

Illinois Youth Survey
2010 Chicago Community Area Report: Roseland

Survey Validity

	%	N
Invalid	9%	41
Valid	91%	429

Valid surveys are those that have 40% or more of the questions answered, report no derbisol use, and indicate that the respondent was honest at least some of the time.

Age

	6th		8th		10th	
	Avg	N	Avg	N	Avg	N
How old are you?	11.8	70	13.8	102	15.9	257

Gender

	6th		8th		10th	
	%	N	%	N	%	N
Female	59%	41	55%	55	66%	167
Male	41%	29	45%	45	34%	87

Race/Ethnicity

	6th		8th		10th	
	%	N	%	N	%	N
White	1%	1	0%	0	1%	2
Black / African American	91%	64	87%	88	85%	217
Latino / Latina	0%	0	0%	0	5%	12
Asian American	0%	0	0%	0	0%	0
Native American / American Indian	4%	3	2%	2	1%	2
Multi-racial	6%	4	11%	11	7%	19
Other	0%	0	2%	2	2%	6

Living Arrangement

	6th		8th		10th	
	%	N	%	N	%	N
Both parents	47%	33	27%	27	31%	79
Parent and step parent	6%	4	14%	14	15%	39
Mother only	34%	24	42%	42	38%	95
Father only	4%	3	2%	2	4%	10
Legal Guardian	4%	3	9%	9	8%	19
Foster parent	1%	1	3%	3	2%	4
Group home or residential care	0%	0	0%	0	0%	1
Living independently	0%	0	0%	0	1%	3
Other	3%	2	3%	3	2%	5

At school are you eligible to receive:

	6th		8th		10th	
	%	N	%	N	%	N
Free lunch	91%	63	80%	79	76%	194
Reduced lunch price	7%	5	11%	11	12%	30
Neither	1%	1	9%	9	12%	31

About how many days are you absent from school during an entire year?

	6th		8th		10th	
	%	N	%	N	%	N
0 - 9 days	90%	63	91%	90	77%	193
10 - 19 days	4%	3	7%	7	17%	43
20 - 30 days	3%	2	2%	2	5%	13
More than 30 days	3%	2	0%	0	1%	3

If you wanted to get the following, how difficult would it be to get?

		Very hard	Sort of hard	Sort of easy	Very easy
		%	%	%	%
6th	Alcohol	67%	14%	11%	8%
	Cigarettes	70%	14%	3%	13%
	Marijuana	79%	6%	10%	5%
8th	Alcohol	47%	20%	18%	15%
	Cigarettes	63%	7%	18%	12%
	Marijuana	58%	15%	15%	13%
	Drug like cocaine, LSD, or amphetamines	86%	9%	0%	4%
10th	Alcohol	22%	23%	34%	21%
	Cigarettes	29%	15%	23%	32%
	Marijuana	19%	11%	21%	50%
	Drug like cocaine, LSD, or amphetamines	50%	20%	16%	14%

How wrong would most adults (over 21) in your neighborhood think it is for kids your age to:

		Very wrong	Wrong	A little bit wrong	Not wrong at all
		%	%	%	%
6th	Drink alcohol?	52%	22%	16%	9%
	Smoke cigarettes?	64%	16%	10%	9%
	Use marijuana?	69%	9%	15%	7%
8th	Drink alcohol?	45%	21%	26%	7%
	Smoke cigarettes?	56%	16%	22%	6%
	Use marijuana?	49%	20%	22%	8%
10th	Drink alcohol?	29%	32%	29%	10%
	Smoke cigarettes?	34%	35%	21%	10%
	Use marijuana?	36%	27%	24%	14%

In which of the following activities do you participate?

	6th		8th		10th	
	%	N	%	N	%	N
School sports team	59%	35	61%	55	55%	118
Other sports	59%	35	54%	49	33%	71
Scouting	22%	13	8%	7	5%	10
Boys and girls club	25%	15	14%	13	7%	15
4-H club	2%	1	2%	2	2%	4
Service or voluntary projects	22%	13	37%	33	48%	104
Church youth group or other faith-based youth group	49%	29	41%	37	35%	76
Other activities	51%	30	72%	65	65%	140

How safe do you feel in your neighborhood?

	6th		8th		10th	
	%	N	%	N	%	N
Very safe	34%	23	31%	31	22%	54
Sort of safe	39%	26	45%	45	47%	116
Sort of unsafe	21%	14	15%	15	24%	61
Very unsafe	6%	4	10%	10	7%	18

How old were you when you first:

		Never have	10 or younger	11	12	13	14	15	16	17
		%	%	%	%	%	%	%	%	%
8th	Smoked marijuana	75%	3%	4%	8%	8%	2%	0%	0%	0%
	Smoked a cigarette, even just a puff	75%	13%	3%	4%	5%	0%	0%	0%	0%
	Used any other tobacco product (chewing tobacco or cigars)	96%	1%	0%	2%	1%	0%	0%	0%	0%
	Had more than a sip or two of alcohol	39%	17%	12%	9%	15%	9%	0%	0%	0%
	Began drinking alcoholic beverages regularly (at least once or twice a month)	81%	1%	2%	4%	8%	4%	0%	0%	0%
10th	Smoked marijuana	67%	3%	3%	3%	6%	7%	8%	3%	0%
	Smoked a cigarette, even just a puff	77%	7%	4%	1%	2%	4%	4%	2%	0%
	Used any other tobacco product (chewing tobacco or cigars)	94%	2%	1%	0%	1%	1%	1%	0%	0%
	Had more than a sip or two of alcohol	46%	9%	4%	7%	11%	7%	11%	5%	0%
	Began drinking alcoholic beverages regularly (at least once or twice a month)	79%	2%	1%	1%	2%	4%	7%	3%	0%

