

ADOLESCENT SURVEY

Participant Number: _____

1. I have people I look up to
 - ☐ Not at all
 - ☐ A Little
 - ☐ Somewhat
 - ☐ Quite a Bit
 - ☐ A Lot
 - ☐ I don't understand the question

2. Getting an education is important to me
 - ☐ Not at all
 - ☐ A Little
 - ☐ Somewhat
 - ☐ Quite a Bit
 - ☐ A Lot
 - ☐ I don't understand the question

3. My parent(s)/caregiver(s) know(s) a lot about me
 - ☐ Not at all
 - ☐ A Little
 - ☐ Somewhat
 - ☐ Quite a Bit
 - ☐ A Lot
 - ☐ I don't understand the question

4. I try to finish what I start
 - ☐ Not at all
 - ☐ A Little
 - ☐ Somewhat
 - ☐ Quite a Bit
 - ☐ A Lot
 - ☐ I don't understand the question

5. I am able to solve problems without harming myself or others (for example by using drugs and/or being violent)
 - ☐ Not at all
 - ☐ A Little
 - ☐ Somewhat
 - ☐ Quite a Bit
 - ☐ A Lot
 - ☐ I don't understand the question

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6. I know where to go in my community to get help

- ☐ Not at all
- ☐ A Little
- ☐ Somewhat
- ☐ Quite a Bit
- ☐ A Lot
- ☐ I don't understand the question

7. I feel I belong at my school

- ☐ Not at all
- ☐ A Little
- ☐ Somewhat
- ☐ Quite a Bit
- ☐ A Lot
- ☐ I don't understand the question

8. My family stands by me during difficult times

- ☐ Not at all
- ☐ A Little
- ☐ Somewhat
- ☐ Quite a Bit
- ☐ A Lot
- ☐ I don't understand the question

9. My friends stand by me during difficult times

- ☐ Not at all
- ☐ A Little
- ☐ Somewhat
- ☐ Quite a Bit
- ☐ A Lot
- ☐ I don't understand the question

10. I am treated fairly in my community

- ☐ Not at all
- ☐ A Little
- ☐ Somewhat
- ☐ Quite a Bit
- ☐ A Lot
- ☐ I don't understand the question

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11. I have opportunities to develop skills that will be useful later in life (like job skills and skills to care for others)

- ☐ Not at all
- ☐ A Little
- ☐ Somewhat
- ☐ Quite a Bit
- ☐ A Lot
- ☐ I don't understand the question

12. I enjoy my community's traditions

- ☐ Not at all
- ☐ A Little
- ☐ Somewhat
- ☐ Quite a Bit
- ☐ A Lot
- ☐ I don't understand the question

13. Over the past two weeks, how often have you had little interest or pleasure in doing things?

- ☐ Not at all
- ☐ Several days
- ☐ More than half the days
- ☐ Nearly every day
- ☐ I don't understand the question

14. Over the past two weeks, how often have you felt down, depressed or hopeless?

- ☐ Not at all
- ☐ Several days
- ☐ More than half the days
- ☐ Nearly every day
- ☐ I don't understand the question

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

- ☐ Yes
- ☐ No
- ☐ I don't understand the question

16. During the past 12 months, did you drink any alcohol (more than a few sips). (Do not count sips of alcohol taken during family or religious events.)

- ☐ Yes
- ☐ No
- ☐ I don't understand the question

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17. During the past 12 months, did you smoke any marijuana or hashish?
- ☐ Yes
 - ☐ No
 - ☐ I don't understand the question
18. During the past 12 months, did you use anything else to get high? ("anything else" includes illegal drugs, over the counter and prescription drugs, and things that you sniff or "huff")
- ☐ Yes
 - ☐ No
 - ☐ I don't understand the question
19. Have you ever ridden in a car driven by someone (including yourself) who was "high" or had been using alcohol or drugs?
- ☐ Yes
 - ☐ No
 - ☐ I don't understand the question
20. Do you ever use alcohol or drugs to relax, feel better about yourself, or fit in?
- ☐ Yes
 - ☐ No
 - ☐ I don't understand the question
21. Do you ever use alcohol or drugs while you are by yourself or alone?
- ☐ Yes
 - ☐ No
 - ☐ I don't understand the question
22. Do you ever forget things you did while using alcohol or drugs?
- ☐ Yes
 - ☐ No
 - ☐ I don't understand the question
23. Do your family or friends ever tell you that you should cut down on your drinking or drug use?
- ☐ Yes
 - ☐ No
 - ☐ I don't understand the question
24. Have you ever gotten into trouble while you were using alcohol or drugs?
- ☐ Yes
 - ☐ No
 - ☐ I don't understand the question

