

2017 High School Healthy Kids Colorado Survey (A)

This survey is about health behavior. It has been developed so you can tell us what you do that may affect your health. The information you give will be used to improve health education for young people like yourself.

DO NOT write your name on this survey. The answers you give will be kept private. No one will know what you write. Answer the questions based on what you really do.

Completing the survey is voluntary. Whether or not you answer the questions will not affect your grade in this class. If you are not comfortable answering a question, just leave it blank.

The questions that ask about your background will be used only to describe the types of students completing this survey. The information will not be used to find out your name. No names will ever be reported.

Make sure to read every question. Fill in the ovals completely. When you are finished, follow the instructions of the person giving you the survey.

Throughout the survey you will see some questions with possible responses, big NO!, no, yes, or big YES!.

NO! means definitely not true for you,
no means mostly not true for you,
yes means mostly true for you,
and YES! means definitely true for you.

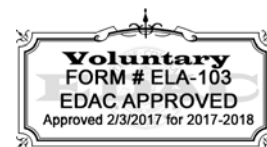
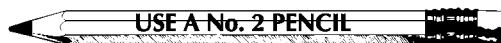
Example: Chocolate is the best ice cream flavor.

NO! no yes YES!

In the example above, the student marked "yes" because he or she thinks the statement is mostly true.

Directions

- Use a #2 pencil only.
- Make dark marks.
- Fill in a response like this: ● A B C D
- If you change your answer, erase your old answer completely.



Thank you very much for your help.

1. How old are you?

- 12 years old or younger
- 13 years old
- 14 years old
- 15 years old
- 16 years old
- 17 years old
- 18 years old or older

2. What is your sex?

- Female
- Male

3. In what grade are you?

- 9th grade
- 10th grade
- 11th grade
- 12th grade
- Ungraded or other grade

4. Are you Hispanic or Latino?

- Yes
- No

5. What is your race? (**Select one or more responses.**)

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White

6. How tall are you without your shoes on?

Directions: Write your height in the shaded blank boxes. Fill in the matching oval below each number.

Height	
Feet	Inches
3	0
4	1
5	2
6	3
7	4
	5
	6
	7
	8
	9
	10
	11

7. How much do you weigh without your shoes on?

Directions: Write your weight in the shaded blank boxes. Fill in the matching oval below each number.

Weight		
Pounds		
0	0	0
1	1	1
2	2	2
3	3	3
4	4	4
5	5	5
6	6	6
7	7	7
8	8	8
9	9	9

8. Which of the following best describes you?

- Heterosexual (straight)
- Gay or lesbian
- Bisexual
- Not sure

9. Some people describe themselves as transgender when their sex at birth does not match the way they think or feel about their gender. Are you transgender?

- No, I am not transgender
- Yes, I am transgender
- I am not sure if I am transgender
- I do not know what this question is asking

The next 6 questions ask about safety.

10. 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**?

- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

11. During the past 30 days, how many times did you **drive** a car or other vehicle **when you had been drinking alcohol**?

- I did not drive a car or other vehicle during the past 30 days
- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

12. During the past 30 days, how many times did you **ride** in a car or other vehicle **driven by someone who had been using marijuana** (also called grass, pot, or weed)?

- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

13. During the past 30 days, how many times did you **drive** a car or other vehicle **when you had been using marijuana** (also called grass, pot, or weed)?

- I did not drive a car or other vehicle during the past 30 days
- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

14. How often do you wear a seat belt when **riding** in a car driven by someone else?

- Never
- Rarely
- Sometimes
- Most of the time
- Always

15. During the past 30 days, on how many days did you **text or e-mail** while **driving** a car or other vehicle?

- I did not drive a car or vehicle during the past 30 days
- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

The next 6 questions ask about violence-related behaviors.

16. During the past 30 days, on how many days did you carry a **weapon** such as a gun, knife, or club **on school property**?

- 0 days
- 1 day
- 2 or 3 days
- 4 or 5 days
- 6 or more days

17. During the past 30 days, on how many days did you **not** go to school because you felt you would be unsafe at school or on your way to or from school?

- 0 days
- 1 day
- 2 or 3 days
- 4 or 5 days
- 6 or more days

18. During the past 12 months, how many times has someone threatened or injured you with a **weapon** such as a gun, knife, or club **on school property**?

- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or 7 times
- 8 or 9 times
- 10 or 11 times
- 12 or more times

19. During the past 12 months, how many times were you in a **physical fight**?

- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or 7 times
- 8 or 9 times
- 10 or 11 times
- 12 or more times

20. During the past 12 months, how many times did **someone you were dating or going out with** physically hurt you on purpose? (Count such things as being hit, slammed into something, or injured with an object or weapon.)

- I did not date or go out with anyone during the past 12 months
- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

21. Have you ever been physically forced to have sexual intercourse when you did not want to?

- Yes
- No

The next 3 questions ask about bullying. Bullying is when 1 or more students tease, threaten, spread rumors about, hit, shove, or hurt another student over and over again. It is not bullying when 2 students of about the same strength or power argue or fight or tease each other in a friendly way.

22. During the past 12 months, have you ever been bullied **on school property**?

- Yes
- No

23. During the past 12 months, have you ever been **electronically** bullied? (Count being bullied through texting, Instagram, Facebook, or other social media.)

- Yes
- No

24. During the past 12 months, have you ever been a victim of teasing or name calling because of your actual or perceived: (You can choose one answer or more than one answer.)

- Race or ethnic background
- Sexual orientation
- Gender identity
- Disability status
- None of these

The next question is about hurting yourself on purpose.

25. During the past 12 months, how many times did you do something to purposefully hurt yourself without wanting to die, such as cutting or burning yourself on purpose?

- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

The next 6 questions ask about sad feelings and attempted suicide. Sometimes people feel so depressed about the future that they may consider attempting suicide, that is, taking some action to end their own life.

26. During the past 12 months, did you ever feel so sad or hopeless almost every day for **two weeks or more in a row** that you stopped doing some usual activities?

- Yes
- No

27. During the past 12 months, did you ever **seriously** consider attempting suicide?

- Yes
- No

28. During the past 12 months, did you make a plan about how you would attempt suicide?

- Yes
- No

29. During the past 12 months, how many times did you actually attempt suicide?

- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

30. If you had a serious problem, do you know an adult in or out of school whom you could talk to or go to for help?

- Yes
- No
- Not sure

31. When you feel sad, empty, hopeless, angry, or anxious, with whom would you **most likely** talk about it?

- I do not feel sad, empty, hopeless, angry, or anxious
- Parent or other adult family member
- Teacher or other adult in this school
- Other adult
- Friend
- Sibling
- Not sure

The next 5 questions ask about tobacco use.

32. During the past 30 days, on how many days did you smoke cigarettes?

- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

33. If you wanted to get some cigarettes, how easy would it be for you to get some?

- Very hard
- Sort of hard
- Sort of easy
- Very easy

34. During the past 30 days, where did you buy your own cigarettes? (You can choose one answer or more than one answer.)

- I did not buy cigarettes during the past 30 days
- A gas station
- A convenience store
- A grocery store
- A drugstore
- A vending machine
- Over the Internet
- Through the mail
- Some other place not listed here

35. During the past 12 months, did you ever try to quit smoking cigarettes?

- I did not smoke during the past 12 months
- Yes
- No

36. In the past 30 days, which of the following products have you used on at least one day? (You can choose one answer or more than one answer.)

- Cigars, cigarillos, or little cigars
- Chewing tobacco, snuff, or dip such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen
- Snus (powdered tobacco in a small pouch) or other spitless tobacco such as Taboka, Revel, or Skoal Dry
- Smoking tobacco from a hookah, narghile, or other type of waterpipe
- Smoking tobacco from a pipe that was not hookah, narghile, or other type of waterpipe
- Bidis or small brown cigarettes wrapped in a leaf
- I have not used any of the products listed above

The next 7 questions ask about electronic vapor products such as blu, NJOY, Vuse, MarkTen, Logic, Vapin Plus, eGo, and Halo. Electronic vapor products include e-cigarettes, e-cigars, e-pipes, vape pipes, vaping pens, e-hookahs, and hookah pens. Do not include marijuana.

37. If one of your best friends offers you an electronic vapor product, will you use it?

- I definitely will
- I probably will
- I probably will not
- I definitely will not

38. At any time in the next year, do you think you will use an electronic vapor product?

- I definitely will
- I probably will
- I probably will not
- I definitely will not

39. Have you ever used a vapor product?

- Yes
- No

40. During the past 30 days, on how many days did you use an electronic vapor product?

- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

41. If you wanted to get any electronic vapor products, how easy would it be for you to get some?

- Very hard
- Sort of hard
- Sort of easy
- Very easy

42. During the past 30 days, where did you buy your own electronic vapor products? (You can choose one answer or more than one answer.)

