

**Illinois Youth Survey  
2010 County Report: Jefferson County**

**Number of IYS 2010 Respondents**

	N				
	6th	8th	10th	12th	Total
Grade	286	308	353	268	1215

**Age**

	6th		8th		10th		12th	
	Avg	N	Avg	N	Avg	N	Avg	N
How old are you?	11.7	286	13.8	308	15.8	353	17.7	268

**Gender**

	6th		8th		10th		12th	
	%	N	%	N	%	N	%	N
Female	48%	136	50%	152	49%	172	55%	143
Male	52%	145	50%	154	51%	176	45%	117

**Race/Ethnicity**

	6th		8th		10th		12th	
	%	N	%	N	%	N	%	N
White	79%	226	82%	253	84%	294	82%	219
Black / African American	12%	34	9%	28	9%	32	9%	23
Latino / Latina	2%	6	2%	6	1%	2	1%	2
Asian American	0%	0	1%	2	1%	2	3%	9
Native American / American Indian	0%	0	1%	4	1%	3	1%	4
Multi-racial	6%	16	4%	11	4%	15	4%	10
Other	2%	6	2%	6	2%	6	1%	2

**Living Arrangement**

	6th		8th		10th		12th	
	%	N	%	N	%	N	%	N
Both parents	53%	149	52%	160	51%	180	51%	137
Parent and step parent	14%	40	17%	52	16%	55	18%	47
Mother only	22%	61	20%	63	25%	88	17%	45
Father only	5%	14	5%	14	5%	16	3%	9
Legal Guardian	3%	8	4%	11	2%	8	3%	8
Foster parent	0%	1	1%	3	1%	3	1%	3
Group home or residential care	0%	0	0%	0	0%	0	0%	1
Living independently	0%	0	0%	0	0%	0	0%	1
Other	4%	11	2%	5	1%	4	6%	17

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**At school are you eligible to receive:**

	6th		8th		10th		12th	
	%	N	%	N	%	N	%	N
Free lunch	44%	124	31%	91	27%	95	25%	66
Reduced lunch price	19%	52	16%	46	11%	38	9%	24
Neither	37%	104	53%	153	62%	214	66%	178

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

	6th		8th		10th		12th	
	%	N	%	N	%	N	%	N
0 - 9 days	82%	231	82%	253	86%	301	77%	207
10 - 19 days	14%	41	14%	42	9%	31	15%	39
20 - 30 days	3%	9	3%	10	4%	14	4%	10
More than 30 days	1%	2	1%	2	1%	5	4%	12

**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	71%	15%	9%	5%
	Cigarettes	68%	16%	10%	6%
	Marijuana	89%	6%	2%	3%
8th	Alcohol	47%	22%	19%	11%
	Cigarettes	48%	18%	14%	20%
	Marijuana	62%	16%	12%	10%
	Drug like cocaine, LSD, or amphetamines	84%	9%	4%	4%
10th	Alcohol	20%	25%	28%	26%
	Cigarettes	18%	18%	20%	44%
	Marijuana	31%	16%	23%	30%
	Drug like cocaine, LSD, or amphetamines	58%	26%	10%	6%
12th	Alcohol	9%	12%	31%	48%
	Cigarettes	6%	2%	10%	82%
	Marijuana	14%	13%	30%	43%
	Drug like cocaine, LSD, or amphetamines	36%	30%	24%	10%

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**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?	74%	19%	5%	2%
	Smoke cigarettes?	75%	17%	6%	1%
	Use marijuana?	86%	12%	2%	1%
8th	Drink alcohol?	54%	28%	15%	3%
	Smoke cigarettes?	56%	25%	12%	7%
	Use marijuana?	77%	13%	6%	3%
10th	Drink alcohol?	34%	32%	27%	6%
	Smoke cigarettes?	34%	30%	24%	12%
	Use marijuana?	53%	30%	14%	3%
12th	Drink alcohol?	22%	29%	37%	12%
	Smoke cigarettes?	13%	22%	39%	26%
	Use marijuana?	38%	34%	19%	9%

**In which of the following activities do you participate?**

	6th		8th		10th		12th	
	%	N	%	N	%	N	%	N
School sports team	56%	145	59%	158	56%	159	44%	100
Other sports	59%	154	60%	162	38%	110	31%	71
Scouting	10%	27	4%	11	3%	9	3%	6
Boys and girls club	4%	10	3%	9	2%	7	4%	8
4-H club	8%	22	5%	14	9%	25	8%	18
Service or voluntary projects	25%	66	23%	61	30%	86	52%	118
Church youth group or other faith-based youth group	49%	126	57%	153	58%	167	58%	131
Other activities	53%	136	70%	188	71%	203	76%	171

**How safe do you feel in your neighborhood?**

	6th		8th		10th		12th	
	%	N	%	N	%	N	%	N
Very safe	56%	159	52%	159	56%	194	57%	152
Sort of safe	33%	95	35%	108	35%	121	29%	77
Sort of unsafe	7%	20	10%	32	6%	22	10%	26
Very unsafe	4%	10	2%	7	3%	10	4%	11

