2014 MACON COUNTY YOUTH RISK BEHAVIOR SURVEY

MIDDLE SCHOOL QUESTIONNAIRE

This survey is about health behavior. It has been developed so you can tell us what you do that may affect your health. The information you give will be used to develop better health education for young people like yourself.

DO NOT write your name on this survey. The answers you give will be kept private. No one will know what you write. Answer the questions based on what you really do.

Completing the survey is voluntary. Whether or not you answer the questions will not affect your grade in this class. If you are not comfortable answering a question, just leave it blank.

The questions that ask about your background will be used only to describe the types of students completing this survey. The information will not be used to find out your name. No names will ever be reported.

Make sure to read every question. Fill in the circles completely. When you are finished, follow the instructions of the person giving you the survey.

Thank you very much for your help.

Directions

- Use a #2 pencil only.
- Make dark marks.
- Fill in a response like this: A B D
- To change your answer, erase your old answer completely.
 - 1. 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 or older
 - 2. What is your sex?
 - A. Female
 - B. Male
 - 3. In what grade are you?
 - A. 6th grade
 - B. 7th grade
 - C. 8th grade
 - D. Ungraded or other grade
 - 4. Are you Hispanic or Latino?
 - A. Yes
 - B. No
 - 5. What is your race? (**Select one or more responses.**)
 - A. American Indian or Alaska Native
 - B. Asian
 - C. Black or African American
 - D. Native Hawaiian or Other Pacific Islander
 - E. White
 - 6. During the past 12 months, how would you describe your grades in school?
 - A. Mostly A's
 - B. Mostly B's
 - C. Mostly C's
 - D. Mostly D's
 - E. Mostly F's
 - F. None of these grades
 - G. Not sure

The next 12 questions ask about personal safety and violence-related behaviors.

- 7. How often do you wear a seat belt when **riding** in a car?
 - A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always
- 8. When you ride a **bicycle**, how often did you wear a helmet?
 - A. I do not ride a bicycle
 - B. Never wear a helmet
 - C. Rarely wear a helmet
 - D. Sometimes wear a helmet
 - E. Most of the time wear a helmet
 - F. Always wear a helmet
- 9. When you rode a **four-wheeler** during the past 12 months, how often did you wear a helmet?
 - A. I did not ride a four-wheeler during the past 12 months
 - B. Never wore a helmet
 - C. Rarely wore a helmet
 - D. Sometimes wore a helmet
 - E. Most of the time wore a helmet
 - F. Always wore a helmet
- 10. Have you ever ridden in a car driven by someone who had been drinking alcohol?
 - A. Yes
 - B. No
 - C. Not sure
- 11. Have you ever carried **a weapon** such as a gun, knife, or club?
 - A. Yes
 - B. No
- 12. During the past 12 months, did someone threaten or injure you with a weapon such as a gun, knife, or club **on school property**?
 - A. Yes
 - B. No
- 13. Have you ever been in a physical fight?
 - A. Yes
 - B. No

- 14. Have you ever been in a physical fight in which you were hurt and had to be treated by a doctor or nurse?
 - A. Yes
 - B. No
- 15. During the past 30 days, did you **not** go to school because you felt you would be unsafe at school or on your way to or from school?
 - A. Yes
 - B. No
- 16. During the past 12 months, has someone stolen or deliberately damaged your property, such as your clothing or books, **on school property**?
 - A. Yes
 - B. No
- 17. During the past 12 months, did your boyfriend or girlfriend ever hit, slap, or physically hurt you on purpose?
 - A. Yes
 - B. No
- 18. Have you ever been physically forced to have sexual intercourse when you did not want to?
 - A. Yes
 - B. No

The next 2 questions ask 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.

- 19. During the past 12 months, have you been harassed or bullied **on school property?**
 - A. Yes
 - B. No
- 20. During the past 12 months, have you ever been **electronically bullied**, such as through email, chat rooms, instant messaging, Web sites, or text messaging?
 - A. Yes
 - B. No

The next 4 questions ask about attempted suicide. Sometimes people feel so depressed about the future that they may consider attempting suicide or killing themselves.

- 21. During the past 12 months, did you ever feel so sad or hopeless almost every day for **two** weeks or more in a row that you stopped doing some usual activities?
 - A. Yes
 - B. No
- 22. Have you ever **seriously** thought about killing yourself?
 - A. Yes
 - B. No
- 23. Have you ever made a plan about how you would kill yourself?
 - A. Yes
 - B. No
- 24. When you feel sad, empty, hopeless, angry, or anxious, with whom do you **usually** talk?
 - A. I do not feel sad, empty, hopeless, angry, or anxious
 - B. Parent or other adult family member
 - C. Teacher or other adult in this school
 - D. Religious leader
 - E. Doctor or nurse
 - F. Other adult
 - G. Friend or sibling
 - H. Some other person

The next 5 questions ask about tobacco use.

- 25. How old were you when you smoked a whole cigarette for the first time?
 - A. I have never smoked a whole cigarette
 - B. 8 years old or younger
 - C. 9 years old
 - D. 10 years old
 - E. 11 years old
 - F. 12 years old
 - G. 13 years old or older

- 26. During the past 30 days, on how many days did you smoke cigarettes?
 - A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days
- 27. During the past 12 months, did you ever try **to quit** smoking cigarettes?
 - A. I did not smoke cigarettes during the past 12 months
 - B. Yes
 - C. No
- 28. During the past 30 days, how did you **usually** get your own cigarettes? (Select only **one** response)
 - A. I did not smoke cigarettes during the past 30 days.
 - B. I bought them in a store such as a convenience store, supermarket, discount store, or gas station.
 - C. I bought them from a vending machine.
 - D. I gave someone else money to buy them for me.
 - E. I borrowed (or bummed) them from someone else.
 - F. A person 18 years or older gave them to me.
 - G. I took them from a store or family member.
 - H. I got them some other way.
- 29. During the past 30 days, on how many days did you use **chewing tobacco**, **snuff**, **or dip**, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen?
 - A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days

The next 3 questions ask about drinking alcohol. This includes drinking beer, wine, wine coolers, and liquor such as rum, gin, vodka, or whiskey. For these questions, drinking alcohol does <u>not</u> include drinking a few sips of wine for religious purposes.

- 30. Have you ever had a drink of alcohol, other than a few sips?
 - A. Yes
 - B. No
- 31. How old were you when you had your first drink of alcohol other than a few sips?
 - A. I have never had a drink of alcohol other than a few sips
 - B. 8 years old or younger
 - C. 9 years old
 - D. 10 years old
 - E. 11 years old
 - F. 12 years old
 - G. 13 years old or older
- 32. If you drank alcohol during the past 30 days, how did you usually get your alcohol?
 - A. I did not drink alcohol during the past 30 days
 - B. I bought it at a store such as a liquor store, convenience store, gas station or supermarket
 - C. I bought it at a restaurant, bar, or club
 - D. I took it from home
 - E. My parent(s)/guardian(s) gave it to me
 - F. I gave someone else the money to buy it for me
 - G. A person over 21 years old gave it to me
 - H. I got it some other way

The next 4 questions ask about marijuana use. Marijuana also is called grass or pot.

- 33. Have you ever used marijuana?
 - A. Yes
 - B. No

- 34. How old were you when you tried marijuana for the first time?
 - A. I have never tried marijuana
 - B. 8 years old or younger
 - C. 9 years old
 - D. 10 years old
 - E. 11 years old
 - F. 12 years old
 - G. 13 years old or older
- 35. During the past 30 days, did you use marijuana?
 - A. Yes
 - B. No
- 36. During the past 30 days, did you use marijuana **on school property**?
 - A. Yes
 - B. No

The next 9 questions ask about other drugs.

- 37. Have you ever used **any** form of cocaine, including powder, crack, or freebase?
 - A. Yes
 - B. No
- 38. Have you ever used LSD (acid), PCP (angel dust), mushrooms, ecstasy or other hallucinogens?
 - A. Yes
 - B. No
- 39. Have you ever sniffed glue, or breathed the contents of spray cans, or inhaled any paints or sprays to get high?
 - A. Yes
 - B. No
- 40. Have you ever smoked, snorted, or injected a synthetic drug, including **bath** salts, black magic, or red magic?
 - A. Yes
 - B. No
- 41. Have you ever used a needle to inject any **illegal** drug into your body?
 - A. Yes
 - B. No

- 42. Have you ever taken a **prescription drug** such as OxyContin, Percocet, Vicodin, Adderall, Ritalin, or Xanax **without a doctor's prescription?**
 - A. Yes
 - B. No
- 43. If you took a **prescription drug without a doctor's prescription** during the past 12 months, how did you usually get it?
 - A. I did not take a prescription drug without a doctor's prescription during the past 12 months
 - B. I took it from home
 - C. I took it from someone else's home
 - D. I got it from someone
 - E. I bought it from someone
 - F. I got it some other way
- 44. Have you ever used **methamphetamines** (also called speed, crystal, crank, or ice)?
 - A. Yes
 - B. No
- 45. **During the past 12 months**, has anyone offered, sold, or given you an illegal drug **on school property**?
 - A. Yes
 - B. No

The next 4 questions ask about sexual behavior.

- 46. Have you ever had sexual intercourse?
 - A. Yes
 - B. No
- 47. How old were you when you had sexual intercourse for the first time?
 - A. I have never had sexual intercourse
 - B. 11 years old or younger
 - C. 12 years old
 - D. 13 years old or older
- 48. How many times have you been pregnant or gotten someone pregnant?
 - A. 0 times
 - B. 1 time
 - C. 2 or more times
 - D. Not sure

- 49. During your life, with how many people have you had sexual intercourse?
 - A. I have never had sexual intercourse
 - B. 1 person
 - C. 2 people
 - D. 3 people
 - E. 4 people
 - F. 5 people
 - G. 6 or more people

The next 4 questions ask about abstinence, AIDS and STD education.

- 50. Have you ever been taught about abstaining from sexual activity?
 - A. Yes
 - B. No
 - C. Not sure
- 51. Have you ever been taught about AIDS or HIV infection in school?
 - A. Yes
 - B. No
 - C. Not sure
- 52. Have you ever been taught about chlamydia, gonorrhea, syphilis, or human papillomavirus, or genital warts?
 - A. Yes
 - B. No
 - C. Not sure
- 53. When you have questions about sexually transmitted diseases (STD), HIV, AIDS, or pregnancy prevention, with whom do you **usually** talk?
 - A. I do not have questions about sexually transmitted diseases (STD), HIV, AIDS or pregnancy prevention
 - B. Parent or other adult family member
 - C. Teacher or other adult in this school
 - D. Religious leader
 - E. Doctor or nurse
 - F. Other adult
 - G. Friend or sibling
 - H. Some other person

The next 7 questions ask about body weight.

- 54. How do **you** describe your weight?
 - A. Very underweight
 - B. Slightly underweight
 - C. About the right weight
 - D. Slightly overweight
 - E. Very overweight
- 55. Which of the following are you trying to do about your weight?
 - A. Lose weight
 - B. Gain weight
 - C. Stay the same weight
 - D. I am **not trying to do anything** about my weight
- 56. Have you ever **exercised** to lose weight or to keep from gaining weight?
 - A. Yes
 - B. No
- 57. Have you ever **eaten less food, fewer calories, or foods low in fat** to lose weight or to keep from gaining weight?
 - A. Yes
 - B. No
- 58. Have you ever **gone without eating for 24 hours or more** (also called fasting) to lose weight or keep from gaining weight?
 - A. Yes
 - B. No
- 59. Have you ever **taken any diet pills, powders, or liquids** without a doctor's advice to lose weight or to keep from gaining weight? (Do **not** include meal replacement products such as Slim Fast.)
 - A. Yes
 - B. No
- 60. Have you ever **vomited or taken laxatives** to lose weight or to keep from gaining weight?
 - A. Yes
 - B. No

The next 9 questions ask about food you ate or drank during the past 7 days. Think about all the meals and snacks you had from the time you got up until you went to bed. Be sure to include food you ate at home, at school, at restaurants, or anywhere else.

- 61. During the past 7 days, how many times do you eat **fruit**? (Include raw, cooked, frozen, canned or dried fruit and 100% fruit juice.)
 - A. I do not eat fruit
 - B. 1 time
 - C. 2 times
 - D. 3 times
 - E. 4 times
 - F. 5 or more times
- 62. During the past 7 days, how many times do you eat **vegetables**? (Include raw, cooked, frozen, canned vegetables, salad greens and 100% vegetable juice, BUT **do not count** french fries.)
 - A. I do not eat vegetables
 - B. 1 time
 - C. 2 times
 - D. 3 times
 - E. 4 times
 - F. 5 or more times
- 63. During the past 7 days, how many times did you eat junk food such as sweet or salty snack foods? (Include chips, crackers, cookies, candy, cakes, or donuts.)
 - A. I did not eat junk food during the past 7 days.
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day

- 64. During the past 7 days, how many times did you drink a **can, bottle, or glass of soda or pop**, such as Coke, Pepsi, or Sprite? (Do **not** include diet soda or diet pop.)
 - A. I did not drink soda or pop during the past 7 days.
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
- 65. During the past 7 days, how many times do you drink a can, bottle, or glass of any other sweetened beverage? (Include sweet tea, punch, Kool-Aid, fruit-flavored drinks, energy drinks, and sports drinks. Do **not** include diet or sugar-free drinks.)
 - A. I did not drink any other sweetened beverages during the past 7 days.
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
- 66. During the past 7 days, how many **glasses of milk** did you drink (include the milk you drank in a glass or cup, from a carton, or with cereal. Count the half pint milk served at school as equal to 1 glass.)
 - A. I did not drink milk during the past 7 days
 - B. 1 to 3 glasses during the past 7 days
 - C. 4 to 6 glasses during the past 7 days
 - D. 1 glass per day
 - E. 2 glasses per day
 - F. 3 glasses per day
 - G. 4 or more glasses per day
- 67. During the past 7 days, how many times did you buy food and/or drinks from vending machines at school?
 - A. 0 times
 - B. 1 time
 - C. 2 times
 - D. 3 times
 - E. 4 times
 - F. 5 or more times

- 68. During the past 7 days, on how many days did you eat breakfast?
 - A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days
 - G. 6 days
 - H. 7 days
- 69. During the past 7 days, how many times did you eat dinner prepared at home with your family?
 - A. 0 times
 - B. 1 time
 - C. 2 times
 - D. 3 times
 - E. 4 times
 - F. 5 times
 - G. 6 times
 - H. 7 times

The next 7 questions ask about physical activity.

- 70. During the past 7 days on how many days were you physically active for a total of **at least 60 minutes per day**? (Add up all the time you spend in any kind of physical activity that increases your heart rate and makes you breathe hard some of the time.)
 - A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days
 - G. 6 days
 - H. 7 days
- 71. **In an average week** when you are in school, on how many days do you go to physical education (PE) classes?
 - A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days

- 72. On an average school day, how many hours do you watch TV?
 - A. I do not watch TV on an average school day
 - B. Less than 1 hour per day
 - C. 1 hour per day
 - D. 2 hours per day
 - E. 3 hours per day
 - F. 4 hours per day
 - G. 5 or more hours per day
- 73. On an average school day, how many hours do you play video or computer games or use a computer for something that is not school work? (Include activities such as Nintendo, Game Boy, Play Station, Xbox, computer games, and the Internet)
 - A. I do not play video or computer games or use a computer for non school work
 - B. Less than 1 hour per day
 - C. 1 hour per day
 - D. 2 hours per day
 - E. 3 hours per day
 - F. 4 hours per day
 - G. 5 or more hours per day
- 74. On an average Saturday or Sunday, how many hours do you watch TV, play video games, or use a computer for something that is not school work? (Include activities such as Nintendo, Game Boy, PlayStation, Xbox, computer games, and the Internet.)
 - A. I do not watch TV, play video games, or use a computer on an average Saturday or Sunday
 - B. Less than 1 hour per day
 - C. 1 hour per day
 - D. 2 hours per day
 - E. 3 hours per day
 - F. 4 hours per day
 - G. 5 or more hours per day
- 75. During the past 12 months, on how many sports teams did you play? (Include any teams run by your school or community groups.)
 - A. 0 teams
 - B. 1 team
 - C. 2 teams
 - D. 3 or more teams

- 76. On an average school day, how many hours do you play video or computer games or use a computer for something that is not school work? (Include activities such as Nintendo, Game Boy, Play Station, Xbox, computer games, and the Internet)
 - A. I do not play video or computer games or use a computer for something that is not school work
 - B. Less than 1 hour per day
 - C. 1 hour per day
 - D. 2 hours per day
 - E. 3 hours per day
 - F. 4 hours per day
 - G. 5 or more hours per day

The next question asks about sun safety.

- 77. When you are outside for more than one hour on a sunny day, how often do you wear sunscreen with an SPF of 15 or higher?
 - A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always

The next question asks about sleep.

- 78. On an average school night, approximately how many hours of sleep do you get?
 - A. 4 or less hours
 - B. 5 hours
 - C. 6 hours
 - D. 7 hours
 - E. 8 hours
 - F. 9 hours
 - G. 10 or more hours

The next 12 questions are general items about you.

