

Please read the instructions below, and then go to the first question on page 3.

INSTRUCTIONS:

Answer all questions in the order that they appear unless the instructions tell you to skip a question. Instructions that tell you to skip a question appear after some of the answers that you may choose.

There are four types of questions in this booklet:

- 1) Write your answer in the box.

Example: How old are you?

| |

 AGE IN YEARS

- 2) Circle only one answer for each item.

Example: Are you a male or a female?

(CIRCLE ONLY ONE)

Male..... 1

Female..... 2

- 3) Circle the number under your answer for each item.

Example: How often do you:

| | Often | Sometimes | Hardly Ever |
|----------------------|-------|-----------|----------------|
| a. Do your homework? | 1 | 2 | 3 |
| b. Go to the movies? | 1 | 2 | 3 |

- 4) Circle as many answers as apply.

Example: Last week, what did you do after school?

- a. Did homework..... 1
- b. Watched T.V..... 2
- c. Played..... 3
- d. Worked..... 4
- e. Other (Tell what) _____ 5

If any question is not clear, please circle the question number and ask the interviewer about it when you have finished the booklet.

1. Within the last month, have you and your parent(s):
(CIRCLE THE NUMBER UNDER YOUR ANSWER FOR EACH ITEM.)

| | <u>YES</u> | <u>NO</u> | |
|---|------------|-----------|-----|
| a. Gone to the movies together? | 1 | 0 | 13/ |
| b. Gone out to dinner? | 1 | 0 | 14/ |
| c. Gone shopping to get something for you - such as clothes, books, records, or games? | 1 | 0 | 15/ |
| d. Gone on an outing together, like to a museum or sporting event? | 1 | 0 | 16/ |
| e. Gone to church or religious services together? | 1 | 0 | 17/ |

2. Within the last week, have you and your parent(s):
(CIRCLE THE NUMBER UNDER YOUR ANSWER FOR EACH ITEM.)

| | <u>YES</u> | <u>NO</u> | |
|---|------------|-----------|-----|
| a. Done things together, such as build or make things, cook, or sew? | 1 | 0 | 18/ |
| b. Worked on schoolwork together? | 1 | 0 | 19/ |
| c. Played a game or sport? | 1 | 0 | 20/ |

3. In your home, are you regularly expected to help out with:
(CIRCLE THE NUMBER UNDER YOUR ANSWER FOR EACH ITEM.)

| | <u>YES</u> | <u>NO</u> | |
|---|------------|-----------|-----|
| a. Straightening your room? | 1 | 0 | 21/ |
| b. Keeping the rest of the house clean? | 1 | 0 | 22/ |
| c. Doing the dishes? | 1 | 0 | 23/ |
| d. Cooking? | 1 | 0 | 24/ |

Please turn to next page.

4. In your home, are there are any rules about:
(CIRCLE THE NUMBER UNDER YOUR ANSWER FOR EACH ITEM.)

| | <u>YES</u> | <u>NO</u> | |
|--|------------|-----------|-----|
| a. Watching television? | 1 | 0 | 25/ |
| b. Keeping your parent(s) informed about where you are? | 1 | 0 | 26/ |
| c. Doing your homework? | 1 | 0 | 27/ |
| d. Dating and going to parties with boys and girls? | 1 | 0 | 28/ |

IF YOU ANSWERED "NO" TO EVERY ITEM IN Q.4, SKIP TO Q.7.

5. How much say do you have in making up these rules?

(CIRCLE ONE)

| | | |
|--------------------|---|-----|
| A lot..... | 4 | |
| Some..... | 3 | 29/ |
| A little | 2 | |
| No say at all..... | 1 | |

6. How often do you and your parent(s) argue about these rules?

(CIRCLE ONE)

| | | |
|------------------|---|-----|
| Often..... | 3 | |
| Sometimes..... | 2 | 30/ |
| Hardly ever..... | 1 | |

7. How often does your mother or father:
(CIRCLE THE NUMBER UNDER YOUR ANSWER FOR EACH ITEM.)

| | OFTEN | SOMETIMES | HARDLY EVER | |
|---|-------|-----------|----------------|-----|
| a. Talk over important decisions with you? | 1 | 2 | 3 | 31/ |
| b. Listen to your side of an argument? | 1 | 2 | 3 | 32/ |

Please turn to next page.

