# **TEXAS SCHOOL SURVEY OF SUBSTANCE USE**

## **SURVEY INSTRUMENT**

### **INTRODUCTION**

Before answering the survey questions in this booklet, please read the following:

- I am aware that the survey questions I am answering are designed to measure drug and alcohol use, that I will be asked questions about student attitudes and behaviors that relate to substance abuse issues, and that over 200,000 students all over Texas will be taking this survey;
- > I know that I do not have to take this survey and that I can skip any question that I do not choose to answer for any reason without any consequences;
- > I know that there is no way for anyone to find out which survey that I answered, that the numbers on the questionnaire books are used only to identify which pages go together after the booklets are cut and cannot be used to tell who answered the questions; and
- > I am voluntarily participating in the Texas School Survey of Drug and Alcohol Use.

We will do everything we can to keep others from knowing about your participation in this study and how you answered the survey. The researchers will use a Certificate of Confidentiality to prevent anyone from finding out which survey students answered. The Certificate does not keep you or your family members from deciding to release information about yourself, or your participation in this study.

If you feel you need to talk with someone about problems with tobacco, inhalants, alcohol or drugs, please call, toll free, 1-877-9-NO-DRUG (1-877-966-3784) for immediate and confidential help, 24 hours a day, seven days a week.

This research study has been reviewed and approved by the Institutional Review Board --- Human Subjects in Research, Texas A&M University (IRB2005-0396F). For research-related questions regarding subjects' rights, the Institutional Review Board may be contacted at (979) 458-4067 or <a href="mailto:irb@tamu.edu">irb@tamu.edu</a>.

#### **DIRECTIONS**

- DO NOT write your name anywhere on this booklet.
- Use a NUMBER 2 PENCIL only.
- Fill in only ONE BUBBLE for each part of a question.
- Be sure to read each question carefully.

#### **EXAMPLE QUESTION**

IN	THE PAST WEEK, on how m	any DAYS hav	e you us	sed:		
		Never heard of it	Not used it	1-2 days	3-4 days	5-7 days
a.	Cigarettes	0	0	Ó	Ó	
b.	Smokeless Tobacco	0	0		0	0
C.	Beer	0		0	0	0



**USE ONLY** 

000000

222222

3 3 3 3 3 4 4 4 4 4 4

(5)(5)(5)(5)

666666

777777 888888

999999



**SERIAL** #

1.	Are you:  Male Female	6. On average, what grades do you get? (DARKEN ONE BUBBLE ONLY)
Ļ	0 0	Mostly Mostly Mostly Mostly A's B's C's D's F's
2.	What grade are you in?           7         8         9         10         11         12           O         O         O         O         O	7. Do you have a job? Yes No
3.	Do you live with both of your parents?  Yes  No	0 0
	0 0	8. During the current school year, do you qualify for a free or reduced price school lunch?
4.	How old are you?  11 or younger 12 13 14 15 16 17 18 19+	<ul><li>○ Yes</li><li>○ No</li><li>○ Don't Know</li></ul>
5a.	Are you Hispanic or Latino?  Yes  No	9. Do you regularly participate in any of the following extra-curricular activities? (DARKEN ONE BUBBLE FOR EACH LINE: a-i.) Yes No
5b.	What is your race? (DARKEN ONE BUBBLE ONLY)  American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander White Some other race More than one race	a. School athletics (UIL, Varsity, Junior Varsity) b. School band/orchestra c. School choir d. Drill team or cheerleading squad e. Student government, newspaper, or yearbook f. Academic clubs, societies, or competition groups (UIL, Language Club, Math Club, etc.) g. Other school clubs or student groups h. Athletic teams OUTSIDE of school i. Other clubs or groups OUTSIDE of school
10.	How safe do you feel when you are: (DARKEN ONE BUBBLE FOR EACH LINE: a-c.)  a. in your home?  b. out in your neighborhood?  c. at school?	
sor	What is the highest level of schooling completed by  Completed grade	Graduate or Don't professional know or sigh Completed Some Completed school after doesn't
12.	Do one or both of your parents usually attend school-	sponsored open houses or PTA meetings? O Yes No