- 79. A disability can be physical, mental, emotional, or communication-related. Do you consider yourself to have a disability?
 - A. Yes
 - B. No
 - C. Not sure

- 80. On an average school day, how long after school are you alone without a parent or trusted adult?
 - A. I am not alone after school
 - B. Less than 1 hour per day
 - C. 2 hours per day
 - D. 3 hours per day
 - E. 4 hours per day
 - F. 5 hours per day
 - G. 6 or more hours per day
- 81. Do you participate in school activities other than sports, such as band, drama, clubs, or student government?
 - A. Yes
 - B. No
- 82. During the past 30 days, how many times did you perform any organized community service as a non-paid volunteer (for example, serving meals to elderly, picking up litter, helping out at a hospital, building homes for the poor, etc.)?
 - A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or more times
- 83. When was the last time you saw a doctor or nurse for a check-up or physical exam when you were not sick or injured?
 - A. During the past 12 months
 - B. Between 12 and 24 months ago
 - C. More than 24 months ago
 - D. Never
 - E. Not sure
- 84. When was the last time you saw a dentist for a check-up, exam, teeth cleaning, or other dental work?
 - A. During the past 12 months
 - B. Between 12 and 24 months ago
 - C. More than 24 months ago
 - D. Never
 - E. Not sure
- 85. Has a doctor or nurse ever told you that you have asthma?
 - A. Yes
 - B. No
 - C. Not sure

- 86. During the past 12 months, have you had an episode of asthma or an asthma attack?
 - A. I do not have asthma
 - B. No, I have asthma, but I have not had an episode of asthma or an asthma attack during the past 12 months
 - C. Yes, I have had an episode of asthma or an asthma attack during the past 12 months
 - D. Not sure
- 87. How often do you feel stress in your life?
 - A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. All of the time
- 88. How would you rate your health in general?
 - A. Excellent
 - B. Very good
 - C. Good
 - D. Fair
 - E. Poor
- 89. Based on your answers to this survey, which of the following **influences your decisions** about health the most? (**Choose One**)
 - A. Parents/Family
 - B. School
 - C. Friends/Peers
 - D. Church/Youth Groups
 - E. Media:TV/Movies/Books/Magazines
 - F. Computer/Internet
 - G. Doctor
 - H. Other
- 90. From which of the following would **you prefer** to get information about health? (**Choose One**)
 - A. Parents/Family
 - B. School
 - C. Friends/Peers
 - D. Church/Youth Groups
 - E. Media:TV/Movies/Books/Magazines
 - F. Computer/Internet
 - G. Doctor
 - H. Other

For the next 6 statements, indicate whether you agree or disagree with each statement.

- 91. Do you agree or disagree that you feel alone in your life?
 - A. Strongly agree
 - B. Agree
 - C. Not sure
 - D. Disagree
 - E. Strongly disagree
- 92. Do you agree or disagree that you feel good about yourself?
 - A. Strongly agree
 - B. Agree
 - C. Not sure
 - D. Disagree
 - E. Strongly disagree
- 93. Do you agree or disagree that your teachers really care about you and give you a lot of encouragement?
 - A. Strongly agree
 - B. Agree
 - C. Not sure
 - D. Disagree
 - E. Strongly disagree
- 94. Do you agree or disagree that harassment and bullying by other students is a problem at your school?
 - A. Strongly agree
 - B. Agree
 - C. Not sure
 - D. Disagree
 - E. Strongly disagree
- 95. Do you agree or disagree that gangs are a problem at your school?
 - A. Strongly agree
 - B. Agree
 - C. Not sure
 - D. Disagree
 - E. Strongly disagree

96. Do you agree or disagree that drugs are a problem at your school?

- A. Strongly agree
- B. Agree
- C. Not sure
- D. Disagree
- E. Strongly disagree

This is the end of the survey Thank you very much for your help

2014 MACON COUNTY YOUTH RISK BEHAVIOR SURVEY

HIGH SCHOOL QUESTIONNAIRE

This survey is about health behavior. It has been developed so you can tell us what you do that may affect your health. The information you give will be used to develop better health education for young people like yourself.

DO NOT write your name on this survey. The answers you give will be kept private. No one will know what you write. Answer the questions based on what you really do.

Completing the survey is voluntary. Whether or not you answer the questions will not affect your grade in this class. If you are not comfortable answering a question, just leave it blank.

The questions that ask about your background will be used only to describe the types of students completing this survey. The information will not be used to find out your name. No names will ever be reported.

Make sure to read every question. Fill in the circles completely. When you are finished, follow the instructions of the person giving you the survey.

Thank you very much for your help.

Directions:

- Use a #2 pencil only.
- Make dark marks.
- Fill in a response like this: A B D
- To change your answer, erase your old answer completely.
- 1. How old are you?
 - A. 12 years old or younger
 - B. 13 years old
 - C. 14 years old
 - D. 15 years old
 - E. 16 years old
 - F. 17 years old
 - G. 18 years old or older
- 2. What is your sex?
 - A. Female
 - B. Male
- 3. In what grade are you?
 - A. 9th grade
 - B. 10th grade
 - C. 11th grade
 - D. 12th grade
 - E. Ungraded or other grade
- 4. Are you Hispanic or Latino?
 - A. Yes
 - B. No
- 5. What is your race? (**Select one or more** responses.)
 - A. American Indian or Alaska Native
 - B. Asian
 - C. Black or African American
 - D. Native Hawaiian or Other Pacific Islander
 - E. White

6. How tall are you without your shoes on?

Directions: Write your height in the shaded blank boxes on your answer sheet. Fill in the matching circles below each number.

Example

Hei	ght
Feet	Inches
5	11
3	0
4	①
•	2
6	3
7	4
	<u>\$</u>
	(6)
	7
	8
	9
	10
	•

7. How much do you weigh without your shoes on?

Directions: Write your weight in the shaded blank boxes on your answer sheet. Fill in the matching circles below each number.

Example

	Weight						
	Pounds						
1	5	3					
•	0	0					
3	①	① ②					
3	① ②	2					
	3	•					
	4	4					
	•	(5)					
	6	(5) (6)					
	7	7					
	8	8					
	9	9					

- 8. During the past 12 months, how would you describe your grades in school?
 - A. Mostly A's
 - B. Mostly B's
 - C. Mostly C's
 - D. Mostly D's
 - E. Mostly F's
 - F. None of these grades
 - G. Not sure

The next 4 questions ask about personal safety.

- 9. When you rode a bicycle during the past 12 months, how often did you wear a helmet?
 - A. I did not ride a bicycle during the past 12 months
 - B. Never wore a helmet
 - C. Rarely wore a helmet
 - D. Sometimes wore a helmet
 - E. Most of the time wore a helmet
 - F. Always wore a helmet
- 10. How often do you wear a seat belt when **riding in** a car driven by someone else?
 - A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always
- 11. During the past 30 days, how many times did you **ride** in a car or other vehicle **driven by someone who had been drinking alcohol?**
 - A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or more times
- 12. During the past 30 days, how many times did you **drive** a car or other vehicle **when you had been drinking alcohol?**
 - A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or more times

The next 2 questions ask 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.

- 13. During the past 12 months, have you ever been bullied **on school property?**
 - A. Yes
 - B. No
- 14. During the past 12 months, have you ever been **electronically bullied**, such as through e-mail, chat rooms, instant messaging, Web sites, or text messaging?
 - A. Yes
 - B. No

The next 10 questions ask about violence-related behaviors.

- 15. During the past 30 days, on how many days did you carry **a weapon** such as a gun, knife, or club?
 - A. 0 days
 - B. 1 day
 - C. 2 or 3 days
 - D. 4 or 5 days
 - E. 6 or more days
- 16. During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club **on school property?**
 - A. 0 days
 - B. 1 day
 - C. 2 or 3 days
 - D. 4 or 5 days
 - E. 6 or more days
- 17. 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?
 - A. 0 days
 - B. 1 day
 - C. 2 or 3 days
 - D. 4 or 5 days
 - E. 6 or more days

- 18. During the past 12 months, how many times has someone threatened or injured you with a weapon such as a gun, knife, or club **on school property?**
 - A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or 7 times
 - F. 8 or 9 times
 - G. 10 or 11 times
 - H. 12 or more times
- 19. During the past 12 months, how many times has someone stolen or deliberately damaged your property such as your car, clothing, or books **on school property**?
 - A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or 7 times
 - F. 8 or 9 times
 - G. 10 or 11 times
 - H. 12 or more times
- 20. During the past 12 months, how many times were you in a physical fight?
 - A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or 7 times
 - F. 8 or 9 times
 - G. 10 or 11 times
 - H. 12 or more times
- 21. During the past 12 months, how many times were you in a physical fight in which you were injured and had to be treated by a doctor or nurse?
 - A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or more times

- 22. During the past 12 months, how many times were you in a physical fight **on school property?**
 - A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or 7 times
 - F. 8 or 9 times
 - G. 10 or 11 times
 - H. 12 or more times
- 23. During the past 12 months, did your boyfriend or girlfriend ever hit, slap, or physically hurt you on purpose?
 - A. Yes
 - B. No
- 24. Have you ever been physically forced to have sexual intercourse when you did not want to?
 - A. Yes
 - B. No

The next 5 questions ask about sad feelings and attempted suicide. Sometimes people feel so depressed about the future that they may consider attempting suicide, that is, taking some action to end their own life.

- 25. During the past 12 months, did you ever feel so sad or hopeless almost every day for **two weeks or more** in a row that you stopped doing some usual activities?
 - A. Yes
 - B. No
- 26. During the past 12 months, did you ever **seriously** consider attempting suicide?
 - A. Yes
 - B. No
- 27. During the past 12 months, did you make a plan about how you would attempt suicide?
 - A. Yes
 - B. No

- 28. 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 5 times
 - E. 6 or more times
- 29. When you feel sad, empty, hopeless, angry, or anxious, with whom do you **usually** talk?
 - A. I do not feel sad, empty, hopeless, angry, or anxious
 - B. Parent or other adult family member
 - C. Teacher or other adult in this school
 - D. Religious leader
 - E. Doctor or nurse
 - F. Other adult
 - G. Friend or sibling
 - H. Some other person

The next 4 questions ask about tobacco use.

- 30. How old were you when you smoked a whole cigarette for the first time?
 - A. I have never smoked a whole cigarette
 - B. 8 years old or younger
 - C. 9 or 10 years old
 - D. 11 or 12 years old
 - E. 13 or 14 years old
 - F. 15 or 16 years old
 - G. 17 years old or older
- 31. During the past 30 days, on how many days did you smoke cigarettes?
 - A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days

- 32. During the past 12 months, did you ever try **to quit** smoking cigarettes?
 - A. I did not smoke during the past 12 months
 - B. Yes
 - C. No
- 33. During the past 30 days, on how many days did you use **chewing tobacco**, **snuff**, **or dip**, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen?
 - A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days G. All 30 days

The next 5 questions ask about drinking alcohol. This includes drinking beer, wine, wine coolers, and liquor such as rum, gin, vodka, or whiskey. For these questions, drinking alcohol does not include drinking a few sips of wine for religious purposes.

- 34. How old were you when you had your first drink of alcohol other than a few sips?
 - A. I have never had a drink of alcohol other than a few sips
 - B. 8 years old or younger
 - C. 9 or 10 years old
 - D. 11 or 12 years old
 - E. 13 or 14 years old
 - F. 15 or 16 years old
 - G. 17 years old or older
- 35. During the past 30 days, on how many days did you have at least one drink of alcohol?
 - A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days

- 36. During the past 30 days, on how many days did you have 5 or more drinks of alcohol in a row, that is, within a couple of hours?
 - A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 to 5 days
 - E. 6 to 9 days
 - F. 10 to 19 days
 - G. 20 or more days
- 37. During the past 30 days, on how many days did you have at least one drink of alcohol **on school property**?
 - A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days
- 38. If you drank alcohol during the past 30 days, how did you usually get your alcohol?
 - A. I did not drink alcohol during the past 30 days
 - B. I bought it at a store such as a liquor store, convenience store, gas station or supermarket
 - C. I bought it at a restaurant, bar, or club
 - D. I took it from home
 - E. My parent(s)/guardian(s) gave it to me
 - F. I gave someone else the money to buy it for me
 - G. A person over 21 years old gave it to me
 - H. I got it some other way

The next 4 questions ask about marijuana use. Marijuana also is called grass or pot.

- 39. During your life, how many times have you used marijuana?
 - A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 to 99 times
 - G. 100 or more times
- 40. How old were you when you tried marijuana for the first time?
 - A. I have never tried marijuana
 - B. 8 years old or younger
 - C. 9 or 10 years old
 - D. 11 or 12 years old
 - E. 13 or 14 years old
 - F. 15 or 16 years old
 - G. 17 years old or older
- 41. During the past 30 days, how many times did you use marijuana?
 - A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times
- 42. During the past 30 days, how many times did you use marijuana **on school property**?
 - A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times

The next 10 questions ask about other drugs.

- 43. During your life, how many times have you used **any** form of cocaine, including powder, crack, or freebase?
 - A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times

- 44. During your life, how many times have you sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high?
 - A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times
- 45. During your life, how many times have you used **heroin** (also called smack, junk, or China White)?
 - A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times
- 46. During your life, how many times have you used **methamphetamines** (also called speed, crystal, crank, or ice)?
 - A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times
- 47. During your life, how many times have you used **ecstasy** (also called MDMA)?
 - A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times
- 48. During your life, how many times have you smoked, snorted, or injected a synthetic drug, including **bath salts**, **black magic**, **or red magic**?
 - A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times

- 49. During your life, how many times have you used a needle to inject any **illegal** drug into your body?
 - A. 0 times
 - B. 1 time
 - C. 2 or more times
- 50. During your life, how many times have you taken a **prescription drug** (such as OxyContin, Percocet, Vicodin, Adderall, Ritalin, or Xanax) **without a doctor's prescription?**
 - A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times
- 51. If you took a **prescription drug** without a doctor's prescription during the past 12 months, how did you usually get it?
 - A. I did not take a prescription drug without a doctor's prescription during the past 12 months
 - B. I took it from home
 - C. I took it from someone else's home
 - D. I got it from someone
 - E. I bought it from someone
 - F. I got it some other way
- 52. During the past 12 months, has anyone offered, sold, or given you an illegal drug **on school property**?
 - A. Yes
 - B. No.

The next 10 questions ask about sexual behavior.

- 53. Have you ever had sexual intercourse?
 - A. Yes
 - B. No

- 54. How old were you when you had sexual intercourse for the first time?
 - A. I have never had sexual intercourse
 - B. 11 years old or younger
 - C. 12 years old
 - D. 13 years old
 - E. 14 years old
 - F. 15 years old
 - G. 16 years old
 - H. 17 years old or older
- 55. During your life, with how many people have you had sexual intercourse?
 - A. I have never had sexual intercourse
 - B. 1 person
 - C. 2 people
 - D. 3 people
 - E. 4 people
 - F. 5 people
 - G. 6 or more people
- 56. During the past 3 months, with how many people did you have sexual intercourse?
 - A. I have never had sexual intercourse
 - B. I have had sexual intercourse, but not during the past 3 months
 - C. 1 person
 - D. 2 people
 - E. 3 people
 - F. 4 people
 - G. 5 people
 - H. 6 or more people
- 57. Did you drink alcohol or use drugs before you had sexual intercourse the **last time**?
 - A. I have never had sexual intercourse
 - B. Yes
 - C. No
- 58. The **last time** you had sexual intercourse, did you or your partner use a condom?
 - A. I have never had sexual intercourse
 - B. Yes
 - C. No

- 59. The **last time** you had sexual intercourse, what **one** method did you or your partner use to **prevent pregnancy**? (Select only **one** response.)
 - A. I have never had sexual intercourse
 - B. No method was used to prevent pregnancy
 - C. Birth control pills
 - D. Condoms
 - E. Depo-Provera (injectable birth control)
 - F. Withdrawal
 - G. Some other method
 - H. Not sure
- 60. How many times have you been pregnant or gotten someone pregnant?
 - A. 0 times
 - B. 1 time
 - C. 2 or more times
 - D. Not sure
- 61. Have your parents or other adults in your family ever talked with you about what they expect you to do or not to do when it comes to sex?
 - A. Yes
 - B. No
 - C. Not sure
- 62. The last time you had sexual intercourse, how old was your partner?
 - A. I have never had sexual intercourse.
 - B. 5 or more years younger
 - C. 3 to 4 years younger
 - D. About the same age
 - E. 3 to 4 years older
 - F. 5 or more years older
 - G. Not sure

The next 7 questions ask about body weight.

- 63. How do **you** describe your weight?
 - A. Very underweight
 - B. Slightly underweight
 - C. About the right weight
 - D. Slightly overweight
 - E. Very overweight

- 64. Which of the following are you trying to do about your weight?
 - A. **Lose** weight
 - B. **Gain** weight
 - C. **Stay** the same weight
 - D. I am not trying to do anything about my weight
- 65. During the past 30 days, did you **exercise** to lose weight or to keep from gaining weight?
 - A. Yes
 - B. No
- 66. During the past 30 days, did you **eat less food, fewer calories, or foods low in fat** to lose weight or to keep from gaining weight?
 - A. Yes
 - B. No
- 67. During the past 30 days, did you **take any diet pills, powders, or liquids** without a doctor's advice to lose weight or to keep from gaining weight? (Do **not** include meal replacement products such as Slim Fast.)
 - A. Yes
 - B. No
- 68. During the past 30 days, did you **vomit or take laxatives** to lose weight or to keep from gaining weight?
 - A. Yes
 - B. No
- 69. During the past 30 days, did you skip meals to lose weight or keep from gaining weight?
 - A. Yes
 - B. No

The next 8 questions ask about food you ate or drank during the past 7 days. Think about all the meals and snacks you had from the time you got up until you went to bed. Be sure to include food you ate at home, at school, at restaurants, or anywhere else.

- 70. During the past 7 days, how many times do you eat **fruit**? (Do not count fruit juice.)
 - A. I did not eat fruit during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
- 71. During the past 7 days, how many times do you eat **vegetables**? (Include raw, cooked, frozen, canned vegetables, salad greens and 100% vegetable juice, BUT **do not count** french fries.)
 - A. I did not eat vegetables during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
- 72. During the past 7 days, how many times did you eat junk food such as sweet or salty snack foods? (Include chips, crackers, cookies, candy, cakes, or donuts.)
 - A. I did not eat junk food during the past 7 days.
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day

- 73. During the past 7 days, how many times did you drink a can, bottle, or glass of soda or pop, such as Coke, Pepsi, or Sprite? (Do **not** include diet soda or diet pop.)
 - A. I did not drink soda or pop during the past 7 days.
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
- 74. During the past 7 days, how many times do you drink a can, bottle, or glass of any other sweetened beverage? (Include sweet tea, punch, Kool-Aid, fruit-flavored drinks, energy drinks, and sports drinks. Do **not** include diet or sugar-free drinks.)
 - A. I did not drink any other sweetened beverage during the past 7 days.
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
- 75. During the past 7 days, how many times did you buy food and/or drinks from vending machines at school?
 - A. 0 times
 - B. 1 time
 - C. 2 times
 - D. 3 times
 - E. 4 times
 - F. 5 or more times
- 76. During the past 7 days, on how many days did you eat breakfast?
 - A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days
 - G. 6 days

- H. 7 days
- 77. During the past 7 days, how many times did you eat dinner prepared at home with your family?
 - A. 0 times
 - B. 1 time
 - C. 2 times
 - D. 3 times
 - E. 4 times
 - F. 5 times
 - G. 6 times
 - H. 7 times

The next 7 questions ask about physical activity.

