

# Youth Data Survey 2009

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

*family support positive family communication other adult relationships caring neighborhood caring school climate parent involvement in schooling community values youth as resources service to others integrity honesty responsibility restraint planning and decision making interpersonal competence cultural competence resistance skills peaceful conflict resolution personal power self-esteem sense of purpose positive*

All children and youth need to be surrounded with networks of individuals and institutions that provide them with support, opportunities, boundaries, and structure, and that nurture in them the commitments, values, competencies, and positive identity they need to grow up healthy and competent.

The Vision of Asset Building Communities

*view of person future safety family boundaries school boundaries neighborhood boundaries adult role models positive peer influence high expectations creative activities youth programs religious community time*

*at home achievement motivation school engagement homework bonding to school reading for pleasure caring equality and social justice integrity honesty responsibility restraint planning and decision making interpersonal competence cultural competence resistance skills peaceful conflict resolution personal power self-esteem sense of purpose positive view of person future caring school climate*

*Forty Developmental Assets, Search Institute*

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from Harrisonburg City and  
Rockingham County

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

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# Table of Contents

<b>Introduction</b> .....	3
<b>The Power of Assets</b> .....	4
<b>40 Developmental Assets</b> .....	5
<b>Ideas for Asset Building</b> .....	6
<b>Quick Facts</b> .....	8
<b>Youth Demographics</b>	
Youth by Age.....	12
Youth by Race.....	13
Youth by Sex.....	14
Youth by Living Arrangements.....	15
Youth Employment Status.....	16
<b>Youth Education</b>	
School Dropouts.....	17
School Enrollments (Harrisonburg City/Rockingham County).....	18
Youth Who Make Good Grades Often or a Lot.....	19
<b>Youth Sexuality</b>	
Age at First Time of Sexual Intercourse.....	20
Sexual Intercourse by Grade Level.....	21
Teen Pregnancy Rates per 1,000 Females (15-17).....	22
Births to Teen Girls (15-17) per 1,000.....	23
Births to Mothers with Less than 12 <sup>th</sup> Grade Education.....	24
Number Teen Pregnancies in Harrisonburg & Rockingham.....	25
Non-Marital Births.....	26
Choice of Contraceptive Method.....	27
<b>Youth Tobacco Use</b>	
Cumulative Frequency of Tobacco Use.....	28
Youth Who Use Tobacco Weekly .....	29
Use by Grade Who Use Tobacco At Least Once per Year .....	30
Youth Who Report it is Very Easy or Fairly Easy to Get Tobacco Products.....	31
Youth Who Report it is Harmful or Very Harmful to Use Tobacco.....	32
<b>Youth Alcohol Use</b>	
Cumulative Frequency of Alcohol Use.....	33
Youth Who Report it is Very Easy or Fairly Easy to Get Alcohol.....	34

## Table of Contents (Cont.)

Youth Who Report it is Harmful or Very Harmful to Use Alcohol.....	35
<b>Youth Drug Use</b>	
Cumulative Frequency of Illicit Drug Use.....	36
Youth Who Have Used Drugs Within the Past Year.....	37
Youth Who Report it is Very Easy or Fairly Easy to Get Marijuana.....	39
Youth Who Report it is Harmful or Very Harmful to Use Marijuana.....	40
Youth Nationwide Who use Illicit Drugs.....	41
<b>Youth Violence</b>	
Youth Who Report Violence at School Without a Weapon.....	42
Youth Who Report Violence at School With a Weapon.....	43
Youth Who Participate in Gang Activity.....	44
<b>Youth Suicidal Behavior</b>	
Youth Who Have Thought About Committing Suicide.....	45
Who Youth Would Tell If They Were Seriously Thinking of Suicide.....	46
Who Youth Would Tell When Worried About A Friend Seriously Thinking of Suicide .....	47
<b>Youth Safety and Health</b>	
Youth Who Always Wear a Seatbelt and Never Drink and Drive.....	48
Self-Report of Weight.....	49
Weight Loss Methods.....	50
Youth Who Exercise.....	51
Youth Participation in Activities.....	52
Youth Whose Parents Set and Enforce Rules and Talk With Their Children About Drugs and Alcohol.....	53
<b>Supporting Data</b>	
Parental Information.....	54
<b>Topical Fact Sheets</b>	
Alcohol Use.....	55
Depression and Suicide.....	56
Drug Use.....	57
Exercise and Nutrition.....	58
Safety.....	59
Sexuality.....	60
<b>Appendix</b>	
Pride Survey.....	61
Rockingham County/Harrisonburg Youth Survey.....	63

## **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 2009 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 2009 to youth in Harrisonburg City and Rockingham County. Surveys were completed by 1,889 students (825 females and 811 males) between the ages of 13 and 19.

### Navigation

This report presents information on key issues affecting the youth in our community. The first sections of the report present information about the Search Institute's model of asset building. The Quick Facts section gives an overview of the assets and risk factors present in our youth. We have added a bar graph feature to the Quick Facts summary pages. The data is then presented by categories for a more detailed investigation of assets and risk factors. The Youth Sexuality section has been expanded. Following the categories you will find some supporting data on parents. The final section represents a new feature to this year's report—Topical Fact Sheets. These sheets 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 (1997-2007) is available on the OCY web site ([theocy.org](http://theocy.org)).

## **The Power of Assets**

Today across the nation hundreds of communities are asking what they can do to strengthen young people's foundations and develop a stronger infrastructure for them. Too few young people grow up experiencing key ingredients for their healthy development. They do not experience support from adults, build relationships across generations, or hear consistent messages about boundaries and values. The result is that communities and the nation are overwhelmed with the problems and needs in the lives of youth. Today the real challenge is to shift our thinking to a new approach—one that addresses deeper causes and needs.

If we only look at the problems of the at-risk behaviors of the youth in our community, it is all too easy to become paralyzed by the overwhelming magnitude of the problems. On the other hand, if we look at the assets within our community and build on those strengths, research tells us, the at-risk behaviors will decrease. This becomes more evident when we examine the research from the Search Institutes model of asset development. The Search Institute has spent the last 25 years examining what helps create resilient youth. They asked the question, why do some children who come from the same neighborhood, seem to thrive while others end up having serious problems. The answers are not simple. Today we are constantly bombarded with messages about problems facing our children and youth: failure in school, violence, alcohol abuse, teen pregnancy and suicide, among others. And we have invested a lot of time and considerable expense in trying to fix these problems. We have taken a "problem solving approach" to reduce or control risky behavior through intervention programs, and when the problem becomes too severe, incarceration or other punishments are implemented. Some of these strategies have been effective, but at the same time they often treat only one aspect of the problem and neglect the cause.

By focusing on problems only, we make some repairs but it does not allow us to reinvent how we treat children and youth. Our history suggests that these measures, while certainly well intentioned have not been able to keep up with the tremendous challenges we are facing today. We see little progress and are discouraged and often disillusioned.

The Search Institutes model of asset building holds a great deal of promise. It is an approach that taps into the caring, creative energies of families, neighborhoods, schools, congregations, work places and youth organizations. With this approach you don't begin with the problems. It starts by asking the larger question, what do you people need to navigate successfully through infancy, childhood, and adolescence? The answer, from the Search Institutes research is a set of essential building blocks that all young people need called developmental assets.

The Search Institute has identified 40 such developmental assets, ranging from having caring neighborhoods and schools to knowing how to resolve conflicts in nonviolent ways. The assets model gives us a common language to understand and talk about what children and youth need. The more assets children and youth have the stronger they become, and the more likely they are to live productive, happy adult lives. When drawn together, these assets are powerful shapers of young people's behavior. The Asset model empowers us to become proactive and provides us with a framework where problems are more manageable and an attitude of vision, hope and celebration pervades community life.

## 40 Developmental Assets

	Type	Asset Name and Definition
<b>External</b>	<b>Supportive</b>	<ol style="list-style-type: none"> <li>1. <b>Family support</b> Family life provides high levels of love and support.</li> <li>2. <b>Positive family communication</b> Young persons and her or his parent(s) communicate positively, and young person is willing to seek advice and counseling from parent(s).</li> <li>3. <b>Other adult relationships</b> Young person receives support from three or more nonparent adults</li> <li>4. <b>Caring neighborhood</b> Young person experiences caring neighbors.</li> <li>5. <b>Caring school climate</b> School provides a caring, encouraging environment.</li> <li>6. <b>Parent involvement in schooling</b> Parent(s) are actively involved in helping young person succeed in school.</li> </ol>
	<b>Empowerment</b>	<ol style="list-style-type: none"> <li>7. <b>Community values youth</b> Young person perceives that adults in the community value youth.</li> <li>8. <b>Youth as resources</b> Young people are given useful roles in the community.</li> <li>9. <b>Service to others</b> Young person serves in the community one hour or more per week.</li> <li>10. <b>Safety</b> Young person feels safe at home, at school, and in the neighborhood.</li> </ol>
	<b>Boundaries and Expectations</b>	<ol style="list-style-type: none"> <li>11. <b>Family boundaries</b> Family has clear rules and consequences, and monitors the young person's whereabouts.</li> <li>12. <b>School boundaries</b> School provides clear rules and consequences.</li> <li>13. <b>Neighborhood boundaries</b> Neighbors take responsibility for monitoring young people's behavior.</li> <li>14. <b>Adult role models</b> Parent(s) and other adults model positive, responsible behavior.</li> <li>15. <b>Positive peer influence</b> Young person's best friends model responsible behavior.</li> <li>16. <b>High expectations</b> Both parent(s) and teachers encourage the young person to do well.</li> </ol>
	<b>Constructive Use of Time</b>	<ol style="list-style-type: none"> <li>17. <b>Creative activities</b> Young person spends three or more hours per week in lessons are practice in music, theater or other arts.</li> <li>18. <b>Youth programs</b> Young person spends one hour or more per week in activities in a religious institution.</li> <li>19. <b>Religious community</b> Young person spends one hour or more per week in activities in a religious institution.</li> <li>20. <b>Time at home</b> Young person is out with friends "with nothing special to do" two or fewer nights per week.</li> </ol>
<b>Internal Assets</b>	<b>Commitment to Learning</b>	<ol style="list-style-type: none"> <li>21. <b>Achievement motivation</b> Young person is motivated to do well in school.</li> <li>22. <b>School engagement</b> Young person is actively engaged in learning.</li> <li>23. <b>Homework</b> Young person reports doing at least one hour of homework every school day.</li> <li>24. <b>Bonding to school</b> Young person cares about her or his school.</li> <li>25. <b>Reading for Pleasure</b> Young person reads for pleasure three or more hours per week.</li> </ol>
	<b>Positive Values</b>	<ol style="list-style-type: none"> <li>26. <b>Caring</b> Young person places high value on helping other people.</li> <li>27. <b>Equality and social justice</b> Young person places high value on promoting equality and reducing hunger and poverty.</li> <li>28. <b>Integrity</b> Young person acts on convictions and stands up for her or his beliefs.</li> <li>29. <b>Honesty</b> Young person "tells the truth even when it is not easy."</li> <li>30. <b>Responsibly</b> Young person accepts and takes personal responsibility.</li> <li>31. <b>Restraint</b> Young person believes it is important not to be sexually active or use alcohol or other drugs.</li> </ol>
	<b>Social Competence</b>	<ol style="list-style-type: none"> <li>32. <b>Planning and decision-making</b> Young person knows how to plan ahead and make choices.</li> <li>33. <b>Interpersonal competence</b> Young person has empathy, sensitivity, and friendship skills.</li> <li>34. <b>Cultural competence</b> Young person has knowledge of and comfort with people of different cultural/racial/ethnic backgrounds.</li> <li>35. <b>Resistance skills</b> Young person can resist negative peer pressure and dangerous situations.</li> <li>36. <b>Peaceful conflict resolution</b> Young person seeks to resolve conflict nonviolently.</li> </ol>
	<b>Positive Identity</b>	<ol style="list-style-type: none"> <li>37. <b>Personal power</b> Young person feels he or she has control over "things that happen to me."</li> <li>38. <b>Self-esteem</b> Young person reports having a high self-esteem.</li> <li>39. <b>Sense of purpose</b> Young person reports that "my life has a purpose."</li> <li>40. <b>Positive view of personal future</b> Young person is optimistic about her or his personal future.</li> </ol>

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# MAKE A DIFFERENCE!

## Ideas for Asset Building

### **Communities**

- Establish a representative “vision team” (up to 30 people) and executive committee (fewer than 10 people) to build commitment, gather information, set priorities, and plan.
- Identify a local coordinator who manages the process and unleashes multiple volunteer-initiated efforts.
- Gather data about youth, adult perceptions, and community resources for asset building. Use surveys (such as Search Institute’s *Profiles of Student Life: Attitudes and Behaviors*), focus groups, interviews, town meetings, and other techniques.
- Raise community awareness of the asset-building model, using newsletters, fact sheets, newspaper articles, speeches, cable television, computer networks, and other mechanisms.

### **Schools**

- Make it a priority to provide caring environments for all students.
- Train support staff, teachers, paraprofessionals, administrators, and other school staff in their role in asset building.
- Provide additional opportunities to nurture values deemed crucial by the community.
- Integrate service-learning, values development, relationship-building, the development of social competencies, and other asset-building strategies into the curriculum.

### **Youth-Serving Organizations**

- Involve youth in leadership and program planning.
- Provide a range of structured activities for youth with diverse interests and needs.
- Develop expectations, boundaries, and consequences with youth who participate in programs; enforce appropriate consequences when boundaries are not respected.
- Train volunteers, leaders, and coaches in asset building in young people’s developmental needs.

### **Neighborhoods**

- Create neighborhood service projects linking adults and children.
- Coordinate residents to provide safe places where young people can go after school if they would be home alone or if they feel unsafe.
- Organize informal activities (such as pick-up basketball) for young people in the neighborhood.
- Use neighborhood meetings and other settings to educate people about their responsibility and potential for asset building.

### **Business and Industry**

- Develop family-friendly policies that allow parents to be active in their children’s lives.
- Provide opportunities for employees to build relationships with youth through mentoring and other volunteer programs, flexible scheduling, and internships for youth.
- Be intentional about nurturing assets (such as support, boundaries, values, and social competencies) in the lives of teenagers employed by the business.
- Become partners in and advocates for initiatives designed to create healthy communities for children and youth.

### **Health Care Systems**

- Serve as visionary leaders in reshaping public consciousness about the health and well-being of children and adolescents.
- Offer information on asset building to parents and teenagers when they seek care.
- Emphasize integrating asset building into health care services. For example, are the clinics, hospitals and other facilities providing a supportive, caring environment for children and youth?
- Provide financial and in-kind support to initiatives within the community that seek to strengthen developmental assets.



**Adults**

- Build at least one sustained caring relationship with a child or adolescent.
- Pay attention to youth when you see them.
- Model responsible behavior with young people.
- Volunteer to work in a youth program as a coach, group leader, or tutor.

**Parents**

- Regularly re-negotiate family rules with teenagers so they are developmentally appropriate, and consistently and fairly enforced.
- Talk with your kids about matching personal interests with extracurricular opportunities.
- Stay in contact with teachers about your child's progress.
- Talk with your teenager about life goals, priorities, and dreams.

**Young People**

- Learn the names of your neighbors (both adults and children). Go out of your way to greet them.
- Write a note (or call) one of the main asset builders in your life, thanking her or him for making a difference in your life.
- Talk about the 40 developmental assets with members of your family. Which assets do family members think are the strongest in your family?
- Even if your family provides a warm, caring, supportive place to grow, also seek support through adults in schools, community organizations, and congregations.

**Congregations**

- Intentionally foster intergenerational relationships by providing activities for all ages within the church, synagogue, or other faith community.
- Listen to what youth say they want.
- Regularly offer parent education as part of the congregation's educational programs.
- Make community service a central component of youth programming.
- Network with other congregations and other institutions for mutual learning, support, and programming.

**Local Government**

- Through policy development, staff training, and resource allocation, make asset development a top priority in the city.
- Initiate community-wide efforts to name shared values and boundaries.
- Partner with other organizations in creating child-friendly public places and safe places for teenagers to gather.
- Help to coordinate and publicize after-school, weekend, and summer opportunities for youth in the city.

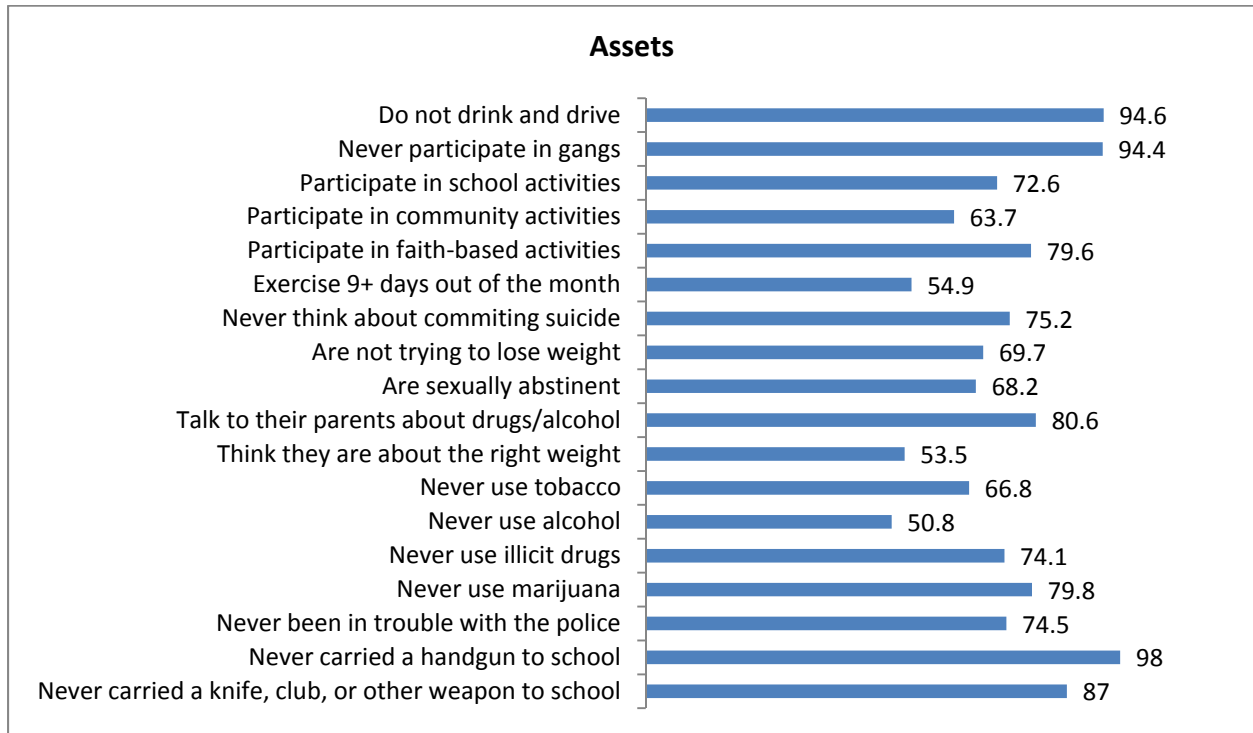
**Juvenile Justice**

- Use the framework of assets as a tool for case management for juvenile offenders.
- Build connections to positive youth organizations and to schools.
- Educate parents and other support networks about the developmental needs of young people at risk.
- Explore how the asset framework may support innovative practices and programs in juvenile detention centers.

**Community Organizations**

- Involve youth as volunteers and leaders in the agency.
- Provide information on asset building to families and others who participate in programs and services.
- Train agency staff and leaders in their role as asset builders.
- Build into your planning ways of connecting people across generations.

