

## ◆ Module A ◆

## Middle School Questionnaire

2010–2011

This survey asks about your behavior, experiences, and attitudes related to health, well-being, and schooling. It includes questions about use of alcohol, tobacco, and other drugs; bullying and violence; and what you do at school and how you feel about it.

**You do not have to answer these questions**, but your answers will be very helpful in improving school and health programs. **You will be able to answer** whether or not you have done or experienced any of these things.

**Please do not write your name on this form or the answer sheet. Do not identify yourself in any other way.**

Please mark all of your answers on the answer sheet. Fill in the bubbles neatly with a **#2 pencil**. Do not write on the questionnaire. Mark only one answer unless told to *“Mark all that apply.”*

This survey asks about things you may have done during different periods of time, such as during your **lifetime** (for example, did you ever do something?), or the past **12 months**, or **30 days**. Each provides different information. Please pay careful attention to these time periods.

**Thank you for taking this survey!**

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**Begin by writing your school's name at the top of the answer sheet.**

- A1. Fill in the bubble for the letter "M."  
A2. Fill in the bubble for the number "4."

**Next, we would like some background information about you.**

- A3. How old are you?  
A) 10 years old or younger  
B) 11 years old  
C) 12 years old  
D) 13 years old  
E) 14 years old  
F) 15 years old  
G) 16 years old  
H) 17 years old  
I) 18 years old or older
- A4. What is your sex?  
A) Male  
B) Female
- A5. What grade are you in?  
A) 6th grade  
B) 7th grade  
C) 8th grade  
D) 9th grade  
E) 10th grade  
F) 11th grade  
G) 12th grade  
H) Other grade  
I) Ungraded
- A6. Are you of Hispanic or Latino origin?  
A) No  
B) Yes
- A7. What is your race?  
A) American Indian or Alaska Native  
B) Asian  
C) Black or African American  
D) Native Hawaiian or Pacific Islander  
E) White  
F) Mixed (two or more) races

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A8. If you are Asian or Pacific Islander, which groups best describe you? (*Mark all that apply.*) If you are **not** of Asian/Pacific Islander background, mark "A. Does not apply."

- |   |  |
|---|--|
| A) Does not apply; I am not Asian or Pacific Islander | H) Korean  |
| B) Asian Indian                                       | I) Laotian   |
| C) Cambodian  | J) Vietnamese  |
| D) Chinese  | K) Native Hawaiian, Guamanian, Samoan, Tahitian, or other Pacific Islander |
| E) Filipino   | L) Other Asian   |
| F) Hmong  |  |
| G) Japanese   |  |

A9. In the past three years, were you part of the Migrant Education Program or did your family move to find work in agriculture?

- A) Yes
- B) No
- C) Don't know

**Next, please mark on your answer sheet how TRUE you feel each of the following statements are about your SCHOOL and things you might do there.**

*How strongly do you agree or disagree with the following statements about your school?*

	Strongly Disagree	Disagree	Neither Disagree Nor Agree	Agree	Strongly Agree
A10. I feel close to people at this school.	A	B	C	D	E
A11. I am happy to be at this school.	A	B	C	D	E
A12. I feel like I am part of this school.	A	B	C	D	E
A13. The teachers at this school treat students fairly.	A	B	C	D	E
A14. I feel safe in my school.	A	B	C	D	E

*At my school, there is a teacher or some other adult ...*

	Not At All True	A Little True	Pretty Much True	Very Much True
A15. who really cares about me.	A	B	C	D
A16. who tells me when I do a good job.	A	B	C	D
A17. who notices when I'm not there.	A	B	C	D
A18. who always wants me to do my best.	A	B	C	D
A19. who listens to me when I have something to say.	A	B	C	D
A20. who believes that I will be a success.	A	B	C	D

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*At school, ...*

	<u>Not at All True</u>	<u>A Little True</u>	<u>Pretty Much True</u>	<u>Very Much True</u>
A21. I do interesting activities.	A	B	C	D
A22. I help decide things like class activities or rules.	A	B	C	D
A23. I do things that make a difference.	A	B	C	D

**The next statements are about what might occur outside your school or home, such as in your NEIGHBORHOOD, COMMUNITY, or with an ADULT other than your parents or guardian.**