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25. During the past 12 months, how many times were you in a physical fight?
- ☐ 0 times
 - ☐ 1 time
 - ☐ 2 or more times
 - ☐ 5 or more times
 - ☐ I don't understand the question
26. Have you ever been arrested and/or been to jail?
- ☐ Never arrested
 - ☐ Yes, arrested but no jail
 - ☐ Yes, arrested and been to jail
 - ☐ I don't understand the question
27. What gender do you identify as?
- ☐ Woman
 - ☐ Man
 - ☐ Trans-woman
 - ☐ Trans-man
 - ☐ Other _____
 - ☐ I don't understand the question
28. What do you consider your sexual orientation?
- ☐ Heterosexual or straight (attracted to the opposite sex)
 - ☐ Gay or lesbian (attracted to the same sex)
 - ☐ Bisexual (attracted to both sexes)
 - ☐ Other _____
 - ☐ I don't understand the question
29. During your life, with how many people have you had sexual intercourse?
- ☐ I have never had sexual intercourse
 - ☐ 1-2 people
 - ☐ 3-5 people
 - ☐ 6-10 people
 - ☐ 11 or more people
 - ☐ I don't understand the question
30. The last time you had sexual intercourse, did you or your partner use a condom?
- ☐ I have never had sexual intercourse
 - ☐ Yes
 - ☐ No
 - ☐ I don't understand the question

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31. Have you ever been diagnosed with an STI (sexually transmitted infection)?
- ☐ Yes
 - ☐ No
 - ☐ I don't understand the question
32. Did you fail a class in middle school or high school?
- ☐ Yes
 - ☐ No
 - ☐ I don't understand the question
33. Have you ever been expelled or have you ever dropped out of school?
- ☐ Yes
 - ☐ No
 - ☐ I don't understand the question
34. Are you involved in any extracurricular activities such as sports, clubs, dance, music, or youth groups? If so, how many?
- ☐ None
 - ☐ 1 or more
 - ☐ 3 or more
 - ☐ I don't understand the question
35. Do you have a mother or stepmother?
- ☐ Yes
 - ☐ No
 - ☐ I don't understand the question

While you were growing up, during your first 18 years of life (or up until now if you are not yet 18):

36. Did a parent or other adult in the household often or very often...
- Swear at you, insult you, put you down, or humiliate you?
- or**
- Act in a way that made you afraid that you might be physically hurt?
- ☐ Yes
 - ☐ No
 - ☐ I don't understand the question

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37. Did a parent or other adult in the household often or very often...

Push, grab, slap, or throw something at you?

or

Ever hit you so hard that you had marks or were injured?

- ☐ Yes
- ☐ No
- ☐ I don't understand the question

38. Did an adult or person at least 5 years older than you ever...

Touch or fondle you or have you touch their body in a sexual way?

or

Attempt or actually have oral, anal, or vaginal intercourse with you?

- ☐ Yes
- ☐ No
- ☐ I don't understand the question

39. Did you often or very often feel that ...

No one in your family loved you or thought you were important or special?

or

Your family didn't look out for each other, feel close to each other, or support each other?

- ☐ Yes
- ☐ No
- ☐ I don't understand the question

40. Did you often or very often feel that ...

You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you?

or

Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?

- ☐ Yes
- ☐ No
- ☐ I don't understand the question

41. Were your parents ever separated or divorced?

- ☐ Yes
- ☐ No
- ☐ I don't understand the question

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42. Was your mother or stepmother:

Often or very often pushed, grabbed, slapped,

or

had something thrown at her?

or

Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard?

or

Ever repeatedly hit at least a few minutes or threatened with a gun or knife?

- ☐ Yes
- ☐ No
- ☐ I don't understand the question

43. Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?

- ☐ Yes
- ☐ No
- ☐ I don't understand the question

44. Was a household member depressed or mentally ill, or did a household member attempt suicide?

- ☐ Yes
- ☐ No
- ☐ I don't understand the question

45. Did a household member go to prison?

- ☐ Yes
- ☐ No
- ☐ I don't understand the question