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**How old were you when you first:**

		Never have	10 or younger	11	12	13	14	15	16	17	18 or older
		%	%	%	%	%	%	%	%	%	%
8th	Smoked marijuana	89%	1%	3%	2%	4%	2%	0%	0%	0%	0%
	Smoked a cigarette, even just a puff	82%	6%	5%	4%	2%	2%	0%	0%	0%	0%
	Used any other tobacco product (chewing tobacco or cigars)	91%	2%	2%	2%	3%	0%	0%	0%	0%	0%
	Had more than a sip or two of alcohol	65%	9%	7%	5%	11%	2%	1%	0%	0%	0%
	Began drinking alcoholic beverages regularly (at least once or twice a month)	93%	0%	2%	1%	3%	1%	0%	0%	0%	0%
10th	Smoked marijuana	70%	3%	1%	2%	3%	9%	10%	2%	0%	0%
	Smoked a cigarette, even just a puff	60%	9%	2%	3%	3%	8%	13%	1%	0%	0%
	Used any other tobacco product (chewing tobacco or cigars)	71%	4%	1%	2%	3%	5%	11%	2%	0%	0%
	Had more than a sip or two of alcohol	41%	7%	5%	5%	7%	12%	17%	5%	1%	0%
	Began drinking alcoholic beverages regularly (at least once or twice a month)	75%	1%	0%	3%	1%	5%	10%	4%	1%	0%
12th	Smoked marijuana	53%	2%	2%	3%	5%	7%	10%	12%	6%	2%
	Smoked a cigarette, even just a puff	40%	0%	8%	13%	20%	3%	3%	10%	3%	3%
	Used any other tobacco product (chewing tobacco or cigars)	65%	3%	0%	3%	3%	5%	6%	6%	9%	0%
	Had more than a sip or two of alcohol	29%	5%	2%	4%	6%	12%	9%	14%	15%	3%
	Began drinking alcoholic beverages regularly (at least once or twice a month)	54%	0%	0%	2%	1%	5%	8%	14%	12%	3%

**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	96%	2%	1%	0%	0%	0%	0%
	PAST YEAR cigarette use	95%	2%	1%	0%	0%	0%	1%
8th	PAST MONTH cigarette use	94%	2%	2%	0%	0%	0%	1%
	PAST YEAR cigarette use	89%	6%	3%	0%	1%	0%	0%
10th	PAST MONTH cigarette use	80%	9%	6%	3%	2%	0%	1%
	PAST YEAR cigarette use	73%	12%	6%	5%	2%	0%	1%
12th	PAST MONTH cigarette use	73%	10%	7%	7%	1%	1%	1%
	PAST YEAR cigarette use	63%	16%	10%	8%	1%	1%	1%

**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	99%	1%	0%	0%	0%
	PAST YEAR other tobacco products use	97%	3%	0%	0%	0%
8th	PAST MONTH other tobacco products use	96%	2%	0%	1%	1%
	PAST YEAR other tobacco products use	93%	5%	1%	1%	1%
10th	PAST MONTH other tobacco products use	83%	6%	3%	2%	6%
	PAST YEAR other tobacco products use	74%	13%	4%	2%	7%
12th	PAST MONTH other tobacco products use	80%	4%	4%	3%	10%
	PAST YEAR other tobacco products use	69%	13%	7%	4%	8%

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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	94%	3%	1%	1%	0%	1%
	PAST YEAR alcohol use	83%	12%	1%	1%	1%	1%
8th	PAST MONTH alcohol use	87%	11%	1%	1%	0%	0%
	PAST YEAR alcohol use	76%	11%	7%	5%	1%	1%
10th	PAST MONTH alcohol use	70%	21%	7%	1%	1%	1%
	PAST YEAR alcohol use	51%	16%	11%	7%	7%	9%
12th	PAST MONTH alcohol use	57%	19%	9%	7%	6%	3%
	PAST YEAR alcohol use	38%	15%	8%	4%	11%	24%

**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	96%	2%	1%	0%	0%	0%
10th	Binge drinking	83%	6%	5%	3%	2%	1%
12th	Binge drinking	71%	9%	9%	6%	1%	3%

**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	99%	1%	0%	0%	0%	0%
	PAST MONTH inhalant use	93%	4%	2%	1%	1%	0%
8th	PAST MONTH marijuana use	94%	2%	2%	1%	1%	1%
	PAST MONTH inhalant use	93%	5%	1%	0%	0%	1%
10th	PAST MONTH marijuana use	80%	8%	3%	2%	1%	6%
	PAST MONTH inhalant use	94%	3%	0%	0%	1%	1%
12th	PAST MONTH marijuana use	74%	9%	2%	5%	3%	8%
	PAST MONTH inhalant use	97%	1%	0%	0%	0%	1%