*Outside of my home and school, there is an adult ...*

	<u>Not At All True</u>	<u>A Little True</u>	<u>Pretty Much True</u>	<u>Very Much True</u>
A24. who really cares about me.	A	B	C	D
A25. who tells me when I do a good job.	A	B	C	D
A26. who notices when I am upset about something.	A	B	C	D
A27. who believes that I will be a success.	A	B	C	D
A28. who always wants me to do my best.	A	B	C	D
A29. whom I trust.	A	B	C	D

*Outside of my home and school, ...*

	<u>Not at All True</u>	<u>A Little True</u>	<u>Pretty Much True</u>	<u>Very Much True</u>
A30. I am part of clubs, sports teams, church/temple, or other group activities.	A	B	C	D
A31. I am involved in music, art, literature, sports, or a hobby.	A	B	C	D
A32. I help other people.	A	B	C	D
A33. Did you eat breakfast today?				
A) No				
B) Yes				

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The next questions ask about the use of alcohol, tobacco, marijuana, and other drugs *without a doctor’s order* (prescription for medical reasons).

Keep the following definitions in mind.

- **One drink of ALCOHOL**, or alcoholic drink (beverage), means one regular size can/bottle of beer or wine cooler, one glass of wine, one mixed drink, or one shot glass of liquor.
- Questions about alcohol do **not** include drinking a few sips of wine for religious purposes.
- **DRUG** means any substance, including pills and medications, used to get “high” (“loaded”, “stoned”, or “wasted”) other than alcohol or tobacco.

During your life, how many times have you used or tried ...

		Number of Times					
		0 times	1 time	2 times	3 times	4–6 times	7 or more times
A34.	a cigarette, even one or two puffs?	A	B	C	D	E	F
A35.	a whole cigarette?	A	B	C	D	E	F
A36.	smokeless tobacco (dip, chew or snuff such as Redman™, Skoal™, or Beechnut™)?	A	B	C	D	E	F
A37.	one full drink of alcohol (such as a can of beer, glass of wine, wine cooler, or shot of liquor)?	A	B	C	D	E	F
A38.	marijuana (pot, weed, grass, hash, bud)?	A	B	C	D	E	F
A39.	inhalants (things you sniff, huff, or breathe to get “high” such as glue, paint, aerosol sprays, gasoline, poppers, gases)?	A	B	C	D	E	F
A40.	derbisol (DB, derbs, or dirt)?	A	B	C	D	E	F
A41.	any other illegal drug or pill to get “high”?	A	B	C	D	E	F

During your life, how many times have you been ...

		Number of Times					
		0 times	1 time	2 times	3 times	4–6 times	7 or more times
A42.	very drunk or sick after drinking alcohol?	A	B	C	D	E	F
A43.	“high” (loaded, stoned, or wasted) from using drugs?	A	B	C	D	E	F
A44.	drunk on alcohol or “high” on drugs on school property?	A	B	C	D	E	F

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

	Never	Years of Age									
		10 or under	11	12	13	14	15	16	17	18 or over	
A45. Had a drink of an alcoholic beverage (other than a sip or two)	A	B	C	D	E	F	G	H	I	J	
A46. Smoked part or all of a cigarette	A	B	C	D	E	F	G	H	I	J	
A47. Used smokeless tobacco or other tobacco products	A	B	C	D	E	F	G	H	I	J	
A48. Used marijuana or hashish	A	B	C	D	E	F	G	H	I	J	
A49. Used any other illegal drug or pill to get "high"	A	B	C	D	E	F	G	H	I	J	

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

	0 days	1 day	2 days	3-9 days	10-19 days	20-30 days
A50. cigarettes?	A	B	C	D	E	F
A51. smokeless tobacco (dip, chew or snuff)?	A	B	C	D	E	F
A52. at least one drink of alcohol?	A	B	C	D	E	F
A53. five or more drinks of alcohol in a row, that is, within a couple of hours?	A	B	C	D	E	F
A54. marijuana (pot, weed, grass, hash, bud)?	A	B	C	D	E	F
A55. inhalants (things you sniff, huff, or breathe to get "high" such as glue, paint, aerosol sprays, gasoline, poppers, gases)?	A	B	C	D	E	F
A56. any other illegal drug or pill to get "high"?	A	B	C	D	E	F

