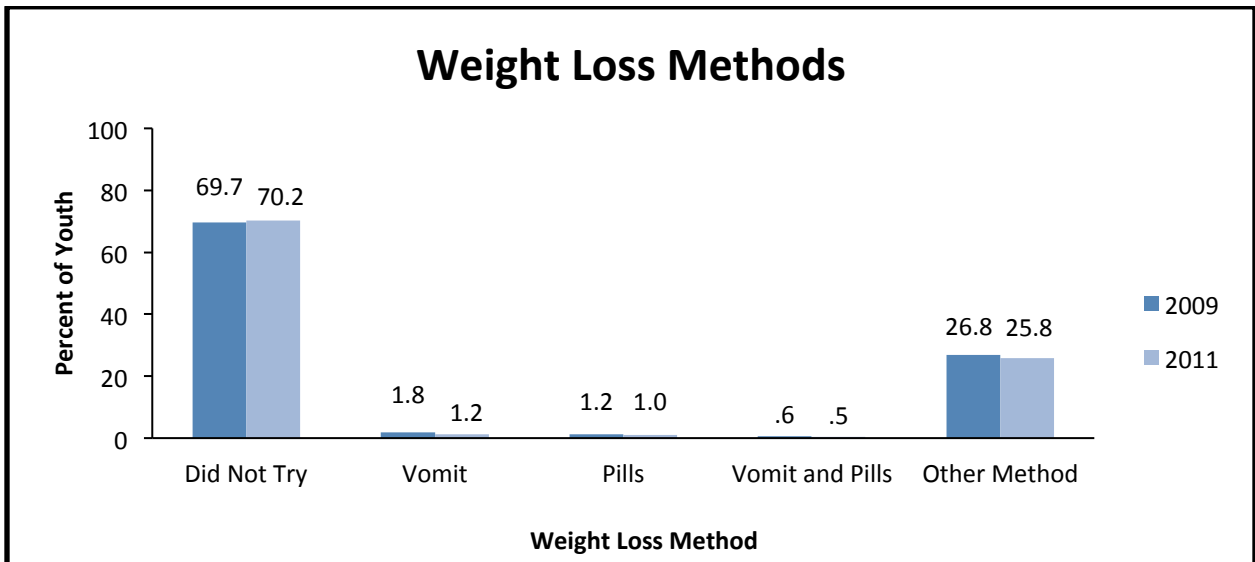
# Health 2011



Source: Rockingham County/ Harrisonburg Youth Survey

**What the numbers and other information told us:**

There was an increase (2.5%) from 2009 in the number of youth who feel that they are about the right weight. There was a slight decrease in the number of youth who feel that they are very underweight, slightly underweight, or slightly overweight.

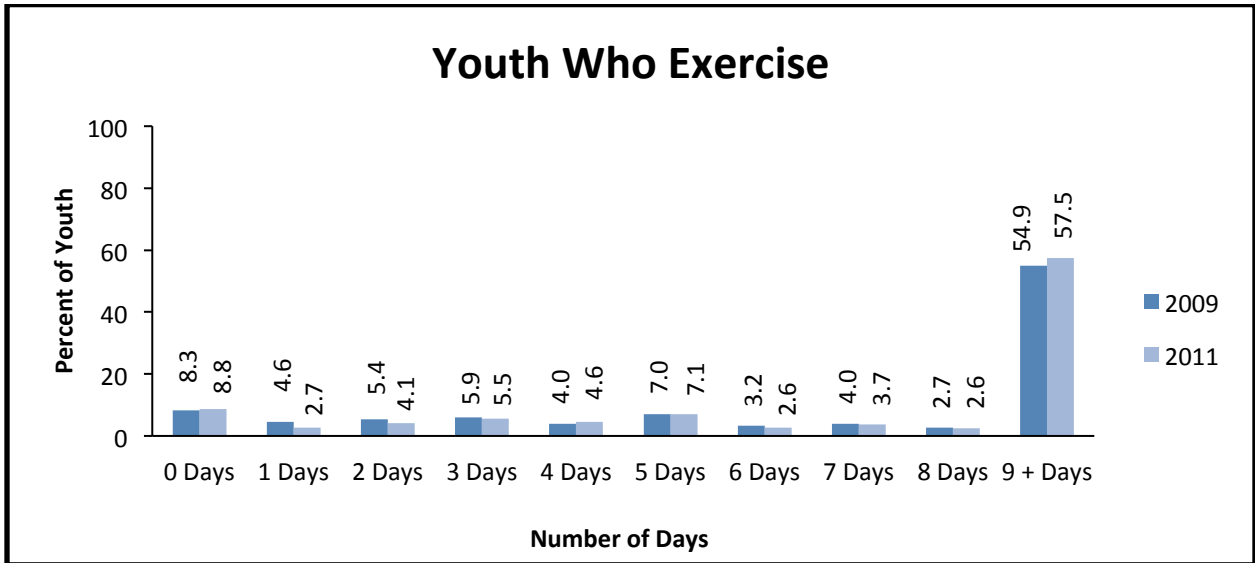


Source: Rockingham/Harrisonburg Youth Survey

**What the numbers and other information told us:**

Weight loss methods remained relatively consistent from 2009 to 2011.

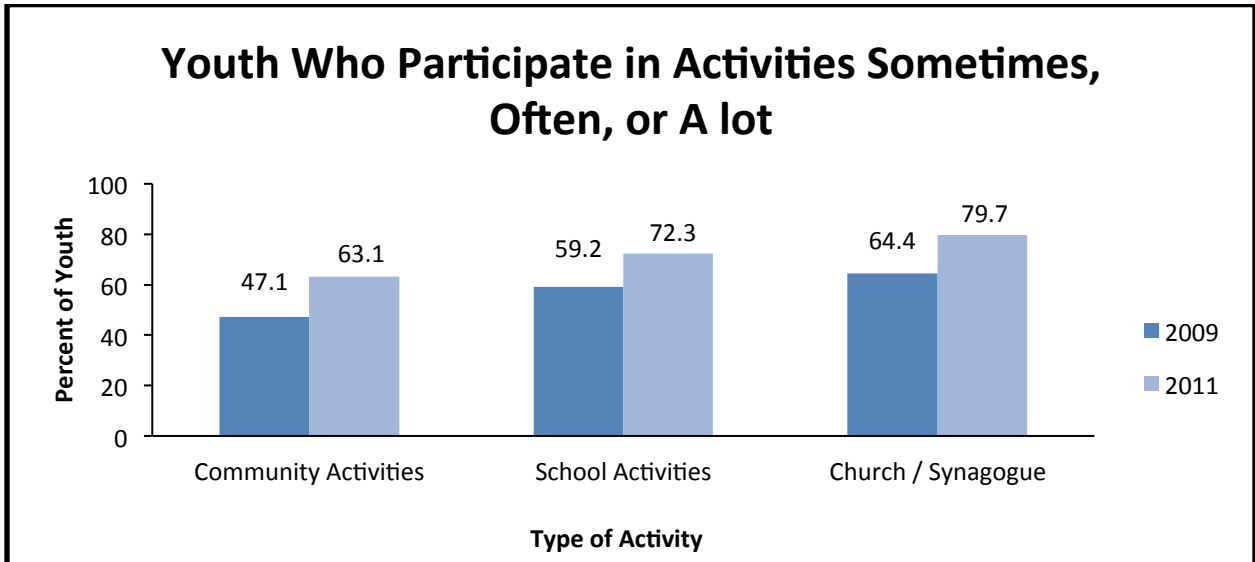
# Health 2011



Source: Rockingham County/Harrisonburg Youth Survey

**What the numbers and other information told us:**

There is a slight increase in the number of youth who report exercising nine or more days in the last month.

