

**Number of IYS 2010  
Respondents**

	N		
	6th	8th	Total
Grade	198	203	401

**Age**

	6th		8th	
	Avg	N	Avg	N
How old are you?	11.9	198	13.9	203

**Gender**

	6th		8th	
	%	N	%	N
Female	49%	96	57%	115
Male	51%	99	43%	87

**Race/Ethnicity**

	6th		8th	
	%	N	%	N
White	84%	165	87%	176
Black / African American	6%	11	3%	7
Latino / Latina	1%	2	1%	3
Asian American	2%	3	1%	2
Native American / American Indian	2%	3	2%	4
Multi-racial	5%	10	4%	8
Other	2%	4	3%	6

**Living Arrangement**

	6th		8th	
	%	N	%	N
Both parents	56%	110	51%	104
Parent and step parent	16%	32	20%	41
Mother only	17%	34	17%	34
Father only	4%	7	4%	9
Legal Guardian	4%	7	5%	10
Foster parent	2%	3	0%	1
Group home or residential care	0%	0	0%	0
Other	2%	3	2%	4

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

	6th		8th	
	%	N	%	N
Free lunch	38%	74	37%	75
Reduced lunch price	16%	31	12%	24
Neither	46%	90	51%	103

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

	6th		8th	
	%	N	%	N
0 - 9 days	72%	141	73%	148
10 - 19 days	19%	38	16%	33
20 - 30 days	7%	14	6%	13
More than 30 days	1%	2	4%	8

**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	70%	12%	10%	7%
	Cigarettes	66%	15%	7%	12%
	Marijuana	82%	11%	3%	5%
8th	Alcohol	35%	27%	21%	17%
	Cigarettes	36%	25%	19%	21%
	Marijuana	53%	20%	13%	14%
	Drug like cocaine, LSD, or amphetamines	74%	14%	5%	7%

**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?	68%	20%	6%	6%
	Smoke cigarettes?	67%	18%	8%	7%
	Use marijuana?	83%	10%	5%	2%
8th	Drink alcohol?	43%	32%	19%	6%
	Smoke cigarettes?	51%	28%	14%	7%
	Use marijuana?	65%	25%	5%	4%

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

	6th		8th	
	%	N	%	N
School sports team	60%	108	66%	114
Other sports	63%	113	51%	88
Scouting	11%	19	4%	7
Boys and girls club	4%	8	8%	14
4-H club	11%	20	13%	22
Service or voluntary projects	22%	39	27%	47
Church youth group or other faith-based youth group	55%	99	60%	104
Other activities	48%	86	64%	111

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

	6th		8th	
	%	N	%	N
Very safe	50%	99	55%	112
Sort of safe	36%	70	36%	72
Sort of unsafe	8%	16	4%	9
Very unsafe	6%	12	4%	9

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

		Never have	10 or younger	11	12	13	14	15
		%	%	%	%	%	%	%
8th	Smoked marijuana	92%	1%	1%	0%	4%	0%	0%
	Smoked a cigarette, even just a puff	71%	10%	3%	3%	9%	3%	0%
	Used any other tobacco product (chewing tobacco or cigars)	81%	2%	2%	5%	6%	2%	0%
	Had more than a sip or two of alcohol	56%	11%	4%	10%	13%	4%	1%
	Began drinking alcoholic beverages regularly (at least once or twice a month)	85%	1%	2%	2%	7%	4%	1%

**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	94%	3%	2%	0%	0%	1%	1%
	PAST YEAR cigarette use	91%	5%	2%	1%	0%	1%	1%
8th	PAST MONTH cigarette use	91%	4%	3%	1%	2%	0%	1%
	PAST YEAR cigarette use	86%	7%	4%	1%	2%	2%	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	95%	2%	2%	1%	1%
	PAST YEAR other tobacco products use	94%	4%	1%	1%	1%
8th	PAST MONTH other tobacco products use	89%	6%	2%	1%	3%
	PAST YEAR other tobacco products use	84%	7%	5%	1%	4%

**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	91%	7%	1%	1%	0%	1%
	PAST YEAR alcohol use	85%	10%	3%	1%	0%	1%
8th	PAST MONTH alcohol use	80%	12%	3%	2%	1%	3%
	PAST YEAR alcohol use	63%	19%	8%	4%	3%	4%