*During the past 30 days, on how many days on school property did you ...*

	0 days	1 day	2 days	3-9 days	10-19 days	20-30 days
A57. smoke cigarettes?	A	B	C	D	E	F
A58. have at least one drink of alcohol?	A	B	C	D	E	F
A59. smoke marijuana?	A	B	C	D	E	F
A60. use any other illegal drug or pill to get "high"?	A	B	C	D	E	F

*During the past 12 months, ...*

	No	Yes
A61. have you talked with at least one of your parents [or guardians] about the dangers of tobacco, alcohol, or drug use?	A	B
A62. have you heard, read, or watched any messages about not using alcohol, tobacco, or drugs?	A	B

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A63. How do you like to drink alcohol?

- A) I don't drink alcohol
- B) Just a sip or two
- C) Enough to feel it a little
- D) Enough to feel it moderately
- E) Until I feel it a lot or get really drunk

*How much do people risk harming themselves physically and in other ways when they do the following?*

	Great	How Much Risk or Harm		None
		Moderate	Slight	
A64. Smoke cigarettes occasionally	A	B	C	D
A65. Smoke 1–2 packs of cigarettes each day	A	B	C	D
A66. Drink alcohol occasionally	A	B	C	D
A67. Have five or more drinks of an alcoholic beverage once or twice a week	A	B	C	D
A68. Smoke marijuana occasionally	A	B	C	D
A69. Smoke marijuana once or twice a week	A	B	C	D

*How difficult is it for students in your grade to get any of the following substances if they really want them?*

	Very Difficult	Fairly Difficult	Fairly Easy	Very Easy	Don't Know
	A70. Cigarettes				
A71. Alcohol	A	B	C	D	E
A72. Marijuana	A	B	C	D	E
	A	B	C	D	E

*Think about a group of 100 students (about three classrooms) in your grade.*

*About how many students have done the following?*

	Number of Students										
	0 (none)	10	20	30	40 (half)	50	60	70	80	90	100 (all)
A73. Smoke cigarettes at least once a month	A	B	C	D	E	F	G	H	I	J	K
A74. Ever tried marijuana	A	B	C	D	E	F	G	H	I	J	K

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

	Neither Approve Nor Disapprove	Somewhat Disapprove	Strongly Disapprove
	A75. Smoking one or more packs of cigarettes a day	A	B
A76. Having one or two drinks of any alcoholic beverage nearly every day	A	B	C
A77. Trying marijuana or hashish once or twice	A	B	C
A78. Using marijuana once a month or more	A	B	C
A79. Carry a weapon to school	A	B	C

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- A80. How do you think your close friends would feel about your smoking one or more packs of cigarettes a day?
- A) Neither approve nor disapprove
  - B) Somewhat disapprove
  - C) Strongly disapprove
- A81. In your life, how many times have you ridden in a car driven by someone who had been drinking alcohol?
- A) Never
  - B) 1 time
  - C) 2 times
  - D) 3 to 6 times
  - E) 7 or more times

**Next are questions about violence, safety, harassment, and bullying.**

*During the past 12 months, how many times **on school property** have you ...*

	<u>0 times</u>	<u>1 time</u>	<u>2 to 3 times</u>	<u>4 or more</u>
A82. been pushed, shoved, slapped, hit, or kicked by someone who wasn't just kidding around?	A	B	C	D
A83. been afraid of being beaten up?	A	B	C	D
A84. been in a physical fight?	A	B	C	D
A85. had mean rumors or lies spread about you?	A	B	C	D
A86. had sexual jokes, comments, or gestures made to you?	A	B	C	D
A87. been made fun of because of your looks or the way you talk?	A	B	C	D
A88. had your property stolen or deliberately damaged, such as your car, clothing, or books?	A	B	C	D
A89. been offered, sold, or given an illegal drug?	A	B	C	D
A90. damaged school property on purpose?	A	B	C	D
A91. carried a gun?	A	B	C	D
A92. carried any other weapon (such as a knife or club)?	A	B	C	D
A93. been threatened or injured with a weapon (gun, knife, club, etc.)?	A	B	C	D
A94. seen someone carrying a gun, knife, or other weapon?	A	B	C	D

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During the past **12 months**, how many times **on school property** were you harassed or bullied for any of the following reasons? [You were **bullied** if repeatedly shoved, hit, threatened, called mean names, teased in a way you didn't like, or had other unpleasant things done to you. It is **not bullying** when two students of about the same strength quarrel or fight.]