	How many of your FRIENDS would you say: (DARI	None	A Few	Some	Most	All
	a. Feel close to their parents?	0	0	0	0	0
	b. Care about making good grades?	Ö	Ö	Ö	Ö	Ö
	c. Wish they could drop out of school?	0	$\circ$	0	$\circ$	$\circ$
	d. Sometimes carry weapons like a knife or gun?	0	0	0	$\circ$	$\circ$
	e. Belong to a gang or are interested in becoming			_		
	a gang member?	0	0	0	$\circ$	O
	w is a list of things some people sniff to get high. The How recently, if ever, have you sniffed, huffed, or in the ARKEN ONE BUBBLE FOR EACH LINE: a-h.)	•			kicks" or to g	jet "high":
	(DANKEN ONE BOBBLE FOR EACH LINE, 8-11.)		Never heard of/Never used it	Used at least once in the Past Month	Used at least once Since Schoo Began in the Fall	Used at least once In Your Lifetime
	a. Spray paint to get high?		O	0	0	0
	b. Whiteout, correction fluid, magic markers to ge	et high?	0	0	$\bigcirc$	0
	c. Computer dusting sprays to get high?	tal a V	0	$\sqrt{}$	0	$\circ$
	d. Helium, butane, propane, whippets (nitrous ox	iae),		-	$\bigcirc$	$\bigcirc$
	refrigerants/Freon gas to get high? e. Glue to get high?			40	0	
	f. Toluene/tolly, paint thinner, other solvents to g	et high?			$\bigcirc$	$\bigcap_{i \in \mathcal{I}} (x_i)$
	g. Gasoline, octane booster, carburetor cleaner to			10	Ŏ	Õ
		7   -1	1 1 1 - 1 1			
	h. Other aerosols/sprays (deodorant spray, Pam,	nqn spra	W' \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
	n. Other aerosols/sprays (deodorant spray, Pam, room spray, etc.) to get high?	nun spru	(/ / / / )	0	$\circ$	$\circ$
5.	room spray, etc.) to get high?  How recently, if ever, have you used the following		6. How recent	y, if ever, have		
5.	How recently, if ever, have you used the following TOBACCO, ALCOHOL, and INHALANT products even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a	1 -h.)	6. How recent	n one time: (D IE: a-k.)	ARKEN ONE BU	JBBLE
5.	How recently, if ever, have you used the following TOBACCO, ALCOHOL, and INHALANT products even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a	1 -h.)	6. How recent	n one time: (D IE: a-k.)	Used at least Past Month	JBBLE /ouce
n.	How recently, if ever, have you used the following TOBACCO, ALCOHOL, and INHALANT products even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a	In Vour Lifetime	16. How recent DRUGS eve FOR EACH LIN	n one time: (D IE: a-k.)	ARKEN ONE BU	Used at least once Since School once Used at least once Once Once Once Once Once Once Once O
n.	How recently, if ever, have you used the following TOBACCO, ALCOHOL, and INHALANT products even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a	h. h. Lifetime	a. Marijuana? b. Cocaine (not c. Crack?	n one time: (D	ARKEN ONE BU	Used at least once  Used at least once Began in the Fall Used at le.
). ).	How recently, if ever, have you used the following TOBACCO, ALCOHOL, and INHALANT products even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a long to the following to the follo	h. hour Lifetime	a. Marijuana? b. Cocaine (not c. Crack?	n one time: (D IE: a-k.)	Used at least Moore In the St	Used at least once Since School once Used at least once Once Once Once Once Once Once Once O
a. o.	How recently, if ever, have you used the following TOBACCO, ALCOHOL, and INHALANT products even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a line)	h lour Lifeting	a. Marijuana? b. Cocaine (not c. Crack? d. Blamaril? e. Hallucinoger Mushrooms,	n one time: (D IE: a-k.)	Used at least  OOO Once In the Ast In the In	Used at least once  Used at least once Began in the Fall Used at le.
a. o.	How recently, if ever, have you used the following TOBACCO, ALCOHOL, and INHALANT products even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a supplied by the	h lour Lifeting	a. Marijuana? b. Cocaine (not c. Crack? d. Blamaril? e. Hallucinoger Mushrooms, f. Synthetic Ca	n one time: (D IE: a-k.)	ARKEN ONE BU	Description of Since School once Since School once Since School once October of the Fall of the Fall of the School once October of the Fall of the School once October once
ı. o. o.	How recently, if ever, have you used the following TOBACCO, ALCOHOL, and INHALANT products even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a support of the control of the	h Your Lifetime	a. Marijuana? b. Cocaine (not c. Crack? d. Blamaril? e. Hallucinoger Mushrooms, f. Synthetic Ca (Bath Salts, I	n one time: (D IE: a-k.)	ARKEN ONE BU	DBBPE  Since Set least  Since Set least  Began in the Fall  Used at le.
