

## 2014 MISSOURI STUDENT SURVEY

### INTRODUCTION

Thank you for agreeing to participate in this study. The following questions are about your thoughts and feelings on a number of subjects about which we would like to know your opinions. Completing this survey is completely voluntary, which means you can stop at any time and you don't have to answer any questions that you don't want to. There are no right or wrong answers and everything you say is completely anonymous. That means that no one will ever know your individual responses. Please answer the survey as thoughtfully and honestly as possible. Thank you very much for being an important part of this project!

- ❖ Please answer all of the questions by marking one of the answer spaces.
- ❖ Select the answer that comes closest to how you feel.
- ❖ If you are not sure what a question means, please ask the survey administrator to explain.
- ❖ If any of the questions make you uncomfortable, you don't have to answer them.: just leave them blank.

After you have read this page, to begin the survey, please enter the code for your school:

In order to help us calculate the most accurate statewide numbers, some classrooms have been assigned an ID number. This does not identify you in any way; your answers are still anonymous.

#### First, we'd like to know a little about you.

1. How old are you?  
 10 or younger  11  12  13  14  15  16  17  18  19 or older
2. What grade are you in?  
 6<sup>th</sup>  7<sup>th</sup>  8<sup>th</sup>  9<sup>th</sup>  10<sup>th</sup>  11<sup>th</sup>  12<sup>th</sup>
3. Are you male or female?  
 Male  Female
4. Are you Hispanic or Latino?  
 Yes, I am Hispanic or Latino  No, I am not Hispanic or Latino
5. Which of the following best describes you? (Please check all that apply)  
 African American or Black  
 American Indian or Alaskan Native  
 Asian  
 Native Hawaiian or other Pacific Islander  
 White  
 Other (specify \_\_\_\_\_)
6. What is the language you speak most often at home?  
 English  Spanish  Other
7. How much education does your father have?  
 Did not finish High School  Graduated from High School  
 Some education after High School  Graduated from College  
 Not Sure
8. How much education does your mother have?  
 Did not finish High School  Graduated from High School  
 Some education after High School  Graduated from College  
 Not Sure

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9. Have either of your parents served in the military (Army, Navy, Marines, Air Force, National Guard, or Reserves)? Check all that apply.
- No
  - Yes, my mother is CURRENTLY in the military
  - Yes, my mother WAS in the military but is now a veteran
  - Yes, my father is CURRENTLY in the military
  - Yes, my father WAS in the military but is now a veteran
10. Do you live with your mother and father?
- Yes, I live with both of my parents
  - No, I live with my mother only
  - No, I live with my father only
  - No, I live with a relative (e.g., grandma, uncle)
  - No, I live with someone who is not a relative
11. What are your plans after you graduate high school?
- Go to College
  - Go to a Technical Schools
  - Get a Job
  - Join the Military
  - Don't Know
  - Other (please specify)

## Your School

12. What were your average grades last school year?
- Mostly A's
  - Mostly B's
  - Mostly C's
  - Mostly D's
  - Mostly F's
13. During the past 30 days, how many whole days have you missed school because you skipped or cut?
- 0 days
  - 1 or 2 days
  - 3 to 5 days
  - 6 to 9 days
  - 10 or more days
14. During the past 30 days, on how many days did you not go to school because you felt you would be unsafe at school or on your way to or from school?
- 0 days
  - 1 day
  - 2 or 3 days
  - 4 or 5 days
  - 6 or more days
15. I feel safe at school.
- Strongly disagree
  - Disagree
  - Agree
  - Strongly agree
16. I feel safe going to or from school.
- Strongly disagree
  - Disagree
  - Agree
  - Strongly agree
17. How many times in the past 3 months have you been suspended from school?
- Never
  - 1-2
  - 3-5
  - 6-9
  - 10-19
  - 20-29
  - 30-39
  - 40 or more

The following sentences ask about your feelings about school. Please answer strongly disagree if you really don't agree with the question, disagree if you sort of disagree, agree if you sort of agree, and strongly agree if you really agree with the sentence

- 18.a. My teacher(s) notice(s) when I am doing a good job and let me know about it.
- Strongly disagree
  - Disagree
  - Agree
  - Strongly agree
- b. The school lets my parents know when I have done something well.
- Strongly disagree
  - Disagree
  - Agree
  - Strongly agree
- c. Rules are enforced fairly.
- Strongly disagree
  - Disagree
  - Agree
  - Strongly agree

d. Students of all races and ethnic groups are treated equally.