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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	99%	1%	0%	0%	0%	0%
	PAST YEAR inhalant use	89%	4%	4%	1%	1%	1%
8th	PAST YEAR marijuana use	90%	3%	2%	1%	0%	4%
	PAST YEAR inhalant use	91%	5%	2%	0%	1%	1%
	PAST YEAR MDMA ('ecstasy') use	99%	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%
10th	PAST YEAR marijuana use	74%	8%	3%	3%	2%	11%
	PAST YEAR inhalant use	92%	3%	2%	1%	0%	2%
	PAST YEAR MDMA ('ecstasy') use	97%	1%	0%	1%	1%	0%
	PAST YEAR LSD use	97%	2%	1%	0%	0%	0%
	PAST YEAR cocaine / crack use	99%	1%	0%	0%	0%	0%
	PAST YEAR meth use	99%	1%	0%	0%	0%	0%
	PAST YEAR heroin use	100%	0%	0%	0%	0%	0%
12th	PAST YEAR marijuana use	63%	8%	4%	3%	3%	18%
	PAST YEAR inhalant use	94%	2%	2%	0%	1%	1%
	PAST YEAR MDMA ('ecstasy') use	91%	5%	3%	1%	0%	0%
	PAST YEAR LSD use	94%	5%	1%	0%	0%	1%
	PAST YEAR cocaine / crack use	95%	3%	0%	1%	0%	1%
	PAST YEAR meth use	99%	0%	0%	0%	0%	1%
	PAST YEAR heroin use	98%	1%	0%	0%	0%	1%

**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.)	98%	2%	0%	0%
	Over-the-counter weight loss aids (laxatives, Dexatrim, etc.)	98%	1%	0%	0%
	Other over-the-counter drugs (cough syrup, etc.)	90%	6%	2%	2%
10th	Performance-enhancing or body-building supplements (Creatine, fat-burners, etc.)	93%	1%	2%	3%
	Over-the-counter weight loss aids (laxatives, Dexatrim, etc.)	97%	2%	0%	1%
	Other over-the-counter drugs (cough syrup, etc.)	85%	9%	4%	2%
12th	Performance-enhancing or body-building supplements (Creatine, fat-burners, etc.)	89%	4%	1%	5%
	Over-the-counter weight loss aids (laxatives, Dexatrim, etc.)	93%	3%	1%	3%
	Other over-the-counter drugs (cough syrup, etc.)	86%	8%	2%	4%

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**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	99%	1%	0%	0%
	Uppers (Ritalin, etc.)	99%	1%	0%	0%
	Downers (Valium, Ambien, etc.)	99%	0%	1%	0%
	Other prescription drugs (OxyContin, Ketamine, etc.)	97%	2%	0%	1%
10th	Steroids	99%	0%	0%	0%
	Uppers (Ritalin, etc.)	97%	2%	0%	1%
	Downers (Valium, Ambien, etc.)	95%	3%	1%	1%
	Other prescription drugs (OxyContin, Ketamine, etc.)	92%	6%	1%	1%
12th	Steroids	99%	0%	0%	1%
	Uppers (Ritalin, etc.)	95%	3%	1%	1%
	Downers (Valium, Ambien, etc.)	94%	4%	0%	2%
	Other prescription drugs (OxyContin, Ketamine, etc.)	90%	6%	3%	2%

**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%	10%	0%	0%
	I bought them at a store	90%	9%	0%	0%
	I bought them from a vending machine	90%	10%	0%	0%
	I gave a stranger money to buy them for me	90%	7%	1%	1%
	I bought them over the Internet	90%	9%	0%	0%
	A friend gave them to me	90%	4%	3%	4%
	My older brother or sister gave them to me	90%	8%	1%	0%
	My parent gave them to me	90%	9%	0%	0%
	I took them from a store	90%	9%	0%	0%
	I took them from home without my parents knowing it	90%	5%	3%	2%
	I got them some other way	91%	5%	2%	3%
10th	I bought them at a gas station	70%	21%	6%	3%
	I bought them at a store	70%	27%	2%	1%
	I bought them from a vending machine	70%	29%	1%	0%
	I gave a stranger money to buy them for me	70%	23%	6%	1%
	I bought them over the Internet	70%	30%	0%	0%
	A friend gave them to me	70%	4%	18%	9%
	My older brother or sister gave them to me	70%	23%	5%	2%
	My parent gave them to me	70%	24%	4%	2%
	I took them from a store	70%	29%	0%	1%
	I took them from home without my parents knowing it	70%	21%	6%	3%
	I got them some other way	70%	14%	11%	5%

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**During the past year, how often did you get cigarettes or other tobacco products from the following sources?(cont.)**

		I did not use cigarettes or other tobacco products during the past year	Never	sometimes	Often
		%	%	%	%
12th	I bought them at a gas station	59%	8%	16%	17%
	I bought them at a store	59%	19%	11%	11%
	I bought them from a vending machine	59%	39%	1%	0%
	I gave a stranger money to buy them for me	59%	37%	2%	2%
	I bought them over the Internet	59%	40%	0%	0%
	A friend gave them to me	59%	11%	22%	8%
	My older brother or sister gave them to me	59%	35%	5%	1%
	My parent gave them to me	59%	36%	4%	1%
	I took them from a store	59%	40%	1%	0%
	I took them from home without my parents knowing it	59%	36%	4%	1%
	I got them some other way	59%	31%	6%	4%