n. o. e. d.	How recently, if ever, have you used the following TOBACCO, ALCOHOL, and INHALANT products even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a line) of the state of the following to the followin	h.) sall festing have a second of the second	a. Marijuana? b. Cocaine (not c. Crack? d. Blamaril? e. Hallucinoger Mushrooms, f. Synthetic Ca (Bath Salts, I g. Steroids?	n one time: (D IE: a-k.)  crack)?  s (LSD, etc.)?  thinones MDPV, etc.)?	ARKEN ONE BU	O O Since Scheat least once Began in the Fall
i. D. S. I.	How recently, if ever, have you used the following TOBACCO, ALCOHOL, and INHALANT products even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a line) of the following to the foll	I h.h. Partietime	a. Marijuana? b. Cocaine (not c. Crack? d. Blamaril? e. Hallucinoger Mushrooms, f. Synthetic Ca (Bath Salts, I g. Steroids? h. Ecstasy?	n one time: (D IE: a-k.)	ARKEN ONE BU	DBBPE  Since Set least  Since Set least  Began in the Fall  Used at le.
i.	How recently, if ever, have you used the following TOBACCO, ALCOHOL, and INHALANT products even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a line in the content of the co	I h.h. Partietime	a. Marijuana? b. Cocaine (not c. Crack? d. Blamaril? e. Hallucinoger Mushrooms, f. Synthetic Ca (Bath Salts, I g. Steroids? h. Ecstasy?	n one time: (D IE: a-k.)  c crack)?  c crack)?  characteristics  display the control of the cont	ARKEN ONE BU	O O Since Scheat least once Began in the Fall
a. o. d.	How recently, if ever, have you used the following TOBACCO, ALCOHOL, and INHALANT products even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a line of the following to the follo	I h.h. Partietime	a. Marijuana? b. Cocaine (not c. Crack? d. Blamaril? e. Hallucinoger Mushrooms, f. Synthetic Ca (Bath Salts, I g. Steroids? h. Ecstasy? i. Heroin (black cheese, chiva heroin)?	n one time: (D IE: a-k.)  c crack)?  c crack)?  characteristics  display the control of the cont	ARKEN ONE BRI	O O Since Scheat least once Began in the Fall
1. 2. 4.	How recently, if ever, have you used the following TOBACCO, ALCOHOL, and INHALANT products even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a line)	h. hour lifeting on the state of the state o	a. Marijuana? b. Cocaine (not c. Crack? d. Blamaril? e. Hallucinoger Mushrooms, f. Synthetic Ca (Bath Salts, I g. Steroids? h. Ecstasy? i. Heroin (black) cheese, chiva	n one time: (D IE: a-k.)  c crack)?  c crack)?  characteristics  display the control of the cont	ARKEN ONE BRI	DBBPE  Since School  Began in the Fall  Used at least  OOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOO
a. o. e. d.	How recently, if ever, have you used the following TOBACCO, ALCOHOL, and INHALANT products even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a some time: (DARKEN ONE B	h. hour lifeting on the state of the state o	a. Marijuana? b. Cocaine (not c. Crack? d. Blamaril? e. Hallucinoger Mushrooms, f. Synthetic Ca (Bath Salts, I g. Steroids? h. Ecstasy? i. Heroin (black cheese, chive heroin)? j. Methampher (speed, cryst	n one time: (D IE: a-k.)  c crack)?  c crack)?  characteristics (D)	ARKEN ONE BUT THE TOTAL OF THE	DBBLE  Since Schear least once  Began in the Fall  Used at less once
n. o. s. d.	How recently, if ever, have you used the following TOBACCO, ALCOHOL, and INHALANT products even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a Solution of the content of th	h.) Partietime	a. Marijuana? b. Cocaine (not c. Crack? d. Blamaril? e. Hallucinoger Mushrooms, f. Synthetic Ca (Bath Salts, I g. Steroids? h. Ecstasy? i. Heroin (black cheese, chival heroin)? j. Methampher (speed, crystice, or crank)	n one time: (D IE: a-k.)  ccrack)?  cs (LSD, etc.)?  cthinones MDPV, etc.)?  ctar, a, brown  ctamine cal meth,	ARKEN ONE BUT THE TOTAL OF THE	DBBPE  Since School  Began in the Fall  Used at least  OOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOO
a. b. c. dl.	How recently, if ever, have you used the following TOBACCO, ALCOHOL, and INHALANT products even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a some time: (DARKEN ONE B	h.) Partietime	a. Marijuana? b. Cocaine (not c. Crack? d. Blamaril? e. Hallucinoger Mushrooms, f. Synthetic Ca (Bath Salts, I g. Steroids? h. Ecstasy? i. Heroin (black cheese, chive heroin)? j. Methampher (speed, cryst	n one time: (D IE: a-k.)  ccrack)?  cs (LSD, etc.)?  cthinones MDPV, etc.)?  ctar, a, brown  ctamine cal meth,	ARKEN ONE BRI	DBBLE  Since Schear least once  Began in the Fall  Used at less once