	0 times	1 time	2 to 3 times	4 or more
A95. Your race, ethnicity, or national origin	A	B	C	D
A96. Your religion	A	B	C	D
A97. Your gender (being male or female)	A	B	C	D
A98. Because you are gay or lesbian or someone thought you were	A	B	C	D
A99. A physical or mental disability	A	B	C	D
A100. Any other reason	A	B	C	D

A101. How safe do you feel when you are at school?

- A) Very safe
- B) Safe
- C) Neither safe or unsafe
- D) Unsafe
- E) Very unsafe

A102. In a normal week, how many days are you home after school for at least one hour without an adult there?

- A) Never
- B) 1 day
- C) 2 days
- D) 3 days
- E) 4 days
- F) 5 days

A103. During the past 12 months, how many times did other students spread mean rumors or lies about you on the internet (i.e. Facebook™, MySpace™, email, instant message)?

- A) 0 times (never)
- B) 1 time
- C) 2–3 times
- D) 4 or more times

A104. Do you consider yourself a member of a gang?

- A) No
- B) Yes

A105. During the past **12 months**, did your boyfriend or girlfriend ever hit, slap, or physically hurt you on purpose?

- A) Does not apply; I didn't have a boyfriend or girlfriend during the past 12 months
- B) No
- C) Yes

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- A106. During the past 12 months, did you ever feel so sad or hopeless almost everyday for two weeks or more that you stopped doing some usual activities?
- A) No  
B) Yes
- A107. During the past 12 months, how would you describe the grades you mostly received in school?
- A) Mostly A's  
B) A's and B's  
C) Mostly B's  
D) B's and C's  
E) Mostly C's  
F) C's and D's  
G) Mostly D's  
H) Mostly F's
- A108. During the past 12 months, about how many times did you skip school or cut classes?
- A) 0 times  
B) 1–2 times  
C) A few times  
D) Once a month  
E) Once a week  
F) More than once a week

*During the past 12 months, how often have you bet/gambled, even casually, for money or valuables in the following ways?*

	Not at all	Less than once a month	1 to 3 times a month	Once a week or more
A109. Card or dice games (such as poker, blackjack, or craps)	A	B	C	D
A110. Personal skill games (such as pool, darts, or video games)	A	B	C	D
A111. Betting on sports	A	B	C	D
A112. Lottery (scratch cards or numbers)	A	B	C	D
A113. Bet or gambled in any other way	A	B	C	D

- A114. How many questions in this survey did you answer honestly?
- A) All of them  
B) Most of them  
C) Only some of them  
D) Hardly any

**▲ Module G ▲****Sonoma/Humboldt County CHKS Consortium Module (SCCCM) 2011-12****Please answer the following five questions under the DASM Section on the bottom of your answer sheet.**

- DASM 1. 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
- DASM 2. Where do you usually go right after school is over? (*Mark only ONE answer.*)
- A) Your home, or another home (such as a friend, relative, neighbor), with an adult there
  - B) Your home, or another home, without an adult there
  - C) A park or recreation program
  - D) A community, volunteer, or church group
  - E) Stay at school for an after-school program
  - F) Stay at school for an extra class, tutoring, or activity such as band, sports, or a club
  - G) To a job
  - H) Some other place
- DASM 3. What do you usually do after school is over? (*Mark all you do for about one hour or more.*)
- A) Do your schoolwork (homework or studying)
  - B) Get help with your schoolwork from an adult (such as a tutor)
  - C) Take private classes or lessons such as art, music, or dance
  - D) Play or practice a sport
  - E) Hang out with friends (talking, playing games, going to the mall or a movie)
  - F) Watch TV or play video games
  - G) Do religious activities or get religious instruction
  - H) Work at a job
  - I) Other

DASM 4. If your school has an after-school program, please mark whether you agree with each of the following statements. (*Mark all that are true for you.*)

- A) My school doesn't have an after-school program
- B) I don't know if my school has an after-school program
- C) I wish my school had an after-school program
- D) I don't know much about the after-school program
- E) It has activities that we usually don't have during the school day
- F) The after-school program doesn't interest me
- G) It is a safe place to be after school
- H) It helps you with schoolwork
- I) The students that attend it really like it
- J) I do not attend, but I would like to

DASM 5. In a normal school week, how many days do you usually go to your school's after-school program in the afternoon?