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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	85%	15%	0%	0%
	I bought it at a store	85%	15%	0%	0%
	I bought it at a bar or restaurant	85%	14%	1%	0%
	I gave a stranger money to buy them for me	85%	13%	1%	0%
	I bought it over the Internet	85%	15%	0%	0%
	A friend gave it to me	83%	8%	6%	3%
	My older brother or sister gave it to me	85%	11%	4%	1%
	My parents with their permission	84%	11%	4%	1%
	My parents without their permission	84%	7%	7%	2%
	An adult (other than my parents) with that adult's permission	85%	9%	4%	2%
	An adult (other than my parents) without that adult's permission	84%	11%	4%	1%
	I took it from a store	85%	14%	1%	0%
	I got it at a party	85%	7%	7%	1%
	I got it some other way	85%	10%	3%	2%
10th	I bought it at a gas station	58%	39%	2%	1%
	I bought it at a store	59%	38%	2%	1%
	I bought it at a bar or restaurant	59%	39%	1%	1%
	I gave a stranger money to buy them for me	58%	35%	5%	2%
	I bought it over the Internet	59%	40%	0%	0%
	A friend gave it to me	58%	13%	21%	8%
	My older brother or sister gave it to me	59%	32%	8%	1%
	My parents with their permission	58%	26%	15%	1%
	My parents without their permission	58%	26%	12%	4%
	An adult (other than my parents) with that adult's permission	59%	26%	10%	5%
	An adult (other than my parents) without that adult's permission	58%	35%	5%	2%
	I took it from a store	59%	39%	1%	1%
	I got it at a party	58%	16%	17%	9%
	I got it some other way	58%	27%	10%	5%
12th	I bought it at a gas station	42%	53%	4%	1%
	I bought it at a store	42%	43%	11%	4%
	I bought it at a bar or restaurant	42%	48%	7%	3%
	I gave a stranger money to buy them for me	43%	46%	7%	4%
	I bought it over the Internet	43%	55%	1%	1%
	A friend gave it to me	42%	8%	31%	19%
	My older brother or sister gave it to me	43%	41%	11%	6%
	My parents with their permission	42%	41%	12%	4%
	My parents without their permission	42%	40%	14%	4%
	An adult (other than my parents) with that adult's permission	42%	25%	23%	10%
	An adult (other than my parents) without that adult's permission	43%	43%	10%	4%
	I took it from a store	43%	54%	1%	2%
	I got it at a party	42%	16%	23%	19%
	I got it some other way	42%	36%	11%	10%

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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?	98%	1%	0%	1%
	Use marijuana on school property?	99%	0%	0%	1%
10th	Drink alcohol on school property?	95%	3%	2%	1%
	Use marijuana on school property?	95%	3%	1%	1%
12th	Drink alcohol on school property?	94%	5%	1%	0%
	Use marijuana on school property?	91%	5%	1%	3%

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?	74%	3%	6%	16%
	you kept using alcohol or drugs even after you knew it could get you into fights or other kinds of legal trouble?	79%	3%	3%	14%
	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?	97%	0%	0%	3%
	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)?	90%	1%	3%	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?	95%	3%	1%	1%
12th	you used alcohol or other drugs weekly?	63%	8%	8%	23%
	you kept using alcohol or drugs even after you knew it could get you into fights or other kinds of legal trouble?	64%	5%	8%	23%
	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?	88%	0%	3%	10%
	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)?	73%	3%	8%	18%
	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?	82%	3%	3%	13%

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**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	97%	1%	1%	0%
	Malt liquor	98%	2%	0%	0%
	Wine	97%	1%	1%	1%
	Wine cooler	97%	1%	1%	1%
	Liquor (vodka, whiskey, etc.)	97%	2%	1%	0%
	Mixed drinks (margarita, etc.)	97%	2%	1%	0%
	Flavored 'alcopops' (hard lemonade, hard cider, etc.)	97%	1%	1%	0%
8th	Beer	90%	5%	5%	1%
	Malt liquor	91%	8%	1%	0%
	Wine	90%	5%	5%	0%
	Wine cooler	91%	5%	2%	2%
	Liquor (vodka, whiskey, etc.)	91%	4%	4%	2%
	Mixed drinks (margarita, etc.)	91%	4%	3%	2%
	Flavored 'alcopops' (hard lemonade, hard cider, etc.)	91%	6%	2%	1%
10th	Beer	73%	9%	11%	8%
	Malt liquor	74%	20%	4%	2%
	Wine	74%	18%	7%	2%
	Wine cooler	74%	16%	9%	2%
	Liquor (vodka, whiskey, etc.)	72%	6%	11%	10%
	Mixed drinks (margarita, etc.)	73%	17%	6%	4%
	Flavored 'alcopops' (hard lemonade, hard cider, etc.)	74%	15%	10%	2%
12th	Beer	60%	7%	20%	13%
	Malt liquor	61%	28%	9%	2%
	Wine	61%	23%	14%	2%
	Wine cooler	61%	20%	12%	7%
	Liquor (vodka, whiskey, etc.)	60%	6%	17%	17%
	Mixed drinks (margarita, etc.)	60%	15%	17%	8%
	Flavored 'alcopops' (hard lemonade, hard cider, etc.)	60%	17%	12%	10%

