

2021 Community Prevention and Wellness Initiative Community Survey

We are interested in your opinions about youth substance use in our community. Your responses will help inform and improve prevention programs for our youth.

This 10-15 minute survey is completely anonymous.

You may skip any questions or stop the survey at any time.

Want to know more about our group?

You can contact us by phone and by email.

Please tear off this page if you would like to take our contact information with you.

Phone: _____

Email: _____

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If you would like us to contact you, please enter your contact information below.

Contact information is kept separate from this anonymous survey.

Please tear off this portion of the page and hand it in separately.

Name: _____

Phone number: _____

Email: _____

Admin

Initials: _____ #: _____ Date: _____

ENGLISH

These first questions ask about your perceptions of substance abuse and mental health concerns in your community.

1. How much of a problem do you think each of the following is among youth (6th–12th grade) in your community?

	Not a problem	A minor problem	A moderate problem	A serious problem	Don't know
Alcohol Use	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Marijuana or hashish use	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prescription drug misuse (using medication without a prescription or in a way other than prescribed)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other drugs (specify below*)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tobacco use	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
E-cigarettes or other electronic vapor products	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Driving under the influence of alcohol	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Driving under the influence of marijuana	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Depression	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Suicide	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bullying	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bullying on social media	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*If you marked "Other Drugs" above, which drugs? _____

2. How much do you think people risk harming themselves when they drive...

	No risk	Slight risk	Moderate risk	High risk	Don't know
Under the influence of alcohol	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Under the influence of marijuana	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3a. If youth wanted to get some alcohol, how easy would it be for them to get some?

	Very easy	Sort of easy	Sort of hard	Very hard	Don't know
Middle School youth (6 th –8 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High School youth (9 th –12 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3b. If youth wanted to get some marijuana, how easy would it be for them to get some?

	Very easy	Sort of easy	Sort of hard	Very hard	Don't know
Middle School youth (6 th –8 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High School youth (9 th –12 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4a. How much do you think youth risk harming themselves if they try marijuana once or twice?

	No risk	Slight risk	Moderate risk	High risk	Don't know
Middle School youth (6 th –8 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High School youth (9 th –12 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4b. How much do you think youth risk harming themselves if they try marijuana regularly (once or twice a week)?

	No risk	Slight risk	Moderate risk	High risk	Don't know
Middle School youth (6 th –8 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High School youth (9 th –12 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4c. How much do you think youth risk harming themselves if they use prescription drugs that are not prescribed to them?

	No risk	Slight risk	Moderate risk	High risk	Don't know
Middle School youth (6 th –8 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High School youth (9 th –12 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

What are your opinions?

5a. Do you think it is OK for youth to drink at parties if they don't get drunk?

	No	Yes	Yes, but only on special occasions
Middle School youth (6 th –8 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High School youth (9 th –12 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5b. Do you think it is OK for parents to offer their children alcoholic beverages in their homes?

	No	Yes	Yes, but only on special occasions
Middle School youth (6 th –8 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High School youth (9 th –12 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5c. Do you think most adults in our community feel it is OK for parents to offer their children alcoholic beverages in their home?

	No	Yes	Yes, but only on special occasions
Middle School youth (6 th –8 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High School youth (9 th –12 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6. Where do you think youth usually get prescription drugs not prescribed to them by a doctor? Select one.

At home	From friends	Buying them	Not sure
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/> Other : _____			

7. If you currently have prescription medication at your home, where is the medication usually kept? Select one.

Hidden	Locked up	Neither	Both (hidden and locked up)	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. Do you know where in your community you could get rid of prescription drugs that you no longer need?

Yes	No
<input type="radio"/>	<input type="radio"/>

9. There is a group of volunteers in your community who are working to reduce youth alcohol and other drug use. Are you aware of this group/coalition?