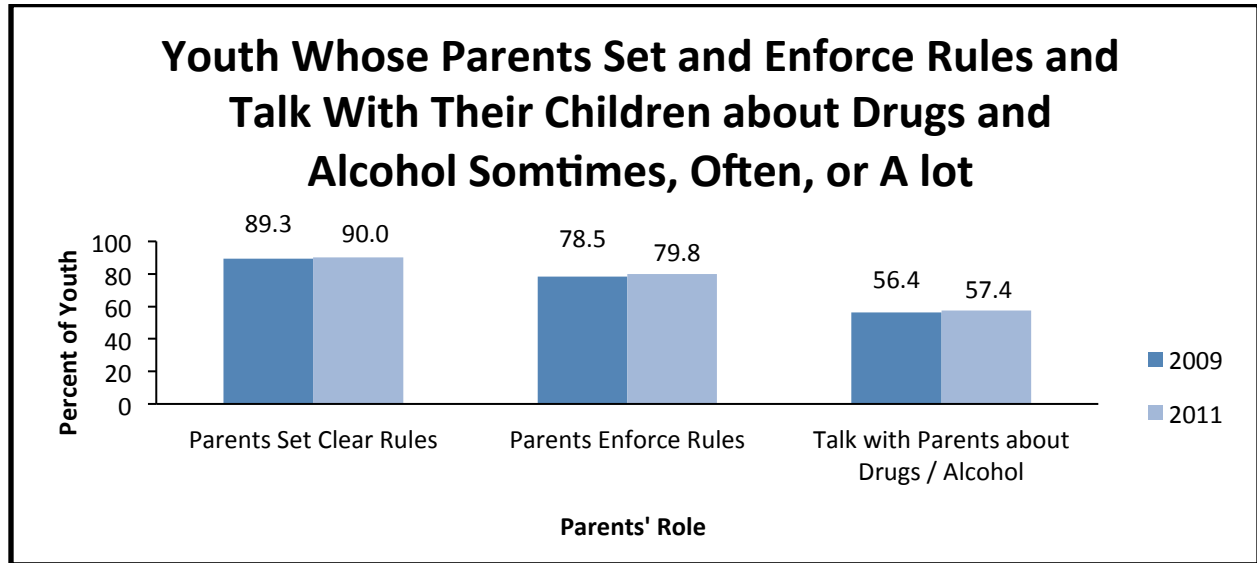


Source: PRIDE Survey

**What the numbers and other information told us:**

There were significant increases in the teens who participate in (community, school, and church) activities sometimes, often, or a lot.

# Health 2011

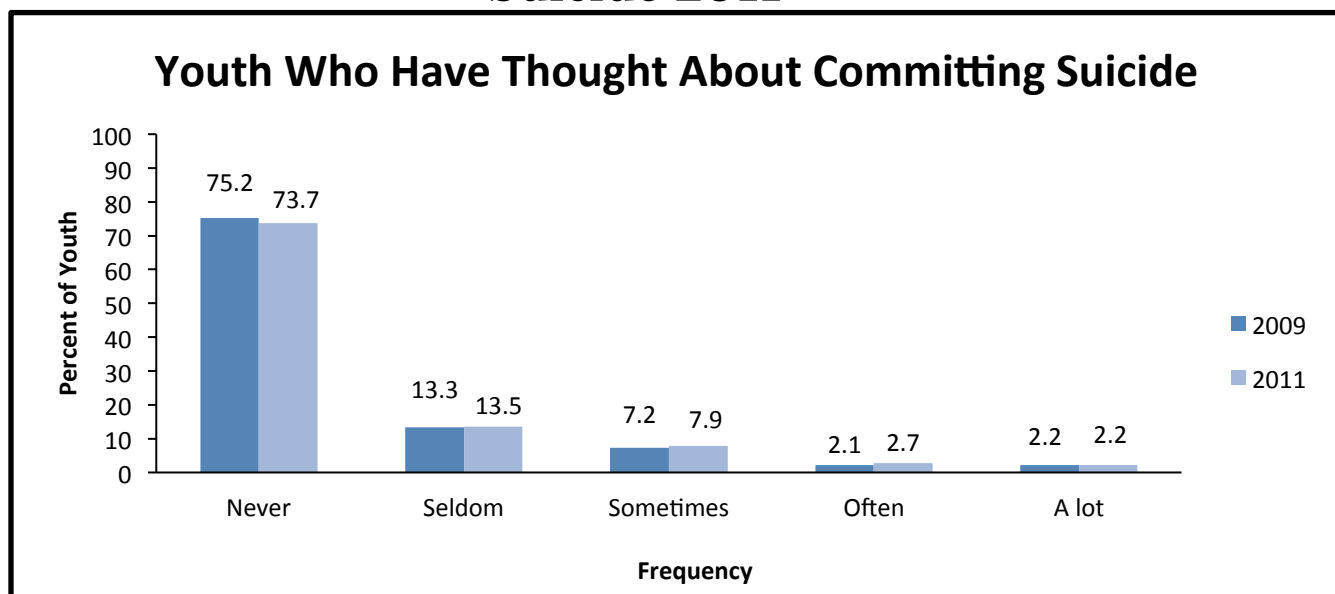


Source: PRIDE Survey

**What the numbers and other information told us:**

Since 2009 there have been slight increases in parents setting clear rules, enforcing rules and talking with their children about drugs/alcohol.