- A) Does not apply, my school doesn't have an after-school program
- B) 0 days
- C) 0 days, but I would like to go to an after-school program
- D) 1 day
- E) 2 days
- F) 3 days
- G) 4 days
- H) 5 days

**Please answer the following questions under Section G of your answer sheet.**

	Not At All	Not Much	Some	A Lot
G1. How much would <b>you</b> disapprove of students your own age using <u>any</u> alcohol?	A	B	C	D
G2. How much would <b>you</b> disapprove of students your own age drinking five or more drinks of alcohol in a row, that is, within a couple of hours?	A	B	C	D
G3. How much would <b>you</b> disapprove of students your own age using prescription drugs (without a doctor's order)?	A	B	C	D
G4. How much would <b>you</b> disapprove of students your own age using other illegal drugs (ecstasy, methamphetamine, etc)?	A	B	C	D

		<b>Would Strongly Disapprove</b>	<b>Would Somewhat Disapprove</b>	<b>Would Neither Disapprove Nor Approve</b>	<b>Would Approve</b>	<b>Would Strongly Approve</b>
		A	B	C	D	E
G5.	How do you think your <b>parents/guardians</b> would feel about you using cigarettes?					
G6.	How do you think your <b>parents/guardians</b> would feel about you using alcohol?					
G7.	How do you think your <b>parents/guardians</b> would feel about you using marijuana?					
G8.	How do you think your <b>parents/guardians</b> would feel about you using prescription drugs (without a doctor's order)?					
G9.	How do you think your <b>parents/guardians</b> would feel about you using other illegal drugs (ecstasy, methamphetamine, etc)?					

- G10. 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 their parents
  - E) At home without parents knowledge
  - F) From adults at friends' homes
  - G) From friends or another teenager
  - H) Get adults to buy it for them
  - I) Buy it themselves from a store (convenience store, liquor store, grocery, mini-mart, etc.)
  - J) Steal it from a store
  - K) At bars, clubs, or gambling casinos
  - L) Other
  - M) Don't know

- G11. How do most students at your school who use marijuana usually get it? (Mark all that apply.)
- A) From a friend at school
  - B) From someone who sells at school
  - C) At parties or events outside school
  - D) From a parent or other family member without their knowledge
  - E) From a parent or other family member with their knowledge
  - F) From a medical marijuana dispensary
  - G) From someone who sells marijuana outside of school (such as a “dealer”)
  - H) Don’t know
- G12. How do most students at your school who use prescription drugs (without a doctor or dentist’s order) usually get them? (Mark all that apply.)
- A) From a friend at school
  - B) From someone who sells at school
  - C) At parties or events outside school
  - D) From a parent or other family member without their knowledge
  - E) From a parent or other family member with their knowledge
  - F) Use a friend’s prescribed drugs
  - G) Purchase on-line (internet)
  - H) From someone who sells prescription drugs outside of school (such as a “dealer”)
  - I) Don’t know
- G13. How do most students at your school who use other illegal drugs (ecstasy, methamphetamine, etc.) get them?
- A) From a friend at school
  - B) From someone who sells at school
  - C) At parties or events outside school
  - D) From a parent or other family member without their knowledge
  - E) From a parent or other family member with their knowledge
  - F) Purchase on-line (internet)
  - G) From someone who sells drugs outside of school (such as a “dealer”)
  - H) Don’t know

G14. Where do most students at your school go to **use** alcohol, other drugs, and/or marijuana? (Mark all that apply.)

- A) At school during the school day
- B) At school events or activities (games, dances, etc.)
- C) At a friend’s house
- D) On the way to or from school
- E) Parks, recreational areas
- F) At parties or events outside school
- G) At home with parents knowledge
- H) At home without parents knowledge
- I) At bars or clubs
- J) Vacant buildings
- K) Other
- L) Don’t know

**Number of Times**

	<b>0</b>	<b>1</b>	<b>2-3</b>	<b>4 or more</b>
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G15. During the past 12 months how many times have you sold drugs to someone?