# 

DRUGS not prescribed to you or only for the experience feeling it caused even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a-e.)  a. Codeine cough syrup (Leans, Nods, AC/DC)?  b. OxyContin, Percodan, Percocet, Oxycodone, Vicodin, Lorcet, or Hydrocodone?	e or OR Lortab,	Never heard of/Never	Used at least once in the Past Month	Used at least once Since School Began in the Fall	Used at least once In Your Lifetime
THE-COUNTER DRUGS only for the experience or feeling caused even one time:		Never heard of/Never used it	\	Used at least once Since School Began in the Fall	Used at least once In Your Lifetime
a. DXIVI, Iriple C's, Skittles, or Coricidin?				0	0
how many times, if any, have you used: (DARKEN ONE BUBBLE FOR EACH LINE: a-f.)  Tobacco? Alcohol? Inhalants (Whiteout, spray paint, glue, gas, etc.) to get high?  Marijuana?  Cocaine (not crack)?	a. Tol b. Ald c. Inh spi ga: d. Ma	bacco? cohol? nalants (Whiteo ray paint, glue, s, etc.)? arijuana?	BUBBLE FOR	R EACH LINE: a	-l.) /s/s/s/0000
Close friends use: (DARKEN ONE BUBBLE FOR EACH LINE: a-d.)  Tobacco? Alcohol? Inhalants (Whiteout, spray paint, glue, gas, etc.)?	g. Bla h. Ste i. Ec: j. He che k. Me (sp ice I. Sy	emaril? eroids? roin (black tar, eese, chiva, bro roin)? ethamphetamin eeed, crystal me , or crank)? nthetic Marijua	eth,		
	DRUGS not prescribed to you or only for the experience feeling it caused even one time: (DARKEN ONE BUBBLE FOEACH LINE: a-e.)  a. Codeine cough syrup (Leans, Nods, AC/DC)? b. OxyContin, Percodan, Percocet, Oxycodone, Vicodin, Lorcet, or Hydrocodone? c. Valium, Diazepam, Xanax, or other benzodiazepines? d. Adderall, Ritalin, Dexedrine, Concerta, or Focalin? e. Any other prescription drug not listed above?  How recently, if ever, have you taken the following OVETHE-COUNTER DRUGS only for the experience or feeling caused even one time: a. DXM, Triple C's, Skittles, or Coricidin?  IN THE PAST 30 DAYS, how many times, if any, have you used: (DARKEN ONE BUBBLE FOR EACH LINE: a-f.)  Tobacco? Alcohol? Inhalants (Whiteout, spray paint, glue, gas, etc.) to get high? Marijuana? Cocaine (not crack)? Crack?  About how many of your close friends use: (DARKEN ONE BUBBLE FOR EACH LINE: a-d.)	DRUGS not prescribed to you or only for the experience or feeling it caused even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a-e.)  a. Codeine cough syrup (Leans, Nods, AC/DC)? b. OxyContin, Percodan, Percocet, Oxycodone, Vicodin, Lortab, Lorcet, or Hydrocodone? c. Valium, Diazepam, Xanax, or other benzodiazepines? d. Adderall, Ritalin, Dexedrine, Concerta, or Focalin? e. Any other prescription drug not listed above?  How recently, if ever, have you taken the following OVER-THE-COUNTER DRUGS only for the experience or feeling it caused even one time:  a. DXM, Triple C's, Skittles, or Coricidin?  IN THE PAST 30 DAYS, how many times, if any, have you used: (DARKEN ONE BUBBLE FOR EACH LINE: a-f.)  Tobacco? Alcohol? Inhalants (Whiteout, spray paint, glue, gas, etc.)?  About how many of your close friends use: (DARKEN ONE BUBBLE FOR EACH LINE: a-d.)  Tobacco? Alcohol? Inhalants (Whiteout, spray paint, glue, gas, etc.)?  Alcohol? Inhalants (Whiteout, spray paint, glue, gas, etc.)?  