# Quick Facts on Our Youth 2009



## Risk Factors

### Sexual Activity

Of sexually active youth (31.8%)  
 15.9% - Use Condoms  
 4.4% - Use no method  
 3.3% - Use withdrawal  
 6.6% - Use birth control  
 1.7% - Use birth control shot

### Tobacco Use

9.5% - Daily  
 15.1% - Weekly  
 19.3% - Monthly  
 33.2% - Annually

### Alcohol Use

1.8%- Daily  
 10.4%- Weekly  
 23.1% - Monthly  
 49.2% - Annually

### Illicit Drug Use

4.3% -Daily  
 9.9% - Weekly  
 14.4% - Monthly  
 25.9% Annually

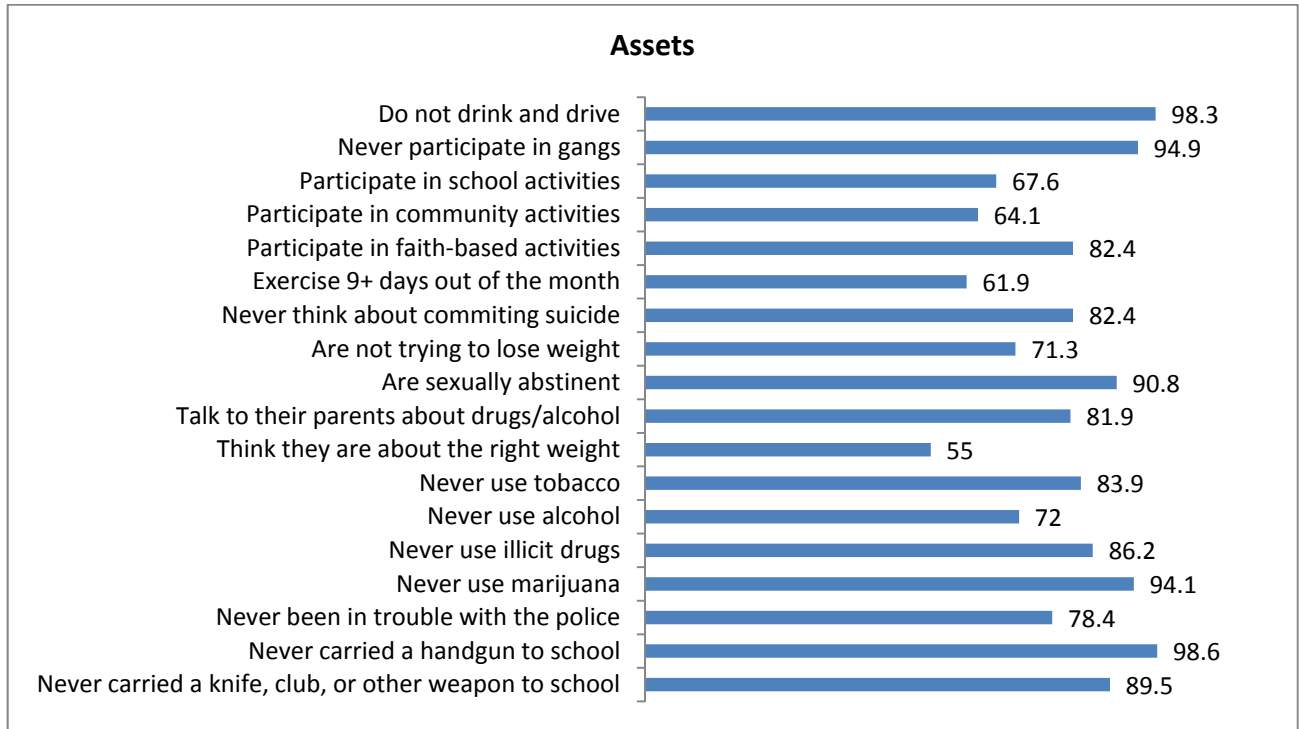
### Gang Activity

1.0% - Participate a lot  
 0.8% - Often  
 1.3% -Sometimes  
 2.6% - Seldom

### Dangerous Weight Loss

1.8% - Vomit  
 1.2% - Use Pills  
 0.6% - Both Vomiting and Pills

# Quick Facts on Our 8<sup>th</sup> Graders 2009



## Risk Factors

### Sexual Activity

Of sexually active 8<sup>th</sup> Graders (9.2% of total)

- 5% - Use condoms
- 2.2% - Use no method
- .7% - Use withdrawal
- 1.3% - Use birth control
- 0% - Use birth control shot

### Tobacco Use

- 2.9% - Daily
- 6.5% - Weekly
- 8.5% - Monthly
- 16.1% - Annually

### Alcohol Use

- 0.6% - Daily
- 3.1% - Weekly
- 9.0% - Monthly
- 28% - Annually

### Illicit Drug Use

- 1.9% - Daily
- 3.4% - Weekly
- 5.3% - Monthly
- 13.8% - Annually

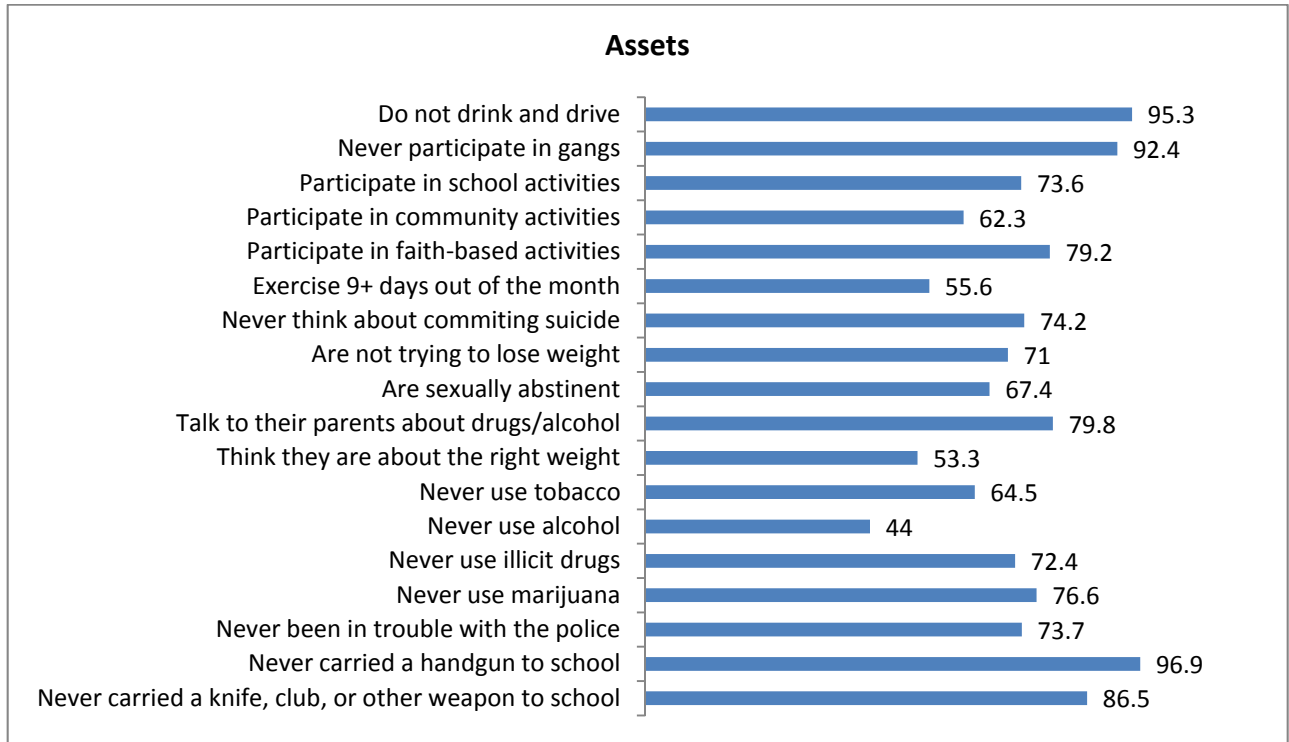
### Gang Activity

- 1.1% - Participate a lot
- 0.9% - Often
- 1.2% - Sometimes
- 1.9% - Seldom

### Dangerous Weight Loss

- 1.4% - Vomit
- 0.3% - Use Pills
- 0.5% - Both Vomiting and Pills

# Quick Facts on Our 10<sup>th</sup> Graders 2009



## Risk Factors

### Sexual Activity

Of sexually active 10<sup>th</sup> graders (32.6% of total)  
 17.6% - Use condoms  
 4.5% - Use no method  
 4% - Use withdrawal  
 5.4% - Use birth control pill  
 1% - Use birth control shot

### Tobacco Use

9.2% - Daily  
 15.5% - Weekly  
 19.8% - Monthly  
 3.5% - Annual

### Alcohol Use

1.8% - Daily  
 11.9% - Weekly  
 26.6% - Monthly  
 56%- Annual

### Illicit Drug Use

4.1% - Daily  
 10.1% - Weekly  
 14.5% - Monthly  
 27.6% - Annual

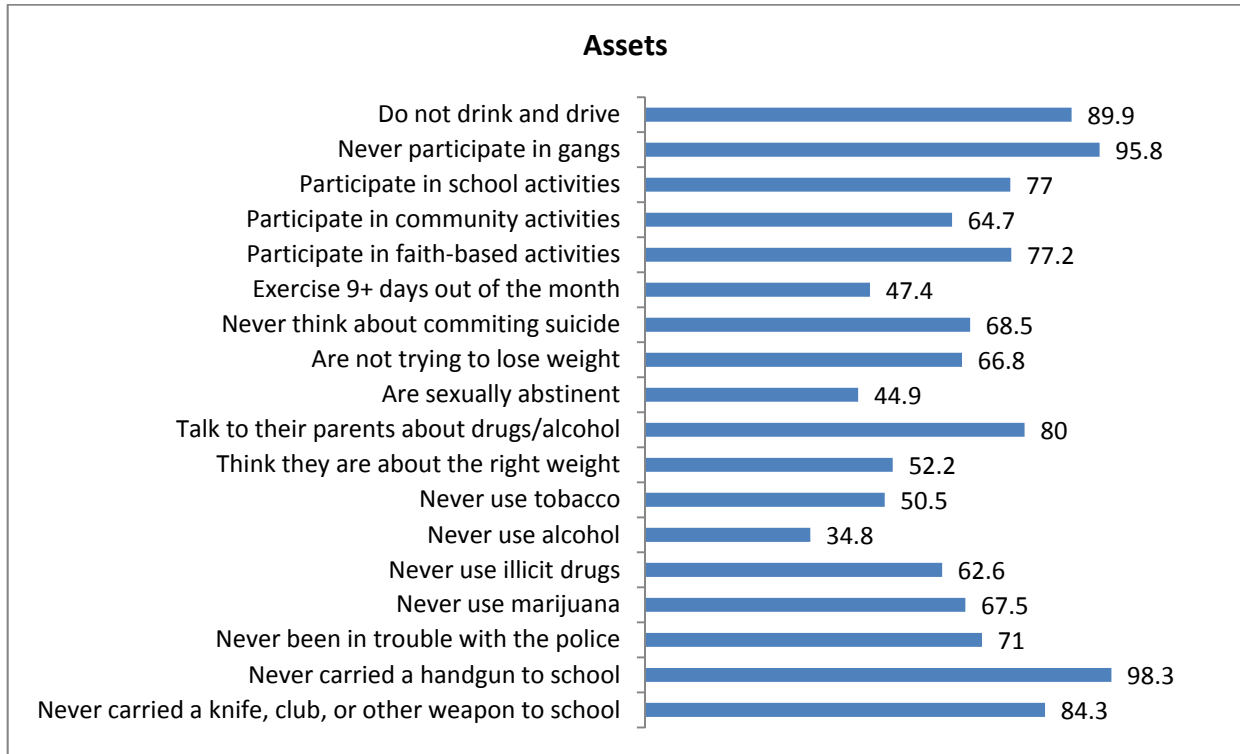
### Gang Activity

1% - Participate a lot  
 1.4% -Often  
 1.4% - Sometimes  
 3.7%-Seldom

### Dangerous Weight Loss

2% -Vomit  
 1.5% - Use Pills  
 .3% - Both Vomiting and Pills

# Quick Facts on Our 12<sup>th</sup> Graders 2009



## Risk Factors

### Sexual Activity

Of sexually active 12<sup>th</sup> graders (55.1% of total)  
 25.9% - Use condoms  
 6.4% - Use no method  
 5.6% - Use withdrawal  
 13.2% - Use birth control pill  
 4% - Use birth control shot

### Tobacco Use

17% - Daily  
 24.1% - Weekly  
 30.6% - Monthly  
 49.5% - Annual

### Alcohol Use

3% - Daily  
 16.8% - Weekly  
 34.7% - Monthly  
 65.2% - Annually

### Illicit Drug Use

7.2% - Daily  
 16.7% - Weekly  
 24.1% - Monthly  
 37.4% - Annual

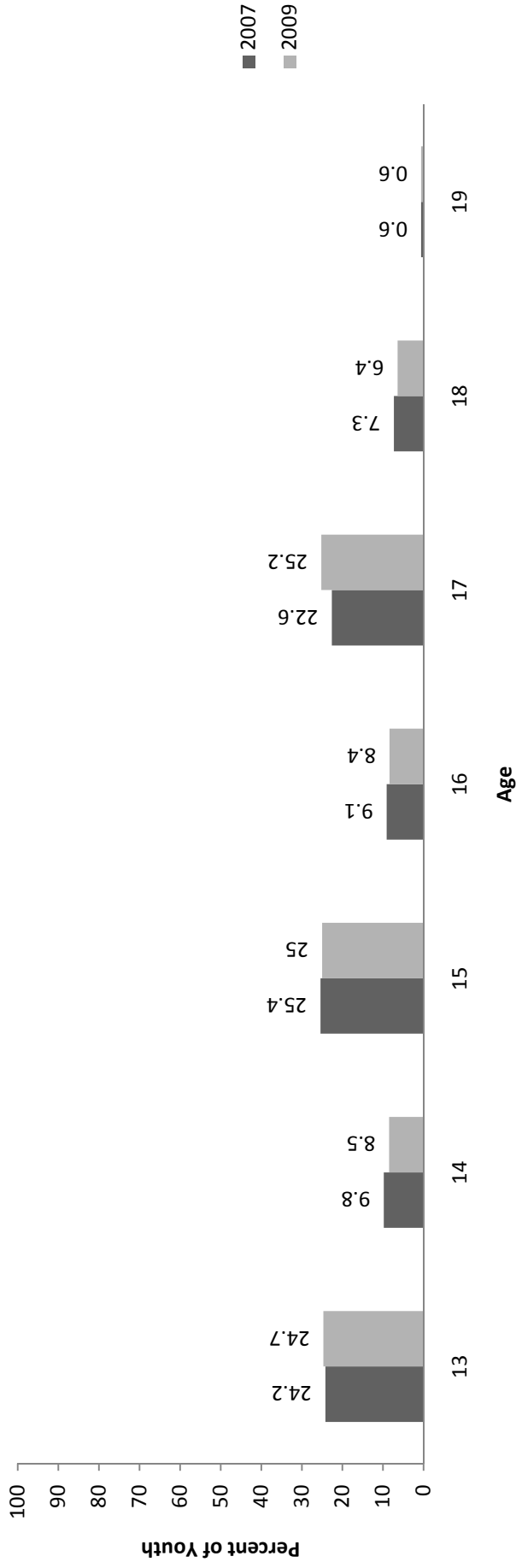
### Gang Activity

.8% - Participate a lot  
 0% - Often  
 1.2% - Sometimes  
 2.2% - Seldom

### Dangerous Weight Loss

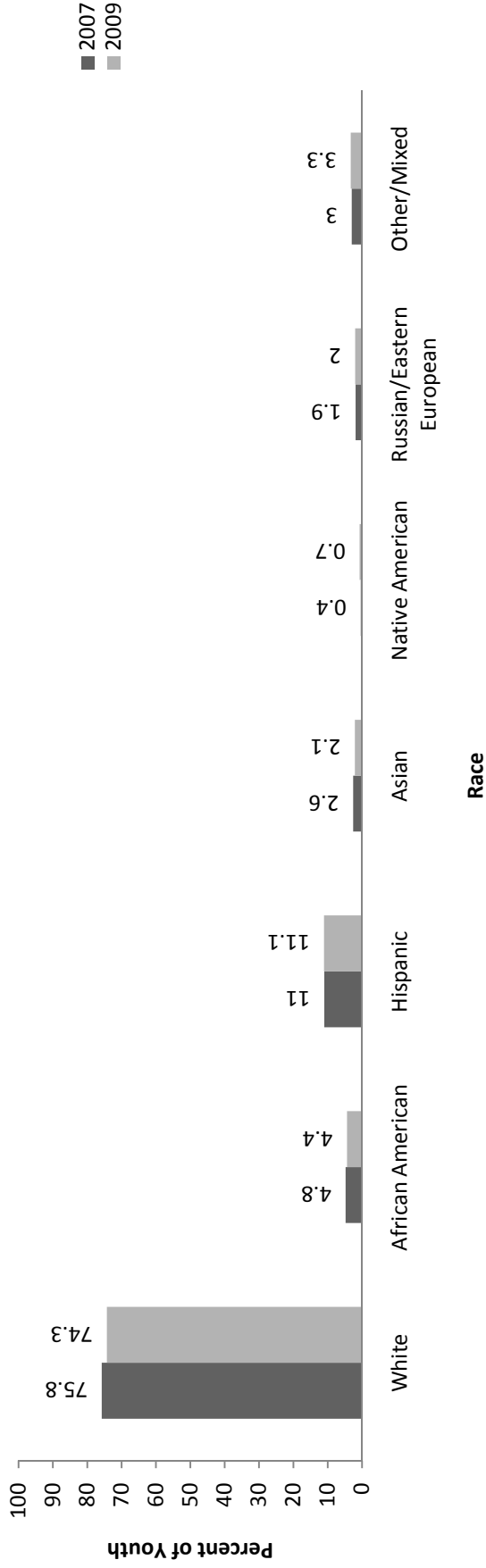
1.8% - Vomit  
 1.8% - Use Pills  
 .8% - Both Vomiting and Pills

## Demographics Youth by Age



Source: Rockingham County/Harrisonburg Youth Survey

## Demographics Youth by Race

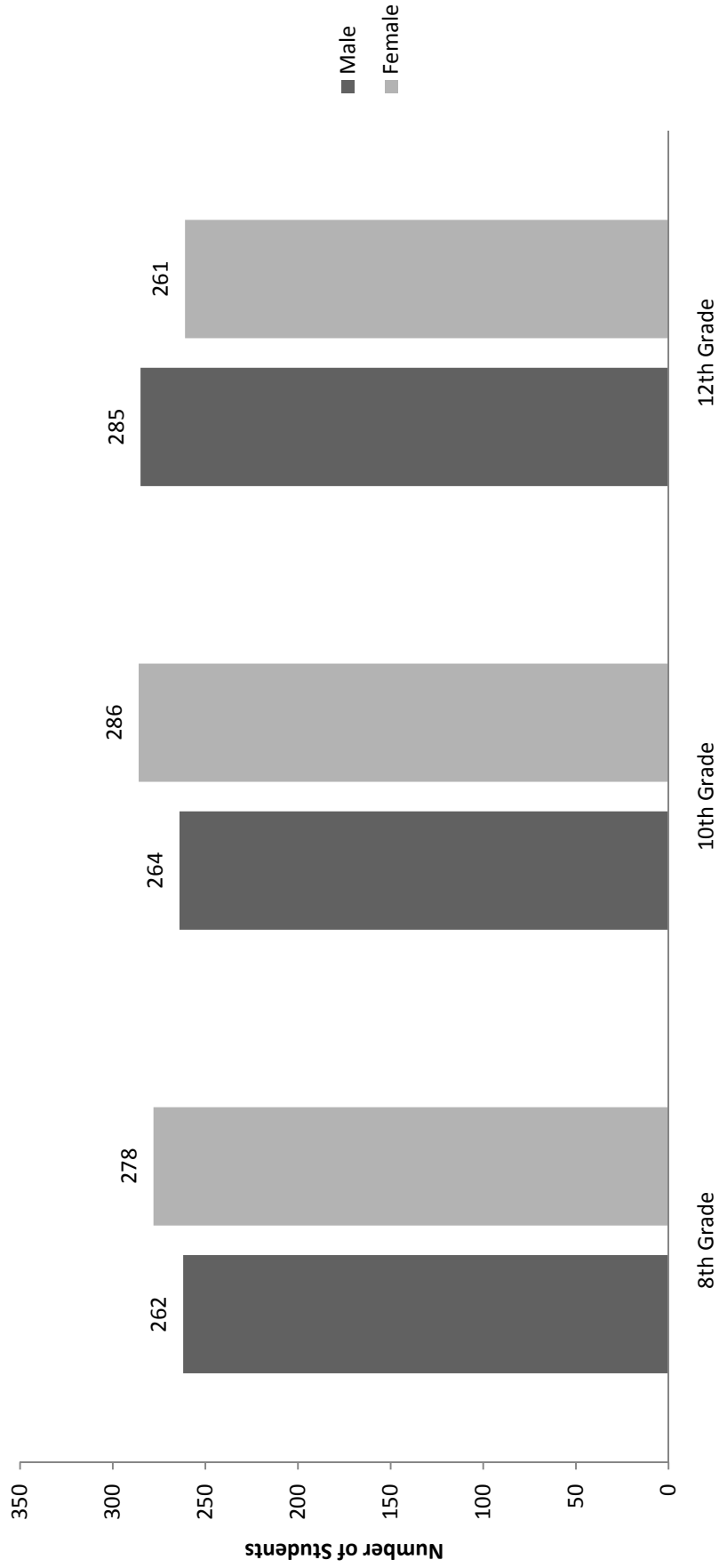


Source: Rockingham County/Harrisonburg Youth Survey

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

The Caucasian, African American and Asian populations have decreased. The other races have slightly increased in the area.