- I did not buy electronic vapor products during the past 30 days
- A gas station
- A convenience store
- A grocery store
- A drugstore
- A vending machine
- Over the Internet
- Through the mail
- Some other place not listed

43. How much do you think people risk harming themselves (physically or in other ways) if they use electronic vapor products every day?

- No risk
- Slight risk
- Moderate risk
- Great risk

The next 4 questions ask about secondhand smoke and vapor.

44. During the past 7 days, on how many days were you inside your home while someone was smoking a cigarette, cigar, or pipe, or using an electronic vapor product? (Do **not** include marijuana.)

- 0 days
- 1 to 2 days
- 3 to 4 days
- 5 to 6 days
- 7 days

45. During the past 7 days, on how many days were you in a car with your parent or guardian while they were smoking a cigarette, cigar, or pipe, or using an electronic vapor product? (Do **not** include marijuana.)

- My parents/guardians do not smoke
- 0 days
- 1 to 2 days
- 3 to 4 days
- 5 to 6 days
- 7 days

46. How much do you think people risk harming themselves (physically or in other ways) if they breath vapor from someone else's electronic vapor product? (Do **not** include marijuana.)

- No risk
- Slight risk
- Moderate risk
- Great risk

47. How much do you think people risk harming themselves (physically or in other ways) if they breath tobacco smoke from someone else's cigarette, cigar, or pipe?

- No risk
- Slight risk
- Moderate risk
- Great risk

The next 8 questions ask about drinking alcohol. This includes drinking beer, wine, wine coolers, and liquor such as rum, gin, vodka, or whiskey. For these questions, drinking alcohol does not include drinking a few sips of wine for religious purposes.

48. During your life, on how many days have you had at least one drink of alcohol?

- 0 days
- 1 or 2 days
- 3 to 9 days
- 10 to 19 days
- 20 to 39 days
- 40 to 99 days
- 100 or more days

49. How old were you when you had your first drink of alcohol other than a few sips?

- I have never had a drink of alcohol other than a few sips
- 8 years old or younger
- 9 or 10 years old
- 11 or 12 years old
- 13 or 14 years old
- 15 or 16 years old
- 17 years old or older

50. During the past 30 days, on how many days did you have at least one drink of alcohol?

- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

The next question asks about how many drinks of alcohol you have had in a row, that is, within a couple of hours. For this question, the number of drinks you need to think about is different for female students and male students.

51. During the past 30 days, on how many days did you have **4** or more drinks of alcohol in a row (if you are **female**) or **5** or more drinks of alcohol in a row (if you are **male**)?

- 0 days
- 1 day
- 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 or more days

52. During the past 30 days, on how many days do you think a **typical student at your school** drank alcohol?

- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

53. During the past 30 days, on how many days do you think a **typical student at your school** had 5 or more drinks of alcohol?

- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

54. During the past 30 days, how did you **usually** get the alcohol you drank? (Select only **one** response.)
- I did not drink alcohol during the past 30 days
 - I bought it in a store such as a liquor store, convenience store, supermarket, discount store, or gas station
 - I bought it at a restaurant, bar, or club
 - I bought it at a public event such as a concert or sporting event
 - I gave someone else money to buy it for me
 - Someone gave it to me
 - I took it from a store or family member
 - I got it some other way

55. During the past 30 days, where did you **usually** drink alcohol? (Select only **one** response.)
- I did not drink alcohol during the past 30 days
 - At my home
 - At another person's home
 - When riding in or driving a car or other vehicle
 - At a restaurant, bar, or club
 - At a public place such as a park, beach, or parking lot
 - At a public event such as a concert or sporting event
 - On school property

The next 11 questions ask about marijuana use. Marijuana also is called grass, pot, or weed.