I. Sy	feeling it caused even one time: (DARKEN ONE BÜBBLE FOR Part August 1988)  a. Codeine cough syrup (Leans, Nods, AC/DC)?  b. OxyContin, Percodan, Percocet, Oxycodone, Vicodin, Lortab, Lorcet, or Hydrocodone?  c. Valium, Diazepam, Xanax, or other benzodiazepines?  d. Adderall, Ritalin, Dexedrine, Concerta, or Focalin?  e. Any other prescription drug not listed above?  How recently, if ever, have you taken the following OVER-THE-COUNTER DRUGS only for the experience or feeling it caused even one time:  a. DXM, Triple C's, Skittles, or Coricidin?  IN THE PAST 30 DAYS, how many times, if any, have you used:  (DARKEN ONE BUBBLE FOR EACH LINE: a-f.)  Tobacco?  Alcohol?  Inhalants (Whiteout, spray paint, glue, gas, etc.)?  Crack?  Tobacco?  About how many of your close friends use:  (DARKEN ONE BUBBLE FOR EACH LINE: a-d.)  Tobacco?  Alcohol?  Inhalants (Whiteout, spray paint, glue, gas, etc.)?  Tobacco?  Alcohol?  Inhalants (Whiteout, spray paint, glue, gas, etc.)?  Inhalants (Whiteout, spray paint, glue, gas, etc.)?	DRUGS not prescribed to you or only for the experience or feeling it caused even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a-e.)  a. Codeine cough syrup (Leans, Nods, AC/DC)?  b. OxyContin, Percodan, Percocet, Oxycodone, Vicodin, Lortab, Lorcet, or Hydrocodone?  c. Valium, Diazepam, Xanax, or other benzodiazepines?  d. Adderall, Ritalin, Dexedrine, Concerta, or Focalin?  e. Any other prescription drug not listed above?  How recently, if ever, have you taken the following OVER-THE-COUNTER DRUGS only for the experience or feeling it caused even one time:  a. DXM, Triple C's, Skittles, or Coricidin?  IN THE PAST 30 DAYS, how many times, if any, have you used: (DARKEN ONE BUBBLE FOR EACH LINE: a-f.)  Tobacco?  Alcohol?  About how many of your close friends use: (DARKEN ONE BUBBLE FOR EACH LINE: a-d.)  About how many of your close friends use: (DARKEN ONE BUBBLE FOR EACH LINE: a-d.)  About how many of your close friends use: (DARKEN ONE BUBBLE FOR EACH LINE: a-d.)  Tobacco?  Alcohol?  Tobacco?	DRUGS not prescribed to you or only for the experience or feeling it caused even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a-e.)  a. Codeine cough syrup (Leans, Nods, AC/DC)?  b. OxyContin, Percodan, Percocet, Oxycodone, Vicodin, Lortab, Lorcet, or Hydrocodone?  c. Valium, Diazepam, Xanax, or other benzodiazepines?  d. Adderall, Ritalin, Dexedrine, Concerta, or Focalin?  e. Any other prescription drug not listed above?  How recently, if ever, have you taken the following OVER-THE-COUNTER DRUGS only for the experience or feeling it caused even one time:  DXM, Triple C's, Skittles, or Coricidin?  IN THE PAST 30 DAYS, how many times, if any, have you used: (DARKEN ONE BUBBLE FOR EACH LINE: a-f.)  Tobacco?  Alcohol?  Inhalants (Whiteout, spray paint, glue, gas, etc.) to get high?  Cocaine (not crack)?  Crack?  Tobacco?  Alcohol?  Crack?  About how many of your close friends use: (DARKEN ONE BUBBLE FOR EACH LINE: a-d.)  Tobacco?  Alcohol?  Inhalants (Whiteout, spray paint, glue, gas, etc.)?  About how many of your close friends use: (DARKEN ONE BUBBLE FOR EACH LINE: a-d.)  Tobacco?  Alcohol?  Inhalants (Whiteout, spray paint, glue, gas, etc.)?  Inhalants (Whiteout, spray paint, glue