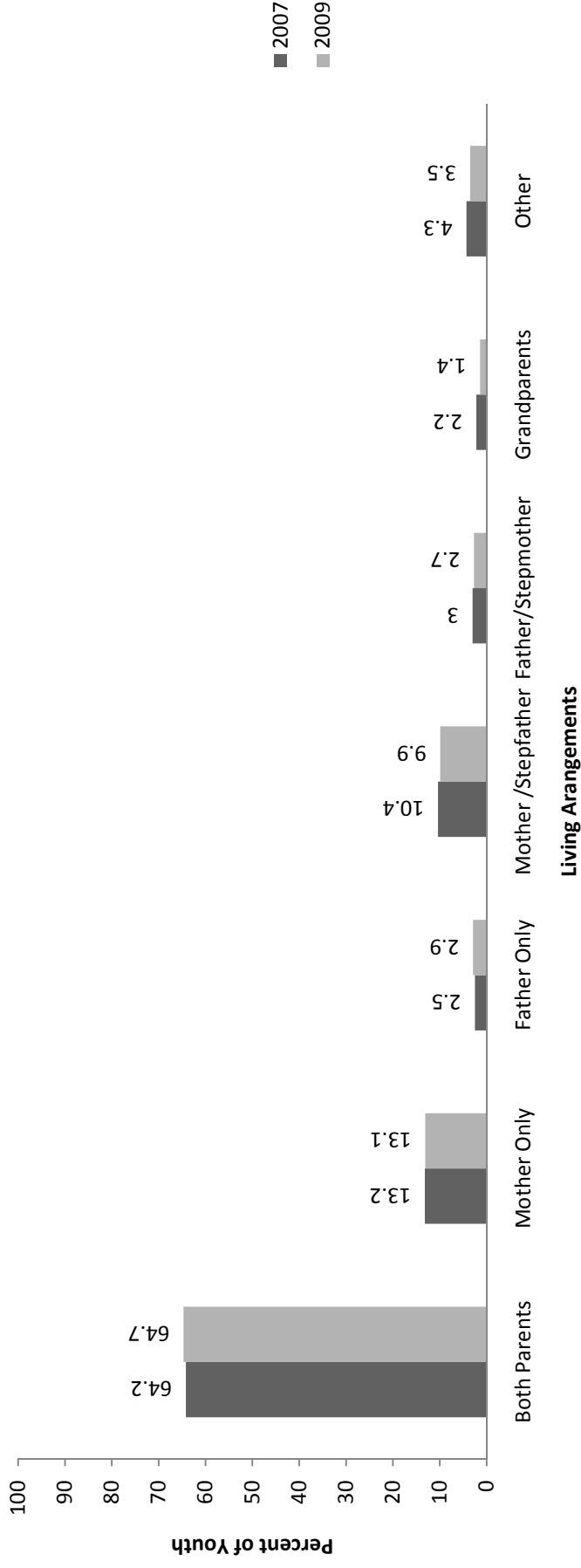
## Demographics Youth by Sex



Source: PRIDE Survey



## Demographics Living Arrangements

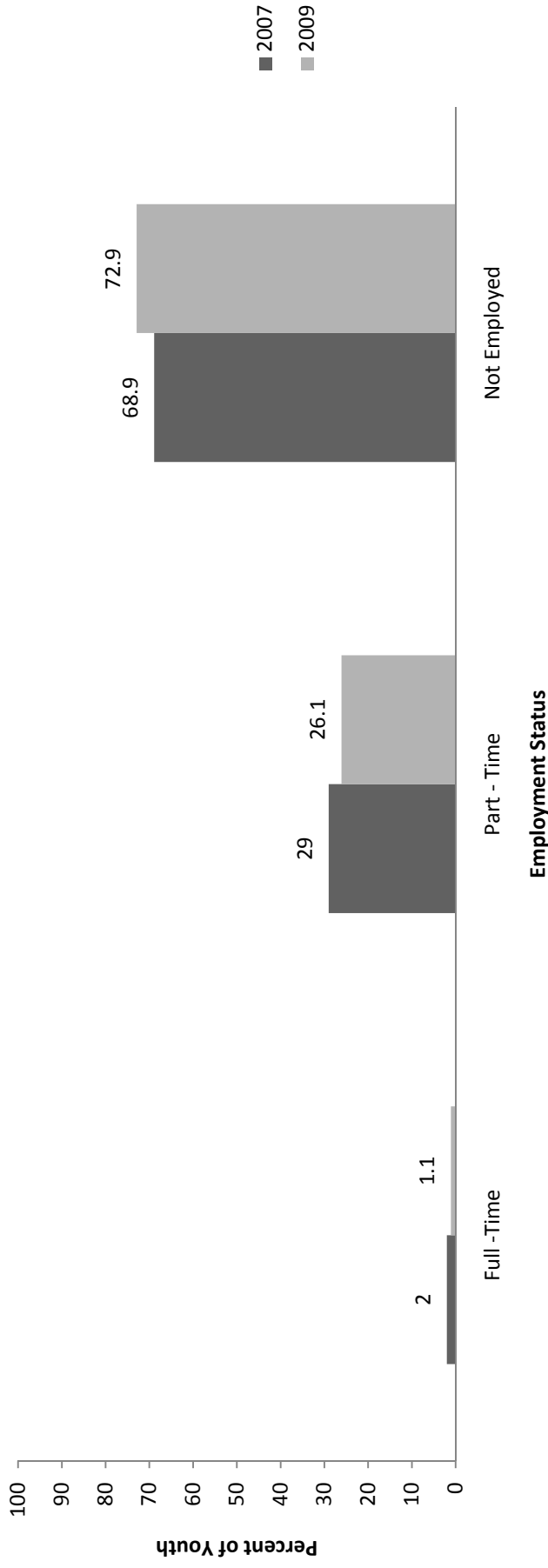


Source: Rockingham County/Harrisonburg Youth Survey

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

The number of youth living with both parents or living with their father has increased. The other living arrangements have slightly decreased.

## Demographics Youth Employment Status



Source: PRIDE Survey

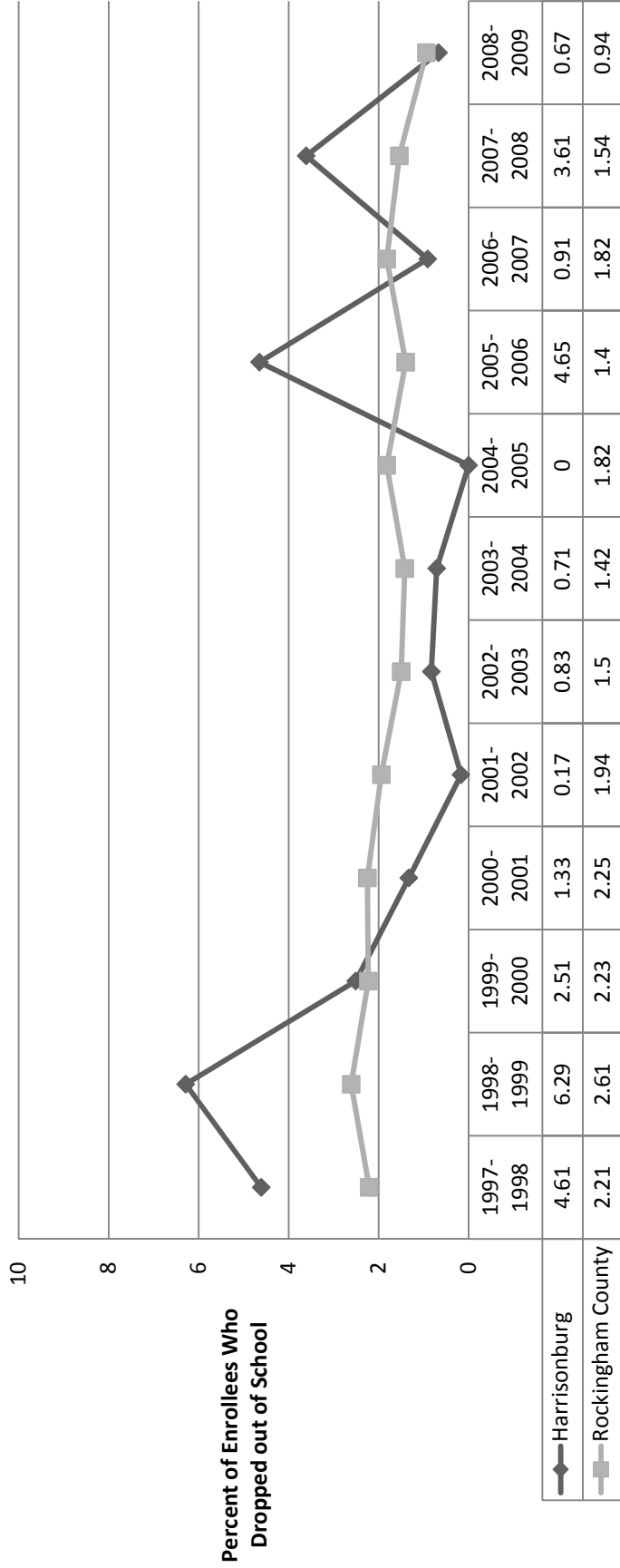
### What the numbers and other information told us:

The majority of youth are not employed (72.9%), an increase since 2007.

27.2% of youth are employed, a decrease from 31% in 2007.

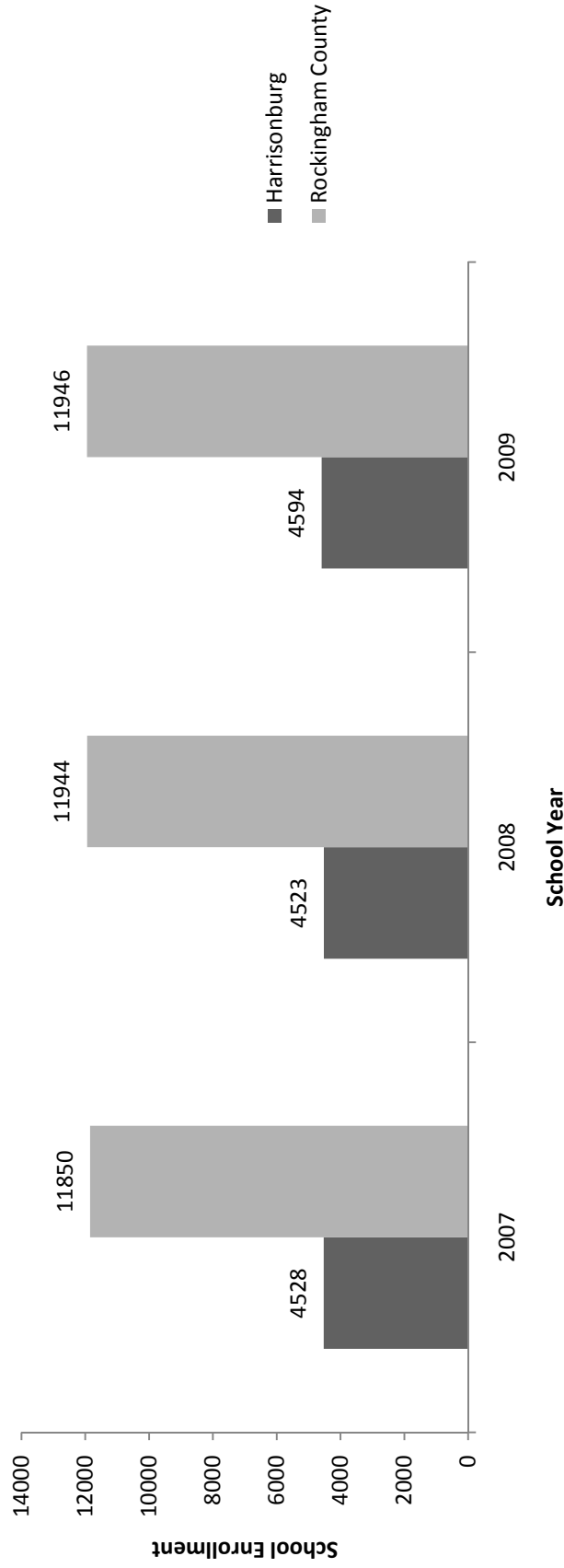
## Education

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



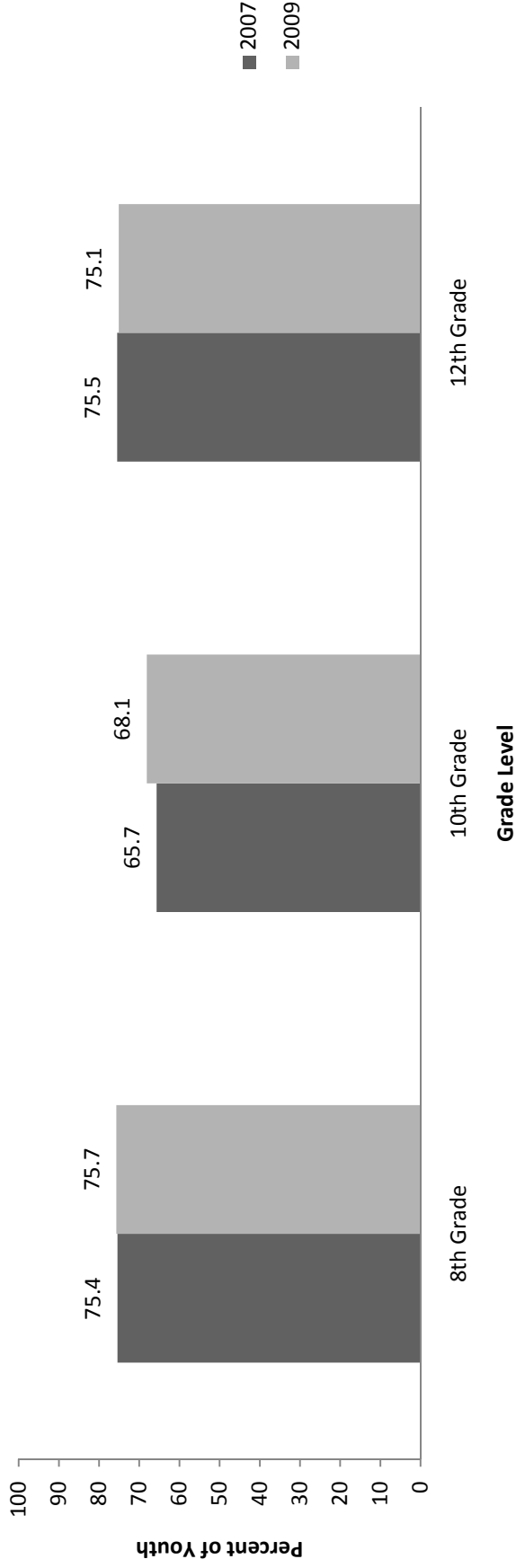
Source: Virginia Department of Education

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



Source: Virginia Department of Education

## Education Youth Who Report They Make Good Grades Often or a Lot



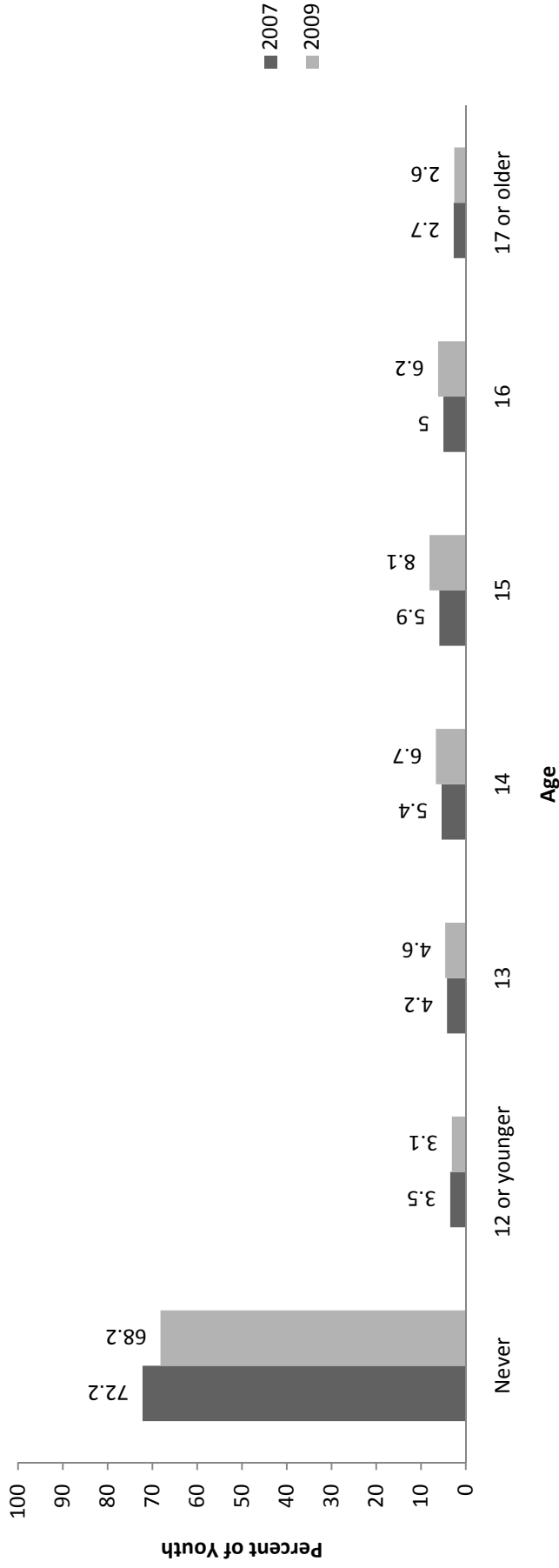
Source: PRIDE Survey

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

73% of youth report making good grades often or a lot, an increase from 2007 (72%).

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

## Sexuality Age at First Time of Sexual Intercourse

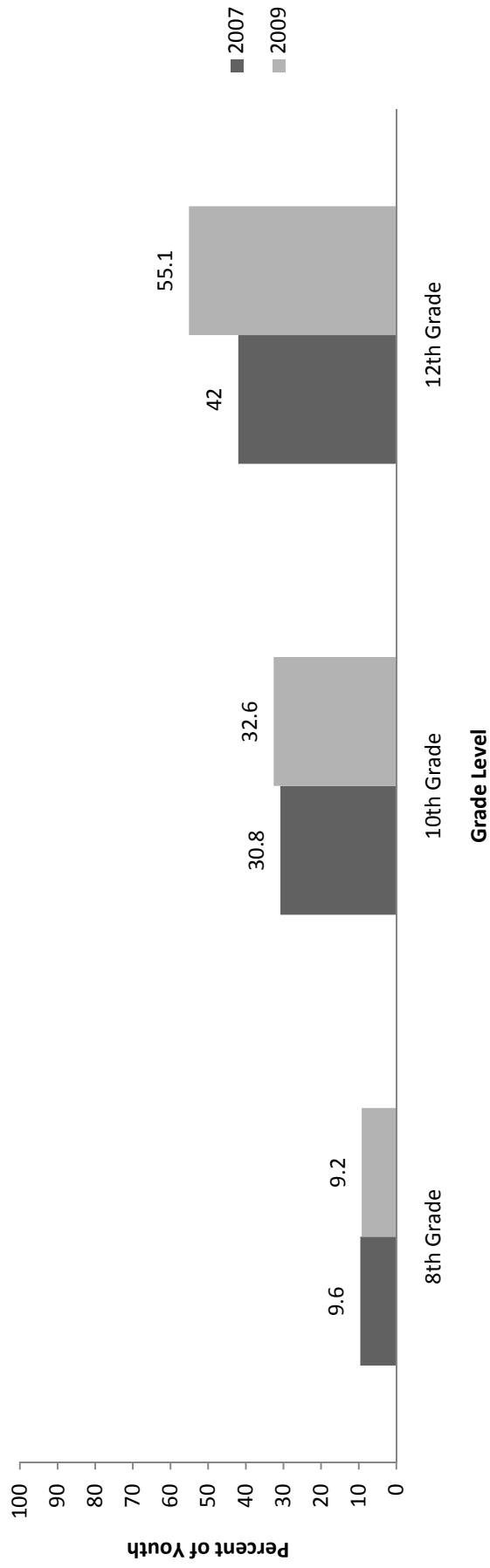


Source: Rockingham County/Harrisonburg Youth Survey

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

The number of youth remaining abstinent has decreased from 72.2% in 2007 to 68.2% in 2009.

## Sexuality Sexual Intercourse by Grade Level



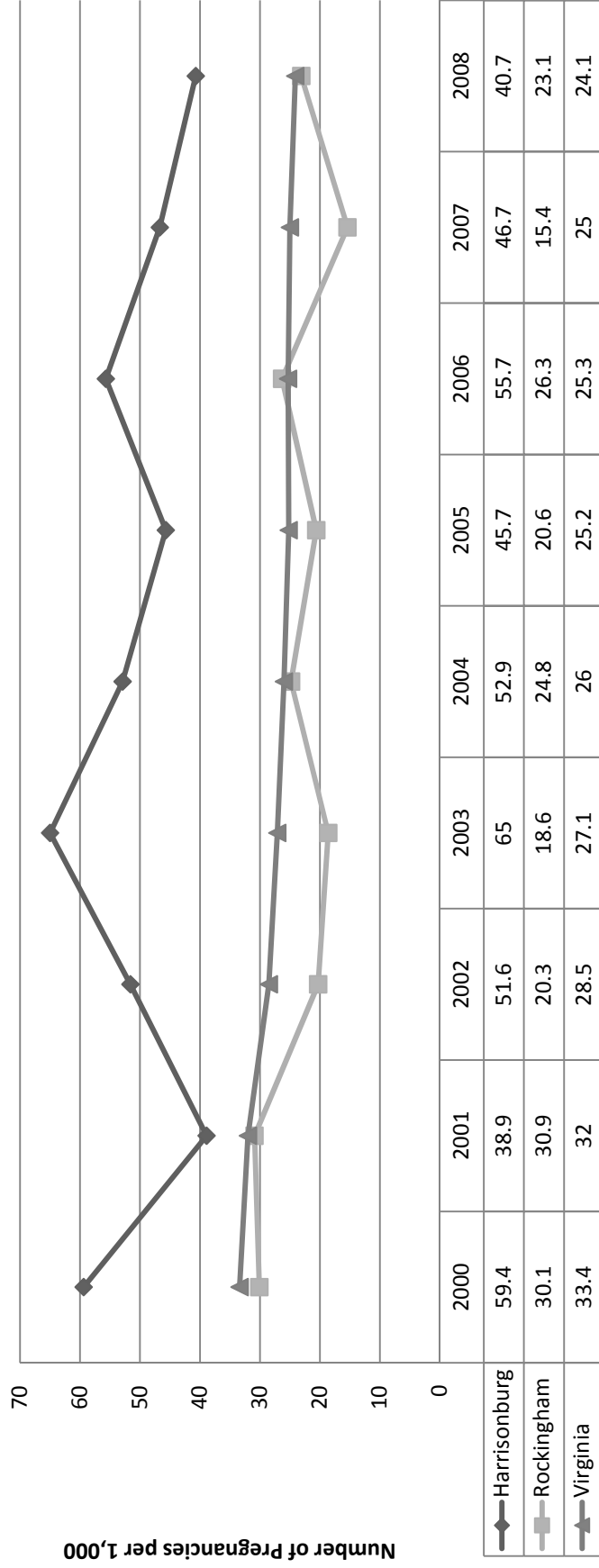
Source: Rockingham County/Harrisonburg Youth Survey

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

Sexual activity has slightly decreased in 8<sup>th</sup> graders, with an increase in 10<sup>th</sup> and 12<sup>th</sup> graders.

77% 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 increased from 2007 (74.8%).