56. During your life, how many times have you used marijuana?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 to 99 times
 - 100 or more times
57. How old were you when you tried marijuana for the first time?
- I have never tried marijuana
 - 8 years old or younger
 - 9 or 10 years old
 - 11 or 12 years old
 - 13 or 14 years old
 - 15 or 16 years old
 - 17 years old or older

58. During the past 30 days, how many times did you use marijuana?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 or more times

59. During the past 30 days, how did you use marijuana? (Select **all that apply**.)
- I did not use marijuana during the past 30 days
 - I smoked it
 - I ate it (in an edible, candy, tincture or other food)
 - I used a vaporizer
 - I dabbed it
 - I used it in some other way

60. During the past 30 days, how did you **usually** use marijuana? (Select only **one** response.)
- I did not use marijuana during the past 30 days
 - I smoked it
 - I ate it (in an edible, candy, tincture or other food)
 - I used a vaporizer
 - I dabbed it
 - I used it in some other way

61. During the past 30 days, how did you **usually** get the marijuana that you used? (Select only **one** response.)
- I did not use marijuana during the past 30 days
 - I bought it at a marijuana store or center
 - I bought it from someone else
 - A parent or family member over the age of 21 gave it to me
 - A friend over the age of 21 gave it to me
 - Someone under the age of 21 gave it to me
 - I took it without permission from the owner

62. During the past 30 days, how many times did you use marijuana **on school property**?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 or more times

63. During the past 30 days, how many times do you think a **typical student at your school** used marijuana?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 or more times

64. How much do you think people risk harming themselves (physically or in other ways) if they use marijuana regularly?
- No risk
 - Slight risk
 - Moderate risk
 - Great risk

65. How wrong do **you** think it is for **someone your age** to use marijuana?
- Very wrong
 - Wrong
 - A little bit wrong
 - Not wrong at all

66. How wrong do **your parents or guardians** feel it would be for **you** to use marijuana?
- Very wrong
 - Wrong
 - A little bit wrong
 - Not wrong at all

The next 10 questions ask about other drugs.

67. During your life, how many times have you used **any** form of cocaine, including powder, crack, or freebase?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 or more times

68. During your life, how many times have you sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 or more times

69. During your life, how many times have you used **heroin** (also called smack, junk, or China White)?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 or more times

70. During your life, how many times have you used **methamphetamines** (also called speed, crystal, crank, or ice)?
- 0 times
 - 1 or 2 times
 - 3 to 9 times
 - 10 to 19 times
 - 20 to 39 times
 - 40 or more times

71. During your life, how many times have you used **ecstasy** (also called MDMA)?

- 0 times
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times

72. During your life, how many times have you taken **prescription pain medicine** without a doctor's prescription or differently than how a doctor told you to use it? (Count drugs such as codeine, Vicodin, OxyContin, Hydrocodone, and Percocet.)

- 0 times
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times

73. During the past 30 days, how many times did you take a **prescription drug** (such as OxyContin, Percocet, Vicodin, codeine, Adderall, Ritalin, or Xanax) without a doctor's prescription?

- 0 times
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times

74. If you wanted to get **prescription drugs** not prescribed to you, how easy would it be for you to get some?

- Very hard
- Sort of hard
- Sort of easy
- Very easy

75. How wrong do you think it is for someone your age to use **prescription drugs** (such as OxyContin, Percocet, Vicodin, codeine, Adderall, Ritalin, or Xanax) without a doctor's prescription?

- Very wrong
- Wrong
- A little bit wrong
- Not wrong at all

76. During the past 12 months, has anyone offered, sold, or given you an illegal drug **on school property**?

- Yes
- No

The next 7 questions ask about sexual health.

77. Have you ever had sexual intercourse?

- Yes
- No

78. How old were you when you had sexual intercourse for the first time?

- I have never had sexual intercourse
- 11 years old or younger
- 12 years old
- 13 years old
- 14 years old
- 15 years old
- 16 years old
- 17 years old or older

79. During your life, with how many people have you had sexual intercourse?

- I have never had sexual intercourse
- 1 person
- 2 people
- 3 people
- 4 people
- 5 people
- 6 or more people

80. During the past 3 months, with how many people did you have sexual intercourse?

- I have never had sexual intercourse
- I have had sexual intercourse, but not during the past 3 months
- 1 person
- 2 people
- 3 people
- 4 people
- 5 people
- 6 or more people

81. Did you drink alcohol or use drugs before you had sexual intercourse the **last time**?

- I have never had sexual intercourse
- Yes
- No

82. The **last time** you had sexual intercourse, did you or your partner use a condom?

- I have never had sexual intercourse
- Yes
- No

83. 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
- An IUD (such as Mirena or ParaGard) or implant (such as Implanon or Nexplanon)
- A shot (such as Depo-Provera), patch (such as Ortho Evra), or birth control ring (such as NuvaRing)
- Withdrawal or some other method
- Not sure

The next 2 questions ask about body weight.