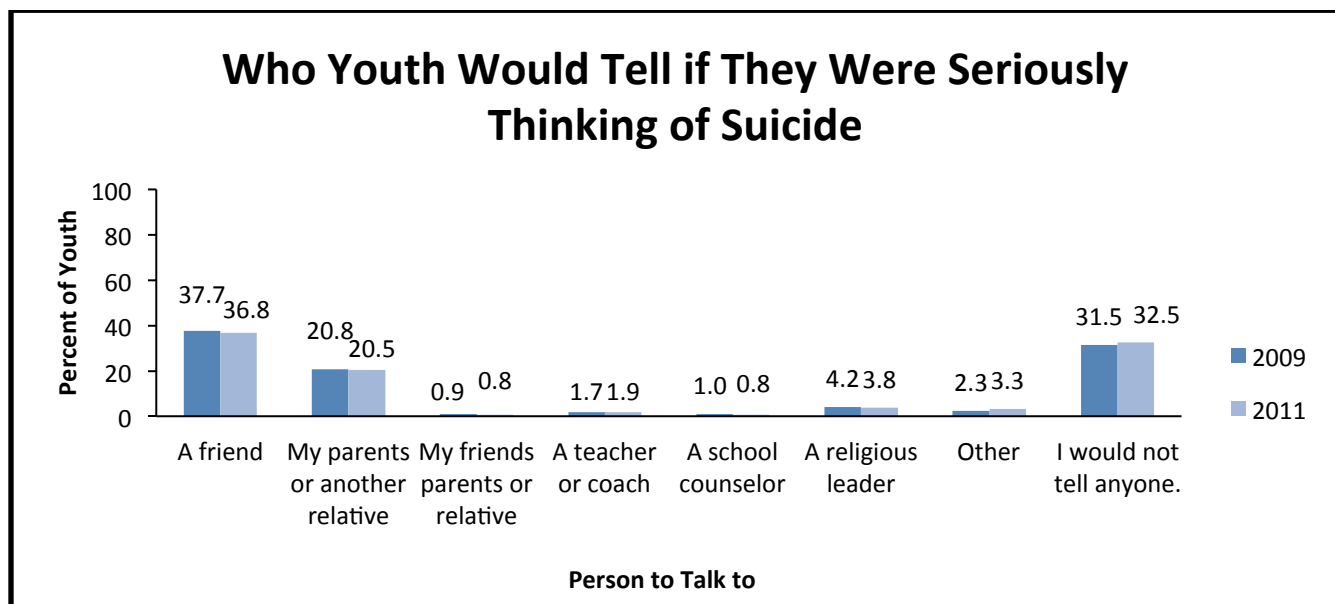
# Suicide 2011



Source: PRIDE Survey

### What the numbers and other information told us:

82.2% of teens say that they have not intentionally hurt their bodies in the last six months. The number of students who have never thought about committing suicide decreased by 1.5% from 2009.

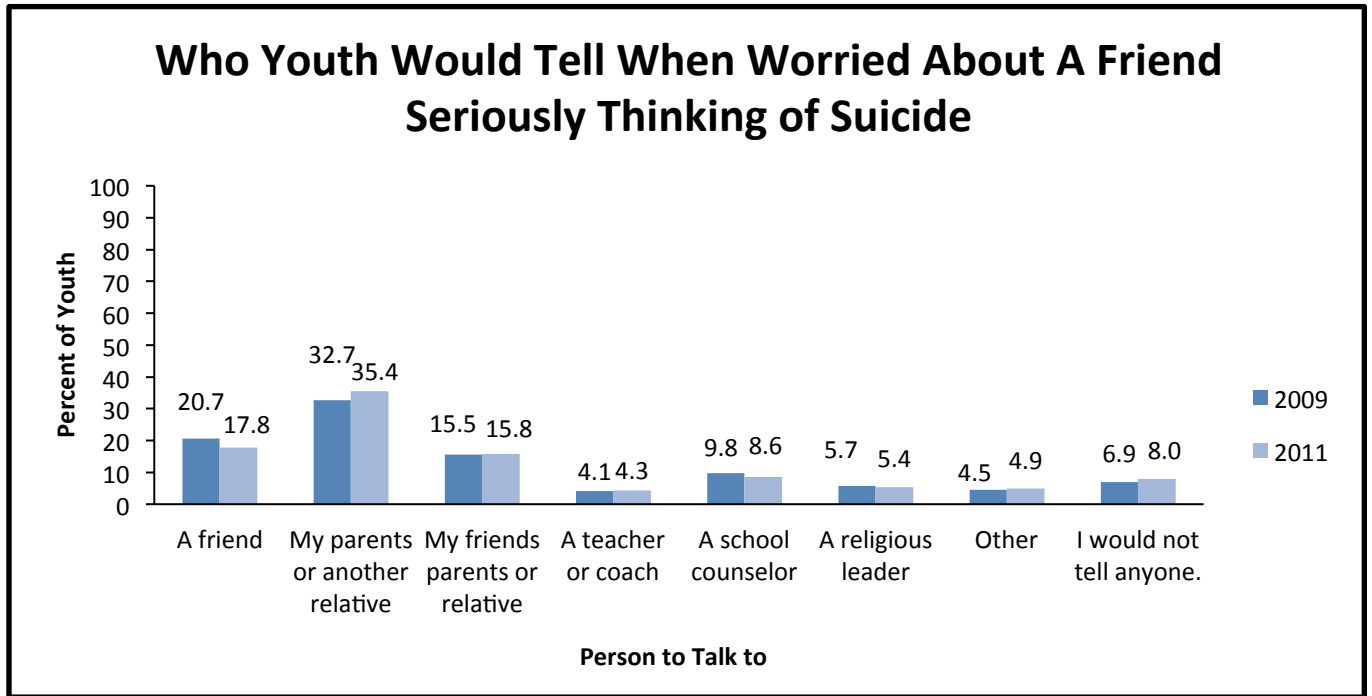


Source: Rockingham County/ Harrisonburg Youth survey

### What the numbers and other information told us:

32.5% of teens say they would not tell anyone if they were seriously thinking of suicide (an increase of 1% from 2009).

# Suicide 2011



Source: Rockingham County/ Harrisonburg Youth Survey

**What the numbers and other information told us:**

8% of youth would not tell anyone if their friend was seriously thinking about suicide, which is a 1.1% increase from 2009. Most teens (35.4%) would tell a parent or relative if they were worried about a friend committing suicide.