Cigarettes: Past month and Past Year

		Not at all	Less than one cigarette per day	One to five cigarettes per day	About one-half pack per day	About one pack per day	About one and one-half packs per day	Two packs or more per day
		%	%	%	%	%	%	%
6th	PAST MONTH cigarette use	97%	0%	1%	1%	0%	0%	0%
	PAST YEAR cigarette use	93%	4%	0%	3%	0%	0%	0%
8th	PAST MONTH cigarette use	97%	2%	0%	0%	0%	0%	1%
	PAST YEAR cigarette use	93%	5%	1%	0%	0%	0%	1%
10th	PAST MONTH cigarette use	96%	2%	1%	1%	0%	0%	0%
	PAST YEAR cigarette use	92%	5%	2%	0%	1%	0%	0%

Other Tobacco Products: Past month and Past Year

		Never	Once or twice	Once or twice per week	About once a day	More than once a day
		%	%	%	%	%
6th	PAST MONTH other tobacco products use	97%	0%	1%	0%	1%
	PAST YEAR other tobacco products use	97%	1%	0%	0%	1%
8th	PAST MONTH other tobacco products use	96%	3%	0%	1%	0%
	PAST YEAR other tobacco products use	96%	3%	0%	1%	0%
10th	PAST MONTH other tobacco products use	93%	2%	1%	2%	2%
	PAST YEAR other tobacco products use	88%	7%	1%	1%	2%

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Alcohol: Number of Occasions of Past month and Past Year use

		0 Occasions	1 - 2 occasions	3 - 5 occasions	6 - 9 occasions	10 - 19 occasions	20 or more occasions
		%	%	%	%	%	%
6th	PAST MONTH alcohol use	86%	9%	3%	0%	2%	0%
	PAST YEAR alcohol use	77%	12%	9%	2%	0%	0%
8th	PAST MONTH alcohol use	73%	18%	5%	2%	2%	0%
	PAST YEAR alcohol use	54%	29%	8%	5%	2%	2%
10th	PAST MONTH alcohol use	74%	17%	5%	3%	1%	0%
	PAST YEAR alcohol use	57%	18%	11%	6%	6%	3%

In the past 2 weeks, how many times have you had five or more alcoholic drinks in a row?

		None	Once	Twice	3-5 times	6-9 times	10 or more times
		%	%	%	%	%	%
6th	Binge drinking	99%	0%	1%	0%	0%	0%
8th	Binge drinking	87%	5%	4%	0%	3%	1%
10th	Binge drinking	88%	4%	3%	2%	1%	1%

Illicit drugs: Number of Occasions of Past Month use

		0 Occasions	1 - 2 occasions	3 - 5 occasions	6 - 9 occasions	10 - 19 occasions	20 or more occasions
		%	%	%	%	%	%
6th	PAST MONTH marijuana use	97%	3%	0%	0%	0%	0%
	PAST MONTH inhalants use	98%	2%	0%	0%	0%	0%
8th	PAST MONTH marijuana use	85%	4%	5%	1%	1%	4%
	PAST MONTH inhalants use	95%	2%	2%	0%	0%	1%
10th	PAST MONTH marijuana use	80%	8%	2%	2%	3%	6%
	PAST MONTH inhalants use	96%	2%	2%	1%	0%	0%

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Illicit drugs: Number of Occasions of Past Year use

		0 Occasions	1 - 2 occasions	3 - 5 occasions	6 - 9 occasions	10 - 19 occasions	20 or more occasions
		%	%	%	%	%	%
6th	PAST YEAR marijuana use	94%	5%	2%	0%	0%	0%
	PAST YEAR inhalant use	96%	4%	0%	0%	0%	0%
8th	PAST YEAR marijuana use	81%	2%	6%	1%	2%	8%
	PAST YEAR inhalant use	94%	2%	1%	1%	1%	1%
	PAST YEAR MDMA ('ecstasy') use	100%	0%	0%	0%	0%	0%
	PAST YEAR LSD use	100%	0%	0%	0%	0%	0%
	PAST YEAR cocaine / crack use	100%	0%	0%	0%	0%	0%
	PAST YEAR meth use	100%	0%	0%	0%	0%	0%
	PAST YEAR heroin use	100%	0%	0%	0%	0%	0%
	PAST YEAR marijuana use	72%	8%	5%	2%	5%	9%
10th	PAST YEAR inhalant use	94%	2%	1%	2%	0%	0%
	PAST YEAR MDMA ('ecstasy') use	98%	0%	0%	0%	0%	0%
	PAST YEAR LSD use	100%	0%	0%	0%	0%	0%
	PAST YEAR cocaine / crack use	99%	1%	0%	0%	0%	0%
	PAST YEAR meth use	100%	0%	0%	0%	0%	0%
	PAST YEAR heroin use	100%	0%	0%	0%	0%	0%

During the past 12 months, which of these over-the-counter drugs have you used for non-medical purposes?

		No	Yes: one or two times	Yes: 3-5 times	Yes: 6 or more times
		%	%	%	%
8th	Performance-enhancing or body-building supplements (Creatine, fat-burners, etc.)	99%	0%	0%	1%
	Over-the-counter weight loss aids (laxatives, Dexatrim, etc.)	99%	1%	0%	0%
	Other over-the-counter drugs (cough syrup, etc.)	87%	9%	4%	0%
10th	Performance-enhancing or body-building supplements (Creatine, fat-burners, etc.)	98%	1%	0%	0%
	Over-the-counter weight loss aids (laxatives, Dexatrim, etc.)	99%	0%	1%	0%
	Other over-the-counter drugs (cough syrup, etc.)	88%	6%	3%	4%

During the past 12 months, which of these drugs have you used without a doctor's prescription?