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



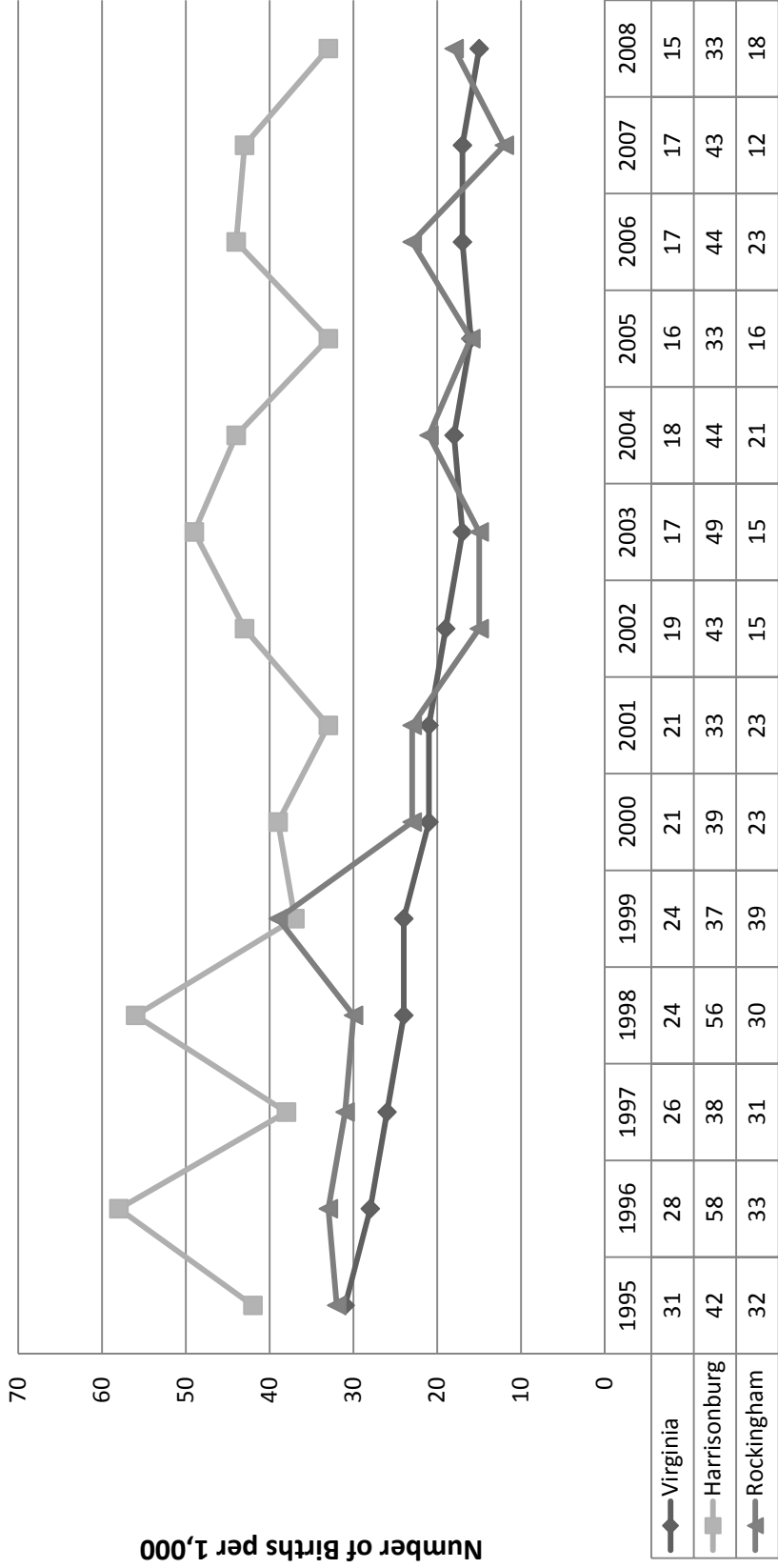
Source: Virginia Center for Health Statistics

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

In 2008, the rate of teen pregnancy among females aged 15-17 in Harrisonburg (40.7 per 1,000) is almost double the teen pregnancy rate among females age 15-17 in Virginia (24.1 per 1,000).



## Births to Teen Girls (15-17) per 1,000

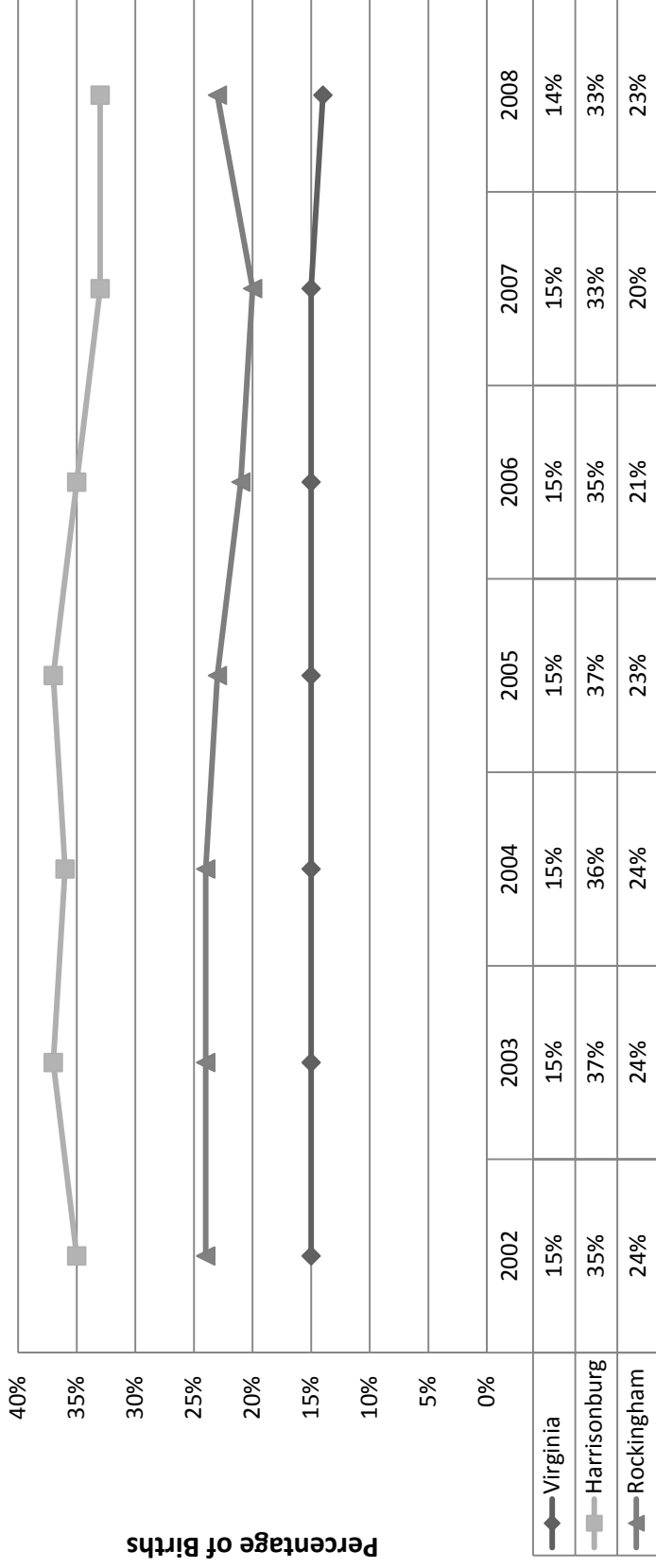


Source: Virginia Center for Health Statistics

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

In 2008, the rate of births to teen girls age 15-17 in Harrisonburg (33 per 1,000) is more than double the birth rate among teen girls age 15-17 in Virginia (15 per 1,000).

## Births to Mothers With Less than 12th Grade Education

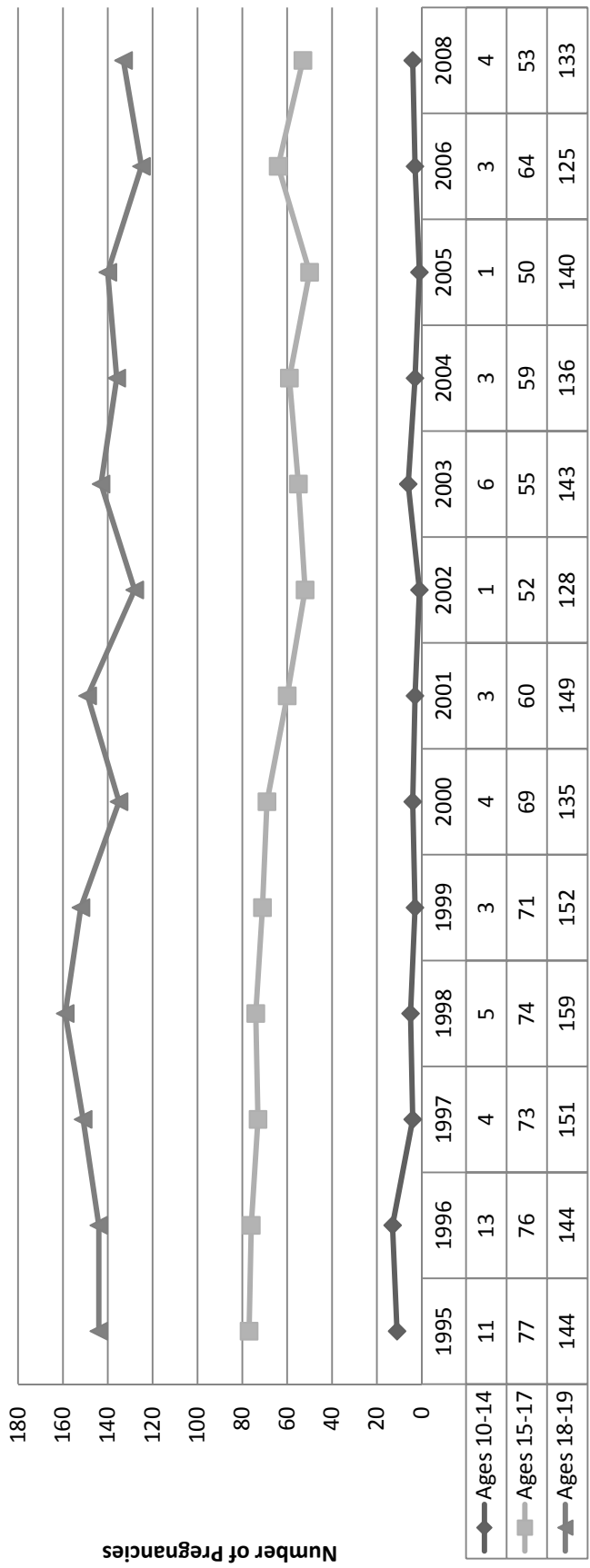


Source: Virginia Center for Health Statistics

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

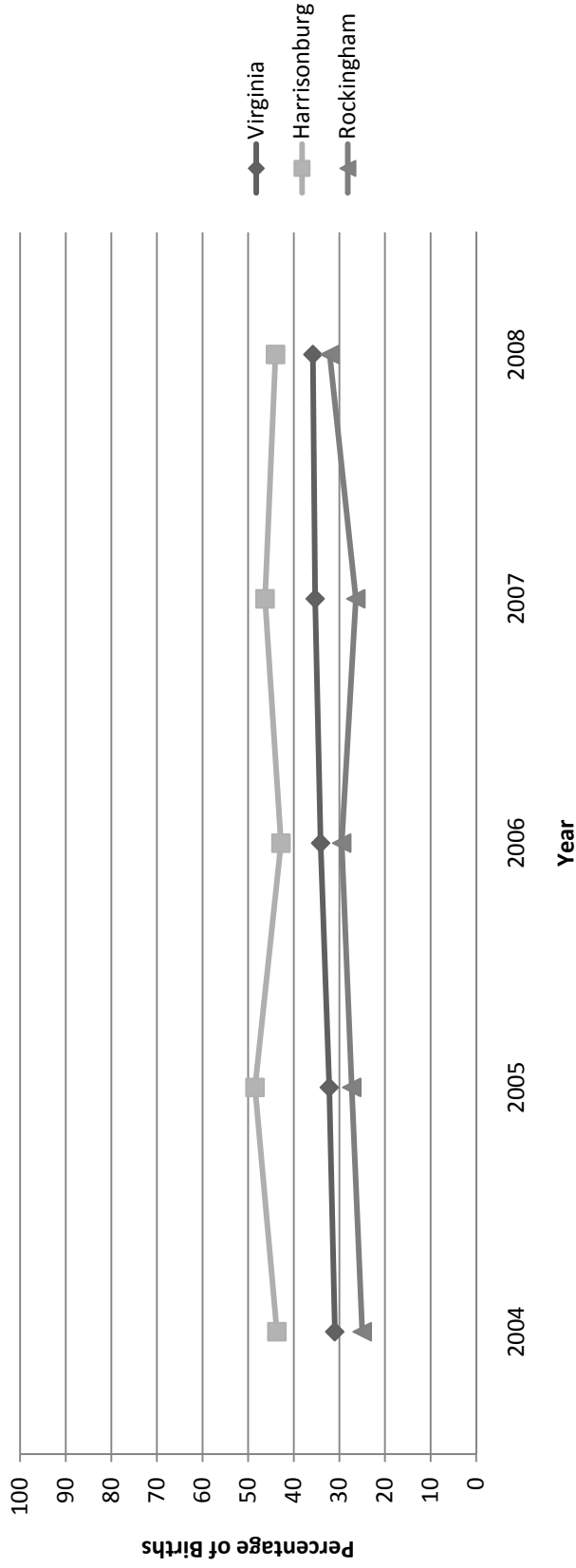
In 2008, the percentage of births to mothers with less than a 12<sup>th</sup> grade education in Harrisonburg (33%) is more than double the percentage for the state of Virginia (14%). The percentage of births to mothers with less than a 12<sup>th</sup> grade education in Rockingham County is significantly higher than the percentage for the state of Virginia as well.

## Number of Teen Pregnancies in Harrisonburg & Rockingham



Source: Virginia Center for Health Statistics <http://www.vdh.state.va.us/healthstats/index.asp>

## Non Marital Births

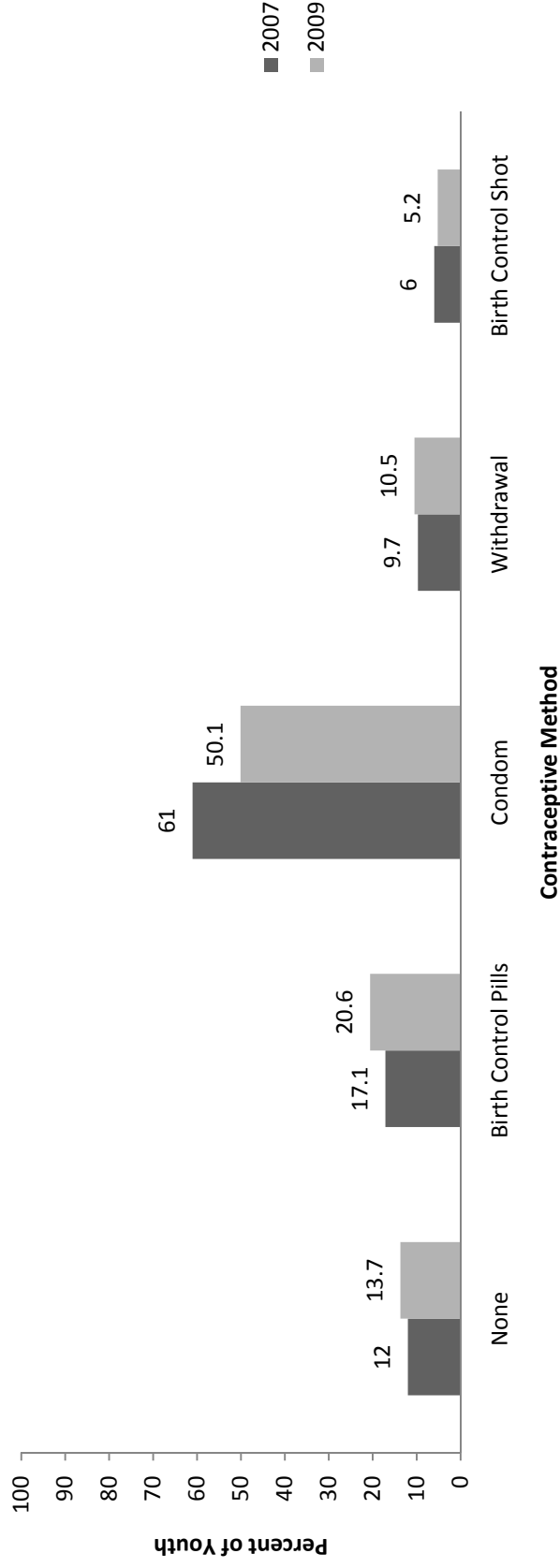


Source: Virginia Center for Health Statistics <http://www.vdh.state.va.us/healthstats/index.asp>

### 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.

## Sexuality Choice of Contraceptive Method



Source: Rockingham County/Harrisonburg Youth Survey

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

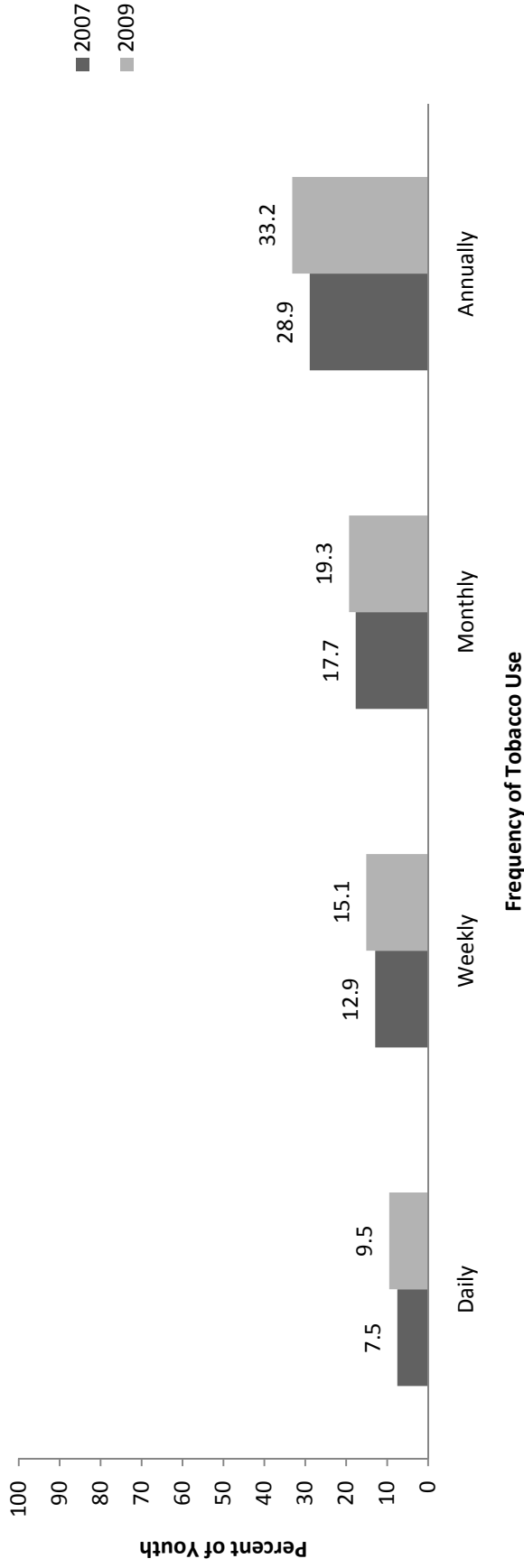
Of the youth that are sexually active, a majority (86.4%) use some method of contraceptive, including withdrawal.

Condoms are the most used method of contraceptive.

There was a decrease in the use of condoms since 2007 (by 10.9%). There was also a slight decrease in the use of the birth control shot. All other methods saw an increase in use.

## Tobacco Use

### Cumulative Frequency of Tobacco Use



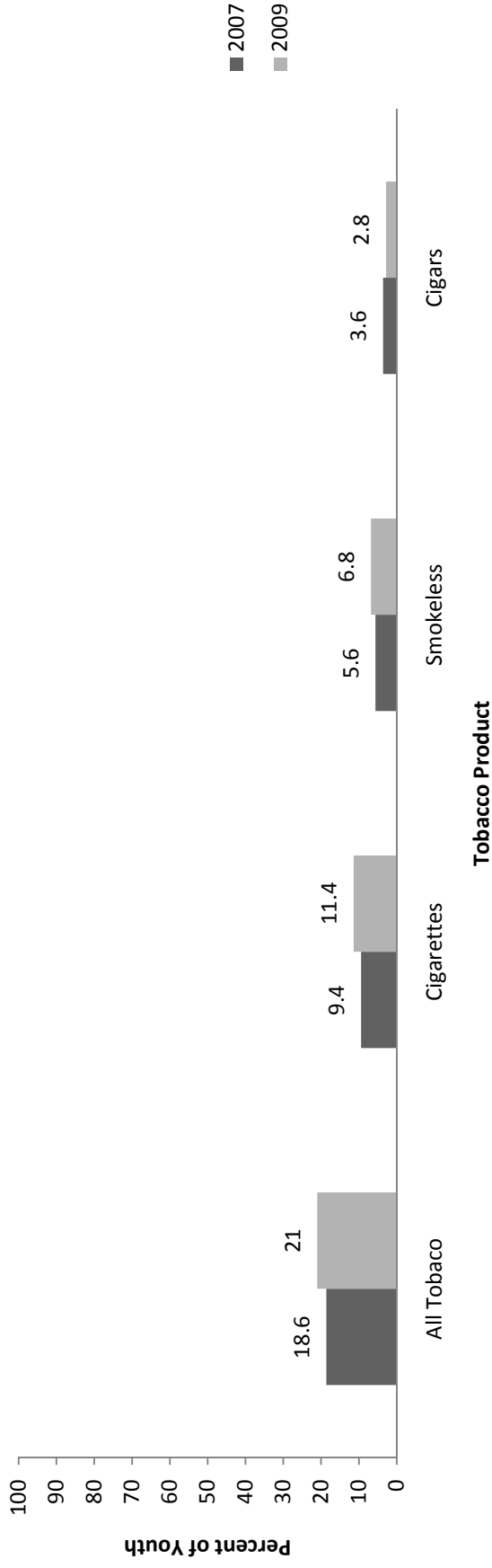
Source: PRIDE Survey

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

66.8% of youth have not used any tobacco products in the last year, a decrease from 71.1% of youth in 2007.

72.5% of youth report never having smoked a cigarette.