# Parental Information

Reported by Youth

## Parent's Employment Status

	Full-Time	Part - Time	Not Employed
Father	85.7%	6.0%	8.3%
Mother	65.7%	17.5%	17.0%

## Education Level of Parents

	Some High School	High school Graduate	Some College	College Graduate
Father	21.0%	35.8%	10.9%	32.3%
Mother	16.1%	29.4%	16.0%	38.6%

Source: Harrisonburg/Rockingham County Youth Survey





# Youth Data Survey 2011

## Alcohol Use

**23.2%** of teens feel it is very easy to get alcohol products.

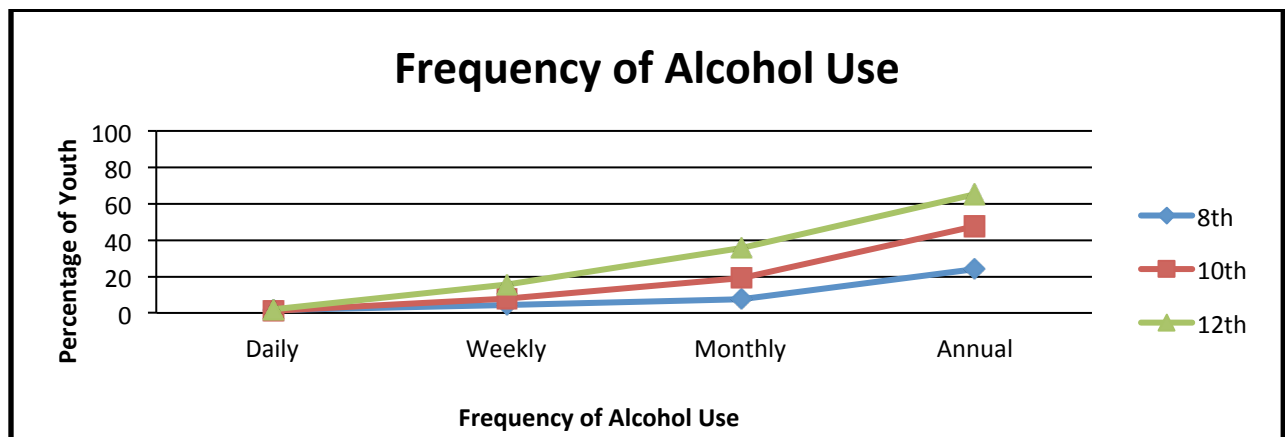
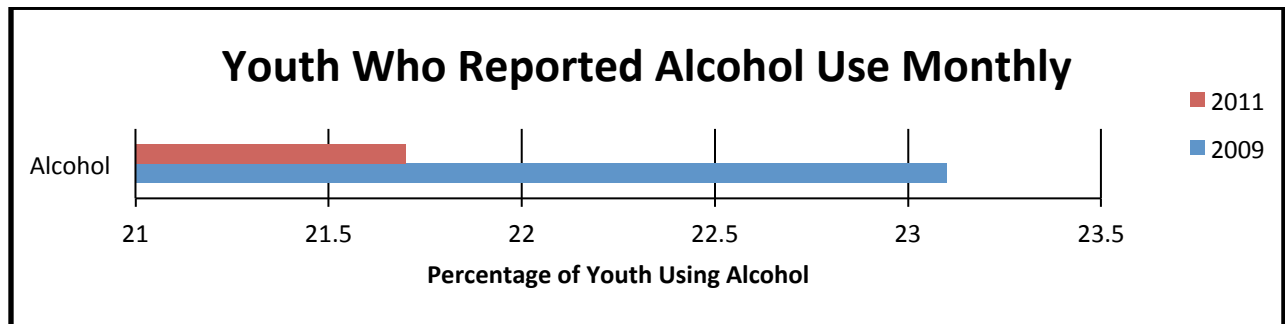
**58.5%** of teens feel that their parents would think that it would be very wrong if they used alcohol.

**15.1%** of teens say that their friends drink alcohol a lot.

**74%** of teens have never had alcohol.

**28.3%** of teens feel that drinking beer is very harmful to their health.

**34.6%** of teens feel that liquor is very harmful to their health.



# Youth Data Survey 2011

## Depression and Suicide

**35.4%** of teens would tell a parent or relative if they were worried about a friend committing suicide.

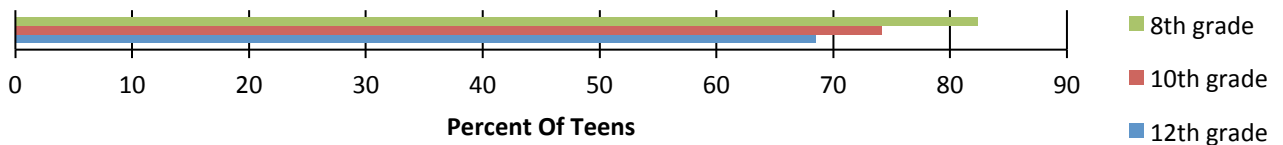
**73.7%** of say that they never have thought about committing suicide.

**82.2%** of teens say that they have not intentionally hurt their bodies in the last six months.

**36.8%** of teens would tell a friend if they were seriously thinking about committing suicide.

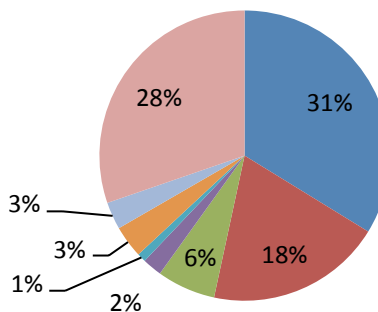
**32.5 %** of teens say they would not tell anyone if they were seriously thinking about suicide.

### Teens Who Never Thought About Committing Suicide



### Who Do Teens Go to When They Are Seriously Thinking About Suicide?

- A friend
- My parents or another relative
- My friends parents or relative
- A teacher or coach
- A school counselor
- A religious leader
- Other
- I would not tell anyone.



# Youth Data Survey 2011

## Drug Use

**69.9%** of teens have never used tobacco.

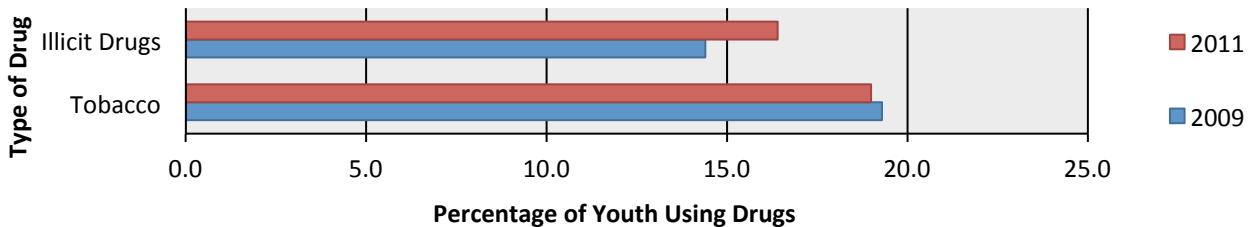
**24%** of teens report they have used marijuana.