84. How do **you** describe your weight?

- Very underweight
- Slightly underweight
- About the right weight
- Slightly overweight
- Very overweight

85. Which of the following are you trying to do about your weight?

- Lose** weight
- Gain** weight
- Stay** the same weight
- I am **not trying to do anything** about my weight

The next 6 questions ask about food you ate or drank during the past 7 days. Think about all the meals and snacks you had from the time you got up until you went to bed. Be sure to include food you ate at home, at school, at restaurants, or anywhere else.

86. During the past 7 days, how many times did you eat **fruit**? (Do **not** count fruit juice.)

- I did not eat fruit during the past 7 days
- 1 to 3 times during the past 7 days
- 4 to 6 times during the past 7 days
- 1 time per day
- 2 times per day
- 3 times per day
- 4 or more times per day

87. During the past 7 days, how many times did you eat **vegetables**?

- I did not eat vegetables during the past 7 days
- 1 to 3 times during the past 7 days
- 4 to 6 times during the past 7 days
- 1 time per day
- 2 times per day
- 3 times per day
- 4 or more times per day

88. During the past 7 days, how many times did you drink a **can, bottle, or glass of soda or pop**, such as Coke, Pepsi, or Sprite? (Do **not** count diet soda or diet pop.)

- I did not drink soda or pop during the past 7 days
- 1 to 3 times during the past 7 days
- 4 to 6 times during the past 7 days
- 1 time per day
- 2 times per day
- 3 times per day
- 4 or more times per day

89. Which of the following beverages did you drink a can, bottle, or glass of one or more times during the past 7 days? (Please select all that apply.)

- Sports drink, such as Gatorade or PowerAde (Do not count low-calorie sports drinks such as Propel or G2)
- Energy drink, such as Red Bull or Jolt (Do not count diet energy drinks)
- Other sugar-sweetened beverage, such as lemonade, sweetened tea or coffee drinks, flavored milk, Snapple, or SunnyDelight
- Diet soda or pop, such as Diet Coke, Diet Pepsi, or Sprite Zero
- Plain water, such as tap, bottled, or unflavored sparkling water
- Something else

90. During the past 7 days, on how many days did you eat **breakfast**?

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days
- 6 days
- 7 days

91. During the past 30 days, how often did you go hungry because there was not enough food in your home?

- Never
- Rarely
- Sometimes
- Most of the time
- Always

The next 7 questions ask about physical activity.

92. During the past 7 days, on how many days were you physically active for a total of **at least 60 minutes per day**? (Add up all the time you spent in any kind of physical activity that increased your heart rate and made you breathe hard some of the time.)

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days
- 6 days
- 7 days

93. On an average school day, how many hours do you watch TV?

- I do not watch TV on an average school day
- Less than 1 hour per day
- 1 hour per day
- 2 hours per day
- 3 hours per day
- 4 hours per day
- 5 or more hours per day

94. On an average school day, how many hours do you play video or computer games or use a computer for something that is not school work? (Count time spent on things such as Xbox, PlayStation, an iPad or other tablet, a smartphone, texting, YouTube, Instagram, Facebook or other social media.)

- I do not play video or computer games or use a computer for something that is not school work
- Less than 1 hour per day
- 1 hour per day
- 2 hours per day
- 3 hours per day
- 4 hours per day
- 5 or more hours per day

95. During the past 12 months, on how many sports teams did you play? (Count any teams run by your school or community groups.)

- 0 teams
- 1 team
- 2 teams
- 3 or more teams

96. If you wanted to, could you walk or ride a bike, scooter, or skateboard **to school**?

- No, it is too far
- No, it is not safe
- No, it is too far and it is not safe
- No, my school does not allow it
- Yes

97. In an average week when you are in school, on how many days do you walk or ride your bike **to school** when weather allows you to do so?

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days

98. In an average week when you are in school, on how many days do you go to physical education (PE) classes?

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days

The next 3 questions ask about your home life.