- 78. During the past 7 days, on how many days were you physically active for a total of **at least 60 minutes per day**? (Add up all the time you spend in any kind of physical activity that increases your heart rate and makes you breathe hard some of the time.)
 - A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 daysG. 6 days
 - H. 7 days
- 79. On an average school day, how much total time do you spend being physically active? (Include all physical activity both in and out of school.)
 - A. I am not physically active on a average school day
 - B. Less than 30 minutes
 - C. 30 minutes to 1 hour
 - D. More than 1 hour and up to 2 hours
 - E. More than 2 hours
- 80. On an average weekend day, how much total time do you spend being physically active?
 - A. I am not physically active on an average weekend day
 - B. Less than 30 minutes
 - C. 30 minutes to 1 hour
 - D. More than 1 hour and up to 2 Hours

- E. More than 2 hours
- 81. In an average week when you are in school, on how many days do you go to physical education (PE) classes?
 - A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days
- 82. On an average school day, how many hours do you watch TV?
 - A. I do not watch TV on an average school day
 - B. Less than 1 hour per day
 - C. 1 hour per day
 - D. 2 hours per day
 - E. 3 hours per day
 - F. 4 hours per day
 - G. 5 or more hours per day
- 83. On an average school day, how many hours do you play video or computer games or use a computer for something that is not school work? (Include activities such as Nintendo, Game Boy, Play Station, Xbox, computer games, and the Internet)
 - A. I do not play video or computer games or use a computer for non school work
 - B. Less than 1 hour per day
 - C. 1 hour per day
 - D. 2 hours per day
 - E. 3 hours per day
 - F. 4 hours per day
 - G. 5 or more hours per day

- 84. On an average Saturday or Sunday, how many hours do you watch TV, play video games, or use a computer for something that is not school work? (Include activities such as Nintendo, Game Boy, PlayStation, Xbox, computer games, and the Internet.)
 - A. I do not watch TV, play video games, or use a computer on an average Saturday or Sunday
 - B. Less than 1 hour per day
 - C. 1 hour per day
 - D. 2 hours per day
 - E. 3 hours per day
 - F. 4 hours per day
 - G. 5 or more hours per day

The next question asks about sun safety.

- 85. When you are outside for more than one hour on a sunny day, how often do you wear sunscreen with an SPF of 15 or higher?
 - A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always

The next question asks about sleep.

- 86. On an average school night, how many hours of sleep do you get?
 - A. 4 or less hours
 - B. 5 hours
 - C. 6 hours
 - D. 7 hours
 - E. 8 hours
 - F. 9 hours
 - G. 10 or more hours

The next 7 questions are general items about you.

- 87. A disability can be physical, mental, emotional, or communication-related. Do you consider yourself to have a disability?
 - A. Yes
 - B. No
 - C. Not sure

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- 88. On an average school day, how long after school are you alone without a parent or adult?
 - A. I am not alone after school
 - B. Less than 1 hour per day
 - C. 1 to 2 hours per day
 - D. 3 hours per day
 - E. 4 hours per day
 - F. 5 hours per day
 - G. 6 or more hours per day
- 89. Do you participate in any extracurricular activities at school (such as sports, band, drama, clubs)?
 - A. Yes
 - B. No
- 90. When was the last time you saw a doctor or nurse for a check-up or physical exam when you were not sick or injured?
 - A. During the past 12 months
 - B. Between 12 and 24 months ago
 - C. More than 24 months ago
 - D. Never
 - E. Not sure
- 91. When was the last time you saw a dentist for a check-up, exam, teeth cleaning, or other dental work?
 - A. During the past 12 months
 - B. Between 12 and 24 months ago
 - C. More than 24 months ago
 - D. Never
 - E. Not sure
- 92. Has a doctor or nurse ever told you that you have asthma?
 - A. Yes
 - B. No
 - C. Not sure
- 93. How do you rate your health in general?
 - A. Excellent
 - B. Very good
 - C. Good
 - D. Fair
 - E. Poor

For the next 6 statements, indicate whether you agree or disagree.

- 94. Do you agree or disagree that you feel alone in your life?
 - A. Strongly agree
 - B. Agree
 - C. Not sure
 - D. Disagree
 - E. Strongly disagree
- 95. Do you agree or disagree that you feel good about yourself?
 - A. Strongly agree
 - B. Agree
 - C. Not sure
 - D. Disagree
 - E. Strongly disagree
- 96. Do you agree or disagree that your teachers really care about you and give you a lot of encouragement?
 - A. Strongly agree
 - B. Agree
 - C. Not sure
 - D. Disagree
 - E. Strongly disagree
- 97. Do you agree or disagree that harassment and bullying by other students is a problem at your school?
 - A. Strongly agree
 - B. Agree
 - C. Not sure
 - D. Disagree
 - E. Strongly disagree
- 98. Do you agree or disagree that gangs are a problem at your school?
 - A. Strongly agree
 - B. Agree
 - C. Not sure
 - D. Disagree
 - E. Strongly disagree

- 99. Do you agree or disagree that drugs are a problem at your school?
 - A. Strongly agree
 - B. Agree
 - C. Not sure
 - D. Disagree
 - E. Strongly disagree

This is the end of the survey. Thank you very much for your help.

Appendix C, 2014 Analyses

Differences in Proportions/ Percentages for 2014-2011

Example: With regard to the percentage of middle school students who never/rarely wear a helmet when riding a bicycle, 2014 is 10.2 % more than 2011 (0.787-0.685).

Confidence Intervals for Differences in Proportions Note #1

Confidence intervals were used to confirm statistical significance. For Macon County YRBS, 95% confidence intervals for differences in proportions (comparing 2014 to 2009 and comparing Macon results with North Carolina state results) were calculated using the following general formula:

$$(p_1 - p_2) \pm CV \sqrt{p_1(1-p_1)/n_1 + p_2(1-p_2)/n_2}$$

in which p_1 is the proportion of 2014 students; p_2 is the proportion of 2011 students; CV is the critical value used to calculate the margin of error for 95% confidence. The Bonferroni correction is used in calculating multiple differences. For example, assuming a = 0.05, the critical value for a series of questions, including 12 items in a set, would be 2.8653; n₁ is the total number of 2014 respondents and n_2 is the total number of 2011 respondents.

For example, the 95% confidence interval for the difference in proportions (comparing 2014 to 2011) of middle school students who rarely or never wear a helmet when riding a bicycle is:

 0.102 ± 0.105

 $2.8653\sqrt{(0.787(1-0.787)/596)} + (0.685(1-0.685)/449)$ 2.8653√0.0002813 + 0.0004806 2.8653 \(\text{0.0007619} \) 2.8653×0.0276020 0.079 = margin of error

In this case, the 95% confidence interval is statistically significant.

Confidence intervals can be interpreted much like score bands in testing. For example, a test score of 110 may have a score band that locates the student's performance somewhere between 104 and 116. Interpreting this statistically significant confidence interval for the difference between 2014 and 2011 proportions, we would say that we are 95% confident that the percentage of 2014 students who rarely or never wear a helmet when riding a bicycle is between 2.3 and 18.1 percentage points more than 2011 students.

Cohen's h^{Note #2}

The measure of effect size is a statistical computation that helps researchers evaluate the practical significance of their results: a result may be statistically significant but people generally want to know if an effect is large enough to matter. Cohen's h is a measure of effect size calculated from proportions that have undergone arcsine transformations, making the differences in proportions comparable with regard to small, moderate, and large effect sizes. The formula for Cohen's h that was used for these analyses is:

h = the absolute value of 2 arcsin $\sqrt{p_1}$ -2 arcsin $\sqrt{p_2}$.

For example the effect size for the difference in proportions between 2014 and 2011 middle school students who rarely or never wear a helmet when riding a bicycle is 0.23:

find the absolute value of 2 arcsin $\sqrt{0.787}$ – 2 arcsin $\sqrt{0..685}$.

The following guidelines are used to interpret Cohen's h:

 $0.2 < h \le 0.5 = small effect$ $0.5 < h \le 0.8 = medium effect$ h > 0.8 = large effect

In comparing the proportions of 2014 and 2011 middle school students who rarely or never wear a helmet when riding a bicycle, the effect size of 0.23 is small. Thus, the following interpretation might be made:

2014 is 10.2% more than 2011 with a 7.9% margin of error. The 95% confidence interval is significant. Although statistically significant, the effect size is small, Cohen's h = .23.

Compound Annual Growth Rate Note#3

Long-term trend analyses (i.e., 2002-2014) were calculated via compound annual growth rates (CAGR). The CAGR is the geometric average of multiple data points over time. As compared to differences in proportions (that are transformed to percentages), the compound annual growth rates report the rate of change from 2002 to 2014. For example, in 2002 the percentage of students who had property damaged or stolen on school property was 36.9%. In 2014, the percentage had decreased to 19.3%. The difference in proportions between these two benchmark years (as reported in percentage form) is 17.6%. The rate of change, however, is 10.2%. Again, this rate is calculated by taking the geometric average of the six data points in years 2002, 2005, 2007, 2009, 2011, using the following mathematical formula:

$$CAGR = \left(\frac{Ending \ Value}{Beginning \ Value}\right)^{\left(\frac{1}{\# \ of \ years}\right)} - 1$$

$$-10.2 = [(36.9 \div 19.3)^{1/6}] - 1$$

Crosstabs

Note that the 2×2 crosstab for carrying a weapon gives row percentages for gender. For example, 57.6% of males were at-risk for carrying a weapon.

Crosstab^a

			Have you ever carried a weapon such as a gun, knife, or club?		
			Yes	No	Total
What is your sex?	Female	Count	120	250	370
		% within What is your sex?	32.4%	67.6%	100.0%
		Std. Residual	-3.7	3.3	
	Male	Count	220	162	382
		% within What is your sex?	57.6%	42.4%	100.0%
		Std. Residual	3.6	-3.3	
Total		Count	340	412	752
		% within What is your sex?	45.2%	54.8%	100.0%

a. Pearson Chi-Square=48.03 with 1df, p<0.0001.

Chi-Square

The Chi-square test of independence compares observed frequencies in a contingency table with expected frequencies, given a null hypothesis of independence (i.e., that one variable is not contingent upon another). In the weapon × gender question, the chi-square test for independence determines if weapon frequencies are independent of gender. A statistically significant chi-square value provides evidence that carrying a weapon is dependent on gender. In this case, the chi-square statistic of $48.03_{df=1}$ is significant with a p-value less than 0.0001. In this and all analyses, alpha = 0.05 was adopted to control for Type I error.

Standardized Residual Analyses

A statistically significant chi-square indicates that there is evidence for dependence somewhere in the table. By comparing cell-by-cell observed frequencies with expected frequencies residual analysis indicates the nature of that evidence. In so doing, the difference between observed and expected frequencies is called a residual. Standardized residuals can be interpreted like a z-statistic that has a mean of zero and a standard deviation of 1. In this report, a standardized residual greater than 1.99 provides evidence that a particular cell significantly contributes to the dependence that was detected by the chi-square test. For example, the standardized residuals of 3.6 indicates that males are far more atrisk for carrying weapons.

IMPORTANT NOTE #1: The Bonferroni adjustment calculated for multiple comparisons controls for Type I error. For example, rather than calculating the margins of error using 1.96 as the critical value for violence-related comparisons, the Bonferroni adjustment sets the critical value to 2.8653. Although this adjustment controls for Type I error, the results may reflect an overly conservative bias. Accordingly, there may be some results that are worth considering, even if they are not reported as statistically significant.

IMPORTANT NOTE #2: Measures of effect size offer an important way to interpret statistical findings. However, the conventional guidelines for evaluating small, moderate, and large effects offer arbitrary indices for examining the practical significance of findings. To best interpret results, readers should consider the context and history, as well as the measures of practical significance given in this report.

IMPORTANT NOTE #3: In this report, CAGRs with rates greater than or equal to 10% are highlighted in the Executive Summary. These trends since 2002 may be worth considering in the context for understanding the efficacy of Macon intervention strategies. The CAGR is a helpful index in that it reports the long-term average of multiple data points; the CAGR, however, does not report the fluctuations from year-to-year.

Appendix D. Macon County Middle School Frequencies

Unintentional Injuries and Violence

How often do you wear a seat belt when riding in a car?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Never	13	1.7	1.7	1.7
	Rarely	55	7.2	7.2	8.9
	Sometimes	77	10.1	10.1	19.0
	Most of the time	223	29.2	29.2	48.2
	Always	396	51.8	51.8	100.0
	Total	764	99.9	100.0	
Missing	System	1	.1		
Total		765	100.0		

When you ride a bicycle, how often did you wear a helmet?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l do not ride a bicycle	169	22.1	22.1	22.1
1	Never wear a helmet	378	49.4	49.4	71.5
1	Rarely wear a helmet	91	11.9	11.9	83.4
	Sometimes wear a helmet	43	5.6	5.6	89.0
	Most of the time wear a helmet	47	6.1	6.1	95.2
1	Always wear a helmet	37	4.8	4.8	100.0
	Total	765	100.0	100.0	

When you rode a four-wheeler during the past 12 months, how often did you wear a helmet?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I did not ride a four- wheeler during the past 12 months	345	45.1	45.3	45.3
	Never wore a helmet	216	28.2	28.4	73.7
	Rarely wore a helmet	49	6.4	6.4	80.2
	Sometimes wore a helmet	20	2.6	2.6	82.8
	Most of the time wore a helmet	52	6.8	6.8	89.6
	Always wore a helmet	79	10.3	10.4	100.0
	Total	761	99.5	100.0	
Missing	System	4	.5		
Total		765	100.0		

Have you ever ridden in a car driven by someone who had been drinking alcohol?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	173	22.6	22.7	22.7
	No	493	64.4	64.8	87.5
	Not sure	95	12.4	12.5	100.0
	Total	761	99.5	100.0	
Missing	System	4	.5		
Total		765	100.0		

Unintentional Injuries and Violence

Have you ever carried a weapon such as a gun, knife, or club?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	342	44.7	45.3	45.3
	No	413	54.0	54.7	100.0
	Total	755	98.7	100.0	
Missing	System	10	1.3		
Total		765	100.0		

During the past 12 months, did someone threaten or injure you with a weapon such as a gun, knife, or club on school property?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	49	6.4	6.5	6.5
	No	706	92.3	93.5	100.0
	Total	755	98.7	100.0	
Missing	System	10	1.3		
Total		765	100.0		

Have you ever been in a physical fight?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	369	48.2	48.4	48.4
	No	394	51.5	51.6	100.0
	Total	763	99.7	100.0	
Missing	System	2	.3		
Total		765	100.0		

Have you ever been in a physical fight in which you were hurt and had to be treated by a doctor or nurse?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	55	7.2	7.2	7.2
	No	706	92.3	92.8	100.0
	Total	761	99.5	100.0	
Missing	System	4	.5		
Total		765	100.0		

During the past 30 days, did you not go to school because you felt you would be unsafe at school or on your way to or from school?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	32	4.2	4.2	4.2
	No	724	94.6	95.8	100.0
	Total	756	98.8	100.0	
Missing	System	9	1.2		
Total		765	100.0		

Unintentional Injuries and Violence

During the past 12 months, has someone stolen or deliberately damaged your property, such as your clothing or books, on school property?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	147	19.2	19.3	19.3
	No	616	80.5	80.7	100.0
	Total	763	99.7	100.0	
Missing	System	2	.3		
Total		765	100.0		

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

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	35	5.5	5.5	5.5
	No	602	94.1	94.5	100.0
	Total	637	99.5	100.0	
Missing	System	3	.5		
Total		640	100.0		

Have you ever been physically forced to have sexual intercourse when you did not want to?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	22	2.9	2.9	2.9
	No	733	95.8	97.1	100.0
	Total	755	98.7	100.0	
Missing	System	10	1.3		
Total		765	100.0		

During the past 12 months, have you been harassed or bullied on school property?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	245	32.0	32.1	32.1
	No	518	67.7	67.9	100.0
	Total	763	99.7	100.0	
Missing	System	2	.3		
Total		765	100.0		

During the past 12 months, have you ever been electronically bullied, such as through e-mail, chat rooms, instant messaging, Web sites, or text messaging?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	133	17.4	17.5	17.5
	No	629	82.2	82.5	100.0
	Total	762	99.6	100.0	
Missing	System	3	.4		
Total		765	100.0		

Suicide

During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	167	21.8	22.1	22.1
	No	589	77.0	77.9	100.0
	Total	756	98.8	100.0	
Missing	System	9	1.2		
Total		765	100.0		

Have you ever seriously thought about killing yourself?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	152	19.9	20.0	20.0
	No	607	79.3	80.0	100.0
	Total	759	99.2	100.0	
Missing	System	6	.8		
Total		765	100.0		

Have you ever made a plan about how you would kill yourself?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	100	13.1	13.3	13.3
	No	651	85.1	86.7	100.0
	Total	751	98.2	100.0	
Missing	System	14	1.8		
Total		765	100.0		

When you feel sad, empty, hopeless, angry, or anxious, with whom do you usually talk?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l do not feel sad, empty, hopeless, angry, or anxious	223	29.2	30.1	30.1
	Parent or other adult family member	188	24.6	25.4	55.5
	Teacher or other adult in this school	11	1.4	1.5	57.0
	Religious leader	14	1.8	1.9	58.8
	Doctor or nurse	2	.3	.3	59.1
	Other adult	10	1.3	1.3	60.5
	Friend or sibling	234	30.6	31.6	92.0
	Some other person	59	7.7	8.0	100.0
	Total	741	96.9	100.0	
Missing	System	24	3.1		
Total		765	100.0		