		No	Yes: one or two times	Yes: 3-5 times	Yes: 6 or more times
		%	%	%	%
8th	Steroids	100%	0%	0%	0%
	Uppers (Ritalin, etc.)	100%	0%	0%	0%
	Downers (Valium, Ambien, etc.)	100%	0%	0%	0%
	Other prescription drugs (OxyContin, Ketamine, etc.)	99%	0%	1%	0%
10th	Steroids	99%	0%	0%	0%
	Uppers (Ritalin, etc.)	100%	0%	0%	0%
	Downers (Valium, Ambien, etc.)	100%	0%	0%	0%
	Other prescription drugs (OxyContin, Ketamine, etc.)	98%	1%	0%	1%

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During the past year, how often did you get cigarettes or other tobacco products from the following sources?

		I did not use cigarettes or other tobacco products during the past year	Never	sometimes	Often
		%	%	%	%
8th	I bought them at a gas station	90%	7%	2%	1%
	I bought them at a store	90%	7%	2%	1%
	I bought them from a vending machine	90%	9%	0%	1%
	I gave a stranger money to buy them for me	90%	10%	0%	0%
	I bought them over the Internet	90%	10%	0%	0%
	A friend gave them to me	90%	8%	2%	0%
	My older brother or sister gave them to me	90%	10%	0%	0%
	My parent gave them to me	90%	10%	0%	0%
	I took them from a store	90%	10%	0%	0%
	I took them from home without my parents knowing it	90%	8%	2%	0%
	I got them some other way	90%	7%	2%	1%
10th	I bought them at a gas station	90%	5%	3%	2%
	I bought them at a store	90%	5%	2%	3%
	I bought them from a vending machine	90%	10%	0%	0%
	I gave a stranger money to buy them for me	90%	7%	2%	1%
	I bought them over the Internet	90%	10%	0%	0%
	A friend gave them to me	89%	5%	4%	2%
	My older brother or sister gave them to me	90%	8%	2%	0%
	My parent gave them to me	90%	10%	0%	0%
	I took them from a store	90%	10%	0%	0%
	I took them from home without my parents knowing it	90%	7%	3%	0%
	I got them some other way	90%	6%	3%	1%

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During the past year, how often did you get alcohol from the following sources?

		I did not drink beer, wine, or liquor during the past year	Never	sometimes	Often
		%	%	%	%
8th	I bought it at a gas station	59%	38%	2%	1%
	I bought it at a store	59%	37%	3%	1%
	I bought it at a bar or restaurant	59%	40%	0%	1%
	I gave a stranger money to buy them for me	59%	39%	1%	1%
	I bought it over the Internet	59%	41%	0%	0%
	A friend gave it to me	59%	28%	12%	1%
	My older brother or sister gave it to me	60%	35%	4%	1%
	My parents with their permission	59%	26%	13%	2%
	My parents without their permission	59%	32%	7%	2%
	An adult (other than my parents) with that adult's permission	59%	28%	11%	2%
	An adult (other than my parents) without that adult's permission	59%	38%	3%	0%
	I took it from a store	59%	41%	0%	0%
	I got it at a party	59%	30%	7%	4%
	I got it some other way	58%	35%	4%	2%
10th	I bought it at a gas station	68%	28%	3%	0%
	I bought it at a store	68%	25%	6%	1%
	I bought it at a bar or restaurant	68%	28%	2%	1%
	I gave a stranger money to buy them for me	68%	22%	8%	1%
	I bought it over the Internet	69%	30%	1%	0%
	A friend gave it to me	67%	9%	18%	6%
	My older brother or sister gave it to me	69%	20%	10%	1%
	My parents with their permission	68%	21%	9%	2%
	My parents without their permission	69%	14%	13%	4%
	An adult (other than my parents) with that adult's permission	69%	19%	10%	2%
	An adult (other than my parents) without that adult's permission	69%	21%	8%	1%
	I took it from a store	70%	29%	1%	0%
	I got it at a party	69%	13%	11%	7%
	I got it some other way	69%	19%	9%	3%

During the last 30 days, on how many days did you:

		None	One or two days	3-5 days	6 or more days
		%	%	%	%
8th	Drink alcohol on school property?	96%	2%	1%	1%
	Use marijuana on school property?	98%	0%	0%	2%
10th	Drink alcohol on school property?	91%	6%	1%	1%
	Use marijuana on school property?	93%	2%	2%	2%

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When was the LAST time that:

		Never	More than a year ago	2-12 months ago	Past month
		%	%	%	%
10th	you used alcohol or other drugs weekly?	82%	5%	6%	6%
	you kept using alcohol or drugs even after you knew it could get you into fights or other kinds of legal trouble?	90%	3%	2%	5%
	you had withdrawal problems from alcohol or drugs like shaking hands, throwing up, having trouble sitting still or sleeping, or that you used any alcohol or other drugs to stop being sick or avoid withdrawal?	95%	1%	2%	2%
	you spent a lot of time either getting alcohol or drugs, using alcohol or drugs, or feeling the effects of alcohol or drugs (high, sick)?	91%	2%	2%	5%
	your use of alcohol or drugs caused you to give up, reduce or have problems at important activities at work, school, home or social events?	96%	2%	1%	2%

If you drank beer, wine, or liquor in the past 30 days, what did you drink?