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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	10%	13%	30%	47%
	Take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day	16%	28%	26%	31%
	Have five or more drinks of an alcoholic beverage once or twice a week	13%	16%	33%	37%
	Smoke marijuana regularly	11%	3%	11%	75%
	Smoke marijuana once or twice a week	7%	9%	27%	57%
	Use inhalants regularly	13%	11%	25%	52%
8th	Smoke one or more packs of cigarettes per day	6%	9%	31%	54%
	Take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day	12%	31%	29%	28%
	Have five or more drinks of an alcoholic beverage once or twice a week	8%	17%	37%	37%
	Smoke marijuana regularly	8%	7%	11%	73%
	Smoke marijuana once or twice a week	9%	11%	26%	53%
	Use inhalants regularly	6%	7%	19%	68%
10th	Smoke one or more packs of cigarettes per day	4%	9%	26%	61%
	Take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day	10%	33%	35%	22%
	Have five or more drinks of an alcoholic beverage once or twice a week	6%	27%	34%	34%
	Smoke marijuana regularly	12%	14%	20%	54%
	Smoke marijuana once or twice a week	11%	16%	36%	36%
	Use inhalants regularly	5%	5%	17%	73%
12th	Smoke one or more packs of cigarettes per day	6%	7%	33%	54%
	Take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day	17%	34%	31%	18%
	Have five or more drinks of an alcoholic beverage once or twice a week	11%	23%	38%	29%
	Smoke marijuana regularly	17%	25%	22%	36%
	Smoke marijuana once or twice a week	23%	13%	36%	28%
	Use inhalants regularly	6%	8%	23%	63%

**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	61%	26%	8%	5%
8th	70%	18%	7%	6%
10th	72%	21%	3%	3%
12th	73%	20%	5%	3%

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**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	92%	5%	2%	1%
	an ADULT who had been drinking or using drugs	80%	12%	5%	3%
8th	a TEENAGER who had been drinking or using drugs	91%	4%	2%	2%
	an ADULT who had been drinking or using drugs	79%	12%	3%	6%
10th	a TEENAGER who had been drinking or using drugs	75%	13%	5%	7%
	an ADULT who had been drinking or using drugs	76%	14%	5%	5%
12th	a TEENAGER who had been drinking or using drugs	60%	21%	7%	13%
	an ADULT who had been drinking or using drugs	71%	14%	7%	9%

**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	91%	3%	1%	4%
	using marijuana or other illegal drugs	91%	3%	0%	6%
12th	drinking alcohol	68%	20%	5%	8%
	using marijuana or other illegal drugs	80%	8%	3%	10%

**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	21%	10%	65%	4%
10th	Abused in past year	10%	7%	81%	1%
	Called you names to put you down or make you feel bad?	10%	11%	78%	1%
	Insisted on knowing who you're with and where you are at all times?	11%	23%	65%	1%
	Followed you?	11%	4%	83%	2%
	Destroyed something that belonged to you or that you liked very much?	11%	1%	87%	1%
	Threatened or frightened your family or friends?	11%	3%	86%	0%
12th	Abused in past year	7%	13%	75%	6%
	Called you names to put you down or make you feel bad?	3%	23%	67%	8%
	Insisted on knowing who you're with and where you are at all times?	3%	23%	69%	5%
	Followed you?	3%	18%	77%	3%
	Destroyed something that belonged to you or that you liked very much?	3%	13%	82%	3%
	Threatened or frightened your family or friends?	3%	5%	89%	3%

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

	Yes	No
	%	%
10th	16%	84%
12th	10%	90%

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**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	5%	95%
	I have been physically attacked	10%	90%
	I have been threatened	19%	81%
8th	I have been injured by a vehicle	2%	98%
	I have been physically attacked	9%	91%
	I have been threatened	18%	82%
10th	I have been injured by a vehicle	1%	99%
	I have been physically attacked	6%	94%
	I have been threatened	14%	86%
12th	I have been injured by a vehicle	4%	96%
	I have been physically attacked	6%	94%
	I have been threatened	14%	86%

**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	24%	76%
	It made learning harder	9%	91%
10th	It made me feel unsafe	19%	81%
	It made learning harder	9%	91%
12th	It made me feel unsafe	15%	85%
	It made learning harder	6%	94%

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**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	79%	15%	5%	1%
	Smoke cigarettes?	81%	13%	6%	0%
	Smoke marijuana?	92%	7%	1%	1%
	Use LSD, cocaine, amphetamines or another illegal drug?	95%	4%	1%	0%
8th	Drink alcohol regularly	66%	20%	11%	3%
	Smoke cigarettes?	67%	19%	10%	4%
	Smoke marijuana?	81%	9%	4%	5%
	Use LSD, cocaine, amphetamines or another illegal drug?	92%	6%	1%	1%
10th	Drink alcohol regularly	42%	25%	24%	8%
	Smoke cigarettes?	45%	26%	16%	13%
	Smoke marijuana?	57%	17%	14%	12%
	Use LSD, cocaine, amphetamines or another illegal drug?	85%	8%	4%	3%
12th	Drink alcohol regularly	31%	17%	36%	16%
	Smoke cigarettes?	24%	23%	21%	32%
	Smoke marijuana?	41%	18%	21%	20%
	Use LSD, cocaine, amphetamines or another illegal drug?	76%	16%	4%	3%