Tobacco Use

How old were you when you smoked a whole cigarette for the first time?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l have never smoked a whole cigarette	668	87.3	88.1	88.1
	8 years old or younger	19	2.5	2.5	90.6
	9 years old	7	.9	.9	91.6
	10 years old	12	1.6	1.6	93.1
	11 years old	18	2.4	2.4	95.5
	12 years old	16	2.1	2.1	97.6
	13 years old or older	18	2.4	2.4	100.0
	Total	758	99.1	100.0	
Missing	System	7	.9		
Total		765	100.0		

During the past 30 days, on how many days did you smoke cigarettes?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 days	718	93.9	94.2	94.2
	1 or 2 days	16	2.1	2.1	96.3
	3 to 5 days	7	.9	.9	97.2
	6 to 9 days	4	.5	.5	97.8
	10 to 19 days	1	.1	.1	97.9
	20 to 29 days	3	.4	.4	98.3
	All 30 days	13	1.7	1.7	100.0
	Total	762	99.6	100.0	
Missing	System	3	.4		
Total		765	100.0		

During the past 12 months, did you ever try to quit smoking cigarettes?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I did not smoke cigarettes during the past 12 months	679	88.8	89.5	89.5
	Yes	39	5.1	5.1	94.6
	No	41	5.4	5.4	100.0
	Total	759	99.2	100.0	
Missing	System	6	.8		
Total		765	100.0		

During the past 30 days, how did you usually get your own cigarettes? (Select only one response)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I did not smoke cigarettes during the past 30 days.	710	92.8	93.3	93.3
	I bought them in a store such as a convenience store, supermarket, discount store, or gas station.	6	.8	.8	94.1
	I bought them from a vending machine.	3	.4	.4	94.5
	I gave someone else money to buy them for me.	9	1.2	1.2	95.7
	I borrowed (or bummed) them from someone else.	8	1.0	1.1	96.7
	A person 18 years or older gave them to me.	9	1.2	1.2	97.9
	I took them from a store or family member.	7	.9	.9	98.8
	I got them some other way.	9	1.2	1.2	100.0
	Total	761	99.5	100.0	
Missing	System	4	.5		
Total		765	100.0		

During the past 30 days, on how many days did you use chewing tobacco, snuff, or dip, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 days	710	92.8	93.8	93.8
	1 or 2 days	28	3.7	3.7	97.5
	3 to 5 days	3	.4	.4	97.9
	6 to 9 days	3	.4	.4	98.3
	10 to 19 days	6	.8	.8	99.1
	20 to 29 days	1	.1	.1	99.2
	All 30 days	6	.8	.8	100.0
	Total	757	99.0	100.0	
Missing	System	8	1.0		
Total		765	100.0		

Alcohol Use

Have you ever had a drink of alcohol, other than a few sips?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	219	28.6	29.3	29.3
	No	529	69.2	70.7	100.0
	Total	748	97.8	100.0	
Missing	System	17	2.2		
Total		765	100.0		

How old were you when you had your first drink of alcohol other than a few sips?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l have never had a drink of alcohol other than a few sips	538	70.3	71.3	71.3
	8 years old or younger	60	7.8	7.9	79.2
	9 years old	17	2.2	2.3	81.5
	10 years old	17	2.2	2.3	83.7
	11 years old	33	4.3	4.4	88.1
	12 years old	35	4.6	4.6	92.7
	13 years old or older	55	7.2	7.3	100.0
	Total	755	98.7	100.0	
Missing	System	10	1.3		
Total		765	100.0		

If you drank alcohol during the past 30 days, how did you usually get your alcohol?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l did not drink alcohol during the past 30 days	668	87.3	87.8	87.8
	I bought it at a store such as a liquor store, convenience store, gas station or supermarket	14	1.8	1.8	89.6
	I bought it at a restaurant, bar, or club	1	.1	.1	89.8
	I took it from home	8	1.0	1.1	90.8
	My parent(s)/guardian(s) gave it to me	20	2.6	2.6	93.4
	I gave someone else the money to buy it for me	1	.1	.1	93.6
	A person over 21 years old gave it to me	14	1.8	1.8	95.4
	I got it some other way	35	4.6	4.6	100.0
	Total	761	99.5	100.0	
Missing	System	4	.5		
Total		765	100.0		

Marijuana and Other Drug Use

Have you ever used marijuana?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	87	11.4	11.6	11.6
	No	666	87.1	88.4	100.0
	Total	753	98.4	100.0	
Missing	System	12	1.6		
Total		765	100.0		

How old were you when you tried marijuana for the first time?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l have never tried marijuana	677	88.5	88.8	88.8
	8 years old or younger	24	3.1	3.1	92.0
	9 years old	8	1.0	1.0	93.0
	10 years old	3	.4	.4	93.4
	11 years old	12	1.6	1.6	95.0
	12 years old	15	2.0	2.0	97.0
	13 years old or older	23	3.0	3.0	100.0
	Total	762	99.6	100.0	
Missing	System	3	.4		
Total		765	100.0		

During the past 30 days, did you use marijuana?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	43	5.6	5.7	5.7
	No	716	93.6	94.3	100.0
	Total	759	99.2	100.0	
Missing	System	6	.8		
Total		765	100.0		

During the past 30 days, did you use marijuana on school property?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	14	1.8	1.9	1.9
	No	739	96.6	98.1	100.0
	Total	753	98.4	100.0	
Missing	System	12	1.6		
Total		765	100.0		

Have you ever used any form of cocaine, including powder, crack, or freebase?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	30	3.9	3.9	3.9
	No	733	95.8	96.1	100.0
	Total	763	99.7	100.0	
Missing	System	2	.3		
Total		765	100.0		

Have you ever used LSD (acid), PCP (angel dust), mushrooms, ecstasy or other hallucinogens?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	27	3.5	3.6	3.6
	No	733	95.8	96.4	100.0
	Total	760	99.3	100.0	
Missing	System	5	.7		
Total		765	100.0		

Have you ever sniffed glue, or breathed the contents of spray cans, or inhaled any paints or sprays to get high?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	60	7.8	7.9	7.9
	No	702	91.8	92.1	100.0
	Total	762	99.6	100.0	
Missing	System	3	.4		
Total		765	100.0		

Have you ever smoked, snorted, or injected a synthetic drug, including bath salts, black magic, or red magic?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	27	3.5	3.5	3.5
	No	734	95.9	96.5	100.0
	Total	761	99.5	100.0	
Missing	System	4	.5		
Total		765	100.0		

Have you ever used a needle to inject any illegal drug into your body?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	14	1.8	1.8	1.8
	No	745	97.4	98.2	100.0
	Total	759	99.2	100.0	
Missing	System	6	.8		
Total		765	100.0		

Have you ever taken a prescription drug such as OxyContin, Percocet, Vicodin, Adderall, Ritalin, or Xanax without a doctor's prescription?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	34	4.4	4.5	4.5
	No	716	93.6	95.5	100.0
	Total	750	98.0	100.0	
Missing	System	15	2.0		
Total		765	100.0		

If you took a prescription drug without a doctor's prescription during the past 12 months, how did you usually get it?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I did not take a prescription drug without a doctor's prescription during the past 12 months	685	89.5	90.0	90.0
	I took it from home	59	7.7	7.8	97.8
	l took it from someone else's home	3	.4	.4	98.2
	I got it from someone	9	1.2	1.2	99.3
	I bought it from someone	1	.1	.1	99.5
	I got it some other way	4	.5	.5	100.0
	Total	761	99.5	100.0	
Missing	System	4	.5		
Total		765	100.0		

Have you ever used methamphetamines (also called speed, crystal, crank, or ice)?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	24	3.1	3.2	3.2
	No	732	95.7	96.8	100.0
	Total	756	98.8	100.0	
Missing	System	9	1.2		
Total		765	100.0		

During the past 12 months, has anyone offered, sold, or given you an illegal drug on school property?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	54	7.1	7.1	7.1
	No	703	91.9	92.9	100.0
	Total	757	99.0	100.0	
Missing	System	8	1.0		
Total		765	100.0		

Have you ever had sexual intercourse?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	99	12.9	13.0	13.0
	No	664	86.8	87.0	100.0
	Total	763	99.7	100.0	
Missing	System	2	.3		
Total		765	100.0		

How old were you when you had sexual intercourse for the first time?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I have never had sexual intercourse	645	84.3	84.8	84.8
	11 years old or younger	48	6.3	6.3	91.1
	12 years old	21	2.7	2.8	93.8
	13 years old or older	47	6.1	6.2	100.0
	Total	761	99.5	100.0	
Missing	System	4	.5		
Total		765	100.0		

How many times have you been pregnant or gotten someone pregnant?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	718	93.9	95.0	95.0
	1 time	18	2.4	2.4	97.4
	2 or more times	6	.8	.8	98.1
	Not sure	14	1.8	1.9	100.0
	Total	756	98.8	100.0	
Missing	System	9	1.2		
Total		765	100.0		

During your life, with how many people have you had sexual intercourse?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l have never had sexual intercourse	666	87.1	87.2	87.2
	1 person	49	6.4	6.4	93.6
	2 people	17	2.2	2.2	95.8
	3 people	13	1.7	1.7	97.5
	4 people	2	.3	.3	97.8
	5 people	1	.1	.1	97.9
	6 or more people	16	2.1	2.1	100.0
	Total	764	99.9	100.0	
Missing	System	1	.1		
Total		765	100.0		

Have you ever been taught about abstaining from sexual activity?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	444	58.0	58.7	58.7
	No	177	23.1	23.4	82.1
	Not sure	135	17.6	17.9	100.0
	Total	756	98.8	100.0	
Missing	System	9	1.2		
Total		765	100.0		

Have you ever been taught about AIDS or HIV infection in school?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	492	64.3	64.8	64.8
	No	190	24.8	25.0	89.9
	Not sure	77	10.1	10.1	100.0
	Total	759	99.2	100.0	
Missing	System	6	.8		
Total		765	100.0		

Have you ever been taught about chlamydia, gonorrhea, syphilis, or human papillomavirus, or genital warts?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	353	46.1	46.6	46.6
	No	305	39.9	40.2	86.8
	Not sure	100	13.1	13.2	100.0
	Total	758	99.1	100.0	
Missing	System	7	.9		
Total		765	100.0		

When you have questions about sexually transmitted diseases (STD), HIV, AIDS, or pregnancy prevention, with whom do you usually talk?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I do not have questions about sexually transmitted diseases (STD), HIV, AIDS or pregnancy prevention	533	69.7	70.7	70.7
	Parent or other adult family member	136	17.8	18.0	88.7
	Teacher or other adult in this school	36	4.7	4.8	93.5
	Religious leader	3	.4	.4	93.9
	Doctor or nurse	8	1.0	1.1	95.0
	Other adult	3	.4	.4	95.4
	Friend or sibling	22	2.9	2.9	98.3
	Some other person	13	1.7	1.7	100.0
	Total	754	98.6	100.0	
Missing	System	11	1.4		
Total		765	100.0		

Perceptions of Weight

How do you describe your weight?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very underweight	33	4.3	4.4	4.4
	Slightly underweight	95	12.4	12.7	17.2
	About the right weight	338	44.2	45.3	62.5
	Slightly overweight	239	31.2	32.0	94.5
	Very overweight	41	5.4	5.5	100.0
	Total	746	97.5	100.0	
Missing	System	19	2.5		
Total		765	100.0		

Which of the following are you trying to do about your weight?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Lose weight	397	51.9	52.7	52.7
	Gain weight	69	9.0	9.2	61.9
	Stay the same weight	153	20.0	20.3	82.2
	I am not trying to do anything about my weight	134	17.5	17.8	100.0
	Total	753	98.4	100.0	
Missing	System	12	1.6		
Total		765	100.0		

Have you ever exercised to lose weight or to keep from gaining weight?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	557	72.8	74.1	74.1
	No	195	25.5	25.9	100.0
	Total	752	98.3	100.0	
Missing	System	13	1.7		
Total		765	100.0		

Have you ever eaten less food, fewer calories, or foods low in fat to lose weight or to keep from gaining weight?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	341	44.6	45.5	45.5
	No	409	53.5	54.5	100.0
	Total	750	98.0	100.0	
Missing	System	15	2.0		
Total		765	100.0		

Have you ever gone without eating for 24 hours or more (also called fasting) to lose weight or keep from gaining weight?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	151	19.7	20.0	20.0
	No	603	78.8	80.0	100.0
	Total	754	98.6	100.0	
Missing	System	11	1.4		
Total		765	100.0		

Perceptions of Weight

Have you ever taken any diet pills, powders, or liquids without a doctor's advice to lose weight or to keep from gaining weight? (Do not include meal replacement products such as Slim Fast.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	51	6.7	6.8	6.8
	No	699	91.4	93.2	100.0
	Total	750	98.0	100.0	
Missing	System	15	2.0		
Total		765	100.0		

Have you ever vomited or taken laxatives to lose weight or to keep from gaining weight?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	46	6.0	6.2	6.2
	No	698	91.2	93.8	100.0
	Total	744	97.3	100.0	
Missing	System	21	2.7		
Total		765	100.0		

Nutrition

During the past 7 days, how many times do you eat fruit? (Include raw, cooked, frozen, canned or dried fruit and 100% fruit juice.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l do not eat fruit	47	6.1	6.2	6.2
	1 time	57	7.5	7.5	13.7
	2 times	88	11.5	11.6	25.3
	3 times	138	18.0	18.2	43.5
	4 times	100	13.1	13.2	56.7
	5 or more times	329	43.0	43.3	100.0
	Total	759	99.2	100.0	
Missing	System	6	.8		
Total		765	100.0		

During the past 7 days, how many times do you eat vegetables? (Include raw, cooked, frozen, canned vegetables, salad greens and 100% vegetable juice, BUT do not count french fries.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l do not eat vegetables	55	7.2	7.3	7.3
	1 time	86	11.2	11.4	18.7
	2 times	111	14.5	14.7	33.3
	3 times	143	18.7	18.9	52.2
	4 times	104	13.6	13.8	66.0
	5 or more times	257	33.6	34.0	100.0
	Total	756	98.8	100.0	
Missing	System	9	1.2		
Total		765	100.0		

During the past 7 days, how many times did you eat junk food such as sweet or salty snack foods? (Include chips, crackers, cookies, candy, cakes, or donuts.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I did not eat junk food during the past 7 days.	43	5.6	5.7	5.7
	1 to 3 times during the past 7 days	288	37.6	38.3	44.0
	4 to 6 times during the past 7 days	145	19.0	19.3	63.3
	1 time per day	69	9.0	9.2	72.5
	2 times per day	75	9.8	10.0	82.4
	3 times per day	54	7.1	7.2	89.6
	4 or more times per day	78	10.2	10.4	100.0
	Total	752	98.3	100.0	
Missing	System	13	1.7		
Total		765	100.0		

Nutrition

During the past 7 days, how many times did you drink a can, bottle, or glass of soda or pop, such as Coke, Pepsi, or Sprite? (Do not include diet soda or diet pop.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I did not drink soda or pop during the past 7 days.	151	19.7	19.9	19.9
	1 to 3 times during the past 7 days	308	40.3	40.7	60.6
	4 to 6 times during the past 7 days	97	12.7	12.8	73.4
	1 time per day	57	7.5	7.5	81.0
	2 times per day	54	7.1	7.1	88.1
	3 times per day	35	4.6	4.6	92.7
	4 or more times per day	55	7.2	7.3	100.0
	Total	757	99.0	100.0	
Missing	System	8	1.0		
Total		765	100.0		

During the past 7 days, how many times do you drink a can, bottle, or glass of any other sweetened beverage? (Include sweet tea, punch, Kool-Aid, fruit-flavored drinks, energy drinks, and sports drinks. Do not include diet or sugar-free drinks.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l did not drink any other sweetened beverages during the past 7 days.	127	16.6	16.9	16.9
	1 to 3 times during the past 7 days	287	37.5	38.2	55.1
	4 to 6 times during the past 7 days	104	13.6	13.8	68.9
	1 time per day	76	9.9	10.1	79.0
	2 times per day	59	7.7	7.8	86.8
	3 times per day	38	5.0	5.1	91.9
	4 or more times per day	61	8.0	8.1	100.0
	Total	752	98.3	100.0	
Missing	System	13	1.7		
Total		765	100.0		

During the past 7 days, how many glasses of milk did you drink (include the milk you drank in a glass or cup, from a carton, or with cereal. Count the half pint milk served at school as equal to 1 glass.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l did not drink milk during the past 7 days	105	13.7	14.1	14.1
	1 to 3 times during the past 7 days	187	24.4	25.1	39.1
	4 to 6 times during the past 7 days	129	16.9	17.3	56.4
	1 time per day	122	15.9	16.4	72.8
	2 times per day	93	12.2	12.5	85.3
	3 times per day	50	6.5	6.7	92.0
	4 or more times per day	60	7.8	8.0	100.0
	Total	746	97.5	100.0	
Missing	System	19	2.5		
Total		765	100.0		

Nutrition

During the past 7 days, how many times did you buy food and/or drinks from vending machines at school?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	574	75.0	76.3	76.3
	1 time	81	10.6	10.8	87.1
	2 times	47	6.1	6.3	93.4
	3 times	24	3.1	3.2	96.5
	4 times	13	1.7	1.7	98.3
	5 or more times	13	1.7	1.7	100.0
	Total	752	98.3	100.0	
Missing	System	13	1.7		
Total		765	100.0		

During the past 7 days, on how many days did you eat breakfast?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 days	89	11.6	11.8	11.8
	1 day	65	8.5	8.6	20.5
	2 days	58	7.6	7.7	28.2
	3 days	48	6.3	6.4	34.5
	4 days	58	7.6	7.7	42.2
	5 days	47	6.1	6.2	48.5
	6 days	42	5.5	5.6	54.1
	7 days	346	45.2	45.9	100.0
	Total	753	98.4	100.0	
Missing	System	12	1.6		
Total		765	100.0		

During the past 7 days, how many times did you eat dinner prepared at home with your family?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	62	8.1	8.3	8.3
	1 time	32	4.2	4.3	12.6
	2 times	36	4.7	4.8	17.4
	3 times	47	6.1	6.3	23.7
	4 times	59	7.7	7.9	31.6
	5 times	93	12.2	12.4	44.0
	6 times	89	11.6	11.9	55.9
	7 times	330	43.1	44.1	100.0
	Total	748	97.8	100.0	
Missing	System	17	2.2		
Total		765	100.0		