**14%** of teens report they use tobacco weekly.

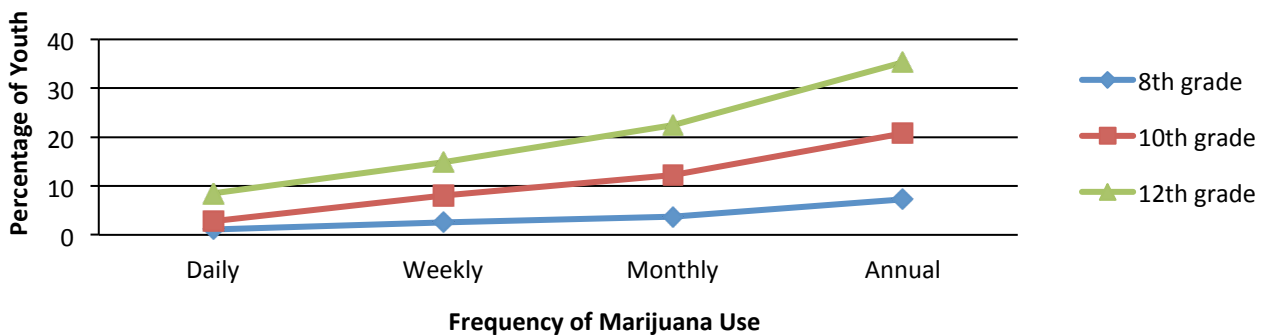
**48.8%** of teens feel that using marijuana is very harmful to their health.

**26.4%** of teens say it is very easy to get tobacco products.

### Youth Who Reported Drug Use Monthly



### Frequency of Youth Using Marijuana



# Youth Data Survey 2011

## Exercise and Nutrition

**57.5%** of teens say that during the past 30 days they participated in physical activities at least nine days for twenty minutes.

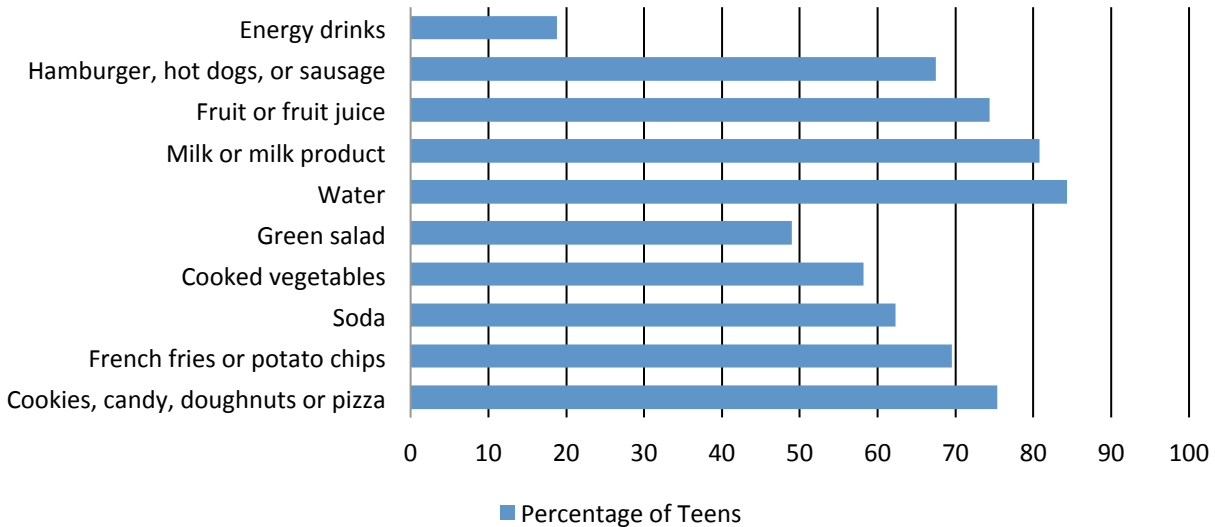
**62.3%** of teens reported drinking soda over the past week.

**91.2%** of teens say that they have exercised for at least 20 minutes during the past 30 days.

**89.3%** of teens have *not* been told by a doctor that they are overweight.

**84.3 %** of teens reported drinking water over the past week.

### What our Youth Report Eating Over the Past Week



# Youth Data Survey 2011

## Safety

**64.6%** of teens say they always wear a seatbelt when riding in somebody else's vehicle.

**73%** of teens say they rarely wear a helmet while riding a bicycle.

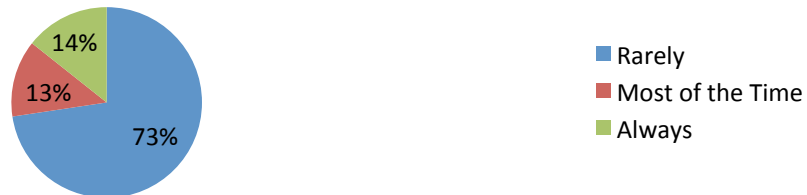
**91.8%** of teens say they feel safe in their neighborhoods.

**93.8%** of teens say they do not drink and drive.

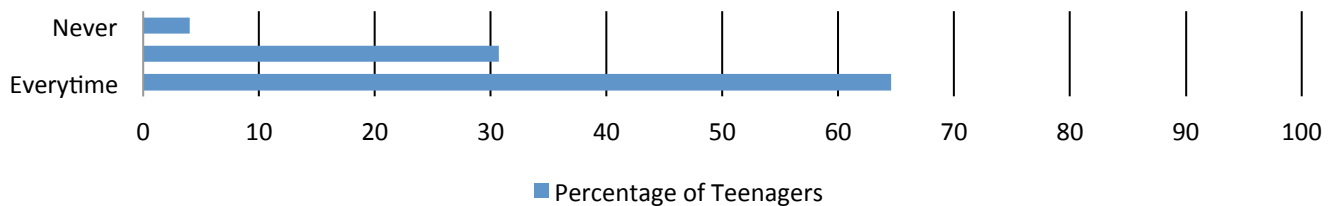
**56.2%** of teens say they feel safe on the school bus.

**54.4%** of teens say they feel safe in the hallways at school.

### Frequency of Wearing a Helmet while Riding a Bike



### Frequency of Wearing a Seatbelt while Driving or Riding in Another Vehicle



# Youth Data Survey 2011

## Sexuality

**68.4%** of teens say that they are sexually abstinent.

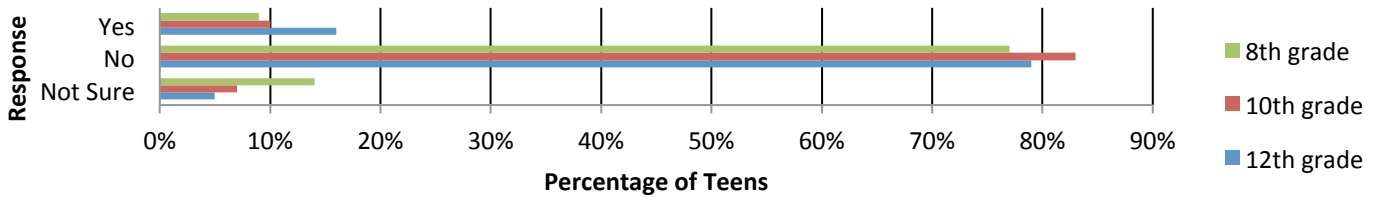
**13.2%** of teens say they drank alcohol or used drugs before the last time they had sexual intercourse.

