

California Student Survey 2007-08

The Statewide Healthy Kids Survey

Grade 7

- This is a survey about school and health-related behaviors, experiences, and attitudes. It includes questions about use of alcohol, tobacco, and other drugs; bullying and violence; and what you do at school and how you feel about it. **You will be able to answer whether or not you have done or experienced any of these things.**
- **You do not have to answer these questions**, but your answers will be very helpful in improving school and health programs.
- **Please do not write your name on this form or the answer sheet. Do not identify yourself in any other way.**
- Please mark all of your answers on the answer sheet. Do not write on the questionnaire. Mark only one answer unless told to "**Mark All That Apply.**"
- This survey asks about things you may have done during different periods of time, such as during your **lifetime** (did you ever do something), or the past **12 months**, **six months**, or **30 days**. Each provides different information. Please pay careful attention to these time periods.

Thank You For Completing This Survey!



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

Next, we would like some background information about you.

1. How old are you?

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

2. What is your sex?

- A) Male
- B) Female

3. In what grade are you?

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

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

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

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

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

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

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

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

Keep the following definitions in mind.

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

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

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

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

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

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

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

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

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

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

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

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

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

	0 days	1 day	2 days	3-9 days	10-19 days	20-30 days
Happened on School Property						
34. smoke cigarettes?	A	B	C	D	E	F
35. have at least one drink of alcohol?	A	B	C	D	E	F
36. smoke marijuana?	A	B	C	D	E	F
37. use any other illegal drug or pill to get "high"?	A	B	C	D	E	F

38. How do you like to drink alcohol?

- A) I don't drink alcohol
- B) Just a sip or two
- C) Enough to feel it a little
- D) Enough to feel it moderately
- E) Until I feel it a lot or get really drunk

39. In your **life**, how many times have you ridden in a car driven by someone who had been drinking alcohol?
- A) Never
 - B) 1 time
 - C) 2 times
 - D) 3 to 6 times
 - E) 7 or more times

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

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

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

		Very difficult	Fairly difficult	Fairly easy	Very easy	Don't know
46.	Cigarettes	A	B	C	D	E
47.	Alcohol	A	B	C	D	E
48.	Marijuana	A	B	C	D	E

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

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

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

	Neither approve nor disapprove	Somewhat disapprove	Strongly disapprove
50. Smoking one or more packs of cigarettes a day	A	B	C
51. Having one or two drinks of any alcoholic beverage nearly every day	A	B	C
52. Trying marijuana or hashish once or twice	A	B	C
53. Using marijuana once a month or more	A	B	C
54. Carrying a weapon to school	A	B	C

55. How do you think your close friends would feel about your smoking one or more packs of cigarettes a day?
- A) Neither approve nor disapprove
 B) Somewhat disapprove
 C) Strongly disapprove

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

		Number of Students										
		0 (none)	10	20	30	40	50 (half)	60	70	80	90	100 (all)
56.	Smoke cigarettes at least once a month	A	B	C	D	E	F	G	H	I	J	K
57.	Drink alcohol at least once a month	A	B	C	D	E	F	G	H	I	J	K
58.	Ever tried marijuana	A	B	C	D	E	F	G	H	I	J	K

59. During the past **12 months**, have you **talked** with at least one of your **parents** [or guardians] about the dangers of tobacco, alcohol, or drug use?
- A) No
B) Yes
60. During the past **12 months**, have you heard, read, or watched any **messages** about not using alcohol, tobacco, or drugs?
- A) No
B) Yes

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

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

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

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

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

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

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

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

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

78. During the past **12 months**, have you gambled (bet) for money or valuables in any of the following ways? (**Mark All That Apply**)

- A) I have not gambled (bet) in the past 12 months
- B) Card games (such as poker, blackjack)
- C) Personal skill games (such as pool, darts, coin tossing)
- D) Betting on sports teams
- E) Lottery (scratch cards or numbers)
- F) Bingo
- G) Dice games
- H) Gambling machines (slots, video poker)
- I) Horse racing
- J) Online gambling
- K) Gambled (bet) in some other way

79. During the past **12 months**, how many times have you gambled (bet) for money or valuables in any way?
- A) I have not gambled (bet) in the past 12 months
 - B) 1 time
 - C) 2 or 3 times
 - D) 4 to 9 times
 - E) 10 or more times

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

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

84. How safe do you feel when you are **at school**?
- A) Very safe
 - B) Safe
 - C) Neither safe nor unsafe
 - D) Unsafe
 - E) Very unsafe
85. How safe do you feel in the **neighborhood** where you live?
- A) Very safe
 - B) Safe
 - C) Neither safe nor unsafe
 - D) Unsafe
 - E) Very unsafe
86. Do you consider yourself a member of a gang?
- A) No
 - B) Yes

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

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

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

MAKE SURE YOU ARE NOW ON #98 ON THE ANSWER SHEET.

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

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

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

At school, ...

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

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

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

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

Outside of my home and school, ...

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

MAKE SURE YOU ARE NOW ON #116 ON THE ANSWER SHEET.

116. Did you eat breakfast today?

- A) No
- B) Yes

117. How many questions in this survey did you answer honestly?

- A) All of them
- B) Most of them
- C) Only some of them
- D) Hardly any

Thank You For Completing This Survey!