Physical Activity

During the past 7 days on how many days were you physically active for a total of at least 60 minutes per day? (Add up all the time you spend in any kind of physical activity that increases your heart rate and makes you breathe hard some of the time.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 days	65	8.5	8.6	8.6
	1 day	45	5.9	5.9	14.5
	2 days	46	6.0	6.1	20.6
	3 days	78	10.2	10.3	30.9
	4 days	78	10.2	10.3	41.2
	5 days	123	16.1	16.2	57.4
	6 days	66	8.6	8.7	66.1
	7 days	257	33.6	33.9	100.0
	Total	758	99.1	100.0	
Missing	System	7	.9		
Total		765	100.0		

In an average week when you are in school, on how many days do you go to physical education (PE) classes?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 days	19	2.5	2.6	2.6
	1 day	28	3.7	3.8	6.4
	2 days	86	11.2	11.7	18.1
	3 days	442	57.8	60.1	78.2
	4 days	33	4.3	4.5	82.7
	5 days	127	16.6	17.3	100.0
	Total	735	96.1	100.0	
Missing	System	30	3.9		
Total		765	100.0		

On an average school day, how many hours do you watch TV?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l do not watch TV on an average school day	96	12.5	12.9	12.9
	Less than 1 hour per day	145	19.0	19.5	32.5
	1 hour per day	125	16.3	16.8	49.3
	2 hours per day	163	21.3	22.0	71.3
	3 hours per day	97	12.7	13.1	84.4
	4 hours per day	61	8.0	8.2	92.6
	5 or more hours per day	55	7.2	7.4	100.0
	Total	742	97.0	100.0	
Missing	System	23	3.0		
Total		765	100.0		

Physical Activity

On an average school day, how many hours do you play video or computer games or use a computer for something that is not school work? (Include activities such as Nintendo, Game Boy, Play Station, Xbox, computer games, and the Internet)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l do not play video or computer games or use a computer for non school work	188	24.6	25.1	25.1
	Less than 1 hour per day	154	20.1	20.5	45.6
	1 hour per day	130	17.0	17.3	62.9
	2 hours per day	108	14.1	14.4	77.3
	3 hours per day	72	9.4	9.6	86.9
	4 hours per day	32	4.2	4.3	91.2
	5 or more hours per day	66	8.6	8.8	100.0
	Total	750	98.0	100.0	
Missing	System	15	2.0		
Total		765	100.0		

On an average Saturday or Sunday, how many hours do you watch TV, play video games, or use a computer for something that is not school work? (Include activities such as Nintendo, Game Boy, PlayStation, Xbox, computer games, and the Internet.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l do not watch TV, play video games, or use a computer on an average Saturday or Sunday	92	12.0	12.4	12.4
	Less than 1 hour per day	127	16.6	17.1	29.4
	1 hour per day	87	11.4	11.7	41.1
	2 hours per day	121	15.8	16.3	57.4
	3 hours per day	110	14.4	14.8	72.2
	4 hours per day	69	9.0	9.3	81.5
	5 or more hours per day	138	18.0	18.5	100.0
	Total	744	97.3	100.0	
Missing	System	21	2.7		
Total		765	100.0		

During the past 12 months, on how many sports teams did you play? (Include any teams run by your school or community groups.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 teams	278	36.3	37.7	37.7
	1 team	207	27.1	28.1	65.8
	2 teams	137	17.9	18.6	84.4
	3 or more teams	115	15.0	15.6	100.0
	Total	737	96.3	100.0	
Missing	System	28	3.7		
Total		765	100.0		

Physical Activity

On an average school day, how many hours do you play video or computer games or use a computer for something that is not school work? (Include activities such as Nintendo, Game Boy, Play Station, Xbox, computer games, and the Internet)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I do not play video or computer games or use a computer for something that is not school work	222	29.0	29.7	29.7
	Less than 1 hour per day	171	22.4	22.9	52.5
	1 hour per day	89	11.6	11.9	64.4
	2 hours per day	116	15.2	15.5	79.9
	3 hours per day	62	8.1	8.3	88.2
	4 hours per day	25	3.3	3.3	91.6
	5 or more hours per day	63	8.2	8.4	100.0
	Total	748	97.8	100.0	
Missing	System	17	2.2		
Total		765	100.0		

During the past 12 months, how would you describe your grades in school?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Mostly A's	213	27.8	28.2	28.2
	Mostly B's	280	36.6	37.0	65.2
	Mostly C's	132	17.3	17.5	82.7
	Mostly D's	28	3.7	3.7	86.4
	Mostly F's	16	2.1	2.1	88.5
	None of these grades	1	.1	.1	88.6
	Not sure	86	11.2	11.4	100.0
	Total	756	98.8	100.0	
Missing	System	9	1.2		
Total		765	100.0		

When you are outside for more than one hour on a sunny day, how often do you wear sunscreen with an SPF of 15 or higher?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Never	312	40.8	42.0	42.0
	Rarely	206	26.9	27.8	69.8
	Sometimes	122	15.9	16.4	86.3
	Most of the time	65	8.5	8.8	95.0
	Always	37	4.8	5.0	100.0
	Total	742	97.0	100.0	
Missing	System	23	3.0		
Total		765	100.0		

On an average school night, approximately how many hours of sleep do you get?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	4 or less	58	7.6	7.9	7.9
	5 hours	64	8.4	8.7	16.6
	6 hours	74	9.7	10.0	26.6
	7 hours	132	17.3	17.9	44.5
	8 hours	246	32.2	33.4	77.9
	9 hours	98	12.8	13.3	91.2
	10 or more hours	65	8.5	8.8	100.0
	Total	737	96.3	100.0	
Missing	System	28	3.7		
Total		765	100.0		

A disability can be physical, mental, emotional, or communication-related. Do you consider yourself to have a disability?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	114	14.9	15.5	15.5
	No	521	68.1	70.9	86.4
	Not sure	100	13.1	13.6	100.0
	Total	735	96.1	100.0	
Missing	System	30	3.9		
Total		765	100.0		

On an average school day, how long after school are you alone without a parent or trusted adult?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l am not alone after school	305	39.9	41.2	41.2
	Less than 1 hour per day	190	24.8	25.6	66.8
	2 hours per day	110	14.4	14.8	81.6
	3 hours per day	45	5.9	6.1	87.7
	4 hours per day	31	4.1	4.2	91.9
	5 hours per day	16	2.1	2.2	94.1
	6 or more hours per day	44	5.8	5.9	100.0
	Total	741	96.9	100.0	
Missing	System	24	3.1		
Total		765	100.0		

Do you participate in school activities other than sports, such as band, drama, clubs, or student government?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	286	37.4	40.7	40.7
	No	417	54.5	59.3	100.0
	Total	703	91.9	100.0	
Missing	System	62	8.1		
Total		765	100.0		

During the past 30 days, how many times did you perform any organized community service as a non-paid volunteer (for example, serving meals to elderly, picking up litter, helping out at a hospital, building homes for the poor, etc.)?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	515	67.3	69.3	69.3
	1 time	110	14.4	14.8	84.1
	2 or 3 times	83	10.8	11.2	95.3
	4 or 5 times	18	2.4	2.4	97.7
	6 or more times	17	2.2	2.3	100.0
	Total	743	97.1	100.0	
Missing	System	22	2.9		
Total		765	100.0		

When was the last time you saw a dentist for a check-up, exam, teeth cleaning, or other dental work?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	During the past 12 months	461	60.3	62.5	62.5
	Between 12 and 24 months ago	83	10.8	11.2	73.7
	More than 24 months ago	48	6.3	6.5	80.2
	Never	27	3.5	3.7	83.9
	Not sure	119	15.6	16.1	100.0
	Total	738	96.5	100.0	
Missing	System	27	3.5		
Total		765	100.0		

When was the last time you saw a dentist for a check-up, exam, teeth cleaning, or other dental work?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	During the past 12 months	461	60.3	62.5	62.5
	Between 12 and 24 months ago	83	10.8	11.2	73.7
	More than 24 months ago	48	6.3	6.5	80.2
	Never	27	3.5	3.7	83.9
	Not sure	119	15.6	16.1	100.0
	Total	738	96.5	100.0	
Missing	System	27	3.5		
Total		765	100.0		

Has a doctor or nurse ever told you that you have asthma?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	162	21.2	22.1	22.1
	No	516	67.5	70.4	92.5
	Not sure	55	7.2	7.5	100.0
	Total	733	95.8	100.0	
Missing	System	32	4.2		
Total		765	100.0		

During the past 12 months, have you had an episode of asthma or an asthma attack?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l do not have asthma	540	70.6	73.5	73.5
	No, I have asthma, but I have not had an episode of asthma or an asthma attack during the past 12 months	121	15.8	16.5	89.9
	Yes, I have had an episode of asthma or an asthma attack during the past 12 months	41	5.4	5.6	95.5
	Not sure	33	4.3	4.5	100.0
	Total	735	96.1	100.0	
Missing	System	30	3.9		
Total		765	100.0		

How often do you feel stress in your life?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Never	109	14.2	14.9	14.9
	Rarely	223	29.2	30.4	45.2
	Sometimes	227	29.7	30.9	76.2
	Most of the time	122	15.9	16.6	92.8
	All of the time	53	6.9	7.2	100.0
	Total	734	95.9	100.0	
Missing	System	31	4.1		
Total		765	100.0		

How would you rate your health in general?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Excellent	183	23.9	24.8	24.8
	Very good	251	32.8	34.0	58.8
	Good	214	28.0	29.0	87.8
	Fair	78	10.2	10.6	98.4
	Poor	12	1.6	1.6	100.0
	Total	738	96.5	100.0	
Missing	System	27	3.5		
Total		765	100.0		

Based on your answers to this survey, which of the following influences your decisions about health the most? (Choose One)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Parents/Family	406	53.1	56.2	56.2
	School	58	7.6	8.0	64.2
	Friends/Peers	100	13.1	13.8	78.0
	Church/Youth Groups	6	.8	.8	78.8
	Media: TV/Movies/Books/Magazin es	12	1.6	1.7	80.5
	Computer/Internet	8	1.0	1.1	81.6
	Doctor	32	4.2	4.4	86.0
	Other	101	13.2	14.0	100.0
	Total	723	94.5	100.0	
Missing	System	42	5.5		
Total		765	100.0		

From which of the following would you prefer to get information about health? (Choose One)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Parents/Family	331	43.3	45.3	45.3
	School	66	8.6	9.0	54.4
	Friends/Peers	57	7.5	7.8	62.2
	Church/Youth Groups	14	1.8	1.9	64.1
	Media: TV/Movies/Books/Magazin es	12	1.6	1.6	65.8
	Computer/Internet	20	2.6	2.7	68.5
	Doctor	178	23.3	24.4	92.9
	Other	52	6.8	7.1	100.0
	Total	730	95.4	100.0	
Missing	System	35	4.6		
Total		765	100.0		

Agree or Disagree

Do you agree or disagree that you feel alone in your life?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	81	10.6	11.0	11.0
	Agree	88	11.5	11.9	22.9
	Not sure	136	17.8	18.4	41.3
	Disagree	187	24.4	25.3	66.6
	Strongly disagree	247	32.3	33.4	100.0
	Total	739	96.6	100.0	
Missing	System	26	3.4		
Total		765	100.0		

Do you agree or disagree that you feel good about yourself?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	255	33.3	34.7	34.7
	Agree	269	35.2	36.6	71.3
	Not sure	104	13.6	14.1	85.4
	Disagree	68	8.9	9.3	94.7
	Strongly disagree	39	5.1	5.3	100.0
	Total	735	96.1	100.0	
Missing	System	30	3.9		
Total		765	100.0		

Do you agree or disagree that your teachers really care about you and give you a lot of encouragement?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	180	23.5	24.9	24.9
	Agree	228	29.8	31.6	56.5
	Not sure	169	22.1	23.4	79.9
	Disagree	81	10.6	11.2	91.1
	Strongly disagree	64	8.4	8.9	100.0
	Total	722	94.4	100.0	
Missing	System	43	5.6		
Total		765	100.0		

Do you agree or disagree that harassment and bullying by other students is a problem at your school?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	195	25.5	26.5	26.5
	Agree	193	25.2	26.2	52.7
	Not sure	195	25.5	26.5	79.2
	Disagree	107	14.0	14.5	93.8
	Strongly disagree	46	6.0	6.3	100.0
	Total	736	96.2	100.0	
Missing	System	29	3.8		
Total		765	100.0		

Agree or Disagree

Do you agree or disagree that gangs are a problem at your school?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	78	10.2	10.6	10.6
	Agree	75	9.8	10.2	20.8
	Not sure	187	24.4	25.5	46.3
	Disagree	185	24.2	25.2	71.5
	Strongly disagree	209	27.3	28.5	100.0
	Total	734	95.9	100.0	
Missing	System	31	4.1		
Total		765	100.0		

Do you agree or disagree that drugs are a problem at your school?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	106	13.9	14.7	14.7
	Agree	123	16.1	17.1	31.8
	Not sure	217	28.4	30.1	61.9
	Disagree	112	14.6	15.5	77.4
	Strongly disagree	163	21.3	22.6	100.0
	Total	721	94.2	100.0	
Missing	System	44	5.8		
Total		765	100.0		

Appendix E. Macon County High School Frequencies

Unintentional Injuries and Violence

When you rode a bicycle during the past 12 months, how often did you wear a helmet?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I did not ride a bicycle during the past 12 months	484	46.8	46.9	46.9
	Never wore a helmet	420	40.6	40.7	87.6
	Rarely wore a helmet	61	5.9	5.9	93.5
	Sometimes wore a helmet	27	2.6	2.6	96.1
	Most of the time wore a helmet	24	2.3	2.3	98.4
	Always wore a helmet	16	1.5	1.6	100.0
	Total	1032	99.8	100.0	
Missing	System	2	.2		
Total		1034	100.0		

How often do you wear a seatbelt when riding in a car driven by someone else?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Never	22	2.1	2.1	2.1
	Rarely	48	4.6	4.7	6.8
	Sometimes	86	8.3	8.3	15.1
	Most of the time	310	30.0	30.1	45.2
	Always	564	54.5	54.8	100.0
	Total	1030	99.6	100.0	
Missing	System	4	.4		
Total		1034	100.0		

During the past 30 days, how many times did you ride in a car or other vehicle driven by someone who had been drinking alcohol?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	799	77.3	77.6	77.6
	1 time	97	9.4	9.4	87.0
	2 or 3 times	68	6.6	6.6	93.6
	4 or 5 times	14	1.4	1.4	95.0
	6 or more times	52	5.0	5.0	100.0
	Total	1030	99.6	100.0	
Missing	System	4	.4		
Total		1034	100.0		

During the past 30 days, how many times did you drive a car or other vehicle when you had been drinking alcohol?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	913	88.3	88.6	88.6
	1 time	59	5.7	5.7	94.3
	2 or 3 times	32	3.1	3.1	97.4
	4 or 5 times	4	.4	.4	97.8
	6 or more times	23	2.2	2.2	100.0
	Total	1031	99.7	100.0	
Missing	System	3	.3		
Total		1034	100.0		

Unintentional Injuries and Violence

During the past 12 months, have you been bullied on school property?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	211	20.4	20.6	20.6
	No	814	78.7	79.4	100.0
	Total	1025	99.1	100.0	
Missing	System	9	.9		
Total		1034	100.0		

During the past 12 months, have you ever been electronically bullied, such as through e-mail, chat rooms, instant messaging, Web sites, or text messaging?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	167	16.2	16.2	16.2
	No	866	83.8	83.8	100.0
	Total	1033	99.9	100.0	
Missing	System	1	.1		
Total		1034	100.0		

During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 days	738	71.4	71.8	71.8
	1 day	26	2.5	2.5	74.3
	2 or 3 days	50	4.8	4.9	79.2
	4 or 5 days	27	2.6	2.6	81.8
	6 or more days	187	18.1	18.2	100.0
	Total	1028	99.4	100.0	
Missing	System	6	.6		
Total		1034	100.0		

During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club on school property?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 days	882	85.3	85.8	85.8
	1 day	21	2.0	2.0	87.8
	2 or 3 days	18	1.7	1.8	89.6
	4 or 5 days	19	1.8	1.8	91.4
	6 or more days	88	8.5	8.6	100.0
	Total	1028	99.4	100.0	
Missing	System	6	.6		
Total		1034	100.0		

Unintentional Injuries and Violence

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?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 days	978	94.6	94.6	94.6
	1 day	25	2.4	2.4	97.0
	2 or 3 days	18	1.7	1.7	98.7
	4 or 5 days	1	.1	.1	98.8
	6 or more days	12	1.2	1.2	100.0
	Total	1034	100.0	100.0	

During the past 12 months, how many times has someone threatened or injured you with a weapon such as a gun, knife, or club on school property?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	971	93.9	94.1	94.1
	1 time	25	2.4	2.4	96.5
	2 or 3 times	16	1.5	1.6	98.1
	4 or 5 times	4	.4	.4	98.4
	6 or 7 times	2	.2	.2	98.6
	10 or 11 times	2	.2	.2	98.8
	12 or more times	12	1.2	1.2	100.0
	Total	1032	99.8	100.0	
Missing	System	2	.2		
Total		1034	100.0		

During the past 12 months, how many times has someone stolen or deliberately damaged your property such as your car, clothing, or books on school property?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	842	81.4	81.8	81.8
	1 time	98	9.5	9.5	91.4
	2 or 3 times	59	5.7	5.7	97.1
	4 or 5 times	13	1.3	1.3	98.3
	6 or 7 times	3	.3	.3	98.6
	8 or 9 times	1	.1	.1	98.7
	12 or more times	13	1.3	1.3	100.0
	Total	1029	99.5	100.0	
Missing	System	5	.5		
Total		1034	100.0		