Yes	No
<input type="radio"/>	<input type="radio"/>

10. Are you a parent or guardian with any children in 6th–12th grade?

Yes	No
<input type="radio"/>	<input type="radio"/> If NO , go to Question 15

Parents/Guardians – please answer the following questions based on the school grade of your child/children. If you have children in both middle and high school, please respond to both categories provided.

11. Which statement BEST describes the conversation you have had with your child about alcohol use in the last 3 months? (Check all that apply for your middle and/or high school aged child/children in the specific grade)

	Your Middle School youth (6 th –8 th grade)	Your High School youth (9 th –12 th grade)
I have not talked with my child about alcohol use in the last three months.	<input type="radio"/>	<input type="radio"/>
I have told my child that alcohol is not OK and they will receive consequences if they use drink.	<input type="radio"/>	<input type="radio"/>
I told my child it is OK for him/her to have a few drinks on a special occasion.	<input type="radio"/>	<input type="radio"/>
I told my child about the risks of underage drinking and they should not drink.	<input type="radio"/>	<input type="radio"/>
I told my child that even though they are less than 21, they will have to decide for themselves whether or not to drink alcohol.	<input type="radio"/>	<input type="radio"/>

12. Which statement BEST describes the conversation you have had with your child about marijuana use in the last 3 months? (Check all that apply for your middle and/or high school aged child/children in the specific grade)

	Your Middle School youth (6 th –8 th grade)	Your High School youth (9 th –12 th grade)
I have not talked with my child about marijuana use in the last three months.	<input type="radio"/>	<input type="radio"/>
I have told my child that marijuana is not OK and they will receive consequences if they use marijuana.	<input type="radio"/>	<input type="radio"/>
I told my child about the risks of youth using marijuana and they should not eat, smoke, or use it any way.	<input type="radio"/>	<input type="radio"/>
I told my child that even though they are less than 21, they will have to decide for themselves whether or not to use marijuana.	<input type="radio"/>	<input type="radio"/>

13. When your child goes out in the evening or on the weekend, how often do you:

	Never	Rarely	Sometimes	Very often	Always
Ask who they will be with?					
Middle School youth (6 th –8 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High School youth (9 th –12 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ask where they are going?					
Middle School youth (6 th –8 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High School youth (9 th –12 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If my child is attending a party, check to see if the party will have adult supervision					
Middle School youth (6 th –8 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High School youth (9 th –12 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Check to see if your child is under the influence of alcohol or drugs (talk with them, smell breath, check eyes)?					
Middle School youth (6 th –8 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High School youth (9 th –12 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Set a time for your child to be home?					
Middle School youth (6 th –8 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High School youth (9 th –12 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wait up until your child comes home?					
Middle School youth (6 th –8 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High School youth (9 th –12 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

14. How wrong do you think it would be for your child....

	Not at all wrong	A little bit wrong	Wrong	Very wrong	Don't know
To drink alcohol					
Middle School youth (6 th –8 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High School youth (9 th –12 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To use marijuana					
Middle School youth (6 th –8 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High School youth (9 th –12 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To use prescription drugs not prescribed to them					
Middle School youth (6 th –8 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High School youth (9 th –12 th grade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Demographics

15. What is your age?

18-24	25-34	35-44	45-54	55-64	65+
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

16. How do you currently identify yourself? Select all that apply.

Male	Female	Transgender	Questioning / not sure of my gender identity	Something else fits better
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

17. Are you of Hispanic, Latino/Latina or Spanish origin?

Yes No

18. What is your race? Select all that apply.

American Indian, Alaska Native	Asian or Asian American	Black or African American	Native Hawaiian or other Pacific Islander	White
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/> Other: _____				

19. What languages are spoken in your home? Select all that apply.

Cambodian/Khmer	English	Russian	Somali	Spanish
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/> Other: _____				

20. What is the highest degree or level of school you completed?

Less than high school	High school degree or GED	Some college	College/university graduate	Post graduate
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

21. What is your zip code where you live most of the time?

Thank you for participating in this survey!