**54.8%** of teens who are sexually active say that they use condoms.

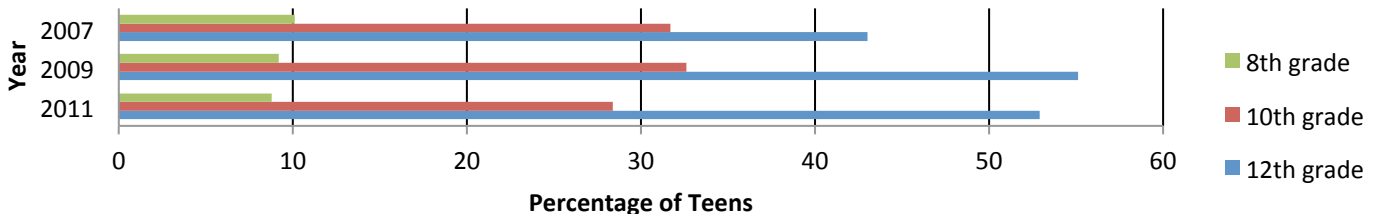
**11.9%** of teens who are sexually active say that they do not use any form of protection.

**74.1%** of teens agree that abstinence is the only 100% effective way to prevent pregnancy.

### Youth Who Drank Alcohol or Used Drugs Before Their Last Sexual Encounter



### Frequency of Youth Who Have Had Sexual Intercourse



**I. PERSONAL AND FAMILY INFORMATION**

<p><b>1. Ethnic Origin:</b></p> <input type="radio"/> White <input type="radio"/> African American <input type="radio"/> Hispanic/Latino <input type="radio"/> Asian/Pacific Islander <input type="radio"/> Native American <input type="radio"/> Mixed Origin <input type="radio"/> Other	<p><b>2. Sex:</b></p> <input type="radio"/> Male <input type="radio"/> Female	<p><b>3. Age:</b></p> <input type="radio"/> 10 years old or less <input type="radio"/> 11 years old <input type="radio"/> 12 years old <input type="radio"/> 13 years old <input type="radio"/> 14 years old <input type="radio"/> 15 years old <input type="radio"/> 16 years old <input type="radio"/> 17 years old <input type="radio"/> 18 years old <input type="radio"/> 19 years old or more	<p><b>4. Grade:</b></p> <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11 <input type="radio"/> 12	<p><b>5. Do you live with...</b></p> <input type="radio"/> both parents <input type="radio"/> mother only <input type="radio"/> father only <input type="radio"/> mother & stepfather <input type="radio"/> father & stepmother <input type="radio"/> other	<p><b>6. Do you have a job?</b></p> <input type="radio"/> Yes, full-time <input type="radio"/> Yes, part-time <input type="radio"/> No	<p><b>7. Do your parents have a job?</b></p> <p>father? mother?</p> <input type="radio"/> Yes, full-time <input type="radio"/> <input type="radio"/> Yes, part-time <input type="radio"/> <input type="radio"/> No <input type="radio"/>	<p><b>8. What is the educational level of your</b></p> <p>father? mother?</p> <input type="radio"/> some high school <input type="radio"/> <input type="radio"/> high school graduate <input type="radio"/> <input type="radio"/> some college <input type="radio"/> <input type="radio"/> college graduate <input type="radio"/>
--	--	--	--	--	--	--	--

**II. STUDENT INFORMATION**

	NEVER	SOMETIMES	OFTEN	A LOT
1. Do you make good grades?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Do you get into trouble at school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Do you take part in school sports teams?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Do you take part in school activities such as band, clubs, etc.?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Do you take part in community activities such as scouts, rec. teams, youth clubs, etc.?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Do you attend church, synagogue, etc.?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Do your parents talk with you about the problems of tobacco, alcohol and drug use?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Do your teachers talk with you about the problems of tobacco, alcohol and drug use?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Have you skipped school without your parents' permission in the past year?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Does your school set clear rules on using drugs at school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Does your school set clear rules on bullying or threatening other students at school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. Do your parents set clear rules for you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. Do your parents punish you when you break the rules?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Have you been in trouble with the police?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. Do you take part in gang activities?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. Have you thought about committing suicide?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. Do your friends use tobacco (cigarettes, etc.)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. Do your friends use alcohol (beer, liquor, etc.)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. Do your friends use marijuana (pot, hash, etc.)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. Have you had 5 or more glasses of beer, coolers, breezers or liquor within a few hours?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. Does your school ask any students to take a drug test?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. Do you think that you are overweight?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. Has a doctor told you that you are overweight?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. Have you bought or sold drugs AT school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. Have you bought or sold drugs when NOT at school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. Have you carried a gun for protection or as a weapon when NOT at school in the past year?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**III. WITHIN THE PAST YEAR HOW OFTEN HAVE YOU...**

	DO NOT USE	6 TIMES/YEAR	ONCE/MONTH	TWICE/MONTH	3 TIMES/WEEK	EVERY DAY
1. Smoked cigarettes?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Used smokeless tobacco (chew, etc.)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Smoked cigars?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Drank beer?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Drank coolers, breezers, hard lemonade, etc.?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Drank liquor (whiskey, vodka, rum, etc.)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Smoked marijuana (pot, hash, etc.)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Used cocaine (crack, etc.)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Used uppers (stimulants, etc.)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Used downers (depressants, etc.)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Used inhalants (glue, gas, etc.)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. Used hallucinogens (PCP, LSD, etc.)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. Used heroin (opiates)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Used steroids?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. Used ecstasy (MDMA)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. Used meth (crystal, ice, crank, etc.)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. Used prescription drugs (such as Ritalin, Adderall, Xanax) to get high?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. Used prescription pain killers (like Vicodin, OxyContin, or Percocet) to get high?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. Used over-the-counter drugs (to get high)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**IV. WHAT EFFECT DO YOU MOST OFTEN GET WHEN YOU...**

	DO NOT USE	A LITTLE	VERY HIGH	BOMBED/STONED
1. Drink beer?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Drink coolers, breezers, etc.?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Drink liquor (whiskey, vodka, etc.)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Smoke marijuana (pot, hash, etc.)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**V. DO YOU FEEL THE FOLLOWING ARE HARMFUL TO YOUR HEALTH?**

	NO HARM	SOME HARM	VERY HARMFUL
1. Smoking cigarettes?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Using smokeless tobacco (chew, etc.)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Smoking cigars?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Drinking beer?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Drinking coolers, breezers, hard lemonade, etc.?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Drinking liquor (whiskey, vodka, etc.)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Smoking marijuana (pot, hash, etc.)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. How much do you think people risk harming themselves (physically or in other ways) if they take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/> No Risk	<input type="radio"/> Moderate Risk	
	<input type="radio"/> Slight Risk	<input type="radio"/> Great Risk	