During the past 12 months, how many times were you in a physical fight?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	826	79.9	79.9	79.9
	1 time	82	7.9	7.9	87.8
	2 or 3 times	76	7.4	7.4	95.2
	4 or 5 times	23	2.2	2.2	97.4
	6 or 7 times	4	.4	.4	97.8
	8 or 9 times	6	.6	.6	98.4
	10 or 11 times	2	.2	.2	98.5
	12 or more times	15	1.5	1.5	100.0
	Total	1034	100.0	100.0	

Unintentional Injuries and Violence

During the past 12 months, how many times were you in a physical fight in which you were injured and had to be treated by a doctor or nurse?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	1000	96.7	96.9	96.9
	1 time	18	1.7	1.7	98.6
	2 or 3 times	4	.4	.4	99.0
	4 or 5 times	6	.6	.6	99.6
	6 or more times	4	.4	.4	100.0
	Total	1032	99.8	100.0	
Missing	System	2	.2		
Total		1034	100.0		

During the past 12 months, how many times were you in a physical fight on school property?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	933	90.2	90.7	90.7
	1 time	60	5.8	5.8	96.5
	2 or 3 times	15	1.5	1.5	98.0
	4 or 5 times	12	1.2	1.2	99.1
	6 or 7 times	2	.2	.2	99.3
	8 or 9 times	1	.1	.1	99.4
	12 or more times	6	.6	.6	100.0
	Total	1029	99.5	100.0	
Missing	System	5	.5		
Total		1034	100.0		

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

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	109	10.5	10.6	10.6
	No	917	88.7	89.4	100.0
	Total	1026	99.2	100.0	
Missing	System	8	.8		
Total		1034	100.0		

Have you ever been physically forced to have sexual intercourse when you did not want to?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	96	9.3	9.3	9.3
	No	931	90.0	90.7	100.0
	Total	1027	99.3	100.0	
Missing	System	7	.7		
Total		1034	100.0		

Suicide

During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	305	29.5	29.7	29.7
	No	723	69.9	70.3	100.0
	Total	1028	99.4	100.0	
Missing	System	6	.6		
Total		1034	100.0		

During the past 12 months, did you ever seriously consider attempting suicide?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	184	17.8	18.0	18.0
	No	841	81.3	82.0	100.0
	Total	1025	99.1	100.0	
Missing	System	9	.9		
Total		1034	100.0		

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

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	146	14.1	14.2	14.2
	No	881	85.2	85.8	100.0
	Total	1027	99.3	100.0	
Missing	System	7	.7		
Total		1034	100.0		

During the past 12 months, how many times did you actually attempt suicide?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	883	85.4	86.6	86.6
	1 time	97	9.4	9.5	96.1
	2 or 3 times	23	2.2	2.3	98.3
	4 or 5 times	2	.2	.2	98.5
	6 or more times	15	1.5	1.5	100.0
	Total	1020	98.6	100.0	
Missing	System	14	1.4		
Total		1034	100.0		

<u>Suicide</u> When you feel sad, empty, hopeless, angry, or anxious, with whom do you usually talk?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l do not feel sad, empty, hopeless, angry, or anxious	288	27.9	28.0	28.0
	Parent or other adult family member	149	14.4	14.5	42.5
	Teacher or other adult in this school	20	1.9	1.9	44.5
	Religious leader	26	2.5	2.5	47.0
	Doctor or nurse	1	.1	.1	47.1
	Other adult	17	1.6	1.7	48.7
	Friend or sibling	406	39.3	39.5	88.2
	Some other person	121	11.7	11.8	100.0
	Total	1028	99.4	100.0	
Missing	System	6	.6		
Total		1034	100.0		

Tobacco Use

How old were you when you smoked a whole cigarette for the first time?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l have never smoked a whole cigarette	648	62.7	63.0	63.0
	8 years old or younger	44	4.3	4.3	67.3
	9 or 10 years old	33	3.2	3.2	70.5
	11 or 12 years old	65	6.3	6.3	76.8
	13 or 14 years old	119	11.5	11.6	88.4
	15 or 16 years old	95	9.2	9.2	97.7
	17 years old or older	24	2.3	2.3	100.0
	Total	1028	99.4	100.0	
Missing	System	6	.6		
Total		1034	100.0		

During the past 12 months, did you ever try to quit smoking cigarettes?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I did not smoke during the past 12 months	779	75.3	75.6	75.6
	Yes	130	12.6	12.6	88.2
	No	122	11.8	11.8	100.0
	Total	1031	99.7	100.0	
Missing	System	3	.3		
Total		1034	100.0		

During the past 30 days, on how many days did you use chewing tobacco, snuff, or dip, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 days	867	83.8	84.0	84.0
	1 or 2 days	42	4.1	4.1	88.1
	3 to 5 days	17	1.6	1.6	89.7
	6 to 9 days	15	1.5	1.5	91.2
	10 to 19 days	19	1.8	1.8	93.0
	20 to 29 days	15	1.5	1.5	94.5
	All 30 days	57	5.5	5.5	100.0
	Total	1032	99.8	100.0	
Missing	System	2	.2		
Total		1034	100.0		

Alcohol Use

How old were you when you had your first drink of alcohol other than a few sips?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I have never had a drink of alcohol other than a few sips	375	36.3	36.5	36.5
	8 years old or younger	69	6.7	6.7	43.3
	9 or 10 years old	57	5.5	5.6	48.8
	11 or 12 years old	70	6.8	6.8	55.7
	13 or 14 years old	205	19.8	20.0	75.6
	15 or 16 years old	210	20.3	20.5	96.1
	17 years old or older	40	3.9	3.9	100.0
	Total	1026	99.2	100.0	
Missing	System	8	.8		
Total		1034	100.0		

During the past 30 days, on how many days did you have at least one drink of alcohol?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 days	588	56.9	56.9	56.9
	1 or 2 days	233	22.5	22.5	79.4
	3 to 5 days	92	8.9	8.9	88.3
	6 to 9 days	58	5.6	5.6	93.9
	10 to 19 days	35	3.4	3.4	97.3
	20 to 29 days	10	1.0	1.0	98.3
	All 30 days	18	1.7	1.7	100.0
	Total	1034	100.0	100.0	

During the past 30 days, on how many days did you have 5 or more drinks of alcohol in a row, that is, within a couple of hours?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 days	743	71.9	72.0	72.0
	1 day	109	10.5	10.6	82.6
	2 days	74	7.2	7.2	89.7
	3 to 5 days	58	5.6	5.6	95.3
	6 to 9 days	23	2.2	2.2	97.6
	10 to 19 days	13	1.3	1.3	98.8
	20 or more days	12	1.2	1.2	100.0
	Total	1032	99.8	100.0	
Missing	System	2	.2		
Total		1034	100.0		

Alcohol Use

During the past 30 days, on how many days did you have at least one drink of alcohol on school property?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 days	961	92.9	93.3	93.3
	1 or 2 days	34	3.3	3.3	96.6
	3 to 5 days	17	1.6	1.7	98.3
	6 to 9 days	4	.4	.4	98.6
	10 to 19 days	5	.5	.5	99.1
	20 to 29 days	1	.1	.1	99.2
	All 30 days	8	.8	.8	100.0
	Total	1030	99.6	100.0	
Missing	System	4	.4		
Total		1034	100.0		

If you drank alcohol during the past 30 days, how did you usually get your alcohol?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l did not drink alcohol during the past 30 days	607	58.7	58.8	58.8
	A. I did not drink alcohol bought it at a store such as a liquor store, convenience store, gas station or supermarket	11	1.1	1.1	59.9
	l bought it at a restaurant, bar, or club	10	1.0	1.0	60.9
	I took it from home	24	2.3	2.3	63.2
	My parent(s)/guardian(s) gave it to me	40	3.9	3.9	67.1
	I gave someone else the money to buy it for me	94	9.1	9.1	76.2
	A person over 21 years old gave it to me	84	8.1	8.1	84.3
	I got it some other way	162	15.7	15.7	100.0
	Total	1032	99.8	100.0	
Missing	System	2	.2		
Total		1034	100.0		

During your life, how many times have you used marijuana?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	637	61.6	62.0	62.0
	1 or 2 times	89	8.6	8.7	70.6
	3 to 9 times	63	6.1	6.1	76.8
	10 to 19 times	40	3.9	3.9	80.6
	20 to 39 times	41	4.0	4.0	84.6
	40 to 99 times	42	4.1	4.1	88.7
	100 or more times	116	11.2	11.3	100.0
	Total	1028	99.4	100.0	
Missing	System	6	.6		
Total		1034	100.0		

How old were you when you tried marijuana for the first time?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l have never tried marijuana	631	61.0	61.2	61.2
	8 years old or younger	27	2.6	2.6	63.8
	9 or 10 years old	19	1.8	1.8	65.7
	11 or 12 years old	58	5.6	5.6	71.3
	13 or 14 years old	144	13.9	14.0	85.3
	15 or 16 years old	134	13.0	13.0	98.3
	17 years old or older	18	1.7	1.7	100.0
	Total	1031	99.7	100.0	
Missing	System	3	.3		
Total		1034	100.0		

During the past 30 days, how many times did you use marijuana?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	801	77.5	77.7	77.7
	1 or 2 times	55	5.3	5.3	83.0
	3 to 9 times	59	5.7	5.7	88.7
	10 to 19 times	36	3.5	3.5	92.2
	20 to 39 times	25	2.4	2.4	94.7
	40 or more times	55	5.3	5.3	100.0
	Total	1031	99.7	100.0	
Missing	System	3	.3		
Total		1034	100.0		

During the past 30 days, how many times did you use marijuana on school property?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	969	93.7	93.7	93.7
	1 or 2 times	35	3.4	3.4	97.1
	3 to 9 times	15	1.5	1.5	98.5
	10 to 19 times	4	.4	.4	98.9
	20 to 39 times	5	.5	.5	99.4
	40 or more times	6	.6	.6	100.0
	Total	1034	100.0	100.0	

During your life, how many times have you used any form of cocaine, including powder, crack, or freebase?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	949	91.8	92.2	92.2
	1 or 2 times	35	3.4	3.4	95.6
	3 to 9 times	19	1.8	1.8	97.5
	10 to 19 times	9	.9	.9	98.3
	20 to 39 times	3	.3	.3	98.6
	40 or more times	14	1.4	1.4	100.0
	Total	1029	99.5	100.0	
Missing	System	5	.5		
Total		1034	100.0		

During your life, how many times have you sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	939	90.8	90.8	90.8
	1 or 2 times	54	5.2	5.2	96.0
	3 to 9 times	20	1.9	1.9	98.0
	10 to 19 times	6	.6	.6	98.5
	20 to 39 times	6	.6	.6	99.1
	40 or more times	9	.9	.9	100.0
	Total	1034	100.0	100.0	

During your life, how many times have you used heroin (also called smack, junk, or China White)?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	994	96.1	96.2	96.2
	1 or 2 times	9	.9	.9	97.1
	3 to 9 times	8	.8	.8	97.9
	10 to 19 times	10	1.0	1.0	98.8
	20 to 39 times	4	.4	.4	99.2
	40 or more times	8	.8	.8	100.0
	Total	1033	99.9	100.0	
Missing	System	1	.1		
Total		1034	100.0		

During your life, how many times have you used methamphetamines (also called speed, crystal, crank, or ice)?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	957	92.6	93.5	93.5
	1 or 2 times	25	2.4	2.4	95.9
	3 to 9 times	16	1.5	1.6	97.5
	10 to 19 times	11	1.1	1.1	98.5
	20 to 39 times	5	.5	.5	99.0
	40 or more times	10	1.0	1.0	100.0
	Total	1024	99.0	100.0	
Missing	System	10	1.0		
Total		1034	100.0		

During your life, how many times have you used ecstasy (also called MDMA)?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	962	93.0	93.2	93.2
	1 or 2 times	22	2.1	2.1	95.3
	3 to 9 times	19	1.8	1.8	97.2
	10 to 19 times	14	1.4	1.4	98.5
	20 to 39 times	4	.4	.4	98.9
	40 or more times	11	1.1	1.1	100.0
	Total	1032	99.8	100.0	
Missing	System	2	.2		
Total		1034	100.0		

During your life, how many times have you smoked, snorted, or injected a synthetic drug, including bath salts, black magic, or red magic?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	955	92.4	92.4	92.4
	1 or 2 times	28	2.7	2.7	95.1
	3 to 9 times	16	1.5	1.5	96.6
	10 to 19 times	8	.8	.8	97.4
	20 to 39 times	11	1.1	1.1	98.5
	40 or more times	16	1.5	1.5	100.0
	Total	1034	100.0	100.0	

During your life, how many times have you used a needle to inject any illegal drug into your body?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	988	95.6	96.6	96.6
	1 time	14	1.4	1.4	97.9
	2 or more times	21	2.0	2.1	100.0
	Total	1023	98.9	100.0	
Missing	System	11	1.1		
Total		1034	100.0		

During your life, how many times have you taken a prescription drug (such as OxyContin, Percocet, Vicodin, Adderall, Ritalin, or Xanax) without a doctor's prescription?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	852	82.4	82.5	82.5
	1 or 2 times	68	6.6	6.6	89.1
	3 to 9 times	35	3.4	3.4	92.4
	10 to 19 times	33	3.2	3.2	95.6
	20 to 39 times	15	1.5	1.5	97.1
	40 or more times	30	2.9	2.9	100.0
	Total	1033	99.9	100.0	
Missing	System	1	.1		
Total		1034	100.0		

If you took a prescription drug without a doctor's prescription during the past 12 months, how did you usually get it?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I did not take a prescription drug without a doctor's prescription during the past 12 months	861	83.3	83.4	83.4
	I took it from home	52	5.0	5.0	88.5
	I took it from someone else's home	5	.5	.5	89.0
	I got it from someone	50	4.8	4.8	93.8
	I bought it from someone	22	2.1	2.1	95.9
	I got it some other way	42	4.1	4.1	100.0
	Total	1032	99.8	100.0	
Missing	System	2	.2		
Total		1034	100.0		

During the past 12 months, has anyone offered, sold, or given you an illegal drug on school property?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	265	25.6	25.9	25.9
	No	757	73.2	74.1	100.0
	Total	1022	98.8	100.0	
Missing	System	12	1.2		
Total		1034	100.0		

Have you ever had sexual intercourse?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	483	46.7	47.4	47.4
	No	537	51.9	52.6	100.0
	Total	1020	98.6	100.0	
Missing	System	14	1.4		
Total		1034	100.0		

How old were you when you had sexual intercourse for the first time?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I have never had sexual intercourse	541	52.3	52.4	52.4
	11 years old or younger	41	4.0	4.0	56.4
	12 years old	26	2.5	2.5	58.9
	13 years old	52	5.0	5.0	64.0
	14 years old	95	9.2	9.2	73.2
	15 years old	153	14.8	14.8	88.0
	16 years old	90	8.7	8.7	96.7
	17 years old or older	34	3.3	3.3	100.0
	Total	1032	99.8	100.0	
Missing	System	2	.2		
Total		1034	100.0		

During your life, with how many people have you had sexual intercourse?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I have never had sexual intercourse	543	52.5	53.0	53.0
	1 person	195	18.9	19.0	72.0
	2 people	97	9.4	9.5	81.5
	3 people	53	5.1	5.2	86.6
	4 people	35	3.4	3.4	90.0
	5 people	32	3.1	3.1	93.2
	6 or more people	70	6.8	6.8	100.0
	Total	1025	99.1	100.0	
Missing	System	9	.9		
Total		1034	100.0		

During the past 3 months, with how many people did you have sexual intercourse?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I have never had sexual intercourse	560	54.2	54.2	54.2
	I have had sexual intercourse, but not during the past 3 months	121	11.7	11.7	65.9
	1 person	259	25.0	25.1	91.0
	2 people	50	4.8	4.8	95.8
	3 people	14	1.4	1.4	97.2
	4 people	9	.9	.9	98.1
	5 people	1	.1	.1	98.2
	6 or more people	19	1.8	1.8	100.0
	Total	1033	99.9	100.0	
Missing	System	1	.1		
Total		1034	100.0		

Did you drink alcohol or use drugs before you had sexual intercourse the last time?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I have never had sexual intercourse	536	51.8	52.4	52.4
	Yes	115	11.1	11.2	63.6
	No	372	36.0	36.4	100.0
	Total	1023	98.9	100.0	
Missing	System	11	1.1		
Total		1034	100.0		

The last time you had sexual intercourse, did you or your partner use a condom?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I have never had sexual intercourse	541	52.3	52.8	52.8
	Yes	289	27.9	28.2	81.0
	No	195	18.9	19.0	100.0
	Total	1025	99.1	100.0	
Missing	System	9	.9		
Total		1034	100.0		

The last time you had sexual intercourse, what one method did you or your partner use to prevent pregnancy? (Select only one response.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I have never had sexual intercourse	543	52.5	52.9	52.9
	No method was used to prevent pregnancy	71	6.9	6.9	59.8
	Birth control pills	84	8.1	8.2	68.0
	Condoms	223	21.6	21.7	89.7
	Depo-Provera (injectable birth control)	25	2.4	2.4	92.1
	Withdrawal	38	3.7	3.7	95.8
	Some other method	17	1.6	1.7	97.5
	Not sure	26	2.5	2.5	100.0
	Total	1027	99.3	100.0	
Missing	System	7	.7		
Total		1034	100.0		

How many times have you been pregnant or gotten someone pregnant?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	930	89.9	90.5	90.5
	1 time	45	4.4	4.4	94.8
	2 or more times	20	1.9	1.9	96.8
	Not sure	33	3.2	3.2	100.0
	Total	1028	99.4	100.0	
Missing	System	6	.6		
Total		1034	100.0		

Have your parents or other adults in your family ever talked with you about what they expect you to do or not to do when it comes to sex?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	706	68.3	68.9	68.9
	No	232	22.4	22.7	91.6
	Not sure	86	8.3	8.4	100.0
	Total	1024	99.0	100.0	
Missing	System	10	1.0		
Total		1034	100.0		

Did you drink alcohol or use drugs before you had sexual intercourse the last time?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I have never had sexual intercourse	536	51.8	52.4	52.4
	Yes	115	11.1	11.2	63.6
	No	372	36.0	36.4	100.0
	Total	1023	98.9	100.0	
Missing	System	11	1.1		
Total		1034	100.0		