- Strongly disagree       Disagree       Agree       Strongly agree

## Your Friends

19. During the past year (12 months), how many of the friends you feel closest to have

a. smoked cigarettes?

- 0 friends       1 friend       2 friends       3 friends       4 or more friends

b. had a drink of any type of alcohol?

- 0 friends       1 friend       2 friends       3 friends       4 or more friends

c. smoked marijuana?

- 0 friends       1 friend       2 friends       3 friends       4 or more friends

d. used any other illegal drugs such as cocaine, LSD (acid), methamphetamine (meth.), or club drugs (molly, ecstasy, roofies)?

- 0 friends       1 friend       2 friends       3 friends       4 or more friends

e. carried a gun (not including use of a gun for hunting or sport)?

- 0 friends       1 friend       2 friends       3 friends       4 or more friends

20. How wrong do your friends feel it would be for you to

a. have one or two drinks of an alcoholic beverage nearly every day?

- Not wrong at all       A little bit wrong       Wrong       Very wrong

b. smoke tobacco?

- Not wrong at all       A little bit wrong       Wrong       Very wrong

c. smoke marijuana?

- Not wrong at all       A little bit wrong       Wrong       Very wrong

d. use prescription drugs not prescribed to you?

- Not wrong at all       A little bit wrong       Wrong       Very wrong

## Your Neighborhood

21.

a. If a kid smoked cigarettes in your neighborhood, or the area around where you live, would he or she be caught by the police?

- No!       no       yes       Yes!

b. If a kid drank some beer, wine, or hard liquor (for example, vodka, whiskey, or gin) in your neighborhood, or the area around where you live, would he or she be caught by the police?

- No!       no       yes       Yes!

c. If a kid smoked marijuana in your neighborhood, or the area around where you live, would he or she be caught by the police?

- No!       no       yes       Yes!

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- d. If a kid was found carrying a gun in your neighborhood, or the area around where you live, would he or she be caught by the police?
- No!       no       yes       Yes!

## Your Thoughts and Behaviors

**The next set of questions asks about bullying. Bullying is when 1 or more students tease, threaten, spread rumors about, hit, shove, or hurt another student over and over again. It is not bullying when 2 students of about the same strength or power argue or fight or tease each other in a friendly way.**

22. How many times in the past 3 months have YOU done the following action:
- a. Spread mean rumors or lies about other kids at school?  
 Never       1-2     3-5     6-9     10-19     20-29     30-39     40 or more
- b. Posted something online or sent a text that might embarrass or hurt another student?  
 Never       1-2     3-5     6-9     10-19     20-29     30-39     40 or more
- c. Made fun of other people?  
 Never       1-2     3-5     6-9     10-19     20-29     30-39     40 or more
- d. Hit, shoved or pushed another student and was not just fooling around?  
 Never       1-2     3-5     6-9     10-19     20-29     30-39     40 or more
23. During the past 12 months, have you ever been bullied **on school property**?  
 No     Yes
24. How many times in the past 3 months has SOMEONE ELSE done the following action TO YOU:
- a. Spread mean rumors or lies about you at school?  
 Never       1-2     3-5     6-9     10-19     20-29     30-39     40 or more
- b. Posted something online or sent a text that embarrassed or hurt you?  
 Never       1-2     3-5     6-9     10-19     20-29     30-39     40 or more
- c. Made fun of you?  
 Never       1-2     3-5     6-9     10-19     20-29     30-39     40 or more
- d. Hit, shoved or pushed you and was not just fooling around?  
 Never       1-2     3-5     6-9     10-19     20-29     30-39     40 or more
25. During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club **on school property**?  
 0 days       1 day       2 or 3 days       4 or 5 days       6 or more days
26. During the past 12 months, how many times:
- a. Were you in a physical fight?  
 0 times     1 time     2 or 3     4 or 5     6 or 7     8 or 9     10 or 11     12 or more

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- b. Were you in a physical fight in which you were injured and had to be treated by a doctor or nurse?  
 0 times    1 time    2 or 3    4 or 5    6 or 7    8 or 9    10 or 11    12 or more
- c. Has someone threatened or injured you with a weapon such as a gun, knife, or club **on school property**?  
 0 times    1 time    2 or 3    4 or 5    6 or 7    8 or 9    10 or 11    12 or more

The following sentences ask about your feelings about yourself. Please answer strongly disagree if you really don't agree with the sentence, disagree if you sort of disagree, agree if you sort of agree, and strongly agree if you really agree with the sentence.