**Do you currently belong to a street gang?**

	Yes	No
	%	%
8th	4%	96%
10th	3%	97%
12th	6%	94%

**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?	73%	9%	5%	2%	0%	11%
	Sold illegal drugs?	97%	1%	1%	0%	1%	0%
	Been drunk or high at school?	97%	2%	1%	0%	0%	0%
10th	Carried a weapon such as a handgun, knife or club?	80%	0%	4%	3%	1%	11%
	Sold illegal drugs?	92%	3%	1%	1%	0%	3%
	Been drunk or high at school?	85%	7%	2%	1%	2%	3%
12th	Carried a weapon such as a handgun, knife or club?	95%	3%	0%	0%	0%	3%
	Sold illegal drugs?	88%	3%	2%	2%	1%	4%
	Been drunk or high at school?	83%	6%	4%	3%	1%	3%

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

		Yes	No
		%	%
6th	Bullied you by calling you names?	44%	56%
	Threatened to hurt you?	28%	72%
	Bullied you by hitting, punching, kicking, or pushing you?	23%	77%
8th	Bullied you by calling you names?	39%	61%
	Threatened to hurt you?	25%	75%
	Bullied you by hitting, punching, kicking, or pushing you?	18%	82%
10th	Bullied you by calling you names?	29%	71%
	Threatened to hurt you?	23%	77%
	Bullied you by hitting, punching, kicking, or pushing you?	8%	92%
12th	Bullied you by calling you names?	19%	81%
	Threatened to hurt you?	17%	83%
	Bullied you by hitting, punching, kicking, or pushing you?	8%	92%

**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?	75%	8%	7%	7%	3%
	Began drinking alcohol regularly?	73%	12%	8%	5%	2%
	Smoked marijuana?	81%	5%	4%	6%	4%
8th	Smoked cigarettes?	72%	13%	9%	4%	3%
	Began drinking alcohol regularly?	73%	11%	8%	4%	4%
	Smoked marijuana?	77%	8%	5%	4%	6%
10th	Smoked cigarettes?	61%	18%	13%	5%	3%
	Began drinking alcohol regularly?	54%	16%	16%	9%	5%
	Smoked marijuana?	58%	16%	13%	7%	5%
12th	Smoked cigarettes?	53%	20%	19%	5%	2%
	Began drinking alcohol regularly?	42%	16%	22%	12%	8%
	Smoked marijuana?	50%	16%	17%	9%	8%

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**Amount of time child spends alone each week after school:**

	6th	8th
	%	%
None	53%	40%
1 to 2 days, < 3 hours per day	19%	26%
1 to 2 days, > 3 hours per day	3%	6%
3 or more days, < 3 hours per day	16%	17%
3 or more days, > 3 hours per day	9%	11%

**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	9%	2%	26%	48%	15%
12th	5%	3%	5%	69%	18%

**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	58%	7%	3%	7%	10%	4%	9%	1%	1%
12th	46%	8%	0%	0%	8%	8%	3%	15%	13%

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

	Yes	No
	%	%
10th	18%	82%
12th	13%	87%

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

	Yes	No
	%	%
8th	14%	86%
10th	23%	77%
12th	29%	71%

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

	10th		12th	
	%	N	%	N
Didn't gamble for money	58%	45	54%	19
At someone's house	23%	18	26%	9
Casino or Riverboat	1%	1	0%	0
Internet	6%	5	3%	1
Poker Machine	1%	1	0%	0
Person-to-person betting with another teen	23%	18	14%	5
Person-to-person betting with an adult	12%	9	9%	3
Lottery self-service machine	8%	6	14%	5
Other lottery tickets	6%	5	14%	5
Off-Track Betting	3%	2	0%	0
Sports Pool	9%	7	6%	2
Other	17%	13	11%	4

**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	2%	10%	8%	9%	14%	7%	11%	14%	17%	6%	2%
	Had beer, wine, or hard liquor	2%	2%	5%	6%	13%	10%	14%	9%	23%	14%	3%
	Used marijuana	6%	24%	17%	14%	6%	10%	6%	7%	5%	3%	3%
12th	Smoked cigarettes	0%	0%	5%	8%	10%	5%	13%	10%	23%	18%	8%
	Had beer, wine, or hard liquor	3%	0%	0%	3%	3%	15%	13%	10%	18%	18%	18%
	Used marijuana	3%	5%	8%	13%	15%	10%	21%	8%	8%	10%	0%