## Tobacco Use Youth Who Use Tobacco Weekly



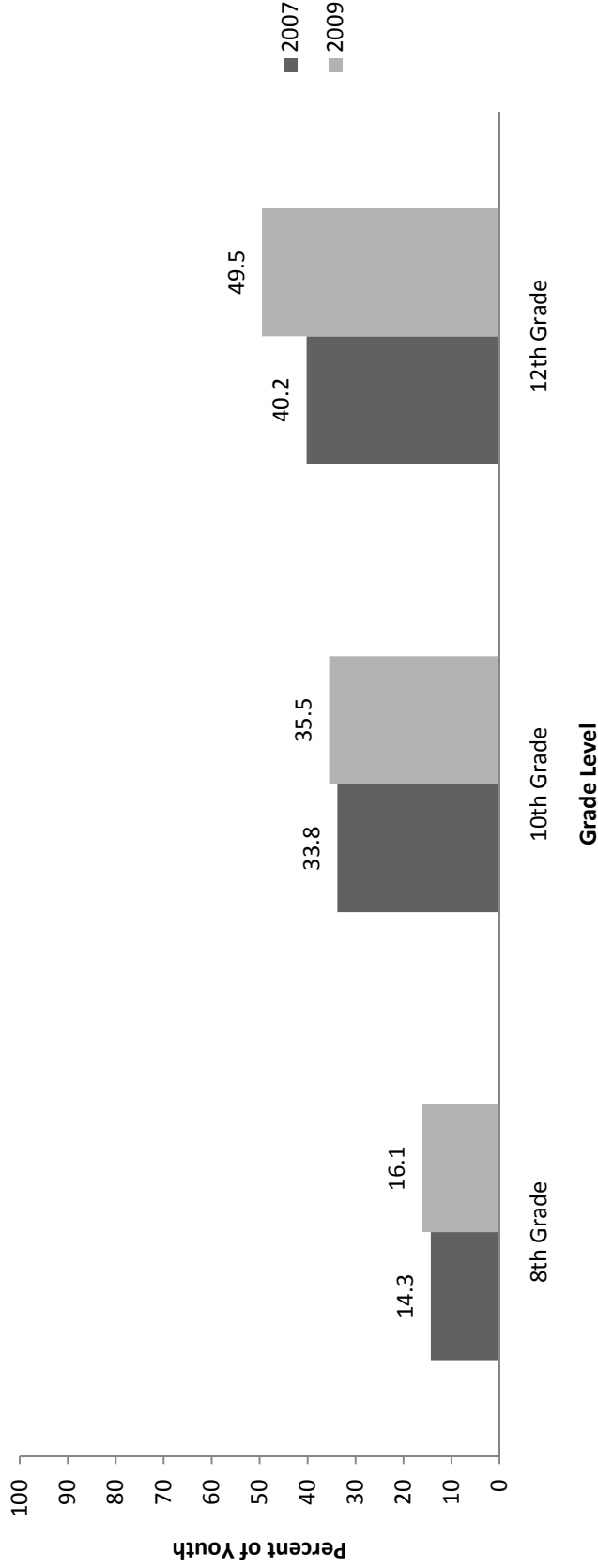
Source: PRIDE Survey

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

Cigarettes are the most popular form of tobacco use.

The numbers of youth who use tobacco products have increased from 2007.

## Tobacco Use Youth By Grade Who Use Tobacco At Least Once Per Year



Source: PRIDE Survey

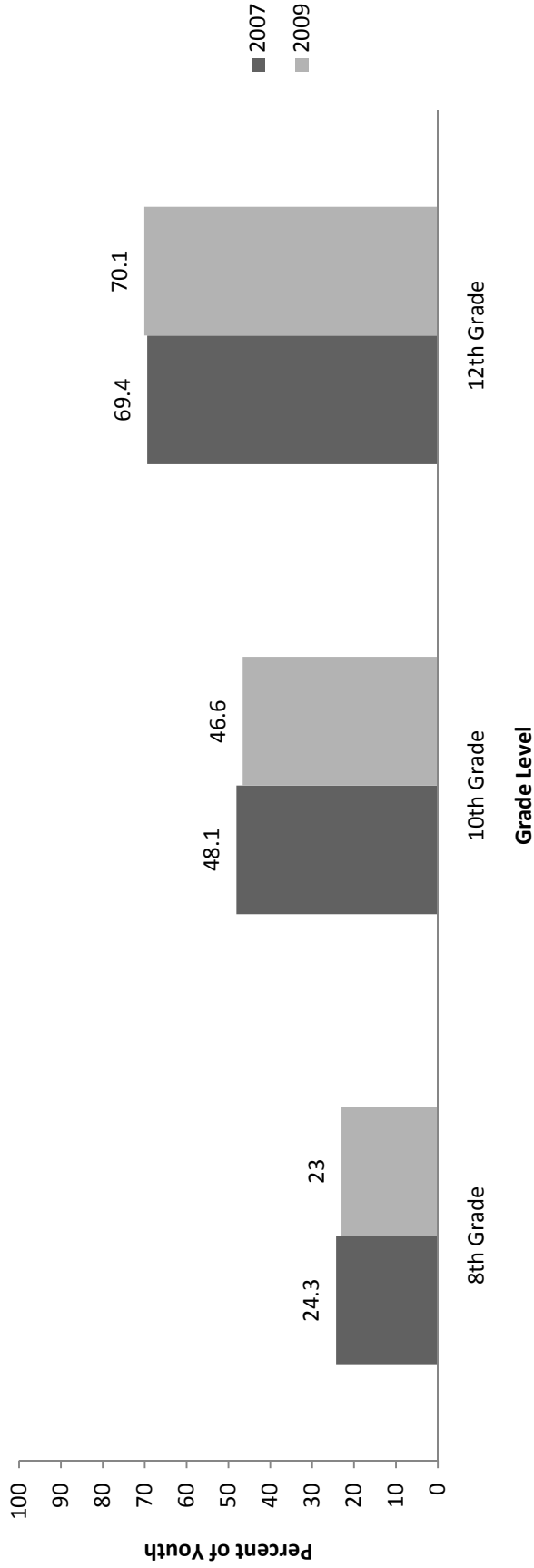
**What the numbers and other information told us:**

A majority of our youth uses tobacco products at a friend's house but still use tobacco products in the car and at home.



## Tobacco Use

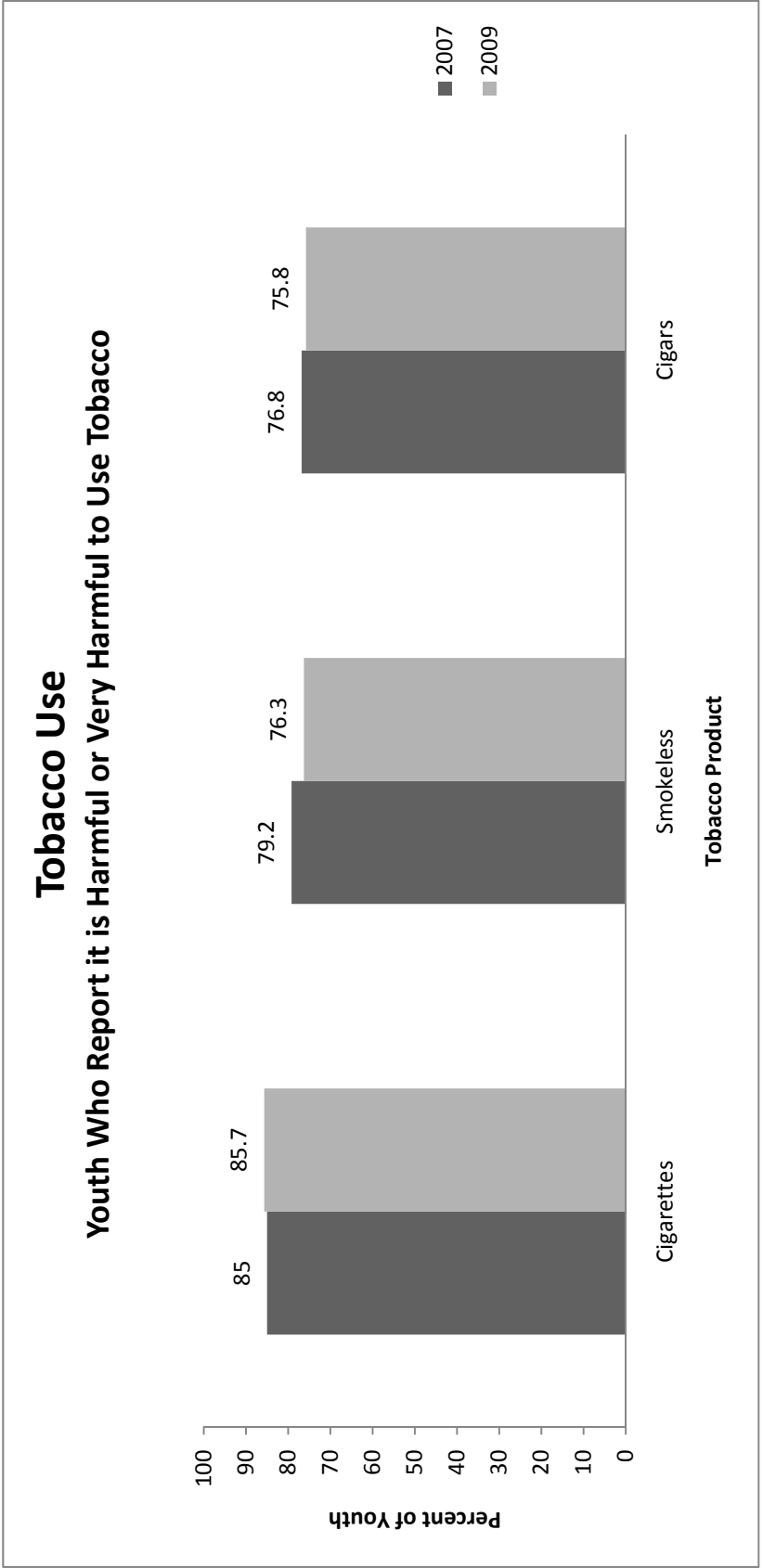
### Youth by Grade Who Report it is Very Easy or Fairly Easy to Get Tobacco Products



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 8<sup>th</sup> and 10<sup>th</sup> graders. The numbers have slightly increased among 12<sup>th</sup> graders.



Source: PRIDE Survey

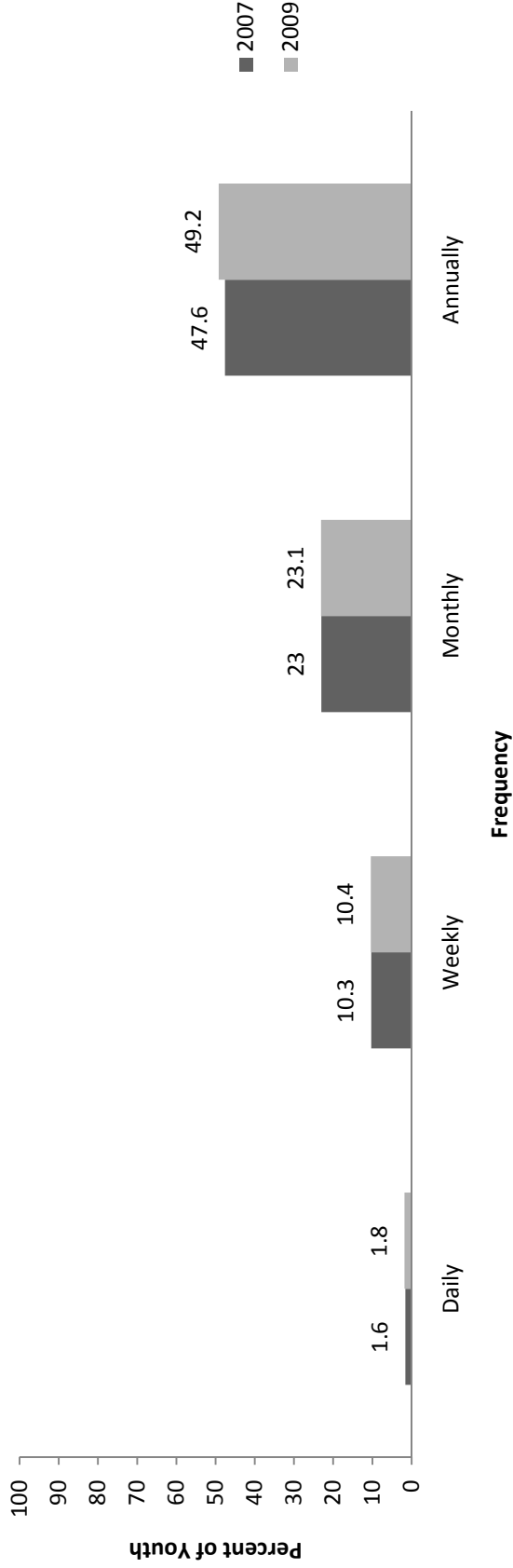
**What the numbers and other information told us:**

The majority of youth perceive tobacco as harmful to your health. The findings show that there has been a slight increase in the perception that cigarettes are harmful from 2007 to 2009. The findings have dropped slightly among the other tobacco products.

6.2% of youth in 2009 report that there is no harm in smoking cigarettes. This percentage remained the same since 2007.

## Alcohol Use

### Cumulative Frequency of Alcohol Use



Source: PRIDE Survey

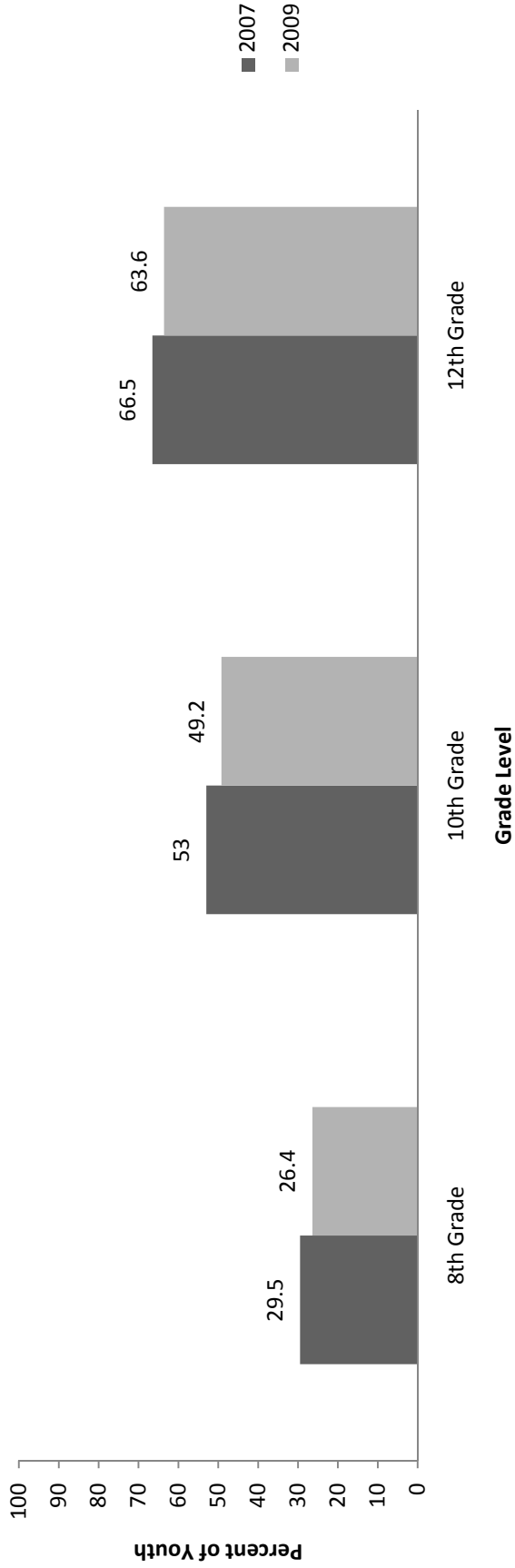
**What the numbers and other information told us:**

Annually more students drank beer (39.5%) than wine coolers (35.8%) and liquor (37%). These numbers are higher than the year 2007: annually, 36.9% drank beer, 35% drank wine coolers and 34.5% drank liquor.

The majority of youth use alcohol on the weekends and at a friend's house.

## Alcohol Use

### Youth By Grade Who Report it is Very Easy or Fairly Easy to Get Alcohol



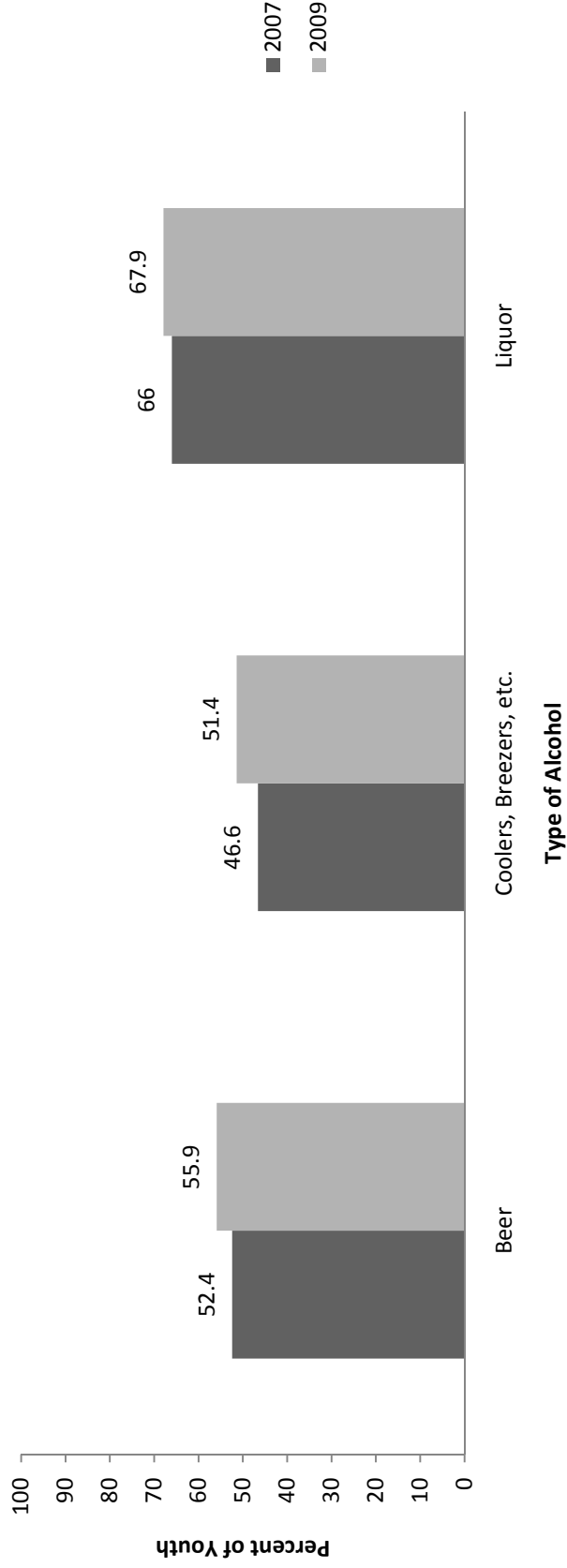
Source: PRIDE Survey

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

The decreasing numbers across the grade levels show that it is still difficult from previous years for our youth to acquire alcohol.

## Alcohol Use

### Youth Who Report it is Harmful or Very Harmful to Use Alcohol

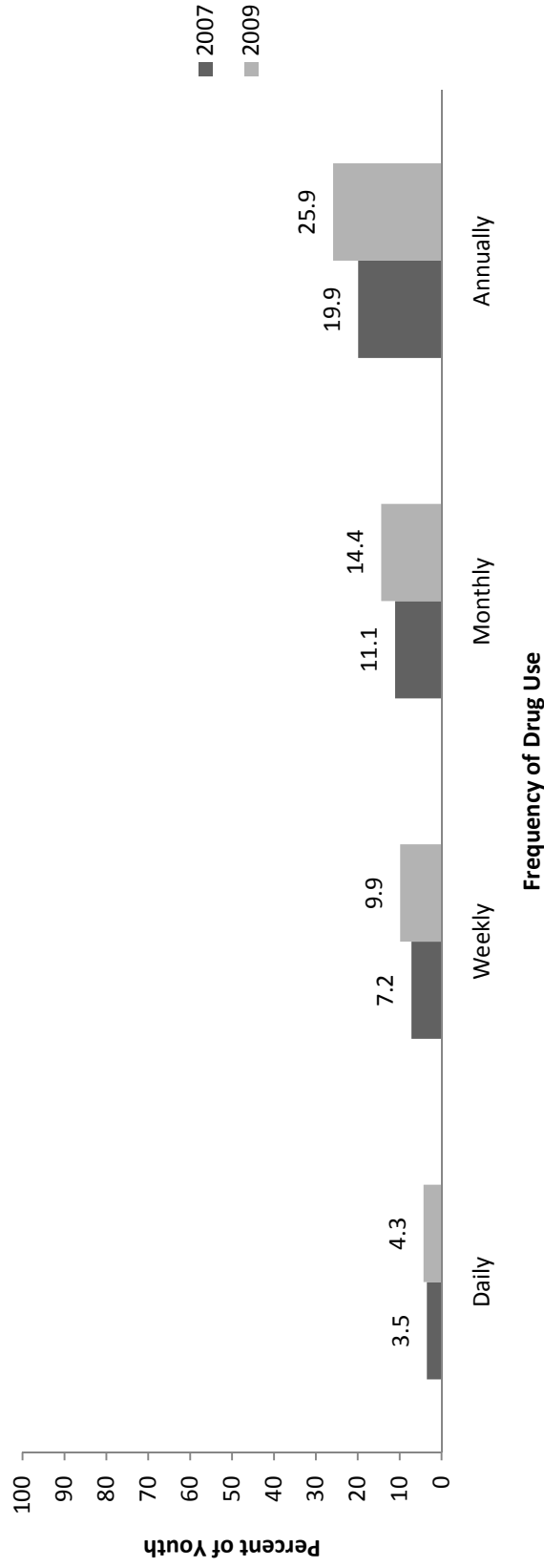


Source: PRIDE Survey

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

The perceived risk of alcohol has decreased among all types of all alcohol from 2007. Coolers are still thought to be the least harmful of the three types of alcohol.