- 27. I ignore rules that get in my way.  
 Strongly disagree    Disagree    Agree    Strongly agree
- 28. It is all right to beat up people if they start the fight.  
 Strongly disagree    Disagree    Agree    Strongly agree
- 29. It is important to be honest with your parents, even if they become upset or you get punished.  
 Strongly disagree    Disagree    Agree    Strongly agree
- 30. I do the opposite of what people tell me, just to get them mad.  
 Strongly disagree    Disagree    Agree    Strongly agree
- 31. I think it is okay to take something without asking if you can get away with it.  
 Strongly disagree    Disagree    Agree    Strongly agree
- 32. I think sometimes it is okay to cheat at school.  
 Strongly disagree    Disagree    Agree    Strongly agree
- 33. On an average school night, how many of hours of sleep do you get?  
 4 hours or Less    5 hours    6 hours    7 hours  
 8 hours    9 hours    10 or more hours
- 34. In the last 30 days how often:
  - a. were you very sad?  
 Never    Not very often    Sometimes    Often    Always
  - b. were you grouchy or irritable, or in a bad mood?  
 Never    Not very often    Sometimes    Often    Always
  - c. did you feel hopeless about the future?  
 Never    Not very often    Sometimes    Often    Always
  - d. did you feel like not eating or eating more than usual?  
 Never    Not very often    Sometimes    Often    Always
  - e. did you sleep a lot more or a lot less than usual?  
 Never    Not very often    Sometimes    Often    Always
  - f. did you have difficulty concentrating on your school work?  
 Never    Not very often    Sometimes    Often    Always
- 35. During the past 12 months, did you ever seriously consider attempting suicide?  
 No    Yes

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36. During the past 12 months, did you make a plan about how you would attempt suicide?  
 No  Yes
37. During the past 12 months, how many times did you actually attempt suicide?  
 0 times  1 time  2 or 3 times  4 or 5 times  6 or more times
38. 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?  
 No  Yes
39. Have you ever harmed yourself on purpose in a way that was deliberate but not intended as a way to take your life?  
 No  Yes

[If "no", skip to question #41, availability]

40. What did you do? (check all that apply)
- Cut, scratched or hit myself on purpose to hurt myself
  - Swallowed more medicine than a doctor told me to take to hurt myself
  - Used drugs or alcohol to hurt myself
  - Swallowed something on purpose that was not food, drink or medicine in order to hurt myself
  - Burned myself
  - Pulled my hair or eyelashes
  - Other

## Your Beliefs about Cigarettes, Alcohol, and Other Drugs

41. These questions are about how available certain things are to you.
- a. If you wanted to get some cigarettes, how easy would it be for you to get some?  
 Very easy  Sort of easy  Sort of hard  Very hard
- b. If you wanted to get some alcohol (beer, wine, brandy, and mixed drinks), how easy would it be for you to get some?  
 Very easy  Sort of easy  Sort of hard  Very hard
- c. If you wanted to get some marijuana, how easy would it be for you to get some?  
 Very easy  Sort of easy  Sort of hard  Very hard
- d. If you wanted to get any other illegal drugs such as cocaine, LSD (acid), methamphetamine (meth.), or club drugs (molly, ecstasy, roofies), how easy would it be for you to get some?  
 Very easy  Sort of easy  Sort of hard  Very hard
- e. If you wanted to get some over the counter drugs (Tylenol Cough, Dayquil, Benadryl, etc) when you were not sick, how easy would it be for you to get some?  
 Very easy  Sort of easy  Sort of hard  Very hard
- f. If you wanted to get some prescription drugs that were not prescribed to you by a doctor, how easy would it be for you to get some?  
 Very easy  Sort of easy  Sort of hard  Very hard
- g. If you wanted to get some synthetic drugs (such as K2, bath salts, plant food, Spice), how easy would it be for you to get some?  
 Very easy  Sort of easy  Sort of hard  Very hard