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

	Yes	No
	%	%
8th	22%	78%
10th	31%	69%
12th	25%	75%

**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%	18%	68%
8th	12%	22%	66%
10th	18%	21%	60%
12th	13%	18%	69%

**How do you describe your weight?**

	Very underweight	Slightly underweight	About the right weight	Slightly overweight	Very overweight
	%	%	%	%	%
6th	1%	18%	56%	22%	3%
8th	1%	13%	59%	22%	5%
10th	1%	9%	66%	20%	3%
12th	0%	3%	67%	31%	0%

**Average Height and Weight**

	Grade											
	6th			8th			10th			12th		
	Mean	Median	N	Mean	Median	N	Mean	Median	N	Mean	Median	N
Height (inches)	61.7	61.0	97	65.5	65.0	91	67.4	67.0	85	66.3	66.0	39
Weight (pounds)	116.1	102.0	93	138.9	120.0	91	147.5	143.0	86	148.4	140.0	38

Height and weight data not available for surveys taken online.

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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	7%	23%	20%	12%	16%	11%	11%
	Eat vegetables	8%	29%	20%	15%	9%	7%	12%
8th	Eat fruit	8%	24%	25%	12%	12%	6%	12%
	Eat vegetables	8%	27%	20%	17%	13%	8%	8%
10th	Eat fruit	14%	31%	23%	8%	13%	7%	3%
	Eat vegetables	15%	19%	22%	15%	16%	7%	6%
12th	Eat fruit	8%	38%	23%	13%	18%	0%	0%
	Eat vegetables	10%	18%	26%	26%	18%	3%	0%

**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	13%	22%	21%	10%	13%	10%	10%
12th	18%	31%	13%	13%	10%	10%	5%

**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	9%	13%	8%	11%	13%	14%	4%	27%
8th	5%	3%	6%	12%	9%	16%	10%	38%
10th	3%	6%	7%	16%	3%	23%	10%	30%
12th	13%	8%	8%	23%	13%	18%	5%	13%

**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%	14%	18%	27%	14%	11%	10%
8th	5%	15%	11%	24%	21%	14%	10%
10th	9%	19%	20%	24%	15%	8%	5%
12th	8%	18%	28%	26%	18%	0%	3%

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**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	11%	6%	3%	10%	10%	8%	12%	41%
8th	7%	6%	7%	10%	9%	14%	10%	38%
10th	12%	5%	12%	12%	12%	16%	9%	22%
12th	10%	3%	23%	10%	8%	21%	8%	18%

**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	26%	41%	6%	17%	2%	7%	0%	0%
8th	23%	41%	6%	24%	3%	3%	0%	0%
10th	33%	21%	5%	19%	8%	12%	1%	2%
12th	28%	33%	13%	21%	0%	3%	3%	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	91%	6%	0%	1%	1%
8th	94%	2%	2%	1%	1%
10th	93%	2%	4%	1%	1%
12th	92%	4%	3%	0%	2%

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How true are the following statements?

At my school there is a teacher or some other adult who:		Not at all true	A little true	Pretty much true	Very much true
		%	%	%	%
6th	Really cares about me.	8%	20%	21%	52%
	Notices when I'm not there.	8%	17%	31%	44%
	Listens to me when I have something to say.	7%	18%	26%	49%
	Notices if I have trouble learning something.	8%	17%	34%	41%
	Tells me when I do a good job.	3%	16%	36%	46%
	Always wants me to do my best.	3%	8%	18%	71%
	Believes that I will be a success.	4%	12%	28%	57%
	Encourages me to work hard in school.	4%	8%	24%	64%
8th	Really cares about me.	11%	22%	21%	46%
	Notices when I'm not there.	16%	12%	30%	42%
	Listens to me when I have something to say.	12%	19%	24%	45%
	Notices if I have trouble learning something.	13%	17%	25%	44%
	Tells me when I do a good job.	9%	19%	31%	41%
	Always wants me to do my best.	8%	11%	20%	62%
	Believes that I will be a success.	10%	15%	24%	52%
	Encourages me to work hard in school.	11%	12%	21%	57%
10th	Really cares about me.	13%	23%	27%	37%
	Notices when I'm not there.	13%	16%	36%	35%
	Listens to me when I have something to say.	14%	16%	35%	34%
	Notices if I have trouble learning something.	19%	23%	28%	31%
	Tells me when I do a good job.	11%	23%	32%	34%
	Always wants me to do my best.	9%	18%	23%	50%
	Believes that I will be a success.	14%	17%	26%	43%
	Encourages me to work hard in school.	11%	18%	28%	43%
12th	Really cares about me.	8%	26%	28%	38%
	Notices when I'm not there.	10%	20%	30%	40%
	Listens to me when I have something to say.	12%	19%	31%	38%
	Notices if I have trouble learning something.	20%	22%	31%	28%
	Tells me when I do a good job.	13%	19%	32%	36%
	Always wants me to do my best.	9%	16%	27%	48%
	Believes that I will be a success.	9%	19%	27%	46%
	Encourages me to work hard in school.	11%	16%	26%	47%