The last time you had sexual intercourse, how old was your partner?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I have never had sexual intercourse.	546	52.8	52.9	52.9
	5 or more years younger	10	1.0	1.0	53.9
	3 to 4 years younger	24	2.3	2.3	56.2
	About the same age	324	31.3	31.4	87.6
	3 to 4 years older	93	9.0	9.0	96.6
	5 or more years older	15	1.5	1.5	98.1
	Not sure	20	1.9	1.9	100.0
	Total	1032	99.8	100.0	
Missing	System	2	.2		
Total		1034	100.0		

Perceptions of Weight

How do you describe your weight?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very underweight	27	2.6	2.6	2.6
	Slightly underweight	123	11.9	11.9	14.5
	About the right weight	524	50.7	50.8	65.3
	Slightly overweight	322	31.1	31.2	96.5
	Very overweight	36	3.5	3.5	100.0
	Total	1032	99.8	100.0	
Missing	System	2	.2		
Total		1034	100.0		

How do you describe your weight?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very underweight	19	2.4	2.4	2.4
	Slightly underweight	85	10.7	10.7	13.1
	About the right weight	413	51.8	51.9	64.9
	Slightly overweight	252	31.6	31.7	96.6
	Very overweight	27	3.4	3.4	100.0
	Total	796	99.9	100.0	
Missing	System	1	.1		
Total		797	100.0		

Which of the following are you trying to do about your weight?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Lose weight	491	47.5	48.1	48.1
	Gain weight	185	17.9	18.1	66.3
	Stay the same weight	185	17.9	18.1	84.4
	I am not trying to do anything about my weight	159	15.4	15.6	100.0
	Total	1020	98.6	100.0	
Missing	System	14	1.4		
Total		1034	100.0		

During the past 30 days, did you exercise to lose weight or to keep from gaining weight?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	677	65.5	66.0	66.0
	No	349	33.8	34.0	100.0
	Total	1026	99.2	100.0	
Missing	System	8	.8		
Total		1034	100.0		

During the past 30 days, did you eat less food, fewer calories, or foods low in fat to lose weight or to keep from gaining weight?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	436	42.2	42.5	42.5
	No	591	57.2	57.5	100.0
	Total	1027	99.3	100.0	
Missing	System	7	.7		
Total		1034	100.0		

Perceptions of Weight

During the past 30 days, did you take any diet pills, powders, or liquids without a doctor's advice to lose weight or to keep from gaining weight? (Do not include meal replacement products such as Slim Fast.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	87	8.4	8.6	8.6
	No	928	89.7	91.4	100.0
	Total	1015	98.2	100.0	
Missing	System	19	1.8		
Total		1034	100.0		

How do you describe your weight?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very underweight	27	2.6	2.6	2.6
	Slightly underweight	123	11.9	11.9	14.5
	About the right weight	524	50.7	50.8	65.3
	Slightly overweight	322	31.1	31.2	96.5
	Very overweight	36	3.5	3.5	100.0
	Total	1032	99.8	100.0	
Missing	System	2	.2		
Total		1034	100.0		

During the past 30 days, did you vomit or take laxatives to lose weight or to keep from gaining weight?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	72	7.0	7.0	7.0
	No	953	92.2	93.0	100.0
	Total	1025	99.1	100.0	
Missing	System	9	.9		
Total		1034	100.0		

During the past 30 days, did you skip meals to lose weight or keep from gaining weight?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	227	22.0	22.3	22.3
	No	789	76.3	77.7	100.0
	Total	1016	98.3	100.0	
Missing	System	18	1.7		
Total		1034	100.0		

Nutrition

During the past 7 days, how many times do you eat fruit? (Do not count fruit juice.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I did not eat fruit during the past 7 days	83	8.0	8.1	8.1
	1 to 3 times during the past 7 days	356	34.4	34.8	42.9
	4 to 6 times during the past 7 days	207	20.0	20.2	63.1
	1 time per day	125	12.1	12.2	75.3
	2 times per day	141	13.6	13.8	89.1
	3 times per day	65	6.3	6.3	95.4
	4 or more times per day	47	4.5	4.6	100.0
	Total	1024	99.0	100.0	
Missing	System	10	1.0		
Total		1034	100.0		

During the past 7 days, how many times do you eat vegetables? (Include raw, cooked, frozen, canned vegetables, salad greens and 100% vegetable juice, BUT do not count french fries.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I did not eat vegetables during the past 7 days	94	9.1	9.1	9.1
	1 to 3 times during the past 7 days	255	24.7	24.7	33.8
	4 to 6 times during the past 7 days	254	24.6	24.6	58.3
	1 time per day	160	15.5	15.5	73.8
	2 times per day	177	17.1	17.1	90.9
	3 times per day	55	5.3	5.3	96.2
	4 or more times per day	39	3.8	3.8	100.0
	Total	1034	100.0	100.0	

During the past 7 days, how many times did you eat junk food such as sweet or salty snack foods? (Include chips, crackers, cookies, candy, cakes, or donuts.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I did not eat junk food during the past 7 days	51	4.9	5.0	5.0
	1 to 3 times during the past 7 days	260	25.1	25.3	30.3
	4 to 6 times during the past 7 days	238	23.0	23.2	53.4
	1 time per day	183	17.7	17.8	71.2
	2 times per day	144	13.9	14.0	85.2
	3 times per day	69	6.7	6.7	91.9
	4 or more times per day	83	8.0	8.1	100.0
	Total	1028	99.4	100.0	
Missing	System	6	.6		
Total		1034	100.0		

During the past 7 days, how many times did you drink a can, bottle, or glass of soda or pop, such as Coke, Pepsi, or Sprite? (Do not include diet soda or diet pop.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I did not drink soda or pop during the past 7 days	204	19.7	19.9	19.9
	1 to 3 times during the past 7 days	346	33.5	33.8	53.7
	4 to 6 times during the past 7 days	176	17.0	17.2	70.8
	1 time per day	118	11.4	11.5	82.3
	2 times per day	94	9.1	9.2	91.5
	3 times per day	34	3.3	3.3	94.8
	4 or more times per day	53	5.1	5.2	100.0
	Total	1025	99.1	100.0	
Missing	System	9	.9		
Total		1034	100.0		

During the past 7 days, how many times do you drink a can, bottle, or glass of any other sweetened beverage? (Include sweet tea, punch, Kool-Aid, fruit-flavored drinks, energy drinks, and sports drinks. Do not include diet or sugar-free drinks.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I did not drink any other sweetened beverage during the past 7 days	172	16.6	16.7	16.7
	1 to 3 times during the past 7 days	329	31.8	31.8	48.5
	4 to 6 times during the past 7 days	203	19.6	19.7	68.2
	1 time per day	116	11.2	11.2	79.4
	2 times per day	102	9.9	9.9	89.3
	3 times per day	47	4.5	4.5	93.8
	4 or more times per day	64	6.2	6.2	100.0
	Total	1033	99.9	100.0	
Missing	System	1	.1		
Total		1034	100.0		

Nutrition

During the past 7 days, how many times do you eat fruit? (Do not count fruit juice.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I did not eat fruit during the past 7 days	83	8.0	8.1	8.1
	1 to 3 times during the past 7 days	356	34.4	34.8	42.9
	4 to 6 times during the past 7 days	207	20.0	20.2	63.1
	1 time per day	125	12.1	12.2	75.3
	2 times per day	141	13.6	13.8	89.1
	3 times per day	65	6.3	6.3	95.4
	4 or more times per day	47	4.5	4.6	100.0
	Total	1024	99.0	100.0	
Missing	System	10	1.0		
Total		1034	100.0		

During the past 7 days, how many times did you buy food and/or drinks from vending machines at school?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	636	61.5	62.5	62.5
	1 time	150	14.5	14.7	77.3
	2 times	84	8.1	8.3	85.5
	3 times	91	8.8	8.9	94.5
	4 times	24	2.3	2.4	96.9
	5 or more times	32	3.1	3.1	100.0
	Total	1017	98.4	100.0	
Missing	System	17	1.6		
Total		1034	100.0		

During the past 7 days, on how many days did you eat breakfast?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 days	110	10.6	10.8	10.8
	1 day	63	6.1	6.2	17.0
	2 days	85	8.2	8.4	25.4
	3 days	96	9.3	9.5	34.9
	4 days	100	9.7	9.9	44.7
	5 days	102	9.9	10.0	54.8
	6 days	192	18.6	18.9	73.7
	7 days	267	25.8	26.3	100.0
	Total	1015	98.2	100.0	
Missing	System	19	1.8		
Total		1034	100.0		

During the past 7 days, how many times did you eat dinner prepared at home with your family?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 times	96	9.3	9.3	9.3
	1 time	65	6.3	6.3	15.6
	2 times	54	5.2	5.2	20.9
	3 times	117	11.3	11.3	32.2
	4 times	126	12.2	12.2	44.4
	5 times	188	18.2	18.2	62.7
	6 times	129	12.5	12.5	75.2
	7 times	256	24.8	24.8	100.0
	Total	1031	99.7	100.0	
Missing	System	3	.3		
Total		1034	100.0		

Physical Activity

During the past 7 days, on how many days were you physically active for a total of at least 60 minutes per day? (Add up all the time you spend in any kind of physical activity that increases your heart rate and makes you breathe hard some of the time.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 days	128	12.4	12.4	12.4
	1 day	73	7.1	7.1	19.5
	2 days	99	9.6	9.6	29.2
	3 days	124	12.0	12.1	41.2
	4 days	98	9.5	9.5	50.7
	5 days	163	15.8	15.8	66.6
	6 days	76	7.4	7.4	74.0
	7 days	268	25.9	26.0	100.0
	Total	1029	99.5	100.0	
Missing	System	5	.5		
Total		1034	100.0		

On an average school day, how much total time do you spend being physically active? (Include all physical activity both in and out of school.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I am not physically active on a average school day	148	14.3	14.5	14.5
	Less than 30 minutes	152	14.7	14.9	29.5
	30 minutes to 1 hour	246	23.8	24.2	53.6
	More than 1 hour and up to 2 hours	279	27.0	27.4	81.0
	More than 2 hours	193	18.7	19.0	100.0
	Total	1018	98.5	100.0	
Missing	System	16	1.5		
Total		1034	100.0		

On an average weekend day, how much total time do you spend being physically active?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I am not physically active on a average weekend day	140	13.5	13.7	13.7
	Less than 30 minutes	182	17.6	17.8	31.4
	30 minutes to 1 hour	305	29.5	29.8	61.2
	More than 1 hour and up to 2 hours	274	26.5	26.8	88.0
	More than 2 hours	123	11.9	12.0	100.0
	Total	1024	99.0	100.0	
Missing	System	10	1.0		
Total		1034	100.0		

In an average week when you are in school, on how many days do you go to physical education (PE) classes?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 days	622	60.2	60.7	60.7
	1 day	33	3.2	3.2	63.9
	2 days	32	3.1	3.1	67.0
	3 days	115	11.1	11.2	78.2
	4 days	11	1.1	1.1	79.3
	5 days	212	20.5	20.7	100.0
	Total	1025	99.1	100.0	
Missing	System	9	.9		
Total		1034	100.0		

Physical Activity

On an average school day, how many hours do you watch TV?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l do not watch TV on an average school day	178	17.2	17.4	17.4
	Less than 1 hour per day	205	19.8	20.0	37.4
	1 hour per day	192	18.6	18.7	56.1
	2 hours per day	212	20.5	20.7	76.8
	3 hours per day	124	12.0	12.1	88.9
	4 hours per day	56	5.4	5.5	94.3
	5 or more hours per day	58	5.6	5.7	100.0
	Total	1025	99.1	100.0	
Missing	System	9	.9		
Total		1034	100.0		

On an average school day, how many hours do you play video or computer games or use a computer for something that is not school work? (Include activities such as Nintendo, Game Boy, Play Station, Xbox, computer games, and the Internet)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l do not play video or computer games or use a computer for non school work	260	25.1	25.2	25.2
	Less than 1 hour per day	239	23.1	23.2	48.4
	1 hour per day	149	14.4	14.4	62.8
	2 hours per day	126	12.2	12.2	75.0
	3 hours per day	86	8.3	8.3	83.3
	4 hours per day	67	6.5	6.5	89.8
	5 or more hours per day	105	10.2	10.2	100.0
	Total	1032	99.8	100.0	
Missing	System	2	.2		
Total		1034	100.0		

On an average Saturday or Sunday, how many hours do you watch TV, play video games, or use a computer for something that is not school work? (Include activities such as Nintendo, Game Boy, PlayStation, Xbox, computer games, and the Internet.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l do not watch TV, play video games, or use a computer on an average Saturday or Sunday	95	9.2	9.2	9.2
	Less than 1 hour per day	155	15.0	15.1	24.3
	1 hour per day	157	15.2	15.3	39.6
	2 hours per day	187	18.1	18.2	57.7
	3 hours per day	131	12.7	12.7	70.5
	4 hours per day	109	10.5	10.6	81.0
	5 or more hours per day	195	18.9	19.0	100.0
	Total	1029	99.5	100.0	
Missing	System	5	.5		
Total		1034	100.0		

General

When you are outside for more than one hour on a sunny day, how often do you wear sunscreen with an SPF of 15 or higher?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Never	539	52.1	52.8	52.8
	Rarely	246	23.8	24.1	76.9
	Sometimes	142	13.7	13.9	90.8
	Most of the time	66	6.4	6.5	97.3
	Always	28	2.7	2.7	100.0
	Total	1021	98.7	100.0	
Missing	System	13	1.3		
Total		1034	100.0		

On an average school night, how many hours of sleep do you get?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	4 or less hours	85	8.2	8.2	8.2
	5 hours	119	11.5	11.5	19.7
	6 hours	184	17.8	17.8	37.5
	7 hours	321	31.0	31.0	68.6
	8 hours	248	24.0	24.0	92.6
	9 hours	62	6.0	6.0	98.5
	10 or more hours	15	1.5	1.5	100.0
	Total	1034	100.0	100.0	

A disability can be physical, mental, emotional, or communication-related. Do you consider yourself to have a disability?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	137	13.2	13.5	13.5
	No	769	74.4	75.7	89.2
	Not sure	110	10.6	10.8	100.0
	Total	1016	98.3	100.0	
Missing	System	18	1.7		
Total		1034	100.0		

On an average school day, how long after school are you alone without a parent or adult?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	l am not alone after school	275	26.6	27.2	27.2
	Less than 1 hour per day	214	20.7	21.1	48.3
	1 to 2 hours per day	276	26.7	27.3	75.6
	3 hours per day	109	10.5	10.8	86.4
	4 hours per day	65	6.3	6.4	92.8
	5 hours per day	25	2.4	2.5	95.3
	6 or more hours per day	48	4.6	4.7	100.0
	Total	1012	97.9	100.0	
Missing	System	22	2.1		
Total		1034	100.0		

General

When you are outside for more than one hour on a sunny day, how often do you wear sunscreen with an SPF of 15 or higher?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Never	539	52.1	52.8	52.8
	Rarely	246	23.8	24.1	76.9
	Sometimes	142	13.7	13.9	90.8
	Most of the time	66	6.4	6.5	97.3
	Always	28	2.7	2.7	100.0
	Total	1021	98.7	100.0	
Missing	System	13	1.3		
Total		1034	100.0		

Do you participate in any extracurricular activities at school (such as sports, band, drama, clubs)?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	651	63.0	65.3	65.3
	No	346	33.5	34.7	100.0
	Total	997	96.4	100.0	
Missing	System	37	3.6		
Total		1034	100.0		

When was the last time you saw a doctor or nurse for a check-up or physical exam when you were not sick or injured?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	During the past 12 months	676	65.4	65.8	65.8
	Between 12 and 24 months ago	138	13.3	13.4	79.2
	More than 24 months ago	66	6.4	6.4	85.6
	Never	48	4.6	4.7	90.3
	Not sure	100	9.7	9.7	100.0
	Total	1028	99.4	100.0	
Missing	System	6	.6		
Total		1034	100.0		

When was the last time you saw a dentist for a check-up, exam, teeth cleaning, or other dental

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	During the past 12 months	678	65.6	66.1	66.1
	Between 12 and 24 months ago	143	13.8	13.9	80.0
	More than 24 months ago	77	7.4	7.5	87.5
	Never	40	3.9	3.9	91.4
	Not sure	88	8.5	8.6	100.0
	Total	1026	99.2	100.0	
Missing	System	8	.8		
Total		1034	100.0		

General When you are outside for more than one hour on a sunny day, how often do you wear sunscreen with an SPF of 15 or higher?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Never	539	52.1	52.8	52.8
	Rarely	246	23.8	24.1	76.9
	Sometimes	142	13.7	13.9	90.8
	Most of the time	66	6.4	6.5	97.3
	Always	28	2.7	2.7	100.0
	Total	1021	98.7	100.0	
Missing	System	13	1.3		
Total		1034	100.0		

Has a doctor or nurse ever told you that you have asthma?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	231	22.3	22.6	22.6
	No	748	72.3	73.3	95.9
	Not sure	42	4.1	4.1	100.0
	Total	1021	98.7	100.0	
Missing	System	13	1.3		
Total		1034	100.0		

How do you rate your health in general?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Excellent	198	19.1	19.2	19.2
	Very good	354	34.2	34.3	53.5
	Good	343	33.2	33.3	86.8
	Fair	115	11.1	11.2	98.0
	Poor	21	2.0	2.0	100.0
	Total	1031	99.7	100.0	
Missing	System	3	.3		
Total		1034	100.0		

During the past 12 months, how would you describe your grades in school?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Mostly A's	361	34.9	35.2	35.2
	Mostly B's	373	36.1	36.3	71.5
	Mostly C's	184	17.8	17.9	89.4
	Mostly D's	40	3.9	3.9	93.3
	Mostly F's	13	1.3	1.3	94.5
	None of these grades	4	.4	.4	94.9
	Not sure	52	5.0	5.1	100.0
	Total	1027	99.3	100.0	
Missing	System	7	.7		
Total		1034	100.0		