99. On an average school night, how many hours of sleep do you get?

- 4 or less hours
- 5 hours
- 6 hours
- 7 hours
- 8 hours
- 9 hours
- 10 or more hours

100. During the past 30 days, where did you usually sleep?

- In my parent's or guardian's home
- In the home of a friend, family member, or other person because I had to leave my home or my parent or guardian cannot afford housing
- In a shelter or emergency housing
- In a motel or hotel
- In a car, park, campground, or other public place
- I do not have a usual place to sleep Somewhere else

101. If I had a personal problem, I could ask my parents or guardians for help.

- NO!
- no
- yes
- YES!

The next 6 questions ask about school.

102. During the past 12 months, how would you describe your grades in school?

- Mostly A's
- Mostly B's
- Mostly C's
- Mostly D's
- Mostly F's
- None of these grades
- Not sure

103. Do you participate in any extracurricular activities at school such as sports, band, drama, clubs, or student government?

- Yes
- No

104. During the **LAST FOUR WEEKS** how many whole days of school have you missed because you skipped or "cut"?

- 0 days
- 1 day
- 2 days
- 3 days
- 4 to 5 days
- 6 to 10 days
- 11 or more days

105. I feel safe at my school.

- NO!
- no
- yes
- YES!

106. My teacher(s) notices when I am doing a good job and lets me know about it.

- NO!
- no
- yes
- YES!

107. My teacher(s) praise me when I work hard in school.

- NO!
- no
- yes
- YES!

The next 3 questions ask about other health-related topics.

108. Has a doctor or nurse ever told you that you have asthma?

- Yes
- No
- Not sure

109. When was the last time you saw a doctor or nurse for a check-up or physical exam when you were not sick or injured?

- During the past 12 months
- Between 12 and 24 months ago
- More than 24 months ago
- Never
- Not sure

110. When was the last time you saw a dentist or dental hygienist for a check-up, exam, teeth cleaning, or other dental work?

- During the past 12 months
- Between 12 and 24 months ago
- More than 24 months ago
- Never
- Not sure

**This is the end of the survey.
Thank you very much for your help.**

DFC Grantees Additional Questions

Your community is collecting additional information through the following questions. The data gathered is very important to the district and to your school. Please record your answers for each question in the "Extra Questions" area (questions 201-220) provided at the end of the main survey form you have been using. As with the questions you were just asked on the Healthy Kids Colorado Survey form, you are welcome to skip any of the following questions, should you not feel comfortable in answering them. Thank you so much for your time!

201. How much do you think people risk harming themselves physically or in other ways when they have five or more drinks of an alcoholic beverage once or twice a weekend?

- A. No risk
- B. Slight risk
- C. Moderate risk
- D. Great risk

202. How much do you think people risk harming themselves physically or in other ways if they smoke marijuana once or twice a week?

- A. No risk
- B. Slight risk
- C. Moderate risk
- D. Great risk

203. How much do you think people risk harming themselves physically or in other ways if they use prescription drugs that are not prescribed to them?

- A. No risk
- B. Slight risk
- C. Moderate risk
- D. Great risk

204. How wrong do your parents feel it would be for you to have one or two drinks of an alcoholic beverage nearly everyday?

- A. Not at all wrong
- B. A little bit wrong
- C. Wrong
- D. Very wrong

205. How wrong do your parents feel it would be for you to use prescription drugs not prescribed to you?

- A. Not at all wrong
- B. A little bit wrong
- C. Wrong
- D. Very wrong

206. How wrong do your friends feel it would be for you to have one or two drinks of an alcoholic beverage nearly everyday?

- A. Not at all wrong
- B. A little bit wrong
- C. Wrong
- D. Very wrong

207. How wrong do your friends feel it would be for you to smoke tobacco?

- A. Not at all wrong
- B. A little bit wrong
- C. Wrong
- D. Very wrong

208. How wrong do your friends feel it would be for you to smoke marijuana?

- A. Not at all wrong
- B. A little bit wrong
- C. Wrong
- D. Very wrong

209. How wrong do your friends feel it would be for you to use prescription drugs not prescribed to you?

- A. Not at all wrong
- B. A little bit wrong
- C. Wrong
- D. Very wrong

210. How do you feel about someone your age having one or two drinks of an alcoholic beverage nearly every day?

- A. Neither approve nor disapprove
- B. Somewhat disapprove
- C. Strongly disapprove
- D. Don't know or can't say