		I did not drink beer, wine, or liquor during the past year	Never	sometimes	Often
		%	%	%	%
6th	Beer	86%	7%	4%	3%
	Malt liquor	86%	12%	3%	0%
	Wine	86%	7%	4%	3%
	Wine cooler	86%	9%	4%	1%
	Liquor (vodka, whiskey, etc.)	86%	7%	6%	1%
	Mixed drinks (margarita, etc.)	86%	9%	6%	0%
	Flavored 'alcopops' (hard lemonade, hard cider, etc.)	86%	10%	3%	1%
8th	Beer	74%	22%	1%	3%
	Malt liquor	74%	20%	3%	3%
	Wine	75%	11%	9%	5%
	Wine cooler	74%	10%	8%	8%
	Liquor (vodka, whiskey, etc.)	74%	7%	12%	7%
	Mixed drinks (margarita, etc.)	74%	10%	8%	8%
	Flavored 'alcopops' (hard lemonade, hard cider, etc.)	74%	16%	7%	3%
10th	Beer	80%	17%	2%	1%
	Malt liquor	80%	18%	3%	0%
	Wine	80%	10%	8%	2%
	Wine cooler	80%	7%	10%	2%
	Liquor (vodka, whiskey, etc.)	80%	3%	13%	5%
	Mixed drinks (margarita, etc.)	79%	8%	9%	4%
	Flavored 'alcopops' (hard lemonade, hard cider, etc.)	80%	10%	7%	3%

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How much do you think people risk harming themselves (physically or in other ways) if they:

		No risk	Slight risk	Moderate risk	Great risk
		%	%	%	%
6th	Smoke one or more packs of cigarettes per day	25%	13%	29%	33%
	Take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day	24%	24%	10%	43%
	Have five or more drinks of an alcoholic beverage once or twice a week	27%	13%	24%	36%
	Smoke marijuana regularly	22%	10%	15%	53%
	Smoke marijuana once or twice a week	23%	20%	26%	32%
	Use inhalants regularly	28%	11%	17%	45%
8th	Smoke one or more packs of cigarettes per day	18%	11%	17%	53%
	Take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day	21%	21%	29%	29%
	Have five or more drinks of an alcoholic beverage once or twice a week	22%	16%	25%	37%
	Smoke marijuana regularly	28%	14%	16%	43%
	Smoke marijuana once or twice a week	33%	22%	24%	22%
	Use inhalants regularly	27%	6%	18%	49%
10th	Smoke one or more packs of cigarettes per day	18%	4%	17%	60%
	Take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day	16%	18%	33%	33%
	Have five or more drinks of an alcoholic beverage once or twice a week	14%	12%	34%	40%
	Smoke marijuana regularly	23%	15%	21%	42%
	Smoke marijuana once or twice a week	26%	26%	22%	26%
	Use inhalants regularly	20%	6%	19%	55%

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

	Never	1-2 times	3-5 times	6 or more times
	%	%	%	%
6th	39%	32%	20%	9%
8th	40%	37%	14%	8%
10th	65%	27%	5%	3%

During the past 12 months, how many times have you ridden in a car driven by:

		Never	1-2 times	3-5 times	6 or more times
		%	%	%	%
6th	a TEENAGER who had been drinking or using drugs	86%	7%	1%	6%
	an ADULT who had been drinking or using drugs	65%	10%	6%	19%
8th	a TEENAGER who had been drinking or using drugs	89%	7%	0%	4%
	an ADULT who had been drinking or using drugs	59%	28%	5%	8%
10th	a TEENAGER who had been drinking or using drugs	81%	10%	6%	3%
	an ADULT who had been drinking or using drugs	68%	16%	8%	8%

During the past 12 months, how many times did you drive a car or other vehicle when:

		Never	1-2 times	3-5 times	6 or more times
		%	%	%	%
10th	drinking alcohol	94%	2%	2%	2%
	using marijuana or other illegal drugs	90%	5%	0%	4%

During the past 12 months, have any of the following been done by someone in a dating relationship to you?

		I have not begun to date	Yes	No	Not sure
		%	%	%	%
8th	Abused in past year	20%	16%	62%	2%
10th	Abused in past year	12%	9%	73%	5%
	Called you names to put you down or make you feel bad?	12%	12%	72%	4%
	Insisted on knowing who you're with and where you are at all times?	12%	19%	66%	4%
	Followed you?	11%	9%	76%	4%
	Destroyed something that belonged to you or that you liked very much?	13%	8%	77%	2%
	Threatened or frightened your family or friends?	12%	6%	80%	2%

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

	Yes	No
	%	%
10th	10%	90%

During the past year have any of the following happened to you due to someone else's drinking?

		Yes	No
		%	%
6th	I have been injured by a vehicle	7%	93%
	I have been physically attacked	4%	96%
	I have been threatened	12%	88%
8th	I have been injured by a vehicle	9%	91%
	I have been physically attacked	12%	88%
	I have been threatened	21%	79%
10th	I have been injured by a vehicle	4%	96%
	I have been physically attacked	9%	91%
	I have been threatened	13%	87%

During the past year, in which of the following ways has another teen's drinking affected you?

		Yes	No
		%	%
8th	It made me feel unsafe	29%	71%
	It made learning harder	14%	86%
10th	It made me feel unsafe	15%	85%
	It made learning harder	11%	89%

How wrong do you think it is for someone your age to:

		Very wrong	Wrong	A little bit wrong	Not wrong at all
		%	%	%	%
6th	Drink alcohol regularly	76%	4%	13%	6%
	Smoke cigarettes?	81%	12%	3%	4%
	Smoke marijuana?	91%	4%	3%	1%
	Use LSD, cocaine, amphetamines or another illegal drug?	94%	0%	3%	3%
8th	Drink alcohol regularly	59%	16%	19%	6%
	Smoke cigarettes?	70%	21%	6%	3%
	Smoke marijuana?	70%	10%	10%	9%
	Use LSD, cocaine, amphetamines or another illegal drug?	96%	3%	0%	1%
10th	Drink alcohol regularly	49%	24%	23%	4%
	Smoke cigarettes?	64%	25%	9%	2%
	Smoke marijuana?	50%	22%	17%	11%
	Use LSD, cocaine, amphetamines or another illegal drug?	88%	7%	4%	1%

Do you currently belong to a street gang?