A	B	C	D
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G16. 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

G17. During the past 12 months, did you ever make a plan about how you would attempt suicide?

- A) No
- B) Yes

**Number of Times**

	<b>0</b>	<b>1</b>	<b>2-3</b>	<b>4 or more</b>
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G18. During the past 12 months, how many times did you actually attempt suicide?

A	B	C	D
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G19. If you have thought about, planned, or attempted suicide during the past 12 months, have you talked to a parent/guardian, counselor, or other adult about this?

- A) No
- B) Yes

G20. If your community was going to provide new activities for people your age, what would you want?

- A) Organized sports and recreation
- B) Arts, music, dance, and drama
- C) Computer, video production, photography
- D) Volunteer opportunities to help others, animals, or the environment
- E) Tutoring and mentoring
- F) Youth clubs and centers
- G) Job readiness and work internships
- H) Counseling
- I) Alcohol and drug treatment

**Number of Times**

0	1	2-3	4 or more
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G21. During the past 12 months, how many times have you been physically hurt or threatened going to or from school?

A	B	C	D
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G22. During the past 12 months, how many times have you used any weapon to threaten or bully someone?

A	B	C	D
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G23. Are there adults you feel close to who would approve of you hanging out with members of a gang?

- A) None
- B) Some
- C) Many
- D) Most or all
- E) Don't know

G24. Have you *ever* been a member of a gang?

- A) No
- B) Yes

G25. If you have *ever* been a member of a gang, how old were you when you first joined a gang?

- A) I have *never* been a member of a gang
- B) 10 years old or younger
- C) 11 years old
- D) 12 years old
- E) 13 years old
- F) 14 years old
- G) 15 years old
- H) 16 years old
- I) 17 years old or older

G26. If you have *ever* been a member of a gang, what was the main reason why you joined this gang?

- A) I have *never* been a member of a gang
- B) For fun
- C) For protection
- D) A friend was in the gang
- E) A relative was in the gang
- F) I was forced to join
- G) To get respect
- H) For money
- I) To fit in better
- J) Other reason(s)

**Number of Days**

0	1	2	3	4	5	6	7
A	B	C	D	E	F	G	H

G27. On how many of the past 7 days did you exercise or do physical activity for at least 20 minutes that made you sweat and breathe hard? (For example, basketball, soccer, running, swimming laps, fast bicycling, fast dancing or similar aerobic activities.)

**Number of Times**

0	1	2	3	4	5 or more
A	B	C	D	E	F

G28. During the past 24 hours (yesterday) how many times did you drink soda pop?

G29. During the past 24 hours (yesterday) how many times did you eat fruit? (Do not count fruit juice)

G30. During the past 24 hours (yesterday) how many times did you eat vegetables? (Include salads and non-fried potatoes)

**Number of Days**

0	1	2	3	4	5
A	B	C	D	E	F

G31. In an average week, on how many days do you have physical activity in your physical education class (PE or gym)?

I do not take PE	Less than 10 min	10-20 min	21-30 min	More than 30 min
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A	B	C	D	E
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G32. During an average physical education (PE) class, how many minutes do you spend actually exercising or playing sports?

G33. During the past 12 months, did you have a regular check up with a doctor when you were not sick or injured?

- A) No
- B) Yes

G34. During the past 12 months, did you visit a dentist for an examination, teeth cleaning, or dental work?

- A) No
- B) Yes

If you attend high school in the following districts: **Cloverdale, Cotati-Rohnert Park, Healdsburg, Petaluma, West Sonoma County or Windsor**, please answer the following 5 questions.

If you do not attend high school in these districts, you are finished with this survey.  
Thank you for participating.

**Project Success**

Which of the following Project Success (PS) Groups or activities have you participated in at your school?

	Yes	No	I don't know
G35. Project Success groups	A	B	C
G36. Prevention Education Class/Series	A	B	C
G37. Other Project Success (PS) services (such as Operation 141, PS Student Team, Finder's Club, PS Student Club)	A	B	C

	Very Much Agree	Agree	Disagree	Very Much Disagree
G38. Adults at school notice when kids come to school under the influence of alcohol or drugs.	A	B	C	D
G39. When kids come to school under the influence of alcohol or drugs, the adults at school do something about it.	A	B	C	D

You are finished with this survey. Thank you for participating.