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42. How “cool” do you think your peers believe someone your age would be if they
- a. Smoked cigarettes?  
 Very cool       Pretty cool       A little cool       Not at all cool
  - b. Drank alcohol?  
 Very cool       Pretty cool       A little cool       Not at all cool
  - c. Smoked marijuana?  
 Very cool       Pretty cool       A little cool       Not at all cool
43. How much do you think people risk harming themselves (physically or in other ways) if they:
- a. take one or two drinks of an alcoholic beverage nearly every day?  
 No risk at all       Slight risk       Moderate risk       Great risk
  - b. have five or more drinks of an alcoholic beverage once or twice a week?  
 No risk at all       Slight risk       Moderate risk       Great risk
  - c. smoke one or more packs of cigarettes per day?  
 No risk at all       Slight risk       Moderate risk       Great risk
  - d. smoke marijuana once or twice a week?  
 No risk at all       Slight risk       Moderate risk       Great risk
  - e. use any other illegal drugs such as cocaine, LSD (acid), methamphetamine (meth.), or club drugs (molly, ecstasy, roofies)?  
 No risk at all       Slight risk       Moderate risk       Great risk
  - f. use synthetic drugs (K2, bath salts, plant food, Spice)?  
 No risk at all       Slight risk       Moderate risk       Great risk
  - g. use Cold/Cough Medicines (Coricidin Cough, Sudafed, TheraFlu, Tylenol Cough) or other over-the-counter medicines to get high?  
 No risk at all       Slight risk       Moderate risk       Great risk
  - h. use prescription drugs that have not been prescribed to them?  
 No risk at all       Slight risk       Moderate risk       Great risk
44. How do you feel about someone your age having one or two drinks of an alcoholic beverage nearly every day?  
 Neither Approve Nor Disapprove     Somewhat Disapprove     Strongly Disapprove     Don't Know/ Can't Say
45. How wrong do you feel it would be for you to:
- a. smoke cigarettes?  
 Not wrong at all       A little bit wrong       Wrong       Very wrong
  - b. have a drink of any type of alcohol?  
 Not wrong at all       A little bit wrong       Wrong       Very wrong
  - c. take one or two drinks of an alcoholic beverage nearly every day?  
 Not wrong at all       A little bit wrong       Wrong       Very wrong

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- d. have five or more drinks of an alcoholic beverage once or twice a week?  
 Not wrong at all       A little bit wrong       Wrong       Very wrong
- e. use marijuana?  
 Not wrong at all       A little bit wrong       Wrong       Very wrong
- f. smoke marijuana once or twice a week?  
 Not wrong at all       A little bit wrong       Wrong       Very wrong
- g. use any other illegal drugs such as cocaine, LSD (acid), methamphetamine (meth.), or club drugs (molly, ecstasy, roofies)?  
 Not wrong at all       A little bit wrong       Wrong       Very wrong
- h. use Cold/Cough Medicines (Coricidin Cough, Sudafed, TheraFlu, Tylenol Cough) or other over-the-counter medicines to get high?  
 Not wrong at all       A little bit wrong       Wrong       Very wrong
- i. use prescription drugs that have not been prescribed to you by a doctor?  
 Not wrong at all       A little bit wrong       Wrong       Very wrong
- j. use synthetic drugs (K2, bath salts, plant food, Spice)?  
 Not wrong at all       A little bit wrong       Wrong       Very wrong

## Cigarettes, Alcohol, and Other Drugs

These next questions are about your use of tobacco, alcohol, and other drugs. Remember your answers are completely anonymous.

