

## Alcohol &amp; Other Drugs Module

## SUPPLEMENT 1

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

		<u>Years of Age</u>									
		<u>Never</u>	<u>10 or Under</u>	<u>11</u>	<u>12</u>	<u>13</u>	<u>14</u>	<u>15</u>	<u>16</u>	<u>17</u>	<u>18 or Over</u>
W1.	Had a drink of an alcoholic beverage (other than a sip or two)	A	B	C	D	E	F	G	H	I	J
W2.	Smoked part or all of a cigarette	A	B	C	D	E	F	G	H	I	J
W3.	Used smokeless tobacco or other tobacco products	A	B	C	D	E	F	G	H	I	J
W4.	Used marijuana or hashish	A	B	C	D	E	F	G	H	I	J
W5.	Used any other illegal drug or pill to get "high"	A	B	C	D	E	F	G	H	I	J
W6.	If you drink alcohol, how much do you usually drink?										
	A) I don't drink alcohol										
	B) Just enough to feel it a little										
	C) Enough to feel it moderately										
	D) Until I feel it a lot or get really drunk										
W7.	How do <i>most</i> students at your school who drink alcohol usually get it? ( <i>Mark All That Apply.</i> )										
	A) At school										
	B) At parties or events outside school										
	C) At their own home										
	D) From adults at friends' homes										
	E) From friends or another teenager										
	F) Get adults to buy it for them										
	G) Buy it themselves from a store (convenience store, liquor store, grocery, mini mart)										
	H) At bars, clubs, or gambling casinos										
	I) Other										
	J) Don't know										

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

		<u>Neither Approve Nor Disapprove</u>	<u>Somewhat Disapprove</u>	<u>Strongly Disapprove</u>
W8.	Having one or two drinks of any alcoholic beverage nearly every day	A	B	C
W9.	Trying marijuana or hashish once or twice	A	B	C
W10.	Using marijuana once a month or more	A	B	C

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W11. During the past 12 months, have you talked with at least one of your parents or guardians about the dangers of tobacco, alcohol, or drug use?

- A) No  
B) Yes

W12. During the past 12 months, have you heard, read, or watched any messages about not using alcohol, tobacco, or drugs?

- A) No  
B) Yes

*How wrong do your parents or guardians feel it would be for you to do the following?*

	Very Wrong	Wrong	A Little Wrong	Not at All Wrong
W13. Take one or two drinks of alcohol nearly every day	A	B	C	D
W14. Smoke tobacco	A	B	C	D
W15. Use marijuana	A	B	C	D
W16. Use prescription drugs to get high or for reasons other than prescribed	A	B	C	D

*How wrong would your close friends feel it would be if you did the following?*

	Very Wrong	Wrong	A Little Wrong	Not at All Wrong
W17. Take one or two drinks of alcohol nearly every day	A	B	C	D
W18. Smoke tobacco	A	B	C	D
W19. Use marijuana	A	B	C	D
W20. Use prescription drugs to get high or for reasons other than prescribed	A	B	C	D

*How do you think your close friends would feel about you doing the following?*

	Neither Approve Nor Disapprove	Somewhat Disapprove	Strongly Disapprove
W21. Drinking one or two drinks of alcohol nearly every day	A	B	C
W22. Using marijuana	A	B	C
W23. Using prescription drugs to get high	A	B	C