## VI. AT WHAT AGE DID YOU FIRST...

	10 OR UNDER NEVER USED	11	12	13	14	15	16	17 OR OLDER
1. Smoke cigarettes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Use smokeless tobacco (chew, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Smoke cigars?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Drink beer?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Drink coolers, breezers, hard lemonade, etc.?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Drink liquor (whiskey, vodka, rum, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Smoke marijuana (pot, hash, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Use cocaine (crack, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Use uppers (stimulants, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Use downers (depressants, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Use inhalants (glue, gas, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Use hallucinogens (PCP, LSD, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Use heroin (opiates)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Use steroids?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Use ecstasy (MDMA)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Use meth (crystal, ice, crank, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Use prescription drugs (such as Ritalin, Adderall, or Xanax) to get high?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Use prescription Drugs (like OxyContin, Vicodin, or Percocet) to get high?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Use over-the-counter drugs (to get high)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## VII. WHERE DO YOU USUALLY...

(You may mark more than 1 response for each question)

	DO NOT USE	AT HOME	AT SCHOOL	FRIEND'S HOUSE	IN A CAR	OTHER
1. Smoke cigarettes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Use smokeless tobacco (chew, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Smoke cigars?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Drink beer?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Drink coolers, breezers, hard lemonade, etc.?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Drink liquor (whiskey, vodka, rum, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Smoke marijuana (pot, hash, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## VIII. WHEN DO YOU USUALLY...

(You may mark more than 1 response for each question)

	DO NOT USE	BEFORE SCHOOL	DURING SCHOOL	AFTER SCHOOL	WEEK NIGHTS	WEEKENDS
1. Smoke cigarettes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Use smokeless tobacco (chew, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Smoke cigars?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Drink beer?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Drink coolers, breezers, hard lemonade, etc.?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Drink liquor (whiskey, vodka, rum, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Smoke marijuana (pot, hash, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## IX. HOW WRONG WOULD YOUR PARENTS/FRIENDS FEEL IT WOULD BE FOR YOU TO...

	Parents			Friends		
	A LITTLE BIT WRONG NOT WRONG AT ALL	VERY WRONG WRONG	VERY WRONG WRONG	A LITTLE BIT WRONG NOT WRONG AT ALL	VERY WRONG WRONG	VERY WRONG WRONG
1. Use tobacco (cigarettes, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Use alcohol (beer, wine, liquor, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Use marijuana (pot, hash, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## X. HOW EASY IS IT TO GET...

- Cigarettes, smokeless tobacco, cigars, etc.?
- Beer, wine, liquor and other alcohol products?
- Marijuana (pot, hash, etc.)?

	VERY DIFFICULT DON'T KNOW/CAN GET	FAIRLY DIFFICULT	FAIRLY EASY	VERY EASY
1. Cigarettes, smokeless tobacco, cigars, etc.?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Beer, wine, liquor and other alcohol products?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Marijuana (pot, hash, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## XI. VEHICLE SAFETY

- During the past 30 days, how many times did you drive a car or other vehicle when you had been drinking alcohol?
- During the past 30 days, how many times did you ride in a car or other vehicle driven by someone who had been drinking alcohol?
- How often do you wear a seatbelt when driving a car?  
 Never     Sometimes     Always  
 Seldom     Most of the time     I don't drive
- How often do you wear a seat belt when riding in a car driven by someone else?  
 Never     Sometimes     Always  
 Seldom     Most of the time

	0 times	1 time	2 or 3 times	4 or 5 times	6 or more times
1. During the past 30 days, how many times did you drive a car or other vehicle when you had been drinking alcohol?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. During the past 30 days, how many times did you ride in a car or other vehicle driven by someone who had been drinking alcohol?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## XII. WHILE AT SCHOOL HAVE YOU...(Past Year)

- Carried a handgun?
- Carried a knife, club or other weapon?
- Threatened a student with a handgun, knife or club?
- Threatened to hurt a student by hitting, slapping or kicking?
- Hurt a student by using a handgun, knife or club?
- Hurt a student by hitting, slapping or kicking?
- Been threatened with a handgun, knife or club by a student?
- Had a student threaten to hit, slap or kick you?
- Been afraid a student may hurt you?
- Been hurt by a student using a handgun, knife or club?
- Been hurt by a student who hit, slapped or kicked you?

	NEVER	ONE TIME	2-5 TIMES	6 OR MORE TIMES
1. Carried a handgun?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Carried a knife, club or other weapon?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Threatened a student with a handgun, knife or club?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Threatened to hurt a student by hitting, slapping or kicking?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Hurt a student by using a handgun, knife or club?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Hurt a student by hitting, slapping or kicking?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Been threatened with a handgun, knife or club by a student?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Had a student threaten to hit, slap or kick you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Been afraid a student may hurt you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Been hurt by a student using a handgun, knife or club?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Been hurt by a student who hit, slapped or kicked you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## XIII. IN MY SCHOOL, I FEEL SAFE...

- In the classroom
- In the cafeteria (lunchroom)
- In the halls
- In the bathroom
- In the gym
- On the school bus
- At school events (ballgames, etc.)
- On the playground
- In the parking lot

	NEVER	SOMETIMES	OFTEN	A LOT
1. In the classroom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. In the cafeteria (lunchroom)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. In the halls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. In the bathroom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. In the gym	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. On the school bus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. At school events (ballgames, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. On the playground	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. In the parking lot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## XIV. ADDITIONAL QUESTIONS

- A  B  C  D  E  F  G  H
- A  B  C  D  E  F  G  H
- A  B  C  D  E  F  G  H
- A  B  C  D  E  F  G  H
- A  B  C  D  E  F  G  H
- A  B  C  D  E  F  G  H
- A  B  C  D  E  F  G  H
- A  B  C  D  E  F  G  H
- A  B  C  D  E  F  G  H
- A  B  C  D  E  F  G  H