Agree or Disagree

Do you agree or disagree that you feel alone in your life?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	85	8.2	8.3	8.3
	Agree	162	15.7	15.8	24.1
	Not sure	157	15.2	15.3	39.4
	Disagree	336	32.5	32.8	72.2
	Strongly disagree	285	27.6	27.8	100.0
	Total	1025	99.1	100.0	
Missing	System	9	.9		
Total		1034	100.0		

Do you agree or disagree that you feel good about yourself?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	251	24.3	24.3	24.3
	Agree	444	42.9	43.0	67.3
	Not sure	165	16.0	16.0	83.3
	Disagree	112	10.8	10.8	94.1
	Strongly disagree	61	5.9	5.9	100.0
	Total	1033	99.9	100.0	
Missing	System	1	.1		
Total		1034	100.0		

Do you agree or disagree that your teachers really care about you and give you a lot of encouragement?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	194	18.8	18.9	18.9
	Agree	394	38.1	38.3	57.1
	Not sure	250	24.2	24.3	81.4
	Disagree	104	10.1	10.1	91.5
	Strongly disagree	87	8.4	8.5	100.0
	Total	1029	99.5	100.0	
Missing	System	5	.5		
Total		1034	100.0		

Do you agree or disagree that harassment and bullying by other students is a problem at your school?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	190	18.4	18.6	18.6
	Agree	223	21.6	21.8	40.3
	Not sure	268	25.9	26.2	66.5
	Disagree	221	21.4	21.6	88.1
	Strongly disagree	122	11.8	11.9	100.0
	Total	1024	99.0	100.0	
Missing	System	10	1.0		
Total		1034	100.0		

Agree or Disagree

Do you agree or disagree that gangs are a problem at your school?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	75	7.3	7.3	7.3
	Agree	39	3.8	3.8	11.1
	Not sure	187	18.1	18.1	29.2
	Disagree	271	26.2	26.3	55.5
	Strongly disagree	459	44.4	44.5	100.0
	Total	1031	99.7	100.0	
Missing	System	3	.3		
Total		1034	100.0		

Do you agree or disagree that drugs are a problem at your school?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	296	28.6	28.6	28.6
	Agree	296	28.6	28.6	57.3
	Not sure	205	19.8	19.8	77.1
	Disagree	114	11.0	11.0	88.1
	Strongly disagree	123	11.9	11.9	100.0
	Total	1034	100.0	100.0	

Body Mass Index (BMI)

BMI Classification

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Underweight	74	9.3	9.3	9.3
	Normal	465	58.3	58.3	67.6
	Overweight	183	23.0	23.0	90.6
	Obese	75	9.4	9.4	100.0
	Total	797	100.0	100.0	

BMI Classification * What is your sex? Crosstabulation^a

			What is y	What is your sex?	
			Female	Male	Total
BMI Classification	Underweight	Count	40	34	74
		% within BMI Classification	54.1%	45.9%	100.0%
		Std. Residual	1	.2	
	Normal	Count	270	192	462
		% within BMI Classification	58.4%	41.6%	100.0%
		Std. Residual	.9	-1.0	
	Overweight	Count	99	84	183
		% within BMI Classification	54.1%	45.9%	100.0%
		Std. Residual	2	.2	
	Obese	Count	29	45	74
		% within BMI Classification	39.2%	60.8%	100.0%
		Std. Residual	-1.9	2.1	
Total		Count	438	355	793
		% within BMI Classification	55.2%	44.8%	100.0%

a. Chi-Square = 9.764 with 3 df, p = 0.021.

Appendix F. Macon County Middle School YRBS, Gender Contingencies

Crosstaba

				Grades		
			Mostly A's and B's	C's, D's, and F's	None/ Not Sure	Total
What is your sex?	Female	Count	260	82	27	369
		% within What is your sex?	70.5%	22.2%	7.3%	100.0%
		Std. Residual	1.2	4	-2.4	
	Male	Count	232	93	60	385
		% within What is your sex?	60.3%	24.2%	15.6%	100.0%
		Std. Residual	-1.2	.4	2.3	
Total		Count	492	175	87	754
		% within What is your sex?	65.3%	23.2%	11.5%	100.0%

a. Pearson Chi-Square = 14.47 with 2 df, p=0.001.

Crosstab^a

			Have you ev weapon such a or cl		
			Yes	No	Total
What is your sex?	Female	Count	120	250	370
		% within What is your sex?	32.4%	67.6%	100.0%
		Std. Residual	-3.7	3.3	
	Male	Count	220	162	382
		% within What is your sex?	57.6%	42.4%	100.0%
		Std. Residual	3.6	-3.3	
Total		Count	340	412	752
		% within What is your sex?	45.2%	54.8%	100.0%

a. Pearson Chi-Square=48.03 with 1df, p<0.0001.

			Have you eve physica		
			Yes	No	Total
What is your sex?	Female	Count	142	229	371
		% within What is your sex?	38.3%	61.7%	100.0%
		Std. Residual	-2.8	2.7	
	Male	Count	225	164	389
		% within What is your sex?	57.8%	42.2%	100.0%
		Std. Residual	2.7	-2.6	
Total		Count	367	393	760
		% within What is your sex?	48.3%	51.7%	100.0%

a. Pearson Chi-Square=29.11 with 1df, p<0.0001.

			Have you even physical fight in the hurt and had to doctor of		
			Yes	No	Total
What is your sex?	Female	Count	14	357	371
		% within What is your sex?	3.8%	96.2%	100.0%
		Std. Residual	-2.4	.7	
	Male	Count	40	347	387
		% within What is your sex?	10.3%	89.7%	100.0%
		Std. Residual	2.4	7	
Total		Count	54	704	758
		% within What is your sex?	7.1%	92.9%	100.0%

a. Pearson Chi-Square=12.328 with 1df, p<0.0001.

Crosstaba

			have you e electronically b through e-mai instant messag	During the past 12 months, have you ever been electronically bullied, such as through e-mail, chat rooms, instant messaging, Web sites, or text messaging?		
			Yes	No	Total	
What is your sex?	Female	Count	99	272	371	
		% within What is your sex?	26.7%	73.3%	100.0%	
		Std. Residual	4.2	-1.9		
	Male	Count	34	354	388	
		% within What is your sex?	8.8%	91.2%	100.0%	
		Std. Residual	-4.1	1.9		
Total		Count	133	626	759	
		% within What is your sex?	17.5%	82.5%	100.0%	

a. Pearson Chi-Square=42.15 with 1df, p<0.0001.

			During the past you ever fee hopeless almo two weeks or mo you stopped doi activi	el so sad or st every day for ore in a row that ng some usual	
			Yes	No	Total
What is your sex?	Female	Count	122	245	367
		% within What is your sex?	33.2%	66.8%	100.0%
		Std. Residual	4.6	-2.5	
	Male	Count	43	343	386
		% within What is your sex?	11.1%	88.9%	100.0%
		Std. Residual	-4.5	2.4	
Total		Count	165	588	753
		% within What is your sex?	21.9%	78.1%	100.0%

a. Pearson Chi-Square=53.71 with 1df, p<0.0001.

Crosstaba

			Have you ever se about killing		
			Yes	No	Total
What is your sex?	Female	Count	103	264	367
		% within What is your sex?	28.1%	71.9%	100.0%
		Std. Residual	3.5	-1.8	
	Male	Count	47	342	389
		% within What is your sex?	12.1%	87.9%	100.0%
		Std. Residual	-3.4	1.7	
Total		Count	150	606	756
		% within What is your sex?	19.8%	80.2%	100.0%

a. Pearson Chi-Square=30.33 with 1df, p<0.0001.

Crosstaba

			Have you ever about how yo yours	u would kill	
			Yes	No	Total
What is your sex?	Female	Count	66	298	364
		% within What is your sex?	18.1%	81.9%	100.0%
		Std. Residual	2.6	-1.0	
	Male	Count	33	351	384
		% within What is your sex?	8.6%	91.4%	100.0%
		Std. Residual	-2.5	1.0	
Total		Count	99	649	748
		% within What is your sex?	13.2%	86.8%	100.0%

a. Pearson Chi-Square=14.8 with 1df, p<0.0001.

				When you	feel sad, empty, h	nopeless, angry, o	r anxious, with wi	nom do you usi	ually talk?		
			I do not feel sad, empty, hopeless, angry, or anxious	Parent or other adult family member	Teacher or other adult in this school	Religious leader	Doctor or nurse	Other adult	Friend or sibling	Some other person	Total
What is your sex?	Female	Count	64	79	5	7	0	5	164	32	356
		% within What is your sex?	18.0%	22.2%	1.4%	2.0%	0.0%	1.4%	46.1%	9.0%	100.0%
		Std. Residual	-4.2	-1.2	1	.1	-1.0	.1	4.9	.7	
	Male	Count	158	108	6	7	2	5	69	27	382
		% within What is your sex?	41.4%	28.3%	1.6%	1.8%	0.5%	1.3%	18.1%	7.1%	100.0%
		Std. Residual	4.0	1.1	.1	1	.9	1	-4.7	6	
Total		Count	222	187	11	14	2	10	233	59	738
		% within What is your sex?	30.1%	25.3%	1.5%	1.9%	0.3%	1.4%	31.6%	8.0%	100.0%

a. Chi-Square=84.74 with 7df, p<0.0001.

			Other Tobacco Use		
			1+ days	0 days	Total
What is your sex?	Female	Count	9	358	367
		% within What is your sex?	2.5%	97.5%	100.0%
		Std. Residual	-2.9	.7	
	Male	Count	38	349	387
		% within What is your sex?	9.8%	90.2%	100.0%
		Std. Residual	2.8	7	
Total		Count	47	707	754
		% within What is your sex?	6.2%	93.8%	100.0%

a. Pearson Chi-Square=17.49 with 1 df, p < 0.0001.

Crosstab^a

				Pregnancy		
			Pregnancy, Yes	Pregnancy, No	Not sure	Total
What is your sex?	Female	Count	6	361	1	368
		% within What is your sex?	1.6%	98.1%	0.3%	100.0%
		Std. Residual	-1.7	.6	-2.2	
	Male	Count	18	354	13	385
		% within What is your sex?	4.7%	91.9%	3.4%	100.0%
		Std. Residual	1.6	6	2.2	
Total		Count	24	715	14	753
		% within What is your sex?	3.2%	95.0%	1.9%	100.0%

a. Pearson Ch-Square=15.98 with 2 df, p<0.0001.

			Have you ever b	Have you ever been taught about abstaining from sexual activity?				
			Yes	No	Not sure	Total		
What is your sex?	Female	Count	241	64	60	365		
		% within What is your sex?	66.0%	17.5%	16.4%	100.0%		
		Std. Residual	1.8	-2.4	6			
	Male	Count	201	113	74	388		
		% within What is your sex?	51.8%	29.1%	19.1%	100.0%		
		Std. Residual	-1.8	2.3	.6			
Total		Count	442	177	134	753		
		% within What is your sex?	58.7%	23.5%	17.8%	100.0%		

a. Pearson Chi-Square=17.96 with 2df, p<0.0001.

				Have you ever been taught about chlamydia, gonorrhea, syphilis, or human papillomavirus, or genital warts?			
			Yes	No	Not sure	Total	
What is your sex?	Female	Count	221	110	37	368	
		% within What is your sex?	60.1%	29.9%	10.1%	100.0%	
		Std. Residual	3.8	-3.1	-1.6		
	Male	Count	131	194	62	387	
		% within What is your sex?	33.9%	50.1%	16.0%	100.0%	
		Std. Residual	-3.7	3.1	1.6		
Total		Count	352	304	99	755	
		% within What is your sex?	46.6%	100.0%			

a. Pearson Chi-Square=52.09 with 2df, p<0.0001.

Crosstab^a

			Body V	Veight	
			Slightly or very overweight	Underweight or the right weight	Total
What is your sex?	Female	Count	162	202	364
		% within What is your sex?	44.5%	55.5%	100.0%
		Std. Residual	2.1	-1.6	
	Male	Count	118	261	379
		% within What is your sex?	31.1%	68.9%	100.0%
		Std. Residual	-2.1	1.6	
Total		Count	280	463	743
		% within What is your sex?	37.7%	62.3%	100.0%

a. Pearson Chi-Square=14.14 with 1 df, p<0.0001.

			Weight		
			Lose	Gain, Maintain, Nothing	Total
What is your sex?	Female	Count	239	127	366
		% within What is your sex?	65.3%	34.7%	100.0%
		Std. Residual	3.3	-3.5	
	Male	Count	156	228	384
		% within What is your sex?	40.6%	59.4%	100.0%
		Std. Residual	-3.3	3.4	
Total		Count	395	355	750
		% within What is your sex?	52.7%	47.3%	100.0%

a. Pearson Chi-Square=45.77 with 1 df, p<0.0001.

Crosstaba

			Have you ever exercised to lose weight or to keep from gaining weight?		
			Yes	No	Total
What is your sex?	Female	Count	310	56	366
		% within What is your sex?	84.7%	15.3%	100.0%
		Std. Residual	2.4	-4.0	
	Male	Count	244	139	383
		% within What is your sex?	63.7%	36.3%	100.0%
		Std. Residual	-2.3	3.9	
Total		Count	554	195	749
		% within What is your sex?	74.0%	26.0%	100.0%

a. Pearson Chi-Square=42.83 with 1df, p<0.0001.

Crosstab^a

			Have you ever e fewer calories, fat to lose wei from gainir		
			Yes	No	Total
What is your sex?	Female	Count	211	154	365
		% within What is your sex?	57.8%	42.2%	100.0%
		Std. Residual	3.5	-3.2	
	Male	Count	129	253	382
		% within What is your sex?	33.8%	66.2%	100.0%
		Std. Residual	-3.4	3.1	
Total		Count	340	407	747
		% within What is your sex?	45.5%	54.5%	100.0%

a. Pearson Chi-Square=43.49 with 1df, p<0.0001

			Have you ever eating for 24 h (also called fa weight or keep weig		
			Yes	No	Total
What is your sex?	Female	Count	95	272	367
		% within What is your sex?	25.9%	74.1%	100.0%
		Std. Residual	2.6	-1.3	
	Male	Count	54	330	384
		% within What is your sex?	14.1%	85.9%	100.0%
		Std. Residual	-2.5	1.3	
Total		Count	149	602	751
		% within What is your sex?	19.8%	80.2%	100.0%

a. Pearson Chi-Square=16.49 with 1df, p<0.0001.

				Fruit		
			3+times per week	1 or 2 times per week	Never	Total
What is your sex?	Female	Count	286	70	11	367
		% within What is your sex?	77.9%	19.1%	3.0%	100.0%
		Std. Residual	.7	.0	-2.5	
	Male	Count	279	74	36	389
		% within What is your sex?	71.7%	19.0%	9.3%	100.0%
		Std. Residual	7	.0	2.4	
Total		Count	565	144	47	756
		% within What is your sex?	74.7%	19.0%	6.2%	100.0%

a. Pearson Chi-Square=12.87 with 1 df, p=0.002.

Crosstab^a

			,	Video Games, etc			
			3+ hours per day	1-2 hours per day	< 1 hour per day	Total	
What is your sex?	Female	Count	64	127	173	364	
		% within What is your sex?	17.6%	34.9%	47.5%	100.0%	
		Std. Residual	-2.1	.2	1.3		
	Male	Count	106	129	148	383	
		% within What is your sex?	27.7%	33.7%	38.6%	100.0%	
		Std. Residual	2.0	2	-1.3		
Total		Count	170	256	321	747	
		% within What is your sex?	22.8%	34.3%	43.0%	100.0%	

a. Pearson Chi-Square=11.86 with 2 df, p=0.003.

What is your sex? * Sports Teams Crosstabulationa

			Sports Teams		
			1+ teams	0 teams	Total
What is your sex?	Female	Count	173	190	363
		% within What is your sex?	47.7%	52.3%	100.0%
		Std. Residual	-2.2	2.5	
	Male	Count	241	133	374
		% within What is your sex?	64.4%	35.6%	100.0%
		Std. Residual	2.1	-2.4	
Total		Count	414	323	737
		% within What is your sex?	56.2%	43.8%	100.0%

a. Pearson Chi-Square=21.07 with 1 df, p<0.0001.

			During the past	During the past 12 months, have you had an episode of asthma or an asthma attack?				
			l do not have asthma	No, I have asthma, but I have not had an episode of asthma or an asthma attack during the past 12 months	Yes, I have had an episode of asthma or an asthma attack during the past 12 months	Not sure	Total	
What is your sex?	Female	Count	259	55	19	27	360	
		% within What is your sex?	71.9%	15.3%	5.3%	7.5%	100.0%	
		Std. Residual	3	6	2	2.7		
	Male	Count	279	66	21	6	372	
		% within What is your sex?	75.0%	17.7%	5.6%	1.6%	100.0%	
		Std. Residual	.3	.6	.1	-2.6		
Total		Count	538	121	40	33	732	
		% within What is your sex?	73.5%	16.5%	5.5%	4.5%	100.0%	

a. Pearson chi-Square=15.01 with 3df, p=0.002.

			Feel S	tress	
			Rarely or Never	Sometimes, Most, Always	Total
What is your sex?	Female	Count	111	248	359
		% within What is your sex?	30.9%	69.1%	100.0%
		Std. Residual	-4.0	3.7	
	Male	Count	220	152	372
		% within What is your sex?	59.1%	40.9%	100.0%
		Std. Residual	4.0	-3.6	
Total		Count	331	400	731
		% within What is your sex?	45.3%	54.7%	100.0%

a. Pearson Ch-Square-58.72 with 1 df, p<0.0001.

Crosstab^a

			Feel Good	About Self	
			Strongly Agree or Agree	Not Sure, Disagree, Strongly Disagree	Total
What is your sex?	Female	Count	217	142	359
		% within What is your sex?	60.4%	39.6%	100.0%
		Std. Residual	-2.5	3.9	
	Male	Count	306	67	373
		% within What is your sex?	82.0%	18.0%	100.0%
		Std. Residual	2.4	-3.8	
Total		Count	523	209	732
		% within What is your sex?	71.4%	28.6%	100.0%

a. Pearson Ch-Square=41.81 with 1df, p<0.0001.