	SERIAL #		00	00				NOT WRITE IN THIS AREA
22.	If you wanted some, he (DARKEN ONE BUBBLE	FOR E	ACH L	INE: a	-l.) /	what	/ /	24. When you drink alcoholic beverages, how many drinks do you usually have AT ONE TIME, on average (DARKEN ONE BUBBLE FOR EACH LINE: a-d.)
a. b. c. d. e. f. g. h. i. j. k.	Tobacco? Alcohol? Inhalants (Whiteout, spray paint, glue, gas, etc.)? Marijuana? Cocaine (not crack)? Crack? Blamaril? Steroids? Ecstasy? Heroin (black tar, cheese, chiva, brown heroin)?							a. Beer?  b. Wine Coolers (hard lemonade, hard sodas, hard cider etc.)?  c. Wine?  d. Liquor (vodka, rum, whiskey, etc.)?  25. IN THE PAST 30 DAYS, on how many days have you had 5 or more drinks of alcohol in a two-hour period?
22	Harrietten de rece							
23.	How often do you normally use: (DARKEN ONE BUBBLE FOR EACH LINE: a-l.)	Every day	Several times	a month	month once a	4bout once a	Less than once	26. How often do you get alcoholic beverages from the following sources?  (DARKEN ONE BUBBLE FOR EACH LINE: a-e.)
a.	normally use: (DARKEN ONE BUBBLE FOR EACH LINE: a-I.) Tobacco?	$\cup$	$\cup$	$\cup$	$\cup$	O Hout once a	$\cup$	the following sources? (DARKEN ONE BUBBLE FOR EACH LINE: a-e.)
a. b.	normally use: (DARKEN ONE BUBBLE FOR EACH LINE: a-I.)  Tobacco? Alcohol?	O Every day	O Several times	$\cup$	O month once a	O About once a	OO Less than once	the following sources? (DARKEN ONE BUBBLE FOR EACH LINE: a-e.)
a. b. c.	normally use: (DARKEN ONE BUBBLE FOR EACH LINE: a-I.)  Tobacco? Alcohol? Inhalants (Whiteout, spray paint, glue, gas, etc.)? Marijuana? Cocaine (not crack)?	000	0000	000	000	000	000	the following sources? (DARKEN ONE BUBBLE FOR EACH LINE: a-e.)
a. b. c. d. e. f. g. h. i.	normally use: (DARKEN ONE BUBBLE FOR EACH LINE: a-l.)  Tobacco? Alcohol? Inhalants (Whiteout, spray paint, glue, gas, etc.)? Marijuana? Cocaine (not crack)? Crack? Blamaril? Steroids? Ecstasy?	00 00	000000		00	00 00	00 00	the following sources? (DARKEN ONE BUBBLE FOR EACH LINE: a-e.)    A
a. b. c. d. e. f. g. h. i. j.	normally use: (DARKEN ONE BUBBLE FOR EACH LINE: a-l.)  Tobacco? Alcohol? Inhalants (Whiteout, spray paint, glue, gas, etc.)? Marijuana? Cocaine (not crack)? Crack? Blamaril? Steroids? Ecstasy? Heroin (black tar, cheese, chiva, brown heroin)? Methamphetamine (speed, crystal meth,	000000	000000	0000000	000000	000000	000000	the following sources? (DARKEN ONE BUBBLE FOR EACH LINE: a-e.)    A
a. b. c. d. e. f. g. h. i. j.	normally use: (DARKEN ONE BUBBLE FOR EACH LINE: a-l.)  Tobacco? Alcohol? Inhalants (Whiteout, spray paint, glue, gas, etc.)? Marijuana? Cocaine (not crack)? Crack? Blamaril? Steroids? Ecstasy? Heroin (black tar, cheese, chiva, brown heroin)?  Methamphetamine	0000000	0000000	0000000	000000	0000000	0000000	the following sources? (DARKEN ONE BUBBLE FOR EACH LINE: a-e.)    A