	Yes	No
	%	%
8th	11%	89%
10th	8%	92%

How many times in the past year (12 months) have you:

		Never	1 or 2 times	3 to 5 times	6 to 9 times	10 to 19 times	20 or more times
		%	%	%	%	%	%
8th	Carried a weapon such as a handgun, knife or club?	69%	15%	8%	3%	2%	3%
	Sold illegal drugs?	92%	6%	0%	0%	0%	1%
	Been drunk or high at school?	90%	4%	4%	1%	0%	0%
10th	Carried a weapon such as a handgun, knife or club?	79%	7%	5%	3%	2%	5%
	Sold illegal drugs?	91%	2%	1%	2%	0%	3%
	Been drunk or high at school?	86%	4%	2%	2%	0%	5%

During the past 12 months, has another student at school:

		Yes	No
		%	%
6th	Bullied you by calling you names?	29%	71%
	Threatened to hurt you?	25%	75%
	Bullied you by hitting, punching, kicking, or pushing you?	19%	81%
8th	Bullied you by calling you names?	31%	69%
	Threatened to hurt you?	16%	84%
	Bullied you by hitting, punching, kicking, or pushing you?	18%	82%
10th	Bullied you by calling you names?	11%	89%
	Threatened to hurt you?	13%	87%
	Bullied you by hitting, punching, kicking, or pushing you?	7%	93%

What are the chances you would be seen as cool if:

		No or very little chance	Little chance	Some chance	Pretty good chance	Very good chance
		%	%	%	%	%
6th	Smoked cigarettes?	76%	7%	6%	4%	6%
	Began drinking alcohol regularly?	67%	12%	7%	6%	7%
	Smoked marijuana?	74%	5%	3%	6%	12%
8th	Smoked cigarettes?	79%	10%	7%	3%	0%
	Began drinking alcohol regularly?	65%	16%	12%	3%	4%
	Smoked marijuana?	64%	11%	13%	4%	9%
10th	Smoked cigarettes?	78%	10%	6%	4%	2%
	Began drinking alcohol regularly?	67%	10%	13%	8%	2%
	Smoked marijuana?	63%	8%	12%	11%	7%

Amount of time child spends alone each week after school:

	6th	8th
	%	%
None	47%	53%
1 to 2 days, < 3 hours per day	15%	13%
1 to 2 days, > 3 hours per day	3%	4%
3 or more days, < 3 hours per day	17%	5%
3 or more days, > 3 hours per day	18%	25%

How likely is it that you will complete a post high school program such as vocational training program, military service, community college, or 4-year college?

	Definitely will not	Probably will not	Probably will	Definitely will	Not sure
	%	%	%	%	%
10th	11%	1%	16%	59%	13%

How old were you the first time you gambled (bet money or something of value on sports, a game of chance or skill, plays the lottery or bet on cards or dice games?

	Never	10 or younger	11	12	13	14	15	16	17 or older
	%	%	%	%	%	%	%	%	%
10th	54%	17%	4%	6%	6%	6%	6%	1%	0%

In the last 30 days, have you gambled for money or anything of value?

	Yes	No
	%	%
10th	22%	78%

In the past 12 months, have you gambled for money or anything of value?

	Yes	No
	%	%
8th	27%	73%
10th	33%	67%

If you gambled for money in the past 12 months, where have you gambled?

	10th	
	%	N
Didn't gamble for money	56%	112
At someone's house	21%	42
Casino or Riverboat	1%	2
Internet	4%	8
Poker Machine	1%	2
Person-to-person betting with another teen	22%	44
Person-to-person betting with an adult	14%	28
Lottery self-service machine	3%	5
Other lottery tickets	2%	3
Off-Track Betting	1%	1
Sports Pool	8%	15
Other	16%	32

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What percent of students at your school do you think have done the following in the past 30 days:

		0%	1-10%	11-20%	21-30%	31-40%	41-50%	51-60%	61-70%	71-80%	81-90%	91-100%
		%	%	%	%	%	%	%	%	%	%	%
10th	Smoked cigarettes	13%	16%	10%	8%	13%	14%	5%	7%	7%	5%	4%
	Had beer, wine, or hard liquor	10%	5%	7%	7%	10%	10%	11%	9%	15%	10%	7%
	Used marijuana	11%	6%	4%	7%	7%	11%	7%	9%	10%	15%	13%

**In the past 12 months did
you ever feel so sad or
hopeless that you stopped
doing some usual activities?**

	Yes	No
	%	%
8th	23%	77%
10th	26%	74%

**Is there an adult you know (other than
your parent) you could talk to about
important things in your life?**

	No	Yes, one adult	Yes, more than one adult
	%	%	%
6th	15%	22%	63%
8th	13%	24%	63%
10th	21%	21%	58%

How do you describe your weight?