### 46. CIGARETTES

- a. At any time during the next year do you think you will smoke a cigarette?  
 Definitely not       Probably not       Probably yes       Definitely yes
- b. If one of your best friends offered you a cigarette, would you smoke it?  
 Definitely not       Probably not       Probably yes       Definitely yes
- c. Have you *ever* smoked part or all of a cigarette?  
 No       Yes

[Note: if student answers "No" student will skip to questions #47(chewing tobacco)]

- d. How old were you the *first time* you smoked part or all of a cigarette?  
 8 or Younger       9       10       11       12       13  
 14       15       16       17       18       19 or older
- e. What is your *best estimate* of the number of days you smoked part or all of a cigarette during the past 30 days?  
 0 days  
 1 or 2 days  
 3 to 5 days  
 6 to 9 days  
 10 to 19 days  
 20 to 29 days  
 All 30 days

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[Note: if student answers "0 days" student will skip to questions #47 (chewing tobacco)]

- f. Have you ever tried to *quit* smoking cigarettes?  
 Yes and I quit                       Yes, but I still smoke                       No, I never tried
- g. On the day or days you smoked cigarettes during the past 30 days, how many cigarettes did you smoke per day, on average?  
 Part of one cigarette per day  
 1 cigarette per day  
 2 to 5 cigarettes per day  
 6 to 15 cigarettes per day (about 1/2 pack)  
 16 to 25 cigarettes per day (about 1 pack)  
 26 to 35 cigarettes per day (about 1 1/2 packs)  
 More than 35 cigarettes per day (about 2 packs or more)
- h. What is your *best estimate* of the number of days you smoked part or all of a cigarette *on school property* during the past 30 days?  
 0 days  
 1 or 2 days  
 3 to 5 days  
 6 to 9 days  
 10 to 19 days  
 20 to 29 days  
 All 30 days
47. **CHEWING TOBACCO.** These next questions are about your use of *chewing tobacco* and *snuff*, sometimes called *dip*.  
a. Have you *ever* used chewing tobacco such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen or snuff (dip), even once?  
 No                       Yes

[Note: if respondent answers "No", student will skip to question #48 (electronic cigarettes)]

- b. What is your *best estimate* of the number of days you used chewing tobacco or snuff during the past 30 days?  
 0 days  
 1 or 2 days  
 3 to 5 days  
 6 to 9 days  
 10 to 19 days  
 20 to 29 days  
 All 30 days
48. **ELECTRONIC CIGARETTES.** These next questions are about your use of *electronic cigarettes* or *e-cigs*.  
a. Have you *ever* used electronic cigarettes (e-cigs), even once?  
 No                       Yes

[Note: if respondent answers "No", student will skip to question #49 (hookah)]

- b. What is your *best estimate* of the number of days you used electronic cigarettes (e-cigs) during the past 30 days?  
 0 days  
 1 or 2 days  
 3 to 5 days

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- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

49. **Hookah.** These next questions are about your use of *hookahs* or *water pipes*.

- a. Have you ever used hookahs (water pipes), even once?
- No
  - Yes

[Note: if respondent answers "No", student will skip to question #50 (alcohol)]

b. What is your *best estimate* of the number of days you used hookahs (water pipes) during the past 30 days?

- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

50. **ALCOHOL.** The next questions are about alcohol, such as beer, wine, brandy, and mixed drinks. We are not asking about times when you only had a sip or two from a drink or drank only for religious purposes.

Throughout these questions, by a "drink", we mean a can or bottle of beer, a glass of wine or a wine cooler, a shot of liquor, or a mixed drink with liquor in it.

- a. If one of your best friends offered you alcohol to drink, would you drink it?
- Definitely not
  - Probably not
  - Probably yes
  - Definitely yes
- b. During the past 30 days, on how many days did you ride in a car or other vehicle driven by someone who had been drinking alcohol?
- 0 days
  - 1 or 2 days
  - 3 to 5 days
  - 6 to 9 days
  - 10 to 19 days
  - 20 to 29 days
  - All 30 days
- c. Have you ever, even once, had a drink of any type of alcohol. Please do not include times when you only had a sip or two from a drink or if you drank alcohol only for religious purposes.
- No
  - Yes

[Note: if ever used question is answered "No", student will skip to question #51 (marijuana)]

- d. Think about the *first time* you had a drink of alcohol. How old were you the *first time* you had a drink of an alcoholic beverage? Please do not include any time when you only had a sip or two from a drink.
- 8 or Younger
  - 9
  - 10
  - 11
  - 12
  - 13
  - 14
  - 15
  - 16
  - 17
  - 18
  - 19 or older
- e. During your life, how many times have you had at least one drink of alcohol?
- 0 times
  - 1-2 times

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- 3-5 times
- 6-9 times
- 10-19 times
- 20-39 times
- 40 or more times