	b. c. d. e. f. g. h. i. j. k.	Tobacco? Alcohol? Inhalants (Whiteout, spray paint, Marijuana? Cocaine (not crack)? Crack? Ecstasy? Steroids? Heroin (black tar, cheese, chiva, I Methamphetamine (speed, cryst Synthetic Marijuana (spice, K2)? Any prescription drug not prescr. Electronic Vapor Products (E-Cig	orown heroi al meth, ice, ibed to you?	n)? or crank)?	ı pens, Vape	e pipes, etc.)			
28.		ICE SCHOOL BEGAN IN THE FALL		any DAYS ha	ave you		\		
	(DA	RKEN ONE BUBBLE FOR EACH L	NE: a-e.)			None	1-3 days	4-9 days	10+ days
	a.	missed a whole day of school bed	cause you "s	skipped" or	"cut"?	1/0/	7 0	0	Ó
		missed a whole day of school bed				//0	0	O	O
		missed a whole day of school for		· · · · · · · · · · · · · · · · · · ·		/ //0		0	0
		been sent by a teacher to someo		1 1 - 1 1	an, or Guid	ance \	1		
		Counselor because of your condu- had someone from your home be			se of vour o	conduct		0	O
		or attitude?		oor becaus	33 of your C		0	0	0
29.		RING THE PAST 12 MONTHS, how		ES (if any) h	ave you		1-3	4-9	10+
		RKEN ONE BUBBLE FOR EACH L	\	futanala kasa		None	times	times	times
		gotten into difficulties of any kindrinking?	u with your	irienas deca	iuse of you	r	0	0	
		driven a car when you've had a g	ood bit to d	rink?			0		00
		gotten into difficulties of any kind			use of you	r			
		drug use?	,		, , ,	0	0	0	0
	d.	driven a car when you've felt hig	h from drug	s?		0	O	0	0
30.	SIN	ICE SCHOOL BEGAN IN THE FALL	, on how ma	any DAYS (if	f any) have	you attende	ed at least o	ne class wh	ile "high,"
٠.		unk" or "stoned" on					1 2	4-9	10:
	(DA	RKEN ONE BUBBLE FOR EACH L	INE: a-d.)		No	one	1-3 days	4-9 days	10+ days
	,			and beautiful at all	er)		-		
		beer, wine coolers (hard lemonac	le, hard soda	as, nara ciae	31 //			_	
	a.	wine, or hard liquor?	le, hard soda	as, nard cide	(	C	0	O	O
	a. b.	wine, or hard liquor? marijuana?	le, hard soda	as, nard cide	(	Ö	Ŏ	Ŏ	Ŏ
	a. b. c.	wine, or hard liquor? marijuana? inhalants?	le, hard soda	as, nara ciae	(	) )	0	0	0000
	a. b. c.	wine, or hard liquor? marijuana?	le, hard soda	as, nard cide	(	Ö	Ŏ	Ŏ	Ŏ
31.	a. b. c. d.	wine, or hard liquor? marijuana? inhalants? some other drug(s)? ohol or other drugs are sometime	es used at pa		( ( ( ( ing of the p	parties you a	0 0	S school year	0 0
	a. b. c. d.	wine, or hard liquor? marijuana? inhalants? some other drug(s)?	es used at pa	arties. Think	( ( ( ( ing of the p	parties you a	oattended this	s school year	ar
	a. b. c. d.	wine, or hard liquor? marijuana? inhalants? some other drug(s)? ohol or other drugs are sometime	es used at pa		( ( ( ( ing of the p	parties you a	0 0	s school year	0 0
	a. b. c. d. Alco	wine, or hard liquor? marijuana? inhalants? some other drug(s)? ohol or other drugs are sometime	es used at pa INE: a-b.) Never	arties. Think Seldom	ing of the p	parties you a	attended this	s school year	ar idn't attendany parties

