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

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

							А	Once Or
				A	Once	Once	Few Times	More
		0	1 - 2	Few	A	A	A	A
		Times	Times	Times	<u>Month</u>	Week	Week	<u>Day</u>
C1.	An alcoholic drink	A	В	C	D	Е	F	G
C2.	Marijuana (pot, weed, grass, hash, bud)	A	В	C	D	E	F	G
C3.	Inhalants (things you sniff, huff, or breathe to get high)	A	В	C	D	E	F	G
C4.	Cocaine (coke, crack, rock, base, snort)	A	В	C	D	E	F	G
C5.	LSD or other psychedelics (acid, mescaline, peyote, mushrooms)	A	В	С	D	Е	F	G
C6.	Ecstasy (E, X, EXTC, MDMA)	A	В	C	D	Е	F	G
C7.	Any other illegal drug or pill to get "high"	A	В	C	D	Е	F	G
C8.	Two or more drugs at the same time (for example, alcohol with marijuana, cocaine with PCP, ecstasy with mushrooms)	A	В	С	D	Е	F	G

- C9. During the past 12 months, have you taken any steroids (roids) to build up muscle or increase performance or endurance?
 - None, have used no steroids
 - B) Some, have taken a few times
 - C) Regularly, have been on a program of steroid use
- C10. During the past 12 months, did you use any banned performance-enhancing supplement that claims to build muscle or increase strength or endurance (andro, ephedrine, DHEA)?
 - A)
 - B) Some, have taken a few times
 - C) Regularly, have been on a program of supplement use

How many times have you tried to quit or stop using ...

		Does Not Apply, Never <u>Used</u>	0 Times	1 Time	2 - 3 Times	4 Or More Times
C11.	alcohol?	A	В	С	D	Е
C12.	marijuana?	A	В	C	D	E

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C13.	Have you ever felt that you needed help (such as counseling or treatment) for your alcohol or other drug
	use?

- A) No, I never used alcohol or other drugs
- No, but I do use alcohol or other drugs B)
- C) Yes, I have felt that I needed help
- C14. In your opinion, how likely is it that a student would find help at your school from a counselor, teacher, or other adult to stop or reduce using alcohol or other drugs?
 - A) Very likely
 - B) Likely
 - C) Not likely
 - D) Don't know
- C15. In your opinion, how likely is it that a student will be suspended, expelled, or transferred if he or she is caught on school property using or possessing alcohol or other drugs?
 - A) Very likely
 - B) Likely
 - C) Not likely
 - D) Don't know
- C16. How do most kids at your school who drink alcohol usually get it? (Mark All That Apply.)
 - 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

- Buy it themselves from a store (convenience store, liquor store, grocery, mini mart)
- At bars, clubs, or gambling casinos H)
- I) Other
- Don't know J)
- C17. During the past 12 months, have you gambled (bet) for money or valuables, in any of the following ways? (Mark All That Apply.)
 - A) I have not gambled (bet) in the past 12 months
 - B) Card games (such as poker, blackjack)
 - Personal skill games (such as pool, C) darts, coin tossing)
 - D) Betting on sports teams
 - E) Lottery (scratch cards or numbers)

- F) Bingo
- G) Dice games
- H) Gambling machines (slots, video poker)
- I) Horse racing
- J) Online gambling
- K) Gambled (bet) in some other way
- C18. During the past 12 months, how many times have you gambled (bet) for money or valuables in any way?

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- A) I have not gambled (bet) in the past 12 months
- B) 1 time
- C) 2 or 3 times
- D) 4 to 9 times
- 10 or more times

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

		0 Times	1 Time	2 - 3 Times	4 Or More Times
C19.	sold drugs to someone?	A	В	С	D
C20.	been in a physical fight?	A	В	С	D
C21.	been in a physical fight between groups of kids?	A	В	C	D
C22.	used any weapon to threaten or bully someone?	A	В	С	D

- C23. 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
- C24. 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
 - 4 or more days

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

		0 Days	1 Day	2 Or More Days
C25.	a gun?	A	В	С
C26.	any other weapon (such as a knife or club)?	A	В	С
C27.	any weapon (gun, knife, or club) on school property?	A	В	C

- C28. During the past 12 months, did you ever seriously consider attempting suicide?
 - A) No
 - B) Yes
- C29. During the past 12 months, did you make a plan about how you would attempt suicide?
 - A) No
 - B) Yes
- C30. During the past 12 months, how many times did you actually attempt suicide?
 - A) 0 times
 - B) 1 time
 - C) 2 or 3 times
 - D) 4 or more times

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- C31. If you attempted suicide during the past 12 months, did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?
 - I did not attempt suicide in the past 12 months
 - B) No
 - C) Yes
- C32. Have you ever been forced to have sexual intercourse when you did not want to?
 - A) No
 - B) Yes