- f. What is your *best estimate* of the number of days you drank alcohol during the past 30 days?
- 0 days
  - 1 or 2 days
  - 3 to 5 days
  - 6 to 9 days
  - 10 to 19 days
  - 20 to 29 days
  - All 30 days

[Note: if student answers "0 days", student will skip to question #51 (marijuana)]

- g. Think back over the last two weeks. How many times have you had five or more alcoholic drinks in a row?
- None
  - Once
  - Twice
  - 3-5 times
  - 6-9 times
  - 10 or more times
- h. On the days you drink alcohol, about how many drinks do you have on average?
- Less than one
  - One
  - Two
  - Three
  - Four
  - Five
  - Six or more
- i. What is your *best estimate* of the number of days you drank alcohol *on school property* during the past 30 days?
- 0 days
  - 1 or 2 days
  - 3 to 5 days
  - 6 to 9 days
  - 10 to 19 days
  - 20 to 29 days
  - All 30 days
- j. During the past 30 days, on how many days did you drive a car or other vehicle when you had been drinking alcohol?
- 0 days
  - 1 or 2 days
  - 3 to 5 days
  - 6 to 9 days
  - 10 to 19 days
  - 20 to 29 days
  - All 30 days

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51. **MARIJUANA.** The next questions are about marijuana, also called weed, pot or grass. Marijuana is usually smoked, either in cigarettes, called joints, or in a pipe.

- a. If one of your best friends offered you marijuana, would you use it?  
 Definitely not                       Probably not                       Probably yes                       Definitely yes
- b. Have you ever, even once, used marijuana?  
 No                       Yes

[Note: If student answers "No" to "ever used" question, student will skip to question #52 (inhalants)]

- c. How old were you the *first time* you used marijuana ?  
 8 or Younger                       9                       10                       11                       12                       13  
 14                       15                       16                       17                       18                       19 or older
- d. What is your *best estimate* of the number of days you used marijuana during the past 30 days?  
 0 days  
 1 or 2 days  
 3 to 5 days  
 6 to 9 days  
 10 to 19 days  
 20 to 29 days  
 All 30 days

[Note: If student answers "0 days" student will skip to question #52 (inhalants)]

- e. What is your *best estimate* of the number of days you used marijuana *on school property* during the past 30 days?  
 0 days  
 1 or 2 days  
 3 to 5 days  
 6 to 9 days  
 10 to 19 days  
 20 to 29 days  
 All 30 days

52. **INHALANTS.** The next questions are about inhalants, which are liquids, sprays, and gases that some people sniff or inhale. Inhalants include things like gas in aerosol cans, gasoline, white out, glue, and marking pens.

- a. Have you ever, even once, used inhalants?  
 No                       Yes

[If student answers "No" to "ever used" question, student will skip to question #53 (prescription drugs)]

- b. How old were you the *first time* you used inhalants?  
 8 or Younger                       9                       10                       11                       12                       13  
 14                       15                       16                       17                       18                       19 or older
- c. What is your *best estimate* of the number of days you used inhalants during the past 30 days?  
 0 days  
 1 or 2 days  
 3 to 5 days  
 6 to 9 days

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- 10 to 19 days
- 20 to 29 days
- All 30 days

### 53. PRESCRIPTION DRUGS

- a. Have you ever, even once, used prescription medication that was not prescribed for you by a doctor? (not including "over-the-counter" medications)
- No
  - Yes

[If "No" student will skip to question #54 (over-the-counter)]

- b. What is your *best estimate* of the number of days in the past 30 days you used any prescription medication that was not prescribed for you by a doctor?
- 0 days
  - 1 or 2 days
  - 3 to 5 days
  - 6 to 9 days
  - 10 to 19 days
  - 20 to 29 days
  - All 30 days

### 54. OVER-THE-COUNTER MEDICATIONS

- a. Have you ever, even once, use Cold/Cough Medicines (Coricidin Cough, Sudafed, TheraFlu, Tylenol Cough) or other over-the-counter medicines to get high?
- No
  - Yes

[If "No" student will skip to question #55 (synthetic drugs)]

- b. What is your *best estimate* of the number of days in the past 30 days you used Cold/Cough Medicines (Coricidin Cough, Sudafed, TheraFlu, Tylenol Cough) or other over-the-counter medicines to get high?
- 0 days
  - 1 or 2 days
  - 3 to 5 days
  - 6 to 9 days
  - 10 to 19 days
  - 20 to 29 days
  - All 30 days