	Very underweight	Slightly underweight	About the right weight	Slightly overweight	Very overweight
	%	%	%	%	%
6th	1%	13%	66%	18%	1%
8th	1%	10%	67%	17%	5%
10th	3%	8%	61%	26%	3%

Average Height and Weight

	Grade								
	6th			8th			10th		
	Mean	Median	N	Mean	Median	N	Mean	Median	N
Height (inches)	64.2	63.0	31	64.5	64.0	63	65.5	65.0	216
Weight (pounds)	131.9	107.0	31	140.1	132.0	61	154.3	142.0	211

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During the past 7 days, how many times did you:

		None	1 to 3 times during the past 7 days	4 to 6 times during the past 7 days	1 time per day	2 times per day	3 times per day	4 or more times per day
		%	%	%	%	%	%	%
6th	Eat fruit	10%	19%	15%	9%	15%	9%	24%
	Eat vegetables	18%	24%	18%	9%	10%	9%	12%
8th	Eat fruit	10%	33%	13%	11%	6%	5%	21%
	Eat vegetables	15%	26%	23%	18%	1%	4%	13%
10th	Eat fruit	11%	25%	21%	10%	14%	11%	9%
	Eat vegetables	16%	29%	20%	14%	9%	6%	6%

During the past 7 days how many glasses of milk did you drink?

	I did not drink milk during the past 7 days	1 to 3 glasses during the past 7 days	4 to 6 glasses during the past 7 days	1 glass per day	2 glasses per day	3 glasses per day	4 or more glasses per day
	%	%	%	%	%	%	%
10th	22%	20%	18%	14%	10%	8%	8%

On how many of the past 7 days did you participate in a physical activity?

	0 days	1 day	2 days	3 days	4 days	5 days	6 days	7 days
	%	%	%	%	%	%	%	%
6th	17%	14%	9%	18%	3%	11%	8%	21%
8th	20%	8%	14%	11%	14%	8%	1%	25%
10th	12%	7%	11%	12%	8%	17%	10%	22%

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

	I do not watch TV on an average school day	Less than 1 hour per day	1 hour per day	2 hours per day	3 hours per day	4 hours per day	5 or more hours per day
	%	%	%	%	%	%	%
6th	5%	6%	6%	21%	14%	15%	33%
8th	3%	7%	3%	18%	14%	14%	40%
10th	13%	11%	6%	21%	16%	13%	20%

In a typical week how often do you and your parent(s) or guardian eat dinner together?

	Never	1 day	2 days	3 days	4 days	5 days	6 days	7 days
	%	%	%	%	%	%	%	%
6th	13%	9%	9%	12%	7%	3%	3%	44%
8th	24%	10%	4%	14%	7%	13%	1%	27%
10th	32%	8%	12%	9%	10%	10%	5%	15%

Putting them all together, what were your grades like for the last year?

	Mostly A	Mostly A and B	Mostly B	Mostly B and C	Mostly C	Mostly C and D	Mostly D	Mostly F
	%	%	%	%	%	%	%	%
6th	12%	32%	7%	36%	7%	6%	0%	0%
8th	4%	27%	5%	35%	7%	16%	2%	3%
10th	13%	36%	10%	25%	9%	6%	1%	0%

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

	0 days	1 day	2 or 3 days	4 or 5 days	6 or more days
	%	%	%	%	%
6th	81%	7%	9%	3%	0%
8th	86%	6%	5%	1%	1%
10th	83%	5%	9%	0%	3%

How true are the following statements?

		Not at all true	A little true	Pretty much true	Very much true
At my school there is a teacher or some other adult who:		%	%	%	%
6th	Really cares about me.	5%	18%	20%	58%
	Notices when I'm not there.	3%	25%	30%	42%
	Listens to me when I have something to say.	6%	19%	26%	48%
	Notices if I have trouble learning something.	14%	19%	24%	43%
	Tells me when I do a good job.	5%	13%	31%	52%
	Always wants me to do my best.	3%	3%	28%	66%
	Believes that I will be a success.	3%	11%	19%	66%
	Encourages me to work hard in school.	8%	2%	19%	71%
8th	Really cares about me.	7%	21%	17%	54%
	Notices when I'm not there.	14%	21%	30%	35%
	Listens to me when I have something to say.	14%	20%	26%	40%
	Notices if I have trouble learning something.	16%	19%	22%	43%
	Tells me when I do a good job.	7%	13%	29%	51%
	Always wants me to do my best.	8%	7%	18%	68%
	Believes that I will be a success.	7%	10%	29%	54%
	Encourages me to work hard in school.	8%	8%	23%	61%
10th	Really cares about me.	20%	28%	23%	29%
	Notices when I'm not there.	16%	21%	31%	32%
	Listens to me when I have something to say.	18%	26%	29%	27%
	Notices if I have trouble learning something.	20%	29%	30%	21%
	Tells me when I do a good job.	16%	21%	31%	33%
	Always wants me to do my best.	10%	19%	29%	42%
	Believes that I will be a success.	12%	20%	31%	37%
	Encourages me to work hard in school.	11%	19%	29%	40%

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How true are the following statements?

At school:		Not at all true	A little true	Pretty much true	Very much true
		%	%	%	%
6th	I do interesting activities.	6%	24%	35%	35%
	I help decide things like class activities or rules.	38%	23%	20%	18%
	I do things that make a difference.	21%	33%	24%	22%
8th	I do interesting activities.	16%	31%	27%	26%
	I help decide things like class activities or rules.	38%	27%	16%	19%
	I do things that make a difference.	23%	33%	17%	27%
10th	I do interesting activities.	28%	32%	20%	20%
	I help decide things like class activities or rules.	47%	26%	15%	12%
	I do things that make a difference.	35%	37%	15%	13%

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

		Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
		%	%	%	%	%
6th	I feel close to people at this school.	6%	6%	20%	47%	20%
	I am happy to be at this school.	10%	16%	16%	41%	17%
	I feel safe in my school.	5%	19%	29%	30%	17%
	The teachers at this school treat students fairly.	17%	11%	19%	25%	27%
8th	I feel close to people at this school.	9%	7%	11%	41%	32%
	I am happy to be at this school.	15%	7%	27%	31%	20%
	I feel safe in my school.	12%	7%	22%	35%	23%
	The teachers at this school treat students fairly.	14%	14%	21%	31%	20%
10th	I feel close to people at this school.	21%	11%	23%	30%	15%
	I am happy to be at this school.	31%	16%	25%	20%	7%
	I feel safe in my school.	16%	8%	21%	34%	20%
	The teachers at this school treat students fairly.	28%	18%	25%	21%	8%