## Drug Use Cumulative Frequency of Illicit Drug Use



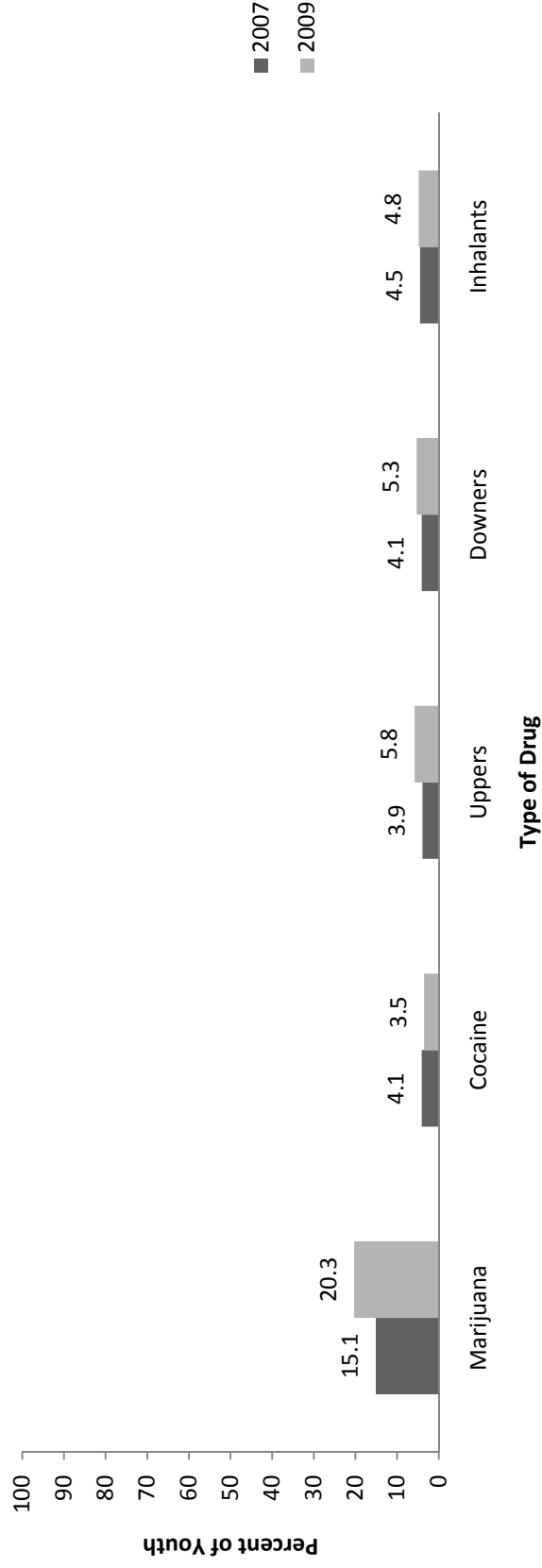
Source: PRIDE Survey

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

There was an increase in the daily, weekly, monthly and annual frequency of drug use since 2007.

7.7% of 8<sup>th</sup> graders, 22.9% of 10<sup>th</sup> graders and 30.4% of 12<sup>th</sup> graders report that their friends use marijuana often or a lot.

## Drug Use Youth Who Used Drugs Within the Past Year



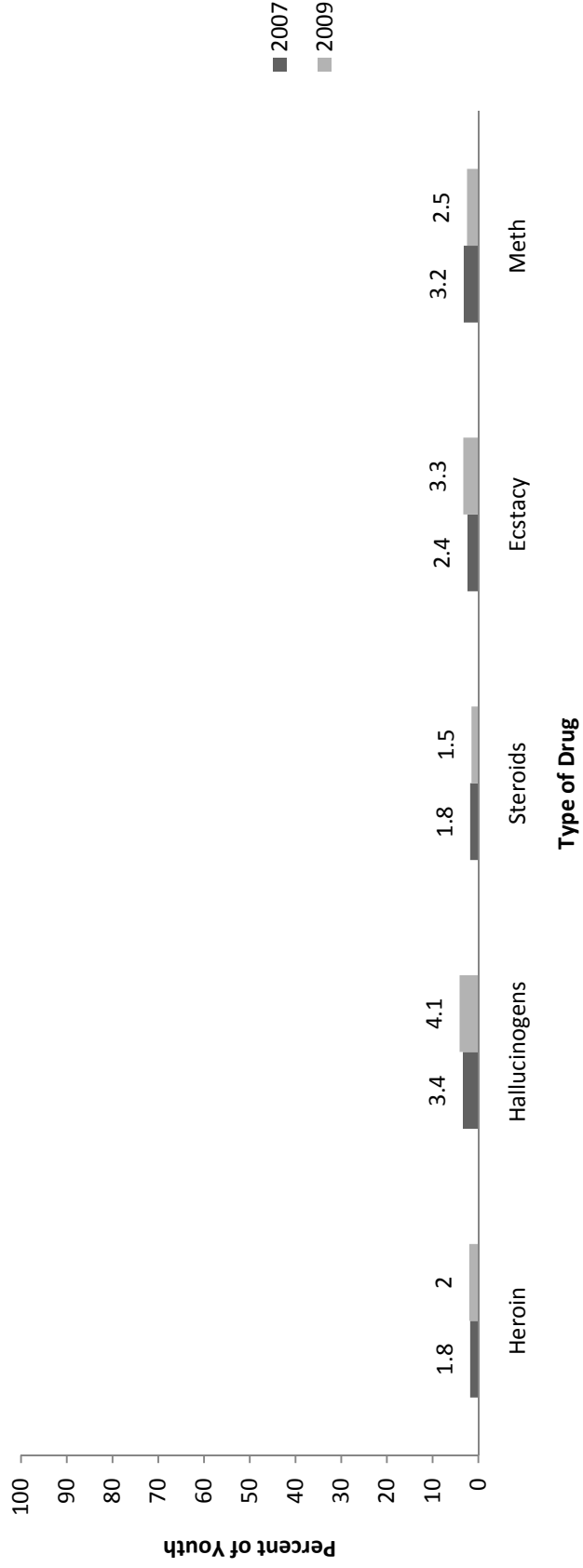
Source: PRIDE Survey

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

The amount of cocaine use had decreased in the past year while the use of uppers, downers and inhalants has increased.

The use of marijuana has significantly increased since 2007.

## Drug Use Youth Who Used Drugs Within the Past Year (cont.)



Source: PRIDE Surveys

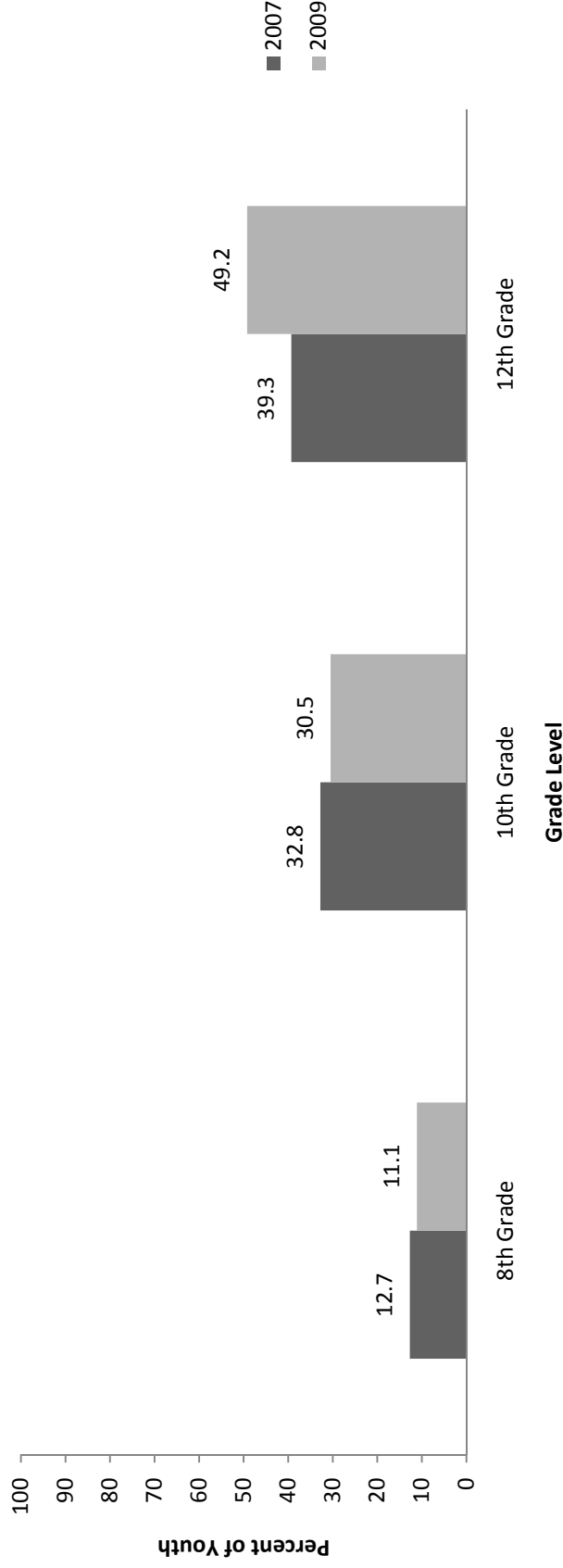
**What the numbers and other information told us:**

There has been a slight increase of Hallucinogens and Ecstasy surveyed since 2007. There has been a slight decrease of Steroids and Meth. The use of Heroin has stayed the same.



## Drug Use

### Youth by Grade Who Report it is Very Easy or Fairly Easy to Get Marijuana



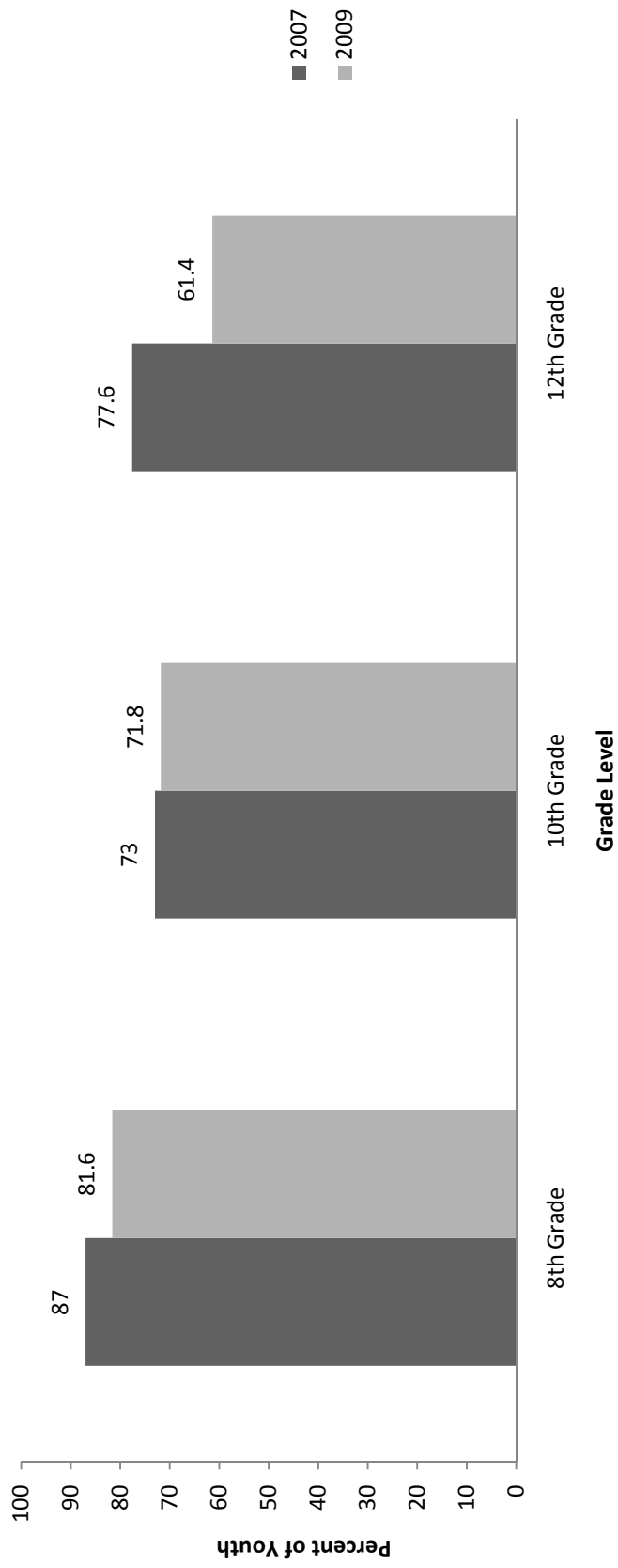
Source: PRIDE Survey

What the numbers and other information told us:

Between 8<sup>th</sup> and 10<sup>th</sup> graders, the rate has slightly decreased. In 12<sup>th</sup> grade, there was a 9.9% increase in youth who felt marijuana was fairly easy or very easy to obtain.

## Drug Use

### Youth By Grade Who Report it is Harmful or Very Harmful to Use Marijuana



Source: PRIDE Survey

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

There was a drop in percentage among all grade levels who view marijuana as harmful or very harmful.

## Youth Nationwide Who Use Illicit Drugs

Source: PRIDE National Survey

<b>PRIDE</b>	<b>Daily</b>	<b>Weekly</b>	<b>Monthly</b>	<b>Annually</b>
<b>2007</b>	4.6%	8.8%	12.2%	20.1%
<b>2009</b>	4.8%	8.9%	12.3%	20.3%

## Harrisonburg/Rockingham Youth Data Survey

Source: PRIDE Survey

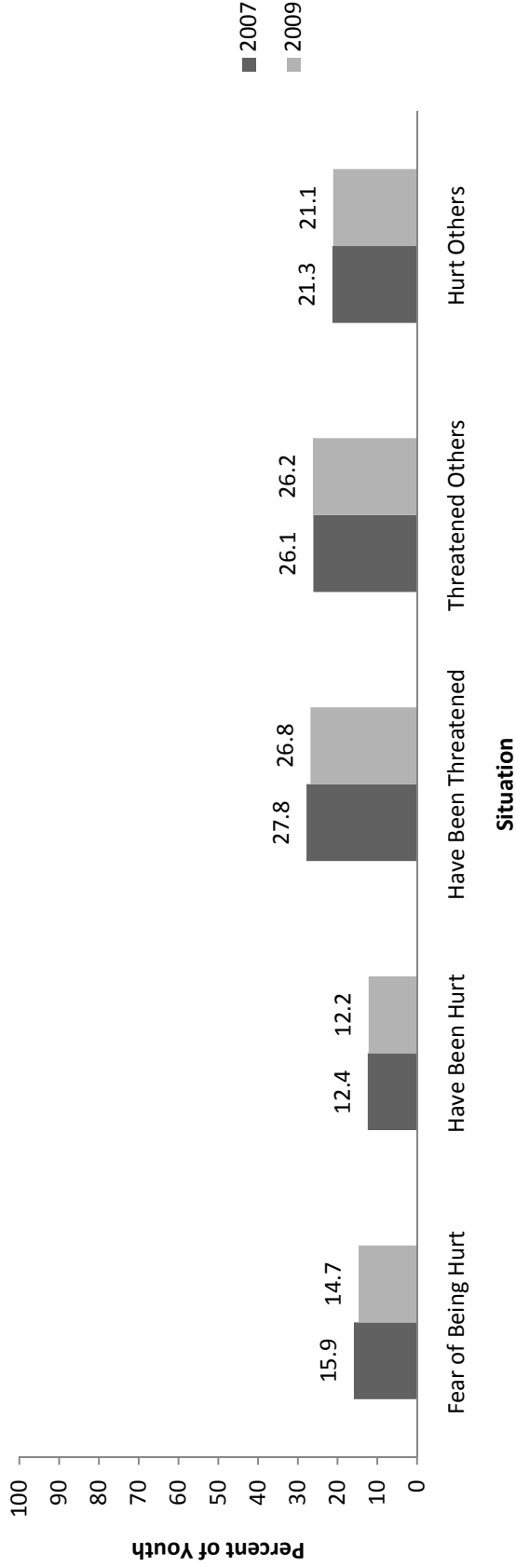
<b>PRIDE</b>	<b>Daily</b>	<b>Weekly</b>	<b>Monthly</b>	<b>Annually</b>
<b>2007</b>	3.5%	7.2%	11.1%	19.9%
<b>2009</b>	4.3%	9.9%	14.4%	25.9%

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

The numbers of illicit drug use has significantly increased in Harrisonburg City/ Rockingham County. The numbers of illicit drug use nationally has slightly increased or has stayed the same.

The Harrisonburg/ Rockingham daily use of illicit drugs is lower than the national average; however, the weekly, monthly and annual use is higher than the national average.

## Violence Youth Who Report Violence at School Without a Weapon

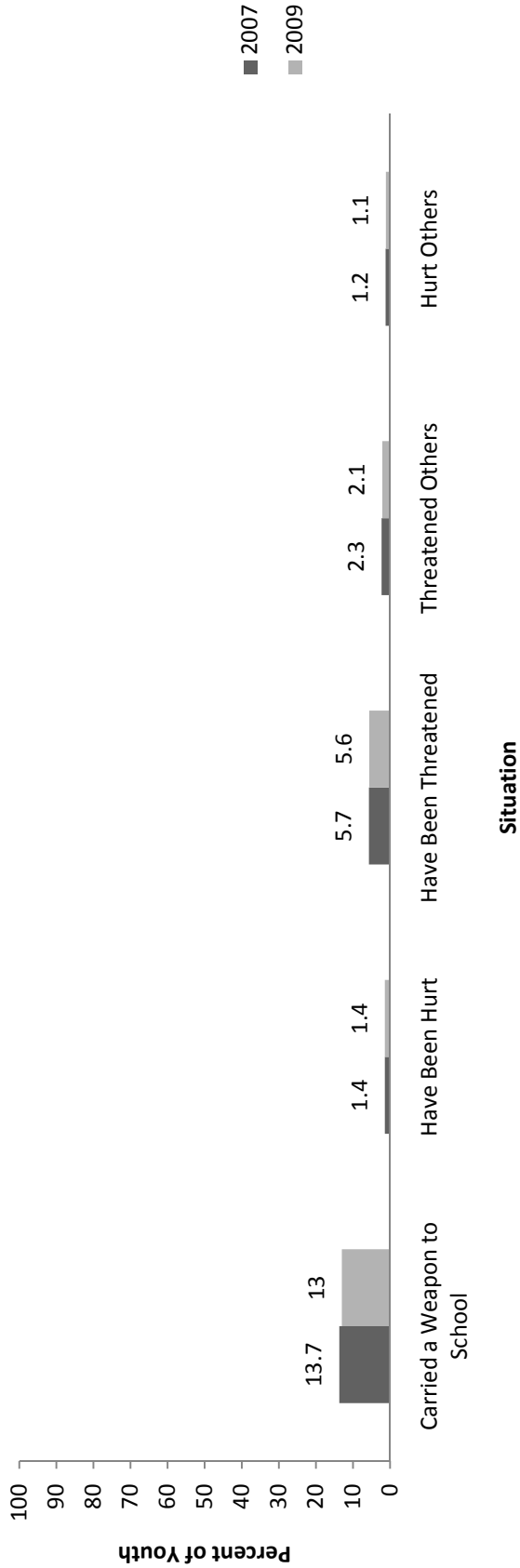


Source: PRIDE Survey

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

The youth report shows a slight decrease among students reporting violence at school without a weapon.

## Violence Youth Who report Violence at School With a Weapon



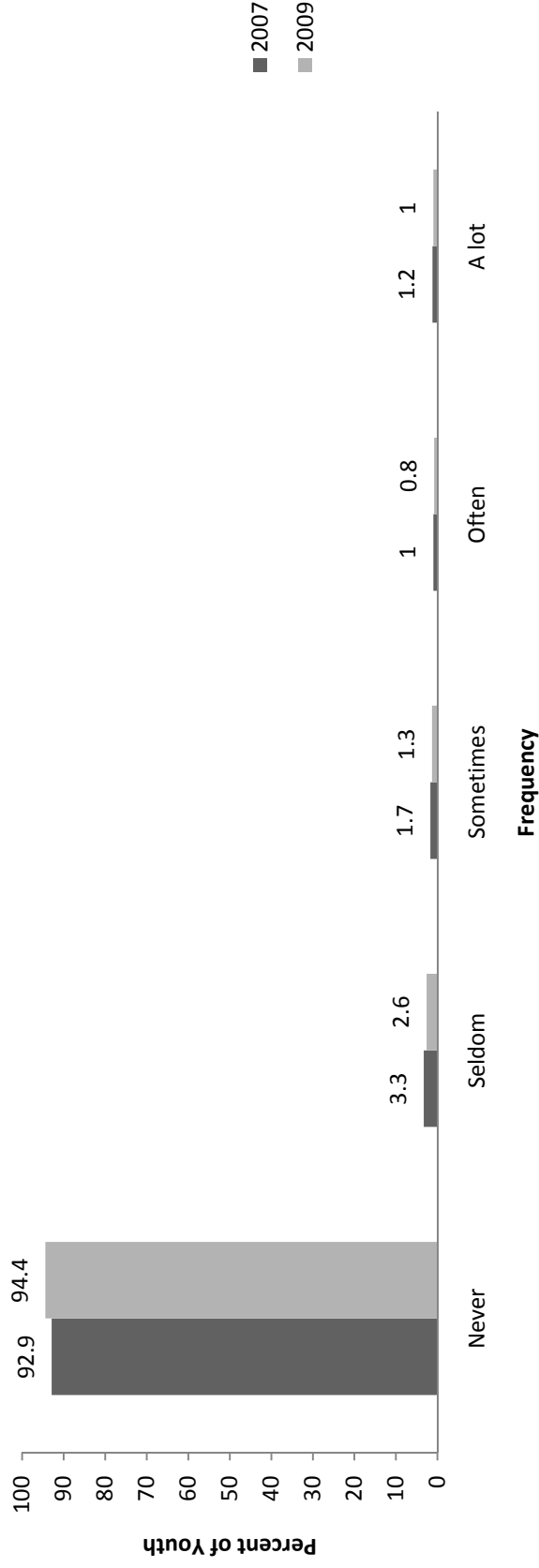
Source: PRIDE Survey

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

There was a slight decrease in violence situations when students reported carrying a weapon to school (0.7%).