	or	NCE SCHOOL BEGAN friends, for problem arijuana, or other dru	s in any way con	•	_				•		Yes	No
	he	ou had a drug or ald lp, who would you g ARKEN ONE BUBBLE	o to?		d		34.	got the	ten any inform following SCH		lcohol	from
					Yes	No		(DA	RKEN ONE BU	BBLE FOR EACH LI	NE: a-h	1.)
		A counselor or prog	gram in school?		O	O						
		A school nurse?			0	0					Yes	No
1	C.	Another adult in sc	hool (such as a t		$\sim$				A school healtl		0	$\circ$
		or coach)?			$\circ$	$\circ$				rogram at school?	$\circ$	$\circ$
		Your parents?			$\circ$	$\circ$			A school gulda A school nurse	nce counselor?	0	0
		A medical doctor? Your friends?			$\circ$	0				cial studies class?	$\circ$	0
	f. ~	Another adult (such	valativa		0	0					0	$\cup$
	y.	clergyman, or other			0	0			at school?	p or club meeting	0	0
	h	A counselor or prog			Ö	Ŏ			An invited sch	nol guest?	Ö	Ö
		I wouldn't go to an			ŏ	Ŏ		•	Another source		$\tilde{O}$	$\tilde{O}$
5	Ho	w do your parents fo	eel about kids vo	our age	(DA	RKEN (	ONE	BURE	I E FOR FACH	LINE: a-c.)		
J.	110	w do your parents it	Strongly Disapprove	Mildl Disappr	ly	Neithe nor D	er App	rove	Mildly Approve	Strongly Approve		Don't Know
	a.	using tobacco?	0			10.12	$\bigcirc$	\		0		0
		drinking alcohol?	0	o Q			Ŏ\		// Ø	Ŏ		Ŏ
		using marijuana?	0	/) 6			O		1/0	Ö		O

## **SUPPLEMENTAL SURVEY QUESTIONS**

S-1 (A) (B) (C) (D) (III) (F) (G) (H) (-1)	S-2 (A) (B) (C) (D) (E) (G) (H) (J)	S-3 (A) (B) (C) (D) (E) (F) (G) (H) (-)	S-4 (A) (B) (C) (D) (III) (F) (G) (H) (-)	S-5 (A) (B) (C) (D) (III) (F) (G) (H) (-)	S-6 (A) (B) (C) (D) (III) (F) (G) (H) (-)	S-7 (A) (B) (C) (D) (E) (F) (G) (H) (J)	S-8 (A) (B) (C) (D) (III) (F) (G) (H) (-)	S-9 (A) (B) (C) (D) (III) (F) (G) (T) (-)	S-10 (A) (B) (C) (D) (E) (C) (F) (G) (H) (J)
S-11 (A) (B) (C) (D) (III) (E) (G) (H) (-) (-)	S-12 (A) (B) (C) (D) (III) (F) (G) (H) (J)	S-13 (A) (B) (C) (D) (III) (E) (G) (H) (-)	S-14 (A) (B) (C) (D) (III) (E) (G) (H) (-)	S-15 (A) (B) (C) (D) (III) (II	S-16 (A) (B) (C) (D) (III) (F) (G) (F) (-)	S-17 (A) (B) (C) (D) (III) (F) (G) (H) (-)	S-18 (A) (B) (C) (D) (III) (E) (G) (H) (-) (-)	S-19 (A) (B) (C) (D) (III) (F) (G) (F) (-)	S-20 (A) (B) (C) (D) (E) (F) (G) (H)
S-21 (A) (B) (C) (D) (H) (T) (J)	S-22 (A) (B) (C) (D) (III) (F) (G) (H) (-)	S-23 (A) (B) (C) (D) (E) (F) (G) (F) (-)	S-24 (A) (B) (C) (D) (E) (F) (G) (H) (1) (J)	S-25 (A) (B) (C) (D) (III) (III) (G) (H) (H) (H) (H) (H) (H) (H) (H) (H) (H	S-26 (A) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	S-27 (A) (B) (C) (D) (H) (-)	S-28 (A) (B) (C) (D) (H) (F) (G) (H) (-)	S-29 (A) (B) (C) (D) (III) (III) (G) (H) (-)	S-30 (A) (B) (C) (D) (E) (F) (G) (H) (-)

THANK YOU FOR BEING PART OF THIS IMPORTANT PROJECT

V4