How wrong do your parents feel it would be for you to:

		Very wrong	Wrong	A little bit wrong	Not wrong at all
		%	%	%	%
6th	Drink alcohol regularly	85%	3%	10%	2%
	Smoke cigarettes	90%	5%	3%	2%
	Smoke marijuana	88%	7%	3%	2%
8th	Drink alcohol regularly	81%	7%	5%	6%
	Smoke cigarettes	89%	3%	2%	5%
	Smoke marijuana	89%	3%	4%	3%
10th	Drink alcohol regularly	81%	9%	8%	1%
	Smoke cigarettes	91%	6%	1%	1%
	Smoke marijuana	90%	4%	4%	1%

In the past year have your parents/guardians talked to you about not using the following:

		Yes	No	Don't remember
		%	%	%
6th	Tobacco	69%	15%	16%
	Alcohol	68%	22%	10%
	Marijuana and other illegal drugs	72%	17%	12%
8th	Tobacco	51%	39%	10%
	Alcohol	55%	34%	12%
	Marijuana and other illegal drugs	60%	31%	9%
10th	Tobacco	38%	47%	15%
	Alcohol	42%	44%	14%
	Marijuana and other illegal drugs	45%	41%	13%

Family Relationships

		Never	Sometimes	Most of the time	Always
		%	%	%	%
6th	When I am not at home, one of my parents knows where I am and who I am with.	3%	15%	8%	73%
	My parents ask if I've gotten my homework done.	3%	15%	7%	75%
	Would your parents know if you did not come home on time?	7%	10%	15%	69%
8th	When I am not at home, one of my parents knows where I am and who I am with.	7%	14%	14%	65%
	If you drank some beer or wine or liquor (for example, vodka, whiskey, or gin) without your parents' permission would you be caught by your parents?	36%	17%	12%	36%
	My parents ask if I've gotten my homework done.	5%	18%	22%	55%
	Would your parents know if you did not come home on time?	11%	10%	17%	63%
	If you go to a party where alcohol is served, would you be caught by your parents?	32%	14%	13%	41%
10th	When I am not at home, one of my parents knows where I am and who I am with.	10%	13%	24%	53%
	If you drank some beer or wine or liquor (for example, vodka, whiskey, or gin) without your parents' permission would you be caught by your parents?	44%	20%	16%	20%
	My parents ask if I've gotten my homework done.	13%	24%	23%	39%
	Would your parents know if you did not come home on time?	13%	16%	16%	55%
	If you go to a party where alcohol is served, would you be caught by your parents?	39%	22%	15%	24%
	If you drank and drove, would you be caught by your parents?	25%	15%	13%	47%
	If you rode in a car driven by a teen driver who had been drinking, would you be caught by your parents?	35%	17%	13%	34%

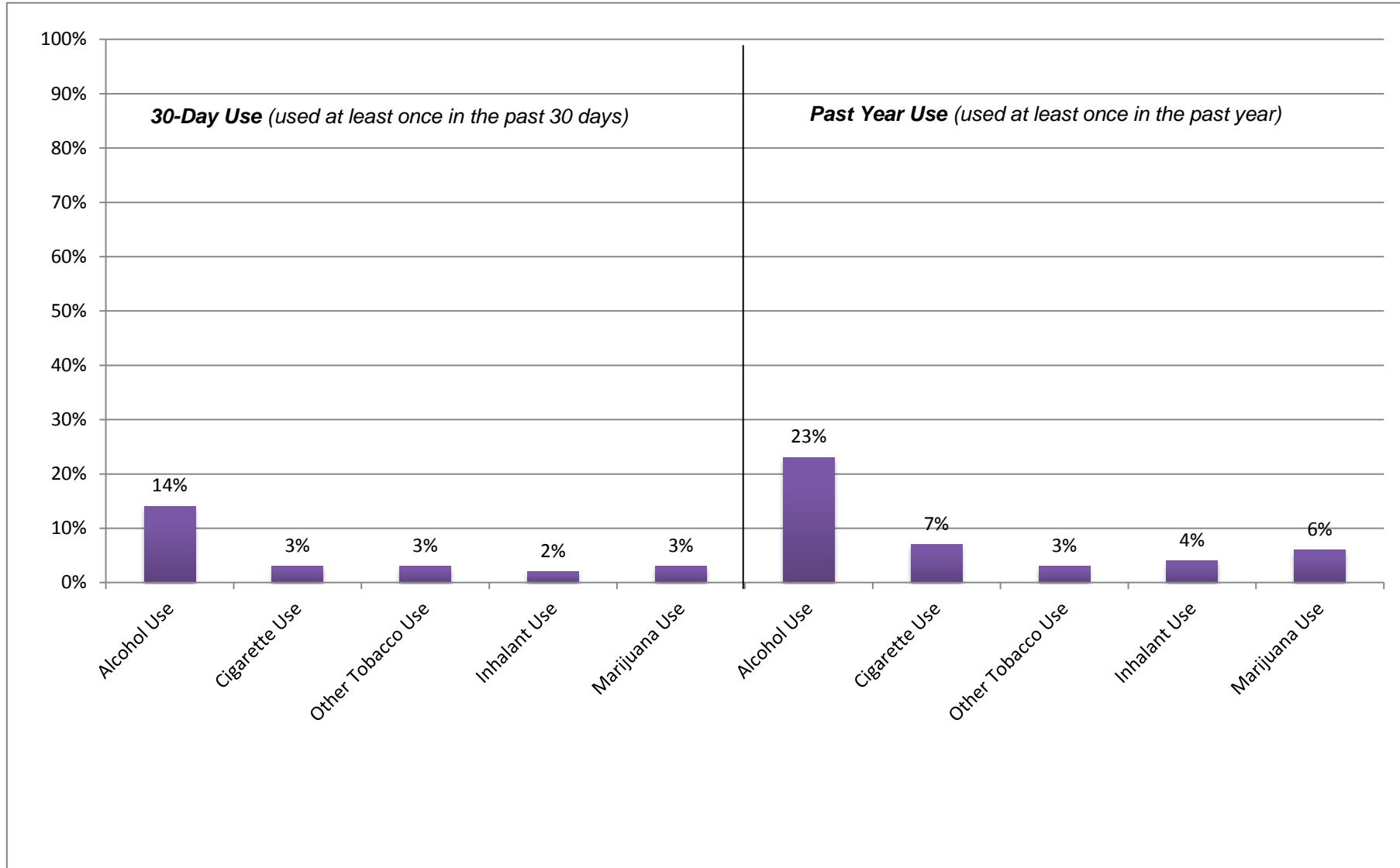
My family has clear rules about alcohol and drug use