**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	97%	1%	1%	1%	0%	1%
8th	Binge drinking	91%	3%	1%	3%	1%	2%

**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%	0%	0%	1%	0%	1%
	PAST MONTH inhalant use	91%	4%	2%	2%	0%	1%
8th	PAST MONTH marijuana use	92%	3%	1%	2%	1%	3%
	PAST MONTH inhalant use	88%	7%	2%	2%	0%	2%

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

**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%	0%	1%	0%	0%	1%
	PAST YEAR inhalant use	90%	3%	4%	2%	1%	1%
8th	PAST YEAR marijuana use	89%	1%	3%	1%	0%	5%
	PAST YEAR inhalant use	87%	4%	3%	1%	1%	3%
	PAST YEAR MDMA ('ecstasy') use	98%	0%	0%	0%	0%	1%
	PAST YEAR LSD use	98%	1%	0%	0%	0%	1%
	PAST YEAR cocaine / crack use	97%	2%	0%	0%	0%	0%
	PAST YEAR meth use	98%	2%	0%	0%	0%	0%
	PAST YEAR heroin use	98%	1%	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.)	94%	3%	1%	2%
	Over-the-counter weight loss aids (laxatives, Dexatrim, etc.)	98%	1%	0%	1%
	Other over-the-counter drugs (cough syrup, etc.)	83%	9%	5%	2%

**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	96%	0%	0%	3%
	Uppers (Ritalin, etc.)	97%	1%	0%	2%
	Downers (Valium, Ambien, etc.)	97%	1%	0%	2%
	Other prescription drugs (OxyContin, Ketamine, etc.)	95%	2%	0%	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	82%	16%	1%	1%
	I bought them at a store	83%	15%	1%	1%
	I bought them from a vending machine	82%	16%	1%	1%
	I gave a stranger money to buy them for me	82%	13%	3%	2%
	I bought them over the Internet	82%	15%	1%	2%
	A friend gave them to me	83%	6%	8%	3%
	My older brother or sister gave them to me	83%	13%	3%	2%
	My parent gave them to me	82%	15%	1%	2%
	I took them from a store	83%	15%	1%	2%
	I took them from home without my parents knowing it	82%	10%	6%	2%
	I got them some other way	82%	9%	5%	3%

**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	69%	30%	1%	1%
	I bought it at a store	69%	30%	1%	1%
	I bought it at a bar or restaurant	69%	30%	1%	1%
	I gave a stranger money to buy them for me	69%	28%	2%	1%
	I bought it over the Internet	69%	29%	1%	1%
	A friend gave it to me	68%	17%	11%	3%
	My older brother or sister gave it to me	70%	24%	4%	2%
	My parents with their permission	69%	21%	8%	1%
	My parents without their permission	69%	22%	5%	3%
	An adult (other than my parents) with that adult's permission	69%	22%	8%	2%
	An adult (other than my parents) without that adult's permission	69%	26%	3%	2%
	I took it from a store	69%	28%	1%	2%
	I got it at a party	70%	19%	7%	4%
	I got it some other way	69%	21%	5%	4%

**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?	97%	2%	1%	2%
	Use marijuana on school property?	97%	1%	0%	1%

**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	96%	2%	2%	1%
	Malt liquor	95%	4%	0%	1%
	Wine	96%	2%	2%	1%
	Wine cooler	96%	2%	2%	1%
	Liquor (vodka, whiskey, etc.)	95%	3%	2%	1%
	Mixed drinks (margarita, etc.)	95%	3%	1%	1%
	Flavored 'alcopops' (hard lemonade, hard cider, etc.)	96%	2%	2%	1%
8th	Beer	84%	6%	6%	5%
	Malt liquor	84%	12%	3%	2%
	Wine	84%	10%	5%	1%
	Wine cooler	84%	9%	6%	1%
	Liquor (vodka, whiskey, etc.)	84%	7%	7%	3%
	Mixed drinks (margarita, etc.)	84%	9%	5%	2%
	Flavored 'alcopops' (hard lemonade, hard cider, etc.)	85%	8%	4%	3%

