## California Healthy Kids Survey

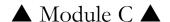
## ▲ Module C ▲

## This section asks more questions related to alcohol and drug use, violence, and safety.

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

		0 times	1 to 2 times	A few times	Once a month	Once a week	A few times a week	Once or more a day
C1.	Any alcohol (beer, wine, wine coolers, liquor, etc.)?	A	В	С	D	Е	F	G
C2.	Marijuana (pot, weed, grass, hash, bud)?	A	В	С	D	Е	F	G
C3.	Inhalants (things you sniff, huff, or breathe to get high such as glue, paint, aerosol sprays, gasoline, poppers, gases)?	A	В	С	D	E	F	G
C4.	Any other drugs (such as cocaine, meth, PCP, or sedatives)?	A	В	С	D	E	F	G

- C5. How likely do you think it is that you will smoke marijuana in the next year?
  - A) I am sure it will **not** happen
  - B) It probably will **not** happen
  - C) There is an even chance (50-50) that it will happen
  - D) It probably will happen
  - E) It will happen for sure
- C6. About how many of the adults you know use marijuana?
  - A) None
  - B) Some
  - C) Many
  - D) Most or all



- C7. During the past **12 months**, did you receive any information or education about using alcohol or other drugs in any of your school classes?
  - A) No
  - B) Yes
  - C) Don't know

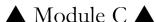
During the past 12 months, how many times have you...

		0 times	1 time	2 or 3 times	4 or more times
C8.	Been in a physical fight?	A	В	С	D
C9.	Been in a physical fight between groups of kids?	A	В	С	D
C10.	Used any weapon to threaten or bully someone?	A	В	С	D
C11.	Used money to bet or gamble?	A	В	С	D

- C12. How safe do you feel in the **neighborhood** where you live?
  - A) Very safe
  - B) Safe
  - C) Neither safe nor unsafe
  - D) Unsafe
  - E) Very unsafe
- C13. During the past **30 days**, on how many days did you **not** go to school because you felt unsafe at school or on your way to or from school?
  - A) 0 days
  - B) 1 day
  - C) 2 or 3 days
  - D) 4 or more days

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

		0 days	1 day	2 or more days
C14.	A gun?	A	В	С
C15.	Any other weapon (such as a knife or club)?	A	В	С
C16.	Any weapon (gun, knife, or club) on school property?	A	В	С



C17.	During the past 12 months, did you ever think about killing yourself?						
	A)	No					
	B)	Yes					
C18.	Dur	ring the past 12 months, did you make a plan about how you would like to kill yourself?					
	A)	No					
	B)	Yes					
C19.	Have you ever <b>tried</b> to kill yourself?						
	A)	No					
	В)	Yes					
C20.	Have you <b>ever</b> been forced to have sexual intercourse when you did not want to?						
	A)	No					
	B)	Yes					
	,						