The other situations show little change from 2007.

## Violence Youth Participation in Gang Activity



Source: PRIDE Survey

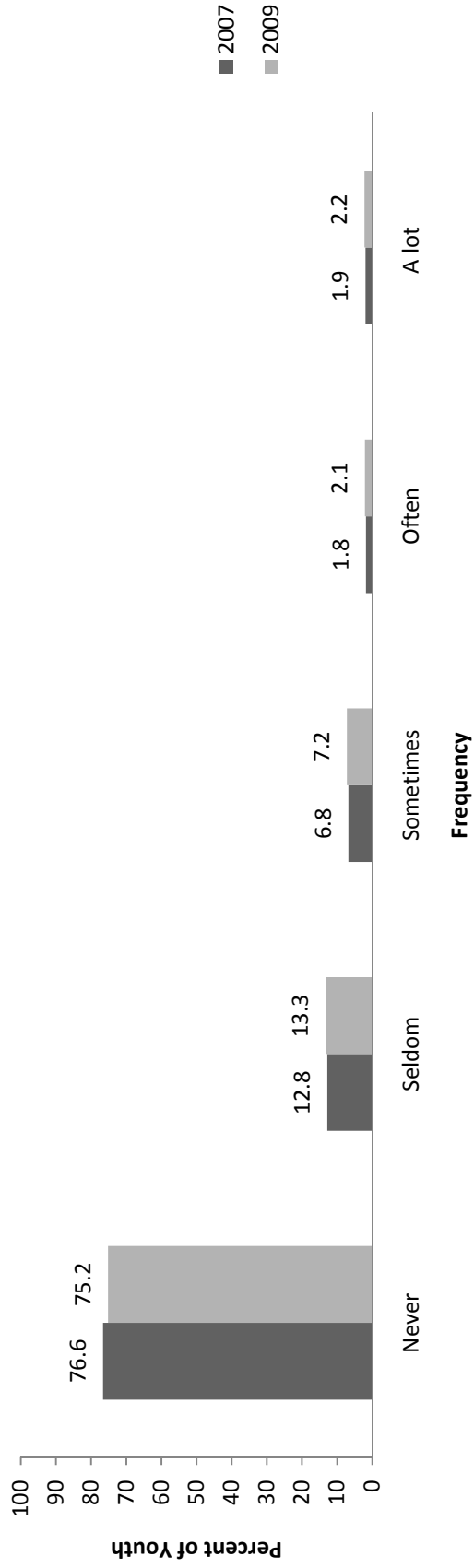
**What the numbers and other information told us:**

Most youth (94.4%) reported never participating in gang activities, which is a slight increase from 2007 (92.9%).

There is a small decrease in students reporting gang participation.

## Suicide

### Youth Who Have Thought About Committing Suicide



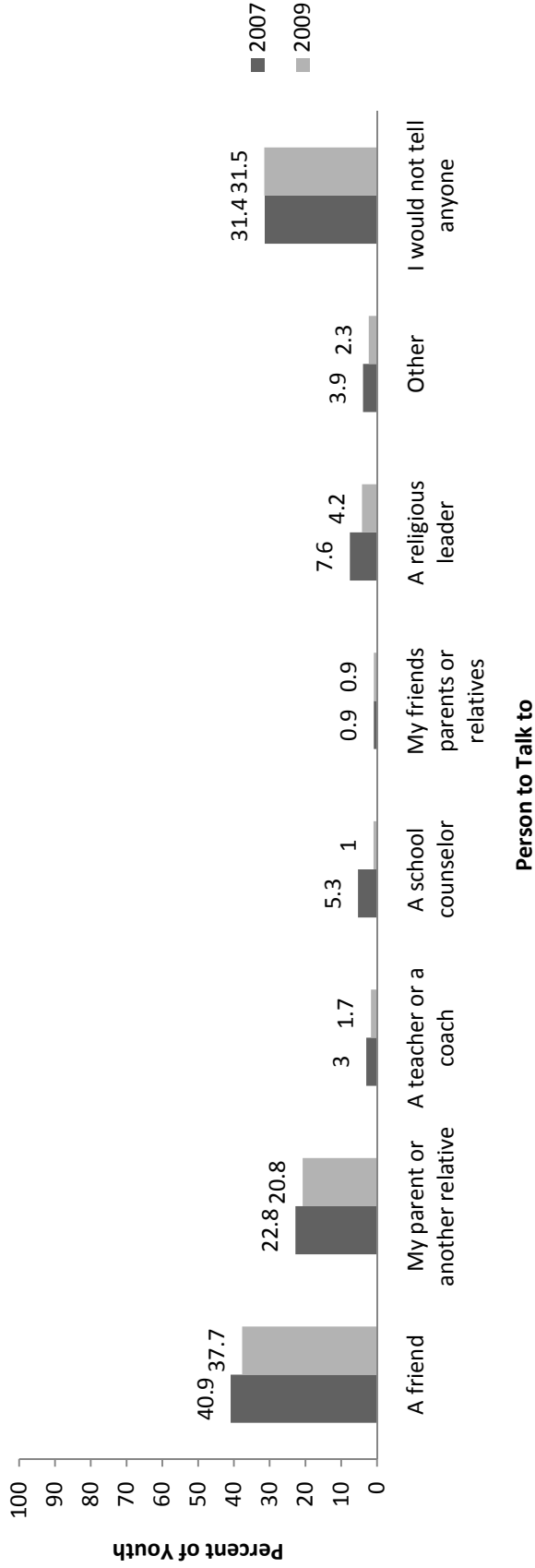
Source: PRIDE Survey

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

75.2% of youth have never thought of committing suicide, a small decrease from 2007 by 1.4%.

The youth report shows an increase in students who have thought about committing suicide in Seldom (by 0.5%), Sometimes (by 0.4%), Often (by 0.3%), and in A Lot (by 0.3%).

## Suicide Who Youth Would Tell if They Were Seriously Thinking of Suicide



Source: Rockingham County/ Harrisonburg Youth survey

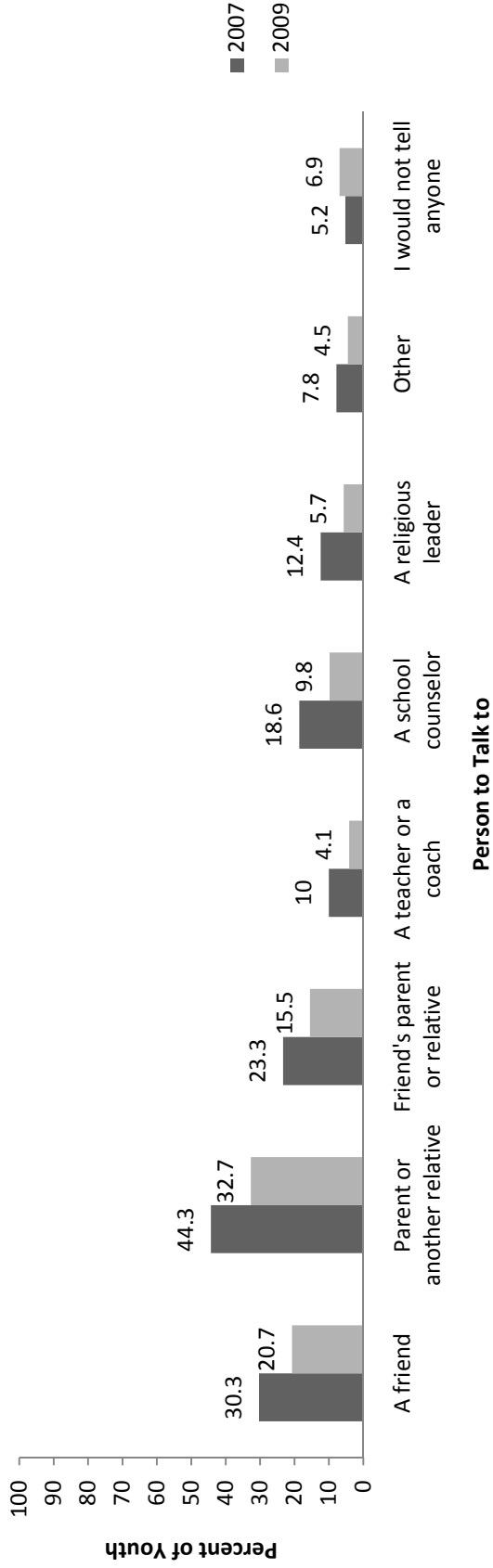
**What the numbers and other information told us:**

In 2009, fewer students reported a person they would talk to if they were thinking about suicide.

31.5% of youth said that they would not tell anyone if they were considering suicide. This number has stayed about the same as 2007.



## Suicide Who Youth Would Tell When Worried About A Friend Seriously Thinking of Suicide



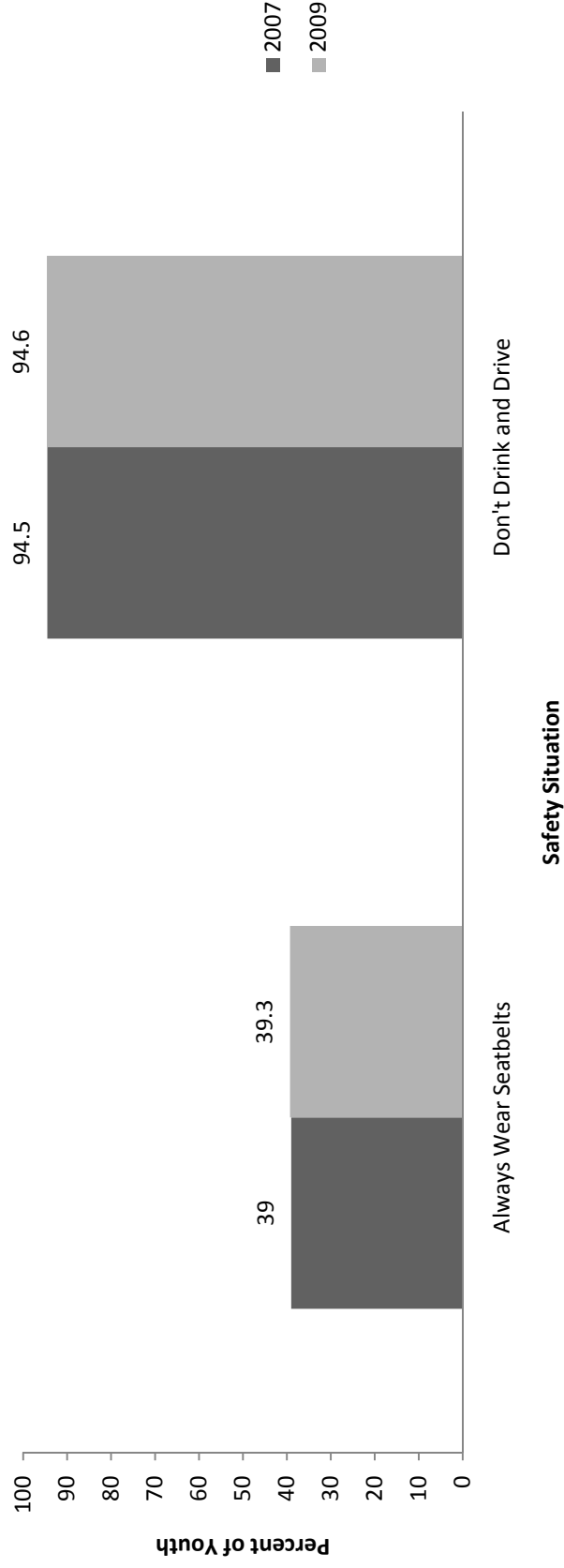
Source: Rockingham County/ Harrisonburg Youth Survey

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

There was a significant increase in the amount of youth who would not confide in anyone if they had a friend who was seriously thinking of suicide.

## Safety

### Youth Who Always Wear Seatbelts and Never Drink and Drive

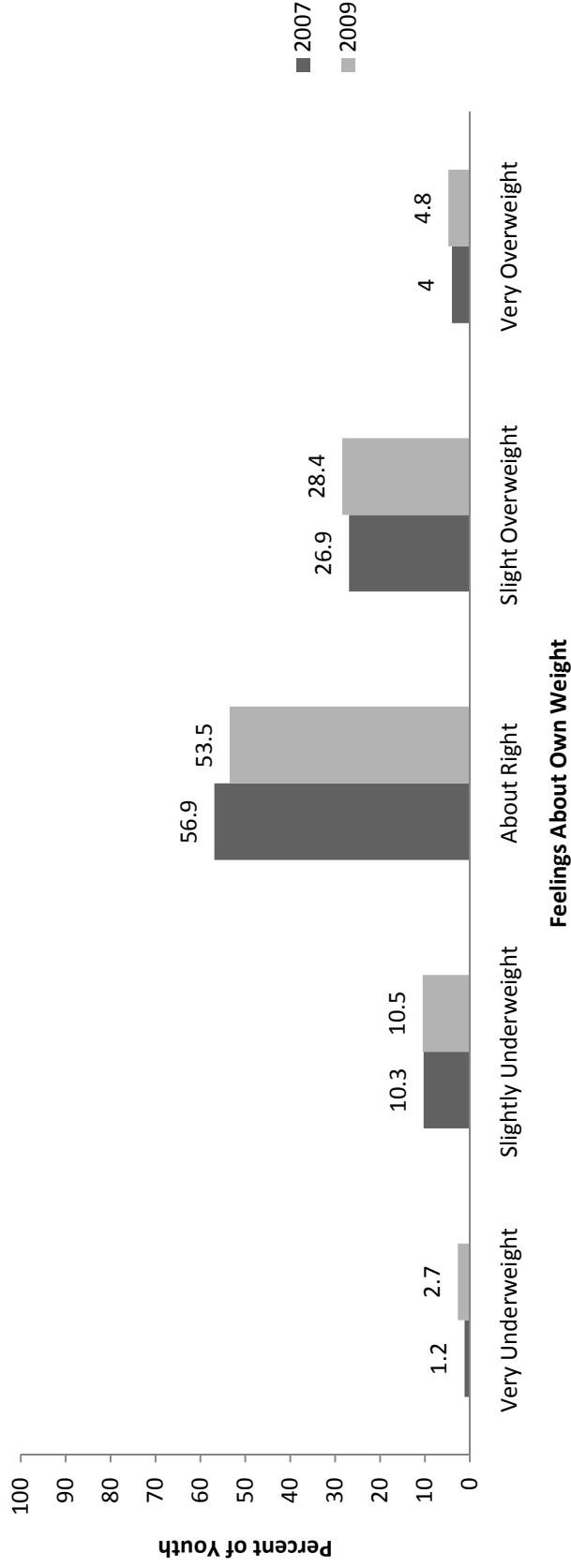


Source: PRIDE Survey

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

There was not a significant change among youth who wear seatbelts or youth who do not drink and drive from 2007 to 2009.

## Health Self-Report of Weight



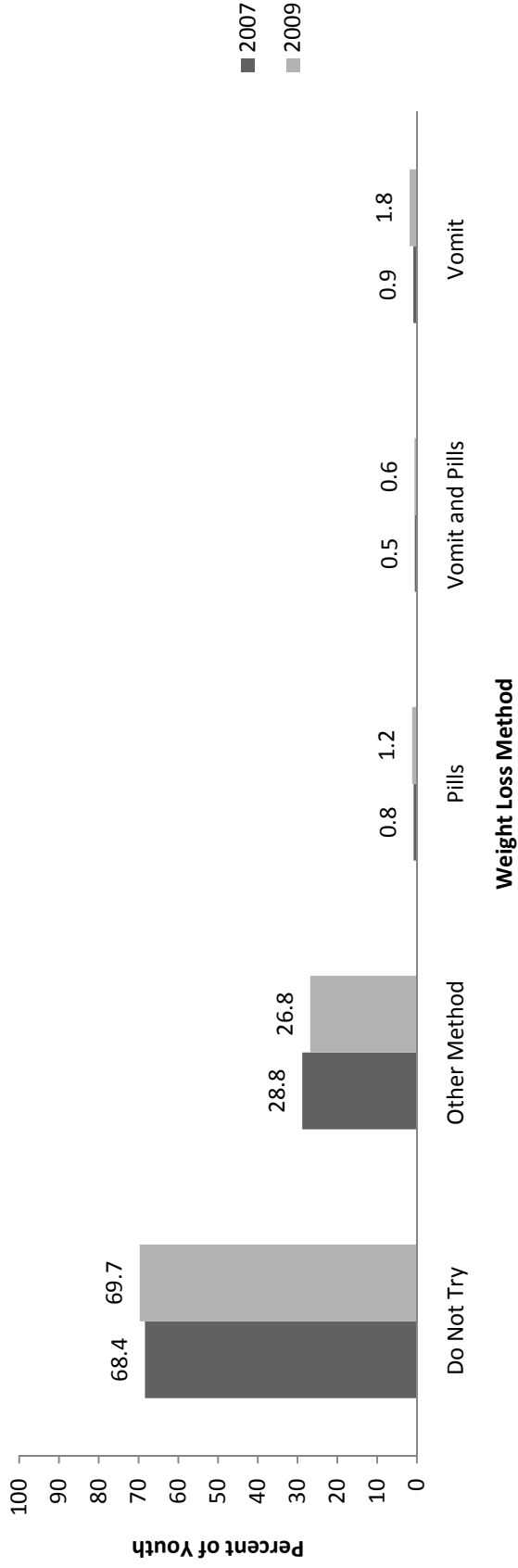
Source: Rockingham County/ Harrisonburg Youth Survey

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

There was a decrease by 3.4% among the amount of youth who feel that they are about the right weight since 2007.

There has been a slight increase of the amount of youth who feel that they are very underweight, slightly underweight, slight overweight and very overweight.

## Health Weight Loss Methods

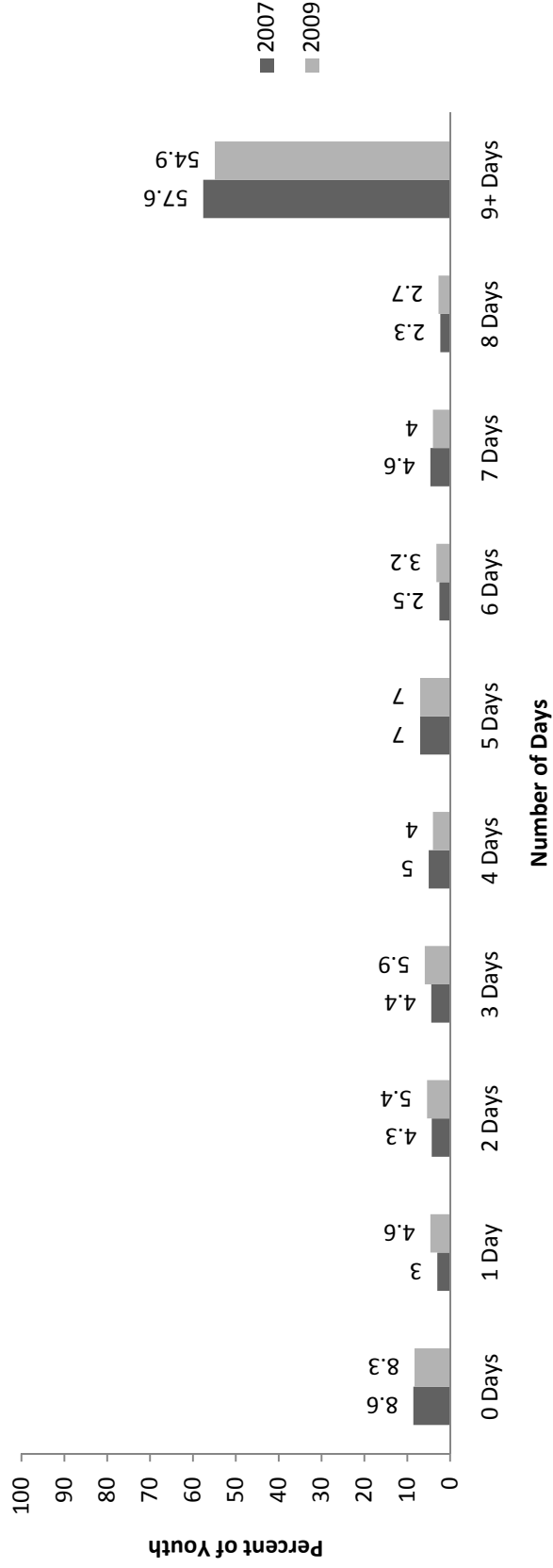


Source: Rockingham County/ Harrisonburg Youth Survey

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

There was a slight increase in the percentage of youth who have not tried a weight loss method by 1.3%.