	Yes	No
	%	%
6th	91%	9%
8th	85%	15%
10th	83%	17%

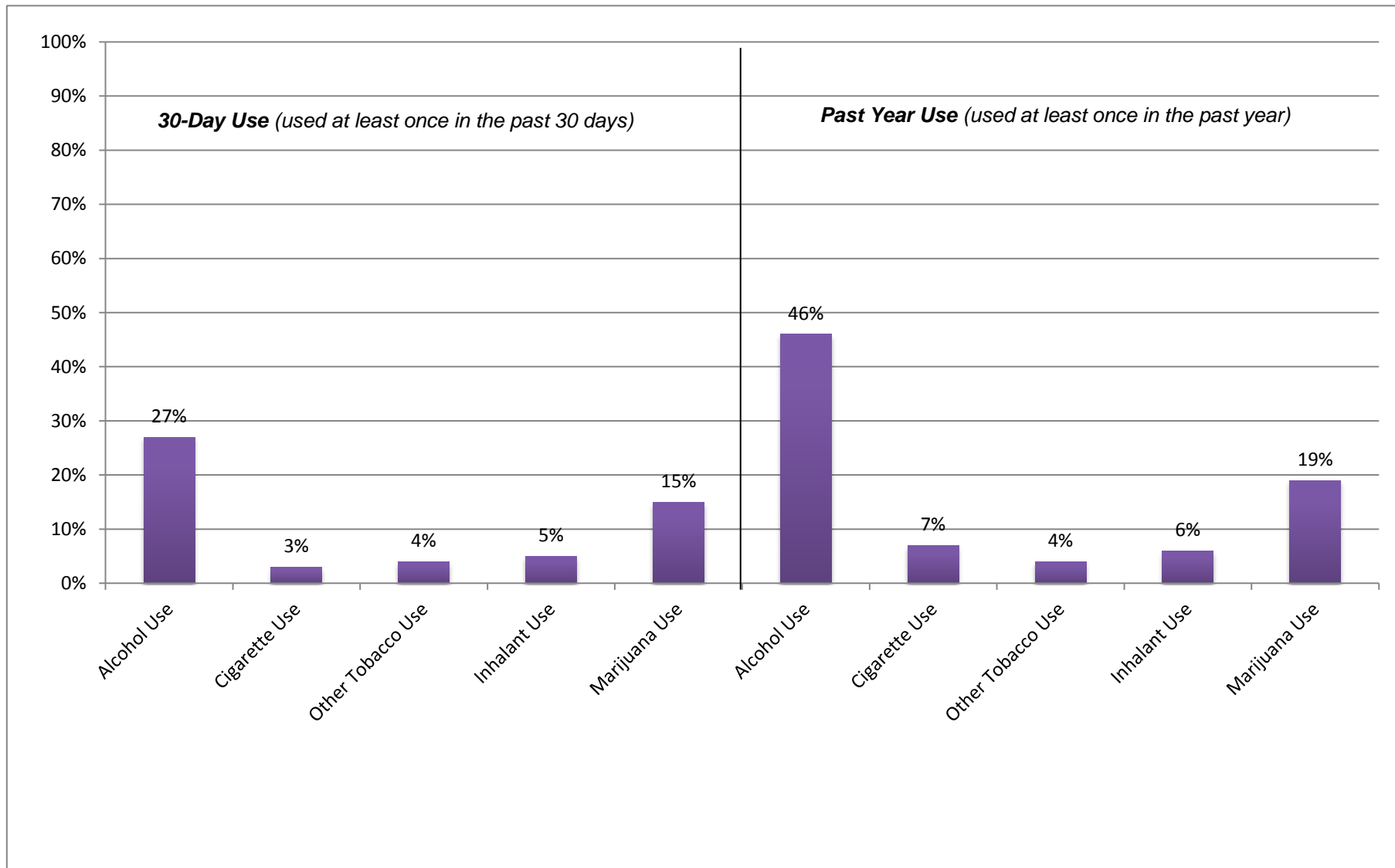
In the past 3 months, have your parents ever talked with you about:

		Yes	No
		%	%
10th	not drinking and driving?	50%	50%
	not riding with a driver who had been drinking?	55%	45%

Roseland 6th Grade - 2010
Substance Use



Roseland 8th Grade - 2010
Substance Use



Roseland 10th Grade - 2010
Substance Use