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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.	10%	21%	30%	39%
	I help decide things like class activities or rules.	37%	36%	15%	12%
	I do things that make a difference.	22%	38%	23%	18%
8th	I do interesting activities.	19%	26%	21%	33%
	I help decide things like class activities or rules.	57%	22%	11%	10%
	I do things that make a difference.	34%	28%	18%	20%
10th	I do interesting activities.	24%	27%	28%	22%
	I help decide things like class activities or rules.	44%	31%	15%	10%
	I do things that make a difference.	34%	32%	21%	13%
12th	I do interesting activities.	23%	32%	24%	22%
	I help decide things like class activities or rules.	52%	27%	11%	9%
	I do things that make a difference.	36%	29%	20%	14%

**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.	7%	8%	17%	46%	22%
	I am happy to be at this school.	10%	5%	16%	37%	33%
	I feel safe in my school.	6%	5%	13%	40%	36%
	The teachers at this school treat students fairly.	7%	8%	15%	38%	33%
8th	I feel close to people at this school.	11%	7%	15%	34%	33%
	I am happy to be at this school.	14%	10%	20%	26%	29%
	I feel safe in my school.	10%	6%	17%	32%	34%
	The teachers at this school treat students fairly.	17%	15%	17%	24%	27%
10th	I feel close to people at this school.	12%	8%	20%	37%	22%
	I am happy to be at this school.	19%	13%	19%	31%	18%
	I feel safe in my school.	12%	12%	29%	33%	15%
	The teachers at this school treat students fairly.	14%	17%	27%	26%	16%
12th	I feel close to people at this school.	15%	12%	21%	35%	17%
	I am happy to be at this school.	22%	17%	25%	28%	8%
	I feel safe in my school.	13%	15%	28%	36%	9%
	The teachers at this school treat students fairly.	19%	25%	28%	20%	7%

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**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	93%	5%	2%	1%
	Smoke cigarettes	93%	4%	2%	1%
	Smoke marijuana	97%	1%	1%	1%
8th	Drink alcohol regularly	83%	12%	3%	2%
	Smoke cigarettes	86%	9%	4%	2%
	Smoke marijuana	93%	3%	3%	2%
10th	Drink alcohol regularly	69%	17%	10%	4%
	Smoke cigarettes	78%	14%	5%	3%
	Smoke marijuana	88%	6%	3%	3%
12th	Drink alcohol regularly	57%	16%	17%	10%
	Smoke cigarettes	63%	15%	13%	9%
	Smoke marijuana	75%	11%	9%	4%

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

		Yes	No	Don't remember
		%	%	%
6th	Tobacco	56%	25%	18%
	Alcohol	61%	23%	16%
	Marijuana and other illegal drugs	58%	25%	17%
8th	Tobacco	47%	34%	19%
	Alcohol	49%	34%	17%
	Marijuana and other illegal drugs	50%	35%	15%
10th	Tobacco	49%	38%	13%
	Alcohol	50%	37%	13%
	Marijuana and other illegal drugs	49%	37%	14%
12th	Tobacco	37%	52%	11%
	Alcohol	39%	50%	11%
	Marijuana and other illegal drugs	38%	51%	11%

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**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.	4%	3%	19%	75%
	My parents ask if I've gotten my homework done.	2%	7%	18%	74%
	Would your parents know if you did not come home on time?	2%	7%	17%	75%
8th	When I am not at home, one of my parents knows where I am and who I am with.	4%	9%	18%	69%
	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?	17%	11%	18%	53%
	My parents ask if I've gotten my homework done.	7%	14%	17%	63%
	Would your parents know if you did not come home on time?	5%	12%	18%	65%
	If you go to a party where alcohol is served, would you be caught by your parents?	13%	17%	21%	48%
10th	When I am not at home, one of my parents knows where I am and who I am with.	2%	16%	32%	49%
	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?	20%	39%	13%	28%
	My parents ask if I've gotten my homework done.	10%	26%	24%	40%
	Would your parents know if you did not come home on time?	7%	12%	27%	54%
	If you go to a party where alcohol is served, would you be caught by your parents?	24%	32%	20%	24%
	If you drank and drove, would you be caught by your parents?	15%	20%	11%	53%
	If you rode in a car driven by a teen driver who had been drinking, would you be caught by your parents?	23%	30%	10%	38%
12th	When I am not at home, one of my parents knows where I am and who I am with.	8%	10%	25%	57%
	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?	51%	18%	15%	15%
	My parents ask if I've gotten my homework done.	23%	35%	15%	28%
	Would your parents know if you did not come home on time?	10%	10%	30%	50%
	If you go to a party where alcohol is served, would you be caught by your parents?	45%	20%	18%	18%
	If you drank and drove, would you be caught by your parents?	30%	25%	15%	30%
	If you rode in a car driven by a teen driver who had been drinking, would you be caught by your parents?	43%	23%	18%	18%

**My family has clear rules about alcohol and drug use**

	Yes	No
	%	%
6th	98%	2%
8th	87%	13%
10th	86%	14%
12th	73%	28%

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

		Yes	No
		%	%
10th	not drinking and driving?	65%	35%
	not riding with a driver who had been drinking?	66%	34%
12th	not drinking and driving?	44%	56%
	not riding with a driver who had been drinking?	41%	59%