## Health Youth Who Exercise



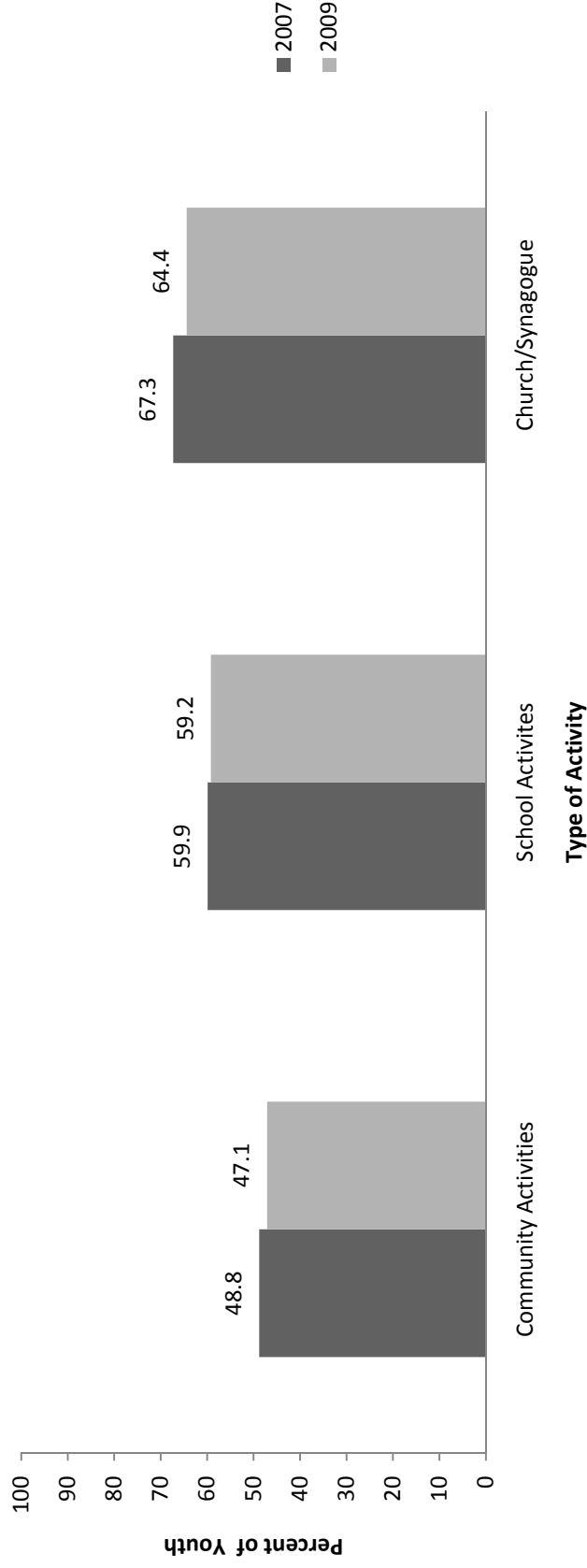
Source: Rockingham County/Harrisonburg Youth Survey

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

Over half the youth (54.9%) report exercising more than 9 days throughout the month. This is a 2.7% decrease since 2007.

## Health

### Youth Who Participate in Activities Sometimes, Often, or A Lot



Source: PRIDE Survey

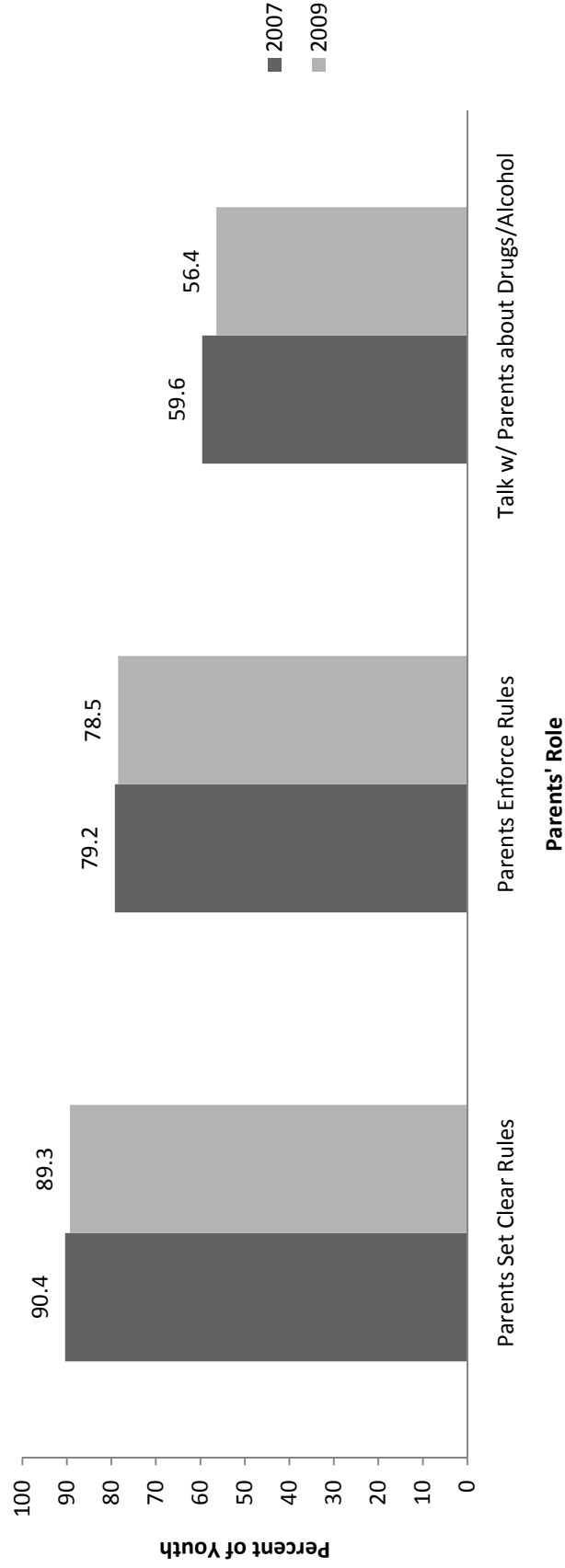
#### What the numbers and other information told us:

A large number of the youth reported going to church or synagogue (64.4%).

There was a decrease in youth participating in community activities (1.7%), school activities (0.7%) and church/synagogue (2.9%).

## Health

### Youth Whose Parents Set and Enforce Rules and Talk With Their Children about Drugs and Alcohol Sometimes, Often, or A lot



Source: PRIDE Survey

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

The majority of parents set clear rules for youth (89.3); however it is a 1.1% decrease from 2007.

The report shows a decrease in parents talking to their children/teens about rules and drugs/alcohol.

Parental Information

Reported by Youth

**Parent's Employment Status**

	Full-Time	Part - Time	Not Employed
Father	86.5%	6.1%	7.4%
Mother	62.8%	20.9%	16.4%

**Education Level of Parents**

	Some High School	High school Graduate	Some College	College Graduate
Father	18.3%	36.5%	10.9%	34.3%
Mother	14.2%	31.2%	15.5%	39.2%

Source: Harrisonburg/Rockingham County Youth Survey



# Youth Data Survey 2009

## Alcohol Use

**24.5%** of teens feel it is very easy to get alcohol products.

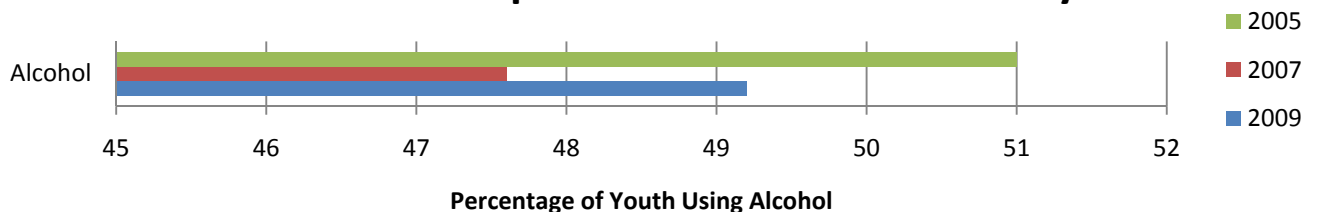
**59.3%** of teens feel that their parents would think that it would be very wrong if they used alcohol.

**16.3%** of teens say that their friends drink alcohol a lot.

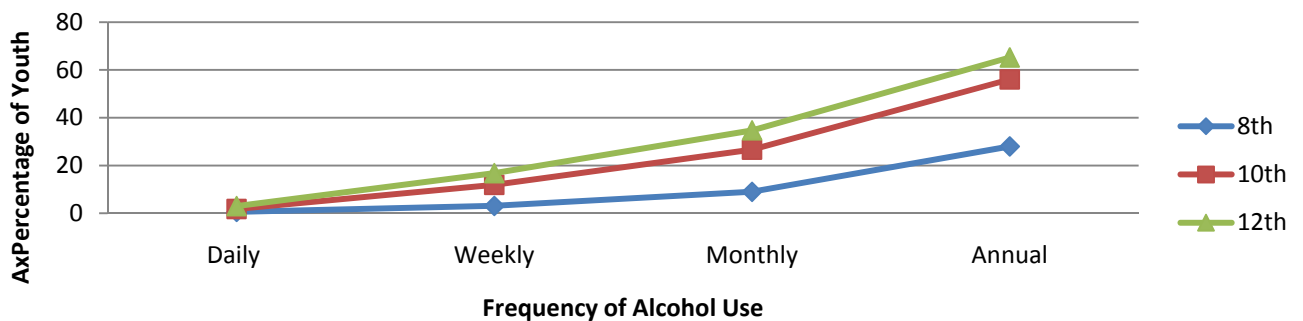
**28.6%** of teens feel that drinking beer is very harmful to their health.

**36.9%** of teens feel that liquor is very harmful to their health.

### Youth Who Reported Alcohol Use Annually



### Frequency of Alcohol Use



# Youth Data Survey 2009

## Depression and Suicide

**32.7%** of teens would tell a parent or relative if they were worried about a friend committing suicide.

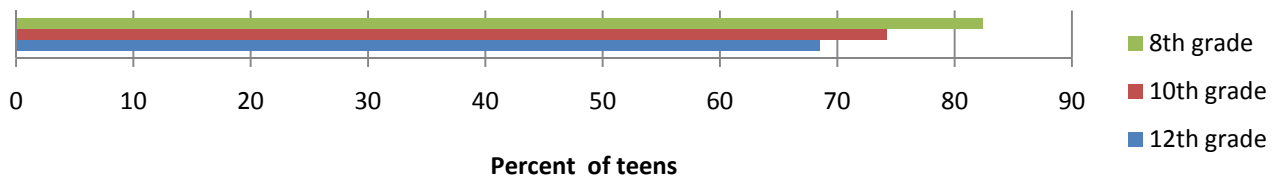
**75.2%** of say that they never have thought about committing suicide.

**97.7%** of teens say that they have not intentionally hurt their bodies in the last six months.

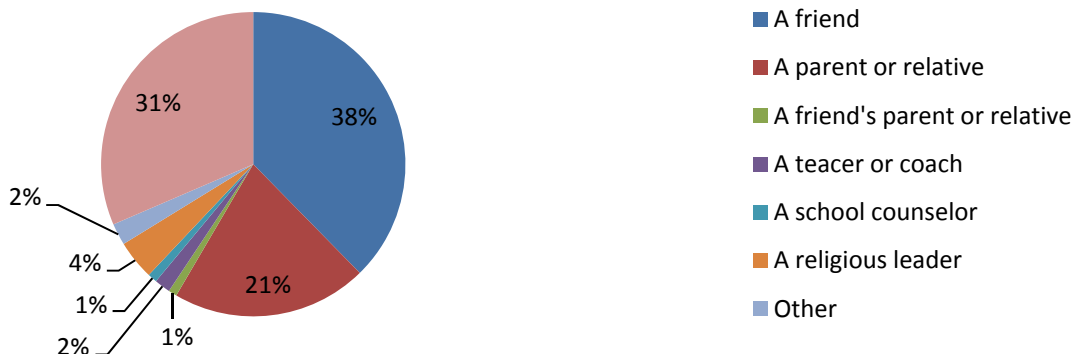
**37.7%** of teens would tell a friend if they were seriously thinking about committing suicide.

**31.5 %** of teens say would not tell anyone if they were seriously thinking about suicide.

**Teens Who Have Never Thought About Committing Suicide**



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



# Youth Data Survey 2009

## Drug Use

**50.8%** of teens have never used tobacco.

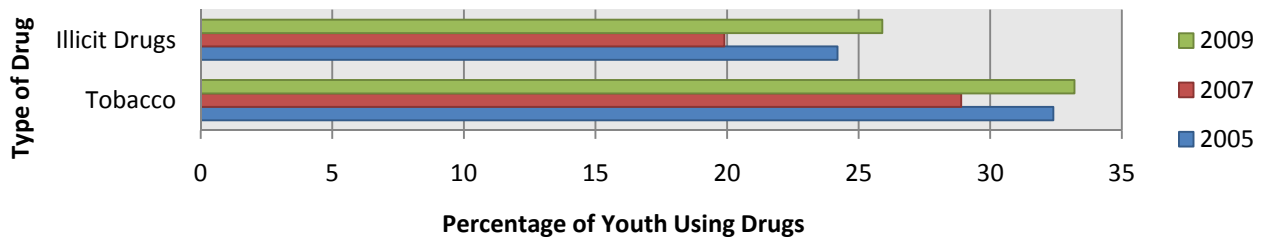
**20.2%** of teens report they have used marijuana.

**15.1%** of teens report they use tobacco weekly.

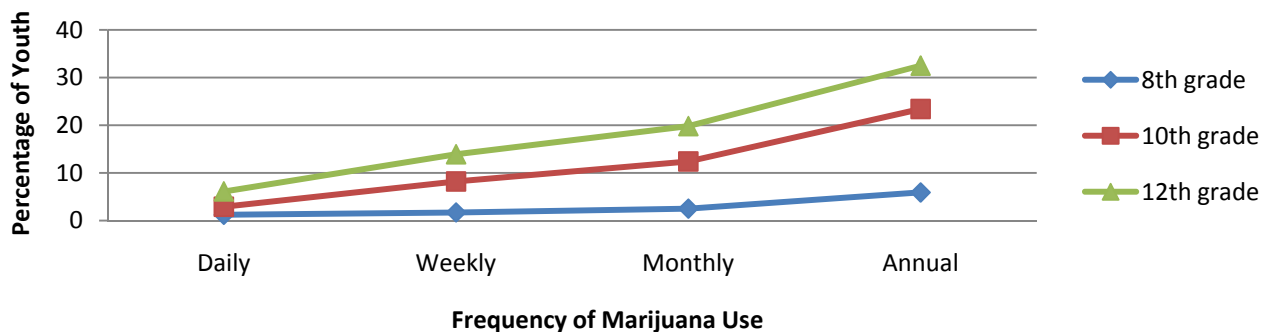
**57.9%** of teens feel that using marijuana is very harmful to their health.

**28.3%** of teens say it is very easy to get tobacco products.

### Youth Who Reported Drug Use Annually



### Frequency of Youth Using Marijuana



# Youth Data Survey 2009

## Exercise and Nutrition

**54.9%** of teens say that during the past 30 days they participated in physical activities at least nine days for twenty minutes.

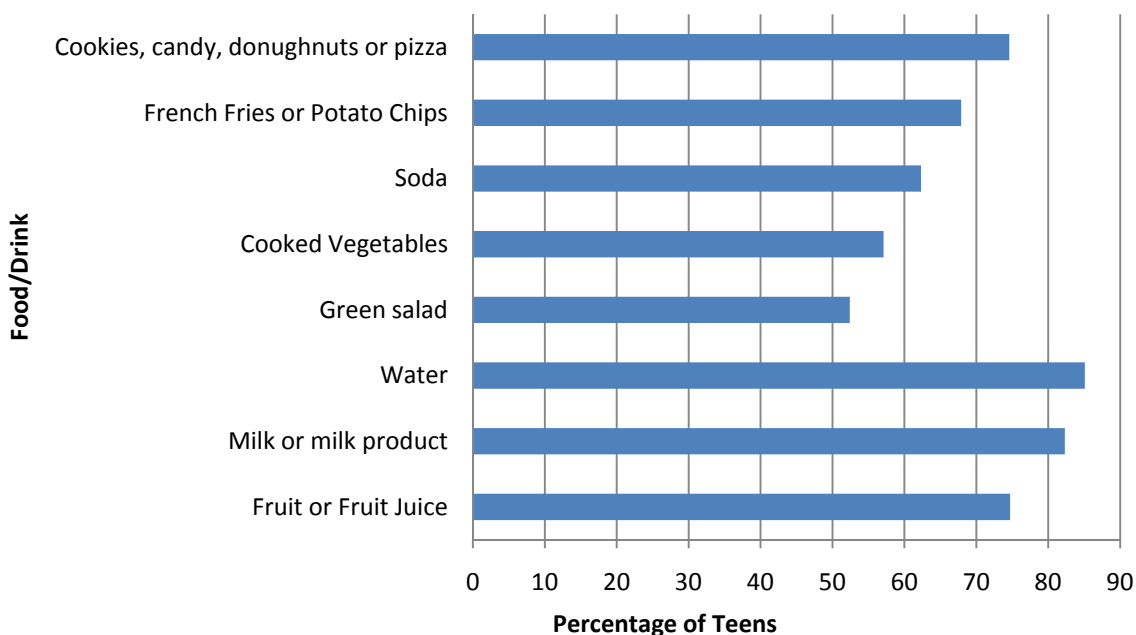
**62.3%** of teens reported drinking soda over the past week.

**91.7%** of teens say that they have exercised for at least 20 minutes during the past 30 days.

**89.6%** of teens have *not* been told by a doctor that they are overweight.

**85.1 %** of teens reported drinking water over the past week.

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



# Youth Data Survey 2009

## Safety

**61.7%** of teens say they always wear a seatbelt when riding in somebody else's vehicle.

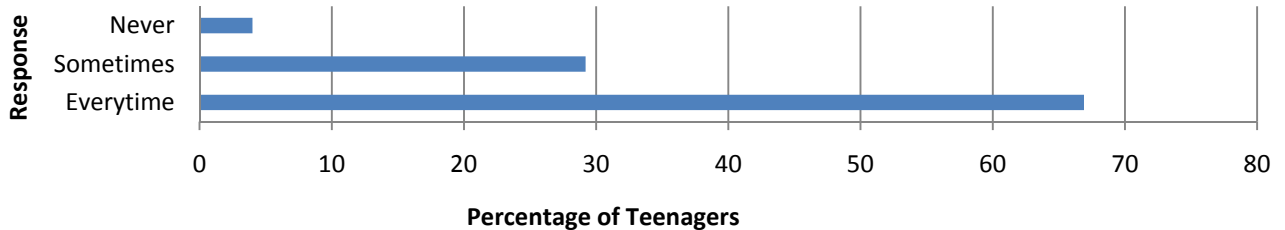
**73%** of teens say they rarely wear a helmet while riding a bicycle.

**92.4%** of teens say they feel safe in their neighborhoods.

**56.3%** of teens say they feel safe on the school bus.

**54.6%** of teens say they feel safe in the hallways at school.

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



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



# Youth Data Survey 2009

## Sexuality

**68.2%** of teens say that they are sexually abstinent.

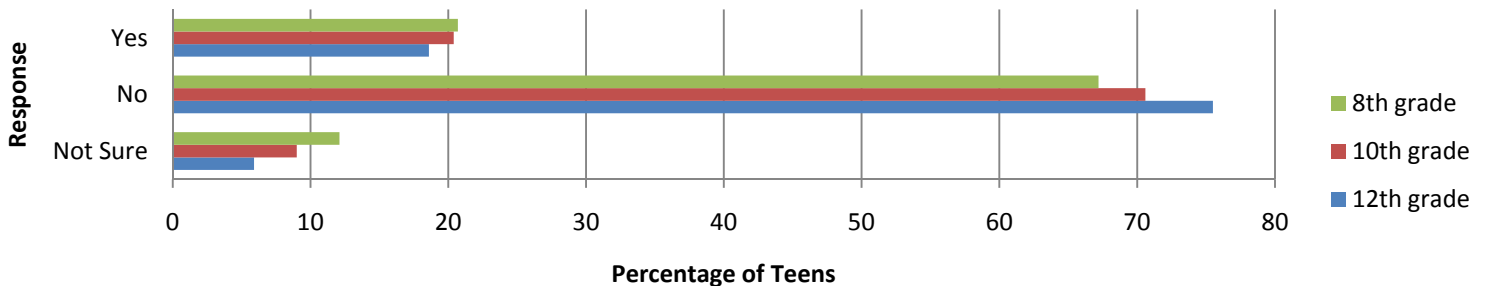
**19.6%** of teens say they drank alcohol or used drugs before the last time they had sexual intercourse.

**50.1%** of teens who are sexually active say that they use condoms.

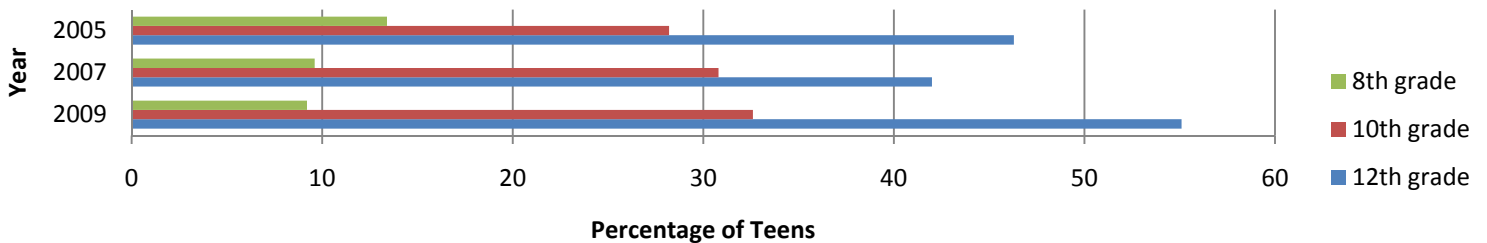
**13.7%** of teens who are sexually active say that they do not use any form of protection.

**77%** 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"/>
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**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...

	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

	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"/>
3. How often do you wear a seatbelt when driving a car? <input type="checkbox"/> Never <input type="checkbox"/> Sometimes <input type="checkbox"/> Always <input type="checkbox"/> Seldom <input type="checkbox"/> Most of the time <input type="checkbox"/> I don't drive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. How often do you wear a seat belt when riding in a car driven by someone else? <input type="checkbox"/> Never <input type="checkbox"/> Sometimes <input type="checkbox"/> Always <input type="checkbox"/> Seldom <input type="checkbox"/> Most of the time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

	NEVER	2-5 TIMES	6 OR MORE TIMES
1. Carried a handgun?	<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"/>
3. Threatened a student with a handgun, knife or club?	<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"/>
5. Hurt a student by using a handgun, knife or club?	<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"/>
7. Been threatened with a handgun, knife or club by a student?	<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"/>
9. Been afraid a student may hurt you?	<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"/>
11. Been hurt by a student who hit, slapped or kicked you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

	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

1.	<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.	<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.	<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.	<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.	<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.	<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.	<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.	<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.	<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.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



# 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>		<b>RIGHT</b> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<b>WRONG</b> <input checked="" type="radio"/> <input type="radio"/> <input checked="" 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
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**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