# ROCKINGHAM COUNTY - HARRISONBURG YOUTH SURVEY

SCHOOL CODE									
0	1	2	3	4	5	6	7	8	9
0	1	2	3	4	5	6	7	8	9
0	1	2	3	4	5	6	7	8	9
0	1	2	3	4	5	6	7	8	9
0	1	2	3	4	5	6	7	8	9

FORM 3532 (10/07) 0987654321

<b>INSTRUCTIONS</b>	 <p style="font-size: 8px;">USE NO. 2 PENCIL ONLY</p>	<b>RIGHT</b> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<b>WRONG</b> <input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<ul style="list-style-type: none"> <li>• USE A NO. 2 PENCIL</li> <li>• FILL THE OVAL COMPLETELY</li> <li>• DO NOT MAKE ANY STRAY MARKS</li> </ul>
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<b>1. Ethnic Origin:</b> <input type="radio"/> White <input type="radio"/> Black <input type="radio"/> Hispanic/Latino <input type="radio"/> Asian <input type="radio"/> Native American <input type="radio"/> Russian/Eastern European <input type="radio"/> Other	<b>2. What is your sex?</b> <input type="radio"/> Male <input type="radio"/> Female	<b>3. What is your age?</b> <input type="radio"/> 13 years old <input type="radio"/> 14 years old <input type="radio"/> 15 years old <input type="radio"/> 16 years old <input type="radio"/> 17 years old <input type="radio"/> 18 years old <input type="radio"/> 19 years old or older	<b>4. What is your grade?</b> <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11 <input type="radio"/> 12	<b>5. Do you live with?</b> <input type="radio"/> Both parents <input type="radio"/> Mother only <input type="radio"/> Father only <input type="radio"/> Mother and Stepfather <input type="radio"/> Father and Stepmother <input type="radio"/> Grandparents <input type="radio"/> Other
--	---	--	---	--

**6. When you rode a bike in the last 12 Months, did you wear a helmet?**  
 I did not ride a bicycle during the past 12 months  
 Rarely wore a helmet  
 Most of the time wore a helmet  
 Always wore a helmet

**7. If you were being physically harmed or hurt, who would you tell?**  
 Parent/family member or relative  
 Friend(s)  
 Church leader  
 School teacher  
 School Counselor  
 Other  
 No one

**8. Have you ever been pressured by anyone to take part in a sexual act against your will?**  
 Yes  
 No

**9. If you have intentionally harmed your body in the past 6 months, please select each method you have used: (Select all that apply)**  
 I have never intentionally tried to harm myself  
 I have cut myself  
 I have scratched myself  
 I have hit or punched myself  
 I have carved names/symbols into my skin  
 Other

**10. During the past 30 days, how many times did you drive a car or other vehicle when you had been drinking alcohol?**  
 I do not drive  
 0 times  
 1 time  
 2 or 3 times  
 4 or 5 times  
 6 or more times

**11. During your life, how many times have you taken PRESCRIPTION medication that WAS NOT prescribed for you?**  
 0 times  
 1 time  
 2 or 3 times  
 4 or 5 times  
 6 or more times

**12. Do you wear a seatbelt when driving or riding in another vehicle?**  
 Every time  
 Sometimes  
 Never

**13. Have you ever talked about HIV/AIDS infection with your parents/guardians or other adults in your family?**  
 Yes  
 No

**14. Have you ever had sexual intercourse?**  
 Yes ⇨ If yes, how old were you when you had sexual intercourse for the first time?  
 No  
 12 or younger  
 13  
 14  
 15  
 16  
 17  
 18

**15. Did you drink alcohol or use drugs before you had sexual intercourse the LAST TIME?**  
 I have never had sexual intercourse  
 Yes  
 No  
 Not sure

**16. The LAST TIME you had sexual intercourse, what ONE method did you or your partner use to PREVENT PREGNANCY? (Select only ONE response)**  
 I have never had sexual intercourse  
 No method was used to prevent pregnancy  
 Birth Control pills  
 Condoms  
 Withdrawal  
 Birth Control Shot

**17. Do you agree that abstinence is the only 100% effective way to prevent pregnancy and the spread of sexually transmitted infection(s) (STI/STD's)?**  
 Yes  
 No

**18. I feel comfortable with my body size:**  
 Yes  
 No

**19. How do you think of yourself?**  
 Very underweight  
 Slightly underweight  
 About the right weight  
 Slightly overweight  
 Very overweight

**20. During the past 30 days, which ONE of the following did you do to lose weight or keep from gaining weight?**  
 I did not try to lose weight  
 I made myself vomit  
 I took diet pills  
 I made myself vomit and took diet pills  
 I used some other method but did not vomit or take diet pills

# ROCKINGHAM COUNTY - HARRISONBURG YOUTH SURVEY

Page 2

21. On how many of the past 30 days did you exercise or participate in sports activities for at least 20 minutes THAT MADE YOU SWEAT AND BREATHE HARD, such as basketball, jogging, fast dancing, swimming laps, tennis, fast bicycling, or similar aerobic activities?

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days
- 6 days
- 7 days
- 8 days
- 9 days +

The next question asks about food you ate in the past 7 days. Think about all meals and snacks you ate over the past week. Be sure to include food you ate at home, at school, at restaurants, or anywhere else.

22. Over the past week did you eat or drink:

- Fruit or Fruit Juice
- Milk products (milk, cheese, yogurt)
- Water
- Soda
- Energy Drinks
- Green salad
- Cooked Vegetables
- Hamburger, hot dogs or sausage
- French fries or potato chips
- Cookies, candy, doughnuts or pizza

23. Are there gangs in your: *(Select all that apply)*

- School
- Neighborhood
- Community

24. Have you ever seen gang activity in your: *(Select all that apply)*

- Have never seen gang activity
- School
- Neighborhood
- The community

25. Have you ever been asked to join a gang?

- Yes
- No

26. Have you ever felt threatened or harmed by a gang member(s)?

- Yes
- No

27. Are you, or have you ever been a member of a gang?

- Yes ⇨ If yes, do any of the following describe your gang? *(Select all that apply)*
- No
- You can join before age 13
- There are initiation rites
- The gang has established leaders
- The gang has regular meetings
- The gang has specific rules or codes
- Gang members have specific roles
- There are roles for each age group
- The gang has symbols or colors
- There are specific roles for girls

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

- English
- Spanish
- Another Language

29. Have you ever been suspended from school?

- Yes
- No

30. If you are in a gang, does your gang do the following things? *(Select all that apply)*

- Get in fights with other gangs
- Provide protection for each other
- Steal things or rob people
- Tagging or Graffiti
- Steal cars
- Sell marijuana
- Sell other illegal drugs
- Damage or destroy property
- I am not in a gang

31. I feel safe in my neighborhood.

- Yes
- No

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

- Yes
- No

33. My parents/guardians ask if I've gotten my homework done.

- Yes
- No

34. Who would you tell if you were worried that a friend is seriously thinking of suicide?

- A friend
- My parent or another relative
- My friends parents or relative
- A teacher or coach
- A school counselor
- A religious leader (my minister, priest, rabbi, or youth leader)
- Other
- I would not tell anyone

35. If you were seriously thinking of suicide, who would you tell?

- A friend
- My parents or another relative
- A teacher or coach
- A school counselor
- A community counselor
- A religious leader (my minister, priest, rabbi, or church youth leader)
- Other
- I would not tell anyone

36. Over the last 12 months I have lived with: *(Select all that apply)*

- I have lived in the same place all 12 months
- Parents or guardian
- A friend
- Another relative
- A shelter
- A foster home
- I had no where to live
- Other