### 55. SYNTHETIC DRUGS

- a. Have you ever, even once, used a synthetic drug (K2, bath salts, plant food, Spice)?
- No
  - Yes

[If "No" student will skip to question #56 (other drugs)]

- b. What is your *best estimate* of the number of days in the past 30 days you used synthetic drug?
- 0 days
  - 1 or 2 days
  - 3 to 5 days
  - 6 to 9 days
  - 10 to 19 days
  - 20 to 29 days
  - All 30 days

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### 56. OTHER DRUGS.

- a. Have you ever, even once, used any form of cocaine?  
 No  Yes
- b. Have you ever, even once, used heroin (also called smack or H)?  
 No  Yes
- c. Have you ever, even once, used hallucinogens such as LSD (acid), PCP (angel dust), Magic Mushrooms, Mescaline, Peyote, or Psilocybin? .  
 No  Yes
- d. Have you ever, even once, used methamphetamine (known as meth, crank, crystal, or ice)?  
 No  Yes
- e. Have you ever, even once, used Dumolan (also known as "dums" or "dumbos")?  
 No  Yes
- f. Have you ever, even once, used any type of club drug including MDMA (molly, ecstasy, X, E), GHB (G), Rohypnol (roofie), and Ketamine (Special K)?  
 No  Yes
- g. Have you ever, even once, used any type of steroid that was not prescribed for you?  
 No  Yes

## Your Family

57.

- a. My parents notice when I am doing a good job and let me know about it.  
 Strongly disagree  Disagree  Agree  Strongly agree
- b. My parents ask me what I think before most family decisions affecting me are made.  
 Strongly disagree  Disagree  Agree  Strongly agree
- c. If I had a personal problem, I could ask my mom or dad for help.  
 Strongly disagree  Disagree  Agree  Strongly agree
- d. My parents give me lots of chances to do fun things with them.  
 Strongly disagree  Disagree  Agree  Strongly agree
- e. My parents ask if I have gotten my homework done.  
 Strongly disagree  Disagree  Agree  Strongly agree

58.

- a. How wrong do your parents feel it would be for you to smoke tobacco?  
 Not wrong at all  A little bit wrong  Wrong  Very wrong
- b. How wrong do your parents feel it would be for you to have a drink of any type of alcohol?  
 Not wrong at all  A little bit wrong  Wrong  Very wrong
- c. How wrong do your parents feel it would be for you to take one or two drinks of an alcoholic beverage nearly every day?  
 Not wrong at all  A little bit wrong  Wrong  Very wrong

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- d. How wrong do your parents feel it would be for you to use Cold/Cough Medicines (Coricidin Cough, Sudafed, TheraFlu, Tylenol Cough) or other over-the-counter medicines to get high?  
 Not wrong at all       A little bit wrong       Wrong       Very wrong
- e. How wrong do your parents feel it would be for you to smoke marijuana?  
 Not wrong at all       A little bit wrong       Wrong       Very wrong
- f. How wrong do your parents feel it would be for you to smoke marijuana once or twice a week?  
 Not wrong at all       A little bit wrong       Wrong       Very wrong
- g. How wrong do your parents feel it would be for you to use synthetic drugs (K2, bath salts, plant food, Spice)?  
 Not wrong at all       A little bit wrong       Wrong       Very wrong
- h. How wrong do your parents feel it would be for you to use prescription drugs not prescribed to you?  
 Not wrong at all       A little bit wrong       Wrong       Very wrong
59. Does anyone in your house smoke cigarettes or cigars (not counting yourself)?  
 No       Yes
60. Does anyone in your house use marijuana (not counting yourself)?  
 No       Yes
61. Has anyone who lives in your home, other than yourself ever had an alcohol or drug problem?  
 No       Yes
62. How often do people in your family insult or yell at each other?  
 Never    Not very often    Some of the time    Most of the time    All of the time

## Honesty

63. How honest were you in filling out this survey?  
 I was not honest at all  
 I was honest once in a while  
 I was honest some of the time  
 I was honest pretty much all of the time  
 I was honest all of the time

Thanks very much for completing this survey!!!