**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	15%	11%	22%	52%
	Take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day	19%	19%	27%	35%
	Have five or more drinks of an alcoholic beverage once or twice a week	18%	15%	27%	41%
	Smoke marijuana regularly	12%	5%	13%	70%
	Smoke marijuana once or twice a week	14%	8%	23%	55%
	Use inhalants regularly	12%	11%	19%	58%
8th	Smoke one or more packs of cigarettes per day	11%	9%	24%	57%
	Take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day	24%	22%	29%	26%
	Have five or more drinks of an alcoholic beverage once or twice a week	16%	23%	22%	40%
	Smoke marijuana regularly	17%	9%	15%	60%
	Smoke marijuana once or twice a week	17%	12%	20%	51%
	Use inhalants regularly	13%	9%	19%	60%

**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	66%	15%	6%	13%
8th	70%	24%	2%	4%

**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%	13%	3%	5%
8th	a TEENAGER who had been drinking or using drugs	87%	9%	2%	3%
	an ADULT who had been drinking or using drugs	84%	11%	2%	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	16%	12%	65%	6%



**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	6%	94%
	I have been physically attacked	11%	89%
	I have been threatened	26%	74%
8th	I have been injured by a vehicle	6%	94%
	I have been physically attacked	9%	91%
	I have been threatened	19%	81%

**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	30%	70%
	It made learning harder	19%	81%

**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	78%	11%	7%	4%
	Smoke cigarettes?	75%	13%	8%	4%
	Smoke marijuana?	88%	6%	4%	3%
	Use LSD, cocaine, amphetamines or another illegal drug?	89%	7%	2%	2%
8th	Drink alcohol regularly	58%	16%	21%	4%
	Smoke cigarettes?	64%	17%	14%	4%
	Smoke marijuana?	72%	13%	10%	5%
	Use LSD, cocaine, amphetamines or another illegal drug?	86%	7%	5%	3%

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

	Yes	No
	%	%
8th	13%	87%

**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?	82%	6%	2%	2%	1%	6%
	Sold illegal drugs?	95%	2%	0%	1%	0%	2%
	Been drunk or high at school?	93%	3%	0%	1%	0%	3%

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

		Yes	No
		%	%
6th	Bullied you by calling you names?	48%	52%
	Threatened to hurt you?	38%	62%
	Bullied you by hitting, punching, kicking, or pushing you?	30%	70%
8th	Bullied you by calling you names?	38%	62%
	Threatened to hurt you?	28%	72%
	Bullied you by hitting, punching, kicking, or pushing you?	23%	77%

**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?	78%	10%	6%	5%	3%
	Began drinking alcohol regularly?	82%	8%	5%	4%	2%
	Smoked marijuana?	87%	3%	5%	2%	4%
8th	Smoked cigarettes?	65%	15%	9%	5%	6%
	Began drinking alcohol regularly?	66%	12%	8%	6%	8%
	Smoked marijuana?	73%	10%	7%	4%	7%

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

	6th	8th
	%	%
None	47%	49%
1 to 2 days, < 3 hours per day	24%	16%
1 to 2 days, > 3 hours per day	4%	6%
3 or more days, < 3 hours per day	18%	12%
3 or more days, > 3 hours per day	7%	17%

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

	Yes	No
	%	%
8th	19%	81%

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

	Yes	No
	%	%
8th	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	18%	24%	58%
8th	18%	29%	53%

**How do you describe your weight?**

	Very underweight	Slightly underweight	About the right weight	Slightly overweight	Very overweight
	%	%	%	%	%
6th	10%	7%	50%	21%	12%
8th	4%	12%	52%	22%	9%

**Average Height and Weight**

	Grade					
	6th			8th		
	Mean	Median	N	Mean	Median	N
Height (inches)	63.9	63.0	126	65.1	65.0	125
Weight (pounds)	138.7	110.0	127	147.6	121.0	120

Height and weight data not available for surveys taken online.

