

I Am One of Many

We need your help and honesty. This is a survey about students’ perceptions of alcohol, tobacco and other drug use. You will not be asked to give your name or any other identification — this is an anonymous survey and your identity is protected. Only group statistics will be reported. Please read each question carefully. There are no "right" or "wrong" answers, just choose whichever answer you think is closest to the truth. This survey is voluntary. If you do not wish to respond to a question, you may leave it blank and continue. Thank you for completing this survey.

How old are you?	<input type="checkbox"/> 10	<input type="checkbox"/> 11	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19	<input type="checkbox"/> 20	<input type="checkbox"/> 21
What is your gender?	<input type="checkbox"/> Male	<input type="checkbox"/> Female	What grade are you in?	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10	<input type="checkbox"/> 11	<input type="checkbox"/> 12		
How do you describe yourself?	<input type="checkbox"/> Native American or Native Alaskan	<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> Asian	<input type="checkbox"/> White or European American	<input type="checkbox"/> Black or African American	<input type="checkbox"/> Native Hawaiian or other Pacific Islander	<input type="checkbox"/> Other					
How do you think the following people would feel about this statement? “Drinking alcohol is never a good thing for anyone my age to do, except for just a few sips at a family or religious gathering.” (give your best guess, mark an answer in each row)												
	Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree							
You												
Most students in your school												
How do you think the following people would feel about this statement? “Getting drunk is never a good thing for anyone my age to do.” (give your best guess, mark an answer in each row)												
	Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree							
You												
Most students in your school												
Which statement below about using any <u>illegal drug other than marijuana</u> do you feel best represents the attitudes of the following people? (give your best guess, mark an answer in each row).												
	It is never a good thing to do.	Trying it once or twice is OK as long as it doesn’t interfere with academics or other responsibilities.	Occasional use is OK even if it does interfere with academics or responsibilities.	Frequent use is OK if that’s what the individual wants to do.								
You												
Most students in your school												
Have you heard about or seen the "MOST of Us" or the “I AM One of Many” campaign in the last 12 months? Yes No Not Sure												
How do you think the following people feel about this statement? “Parents should not let their teens or their teens’ friends <u>drink alcohol at home</u> .” (give your best guess, mark an answer in each row)												
	Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree							
You												
Most students in your school												
Most parents of students in your school												

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How would you feel about <u>your friends</u> doing the following things? (mark an answer in each row)					
	Strongly Approve	Approve	Neither Approve Nor Disapprove	Disapprove	Strongly Disapprove
Trying marijuana once or twice					
Smoking marijuana frequently					
Drinking any amount of alcohol					
Getting drunk					
Smoking cigarettes					
Smoking cigarettes at a party or while drinking					
Trying drugs other than marijuana once or twice					
Using drugs other than marijuana frequently					
Driving in a vehicle while impaired (after drinking alcohol)					
Riding in a vehicle with a driver who has been drinking alcohol					

In what ways have you seen or heard "MOST of Us" or the "I AM One of Many" messages? (mark an answer in each row)		
	Yes	No
School newspaper		
Posters		
Banners		
Give-a ways (messages appearing on water bottles, pencils, key chains)		
Screensavers		
Radio		
TV		
Movie theater slides		
Billboards		
Other		

How often do <u>you</u> use the following? (mark the answer that best applies in each row)	Never	Tried Once or Twice	Once or Twice a Year	Once a Month	Twice a Month	Once a Week	Daily
Tobacco	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marijuana	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Methamphetamine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How often do you think <u>most</u> of the students in your school use the following? (give your best guess)	Never	Tried Once or Twice	Once or Twice a Year	Once a Month	Twice a Month	Once a Week	Daily
Tobacco	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marijuana	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Methamphetamine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>