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

**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	11%	21%	14%	15%	12%	7%	21%
	Eat vegetables	15%	26%	13%	14%	12%	5%	16%
8th	Eat fruit	6%	25%	16%	11%	13%	7%	21%
	Eat vegetables	10%	19%	19%	12%	16%	5%	18%

**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	10%	6%	6%	11%	9%	17%	8%	34%
8th	11%	6%	8%	11%	12%	18%	7%	30%

**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	10%	20%	9%	27%	14%	8%	12%
8th	12%	16%	17%	22%	14%	7%	14%

**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	14%	5%	5%	7%	9%	12%	9%	41%
8th	15%	7%	6%	10%	6%	12%	9%	36%

**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	29%	43%	4%	16%	1%	6%	1%	2%
8th	30%	38%	3%	16%	4%	6%	3%	1%

**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	85%	4%	6%	3%	3%
8th	92%	3%	2%	1%	3%

**How true are the following statements?**

<b>At my school there is a teacher or some other adult who:</b>		Not at all true	A little true	Pretty much true	Very much true
		%	%	%	%
6th	Really cares about me.	19%	24%	25%	32%
	Notices when I'm not there.	15%	26%	29%	30%
	Listens to me when I have something to say.	17%	23%	25%	36%
	Notices if I have trouble learning something.	23%	20%	24%	33%
	Tells me when I do a good job.	14%	17%	30%	40%
	Always wants me to do my best.	8%	15%	20%	57%
	Believes that I will be a success.	11%	18%	23%	47%
	Encourages me to work hard in school.	10%	17%	21%	52%
8th	Really cares about me.	21%	21%	23%	35%
	Notices when I'm not there.	20%	23%	29%	28%
	Listens to me when I have something to say.	25%	21%	23%	31%
	Notices if I have trouble learning something.	27%	21%	23%	30%
	Tells me when I do a good job.	22%	20%	26%	31%
	Always wants me to do my best.	17%	17%	26%	40%
	Believes that I will be a success.	19%	20%	23%	38%
	Encourages me to work hard in school.	21%	16%	24%	39%

**How true are the following statements?**

<b>At school:</b>		Not at all true	A little true	Pretty much true	Very much true
		%	%	%	%
6th	I do interesting activities.	12%	20%	33%	35%
	I help decide things like class activities or rules.	47%	26%	14%	13%
	I do things that make a difference.	31%	30%	25%	15%
8th	I do interesting activities.	27%	26%	22%	26%
	I help decide things like class activities or rules.	50%	23%	15%	12%
	I do things that make a difference.	36%	31%	17%	17%

**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.	16%	5%	20%	32%	27%
	I am happy to be at this school.	15%	7%	13%	31%	34%
	I feel safe in my school.	11%	8%	18%	36%	28%
	The teachers at this school treat students fairly.	17%	9%	20%	30%	24%
8th	I feel close to people at this school.	18%	3%	17%	39%	25%
	I am happy to be at this school.	21%	8%	17%	32%	22%
	I feel safe in my school.	16%	3%	23%	35%	24%
	The teachers at this school treat students fairly.	19%	10%	19%	30%	23%

**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	92%	2%	4%	2%
	Smoke cigarettes	92%	4%	3%	2%
	Smoke marijuana	95%	2%	1%	2%
8th	Drink alcohol regularly	75%	13%	9%	3%
	Smoke cigarettes	83%	9%	3%	6%
	Smoke marijuana	87%	6%	4%	4%

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

		Yes	No	Don't remember
		%	%	%
6th	Tobacco	64%	19%	17%
	Alcohol	68%	19%	13%
	Marijuana and other illegal drugs	62%	20%	18%
8th	Tobacco	53%	35%	13%
	Alcohol	54%	34%	12%
	Marijuana and other illegal drugs	58%	31%	11%

**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.	7%	10%	12%	71%
	My parents ask if I've gotten my homework done.	6%	6%	13%	74%
	Would your parents know if you did not come home on time?	7%	8%	19%	66%
8th	When I am not at home, one of my parents knows where I am and who I am with.	12%	12%	22%	55%
	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?	29%	18%	12%	42%
	My parents ask if I've gotten my homework done.	16%	14%	17%	53%
	Would your parents know if you did not come home on time?	14%	12%	16%	59%
	If you go to a party where alcohol is served, would you be caught by your parents?	24%	20%	17%	39%

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

	Yes	No
	%	%
6th	92%	8%
8th	80%	20%