8. Who usually makes the decisions about:
(CIRCLE ALL THE ANSWERS THAT APPLY.)

| | YOU | MOTHER | FATHER | SOMEONE ELSE (tell who that is) | |
|---------------------------------|-----|--------|--------|---------------------------------------|-----|
| a. Buying your clothes? | 1 | 2 | 3 | 4 _____ | 33/ |
| b. How to spend your money? | 1 | 2 | 3 | 4 _____ | 34/ |
| c. Which friend to go out with? | 1 | 2 | 3 | 4 _____ | 35/ |
| d. How late you can stay out? | 1 | 2 | 3 | 4 _____ | 36/ |
| e. How much allowance you get? | 1 | 2 | 3 | 4 _____ | 37/ |
| f. How much TV you can watch? | 1 | 2 | 3 | 4 _____ | 38/ |
| g. Your religious training? | 1 | 2 | 3 | 4 _____ | 39/ |

9. In dealing with you, how often do your mother and your father agree?

- Always agree..... 1
 - Usually agree..... 2
 - Sometimes agree..... 3
 - Never agree..... 4
 - I only have contact with one parent..... 5
- 40/

10. What grade in school are you attending? (IF SCHOOL HASN'T STARTED YET, PLEASE WRITE IN GRADE YOU LAST ATTENDED.) (IF YOU GO TO AN UNGRADED SCHOOL OR JUST TAKE CLASSES, WRITE IN THE GRADE YOU WOULD BE IN IF YOU WERE IN REGULAR SCHOOL.)

| _____ |
GRADE

41-42/

DO NOT ATTEND SCHOOL OR TAKE CLASSES AT ALL..(SKIP TO Q.16, ON PAGE 8).. 00

Please turn to next page.

11. There are many things that people might say to describe their schools. Here are some things that other people have said about their schools. We would like to know how well you think these statements describe your school.

For each sentence below, circle whether you think it is very true, somewhat true, not too true, or not at all true for your school. (CIRCLE THE NUMBER UNDER YOUR ANSWER FOR EACH ITEM.)

| | VERY TRUE | SOMEWHAT TRUE | NOT TOO TRUE | NOT AT ALL TRUE | |
|---|--------------|------------------|-----------------|--------------------|-----|
| a. It's easy to make friends at this school. | 1 | 2 | 3 | 4 | 43/ |
| b. Most of the teachers are willing to help with personal problems. | 1 | 2 | 3 | 4 | 44/ |
| c. Most of my classes are boring. | 1 | 2 | 3 | 4 | 45/ |
| d. I don't feel safe at this school. | 1 | 2 | 3 | 4 | 46/ |
| e. Most of my teachers really know their subjects well. | 1 | 2 | 3 | 4 | 47/ |
| f. You can get away with almost anything at this school. | 1 | 2 | 3 | 4 | 48/ |
| g. My schoolwork requires me to think to the best of my abilities. | 1 | 2 | 3 | 4 | 49/ |
| h. At this school, a person has the freedom to learn what interests him or her. | 1 | 2 | 3 | 4 | 50/ |

12. How satisfied are you with your school?

(CIRCLE ONE)

| | | |
|----------------------------|---|-----|
| Very satisfied..... | 4 | 51/ |
| Somewhat satisfied..... | 3 | |
| Somewhat dissatisfied..... | 2 | |
| Very dissatisfied..... | 1 | |

Please turn to next page.

13. On a usual day after school, what do you do between the time school lets out and dinner time?
 (CIRCLE THE NUMBER UNDER YOUR ANSWER FOR EACH ITEM.)

| Do you: | <u>YES</u> | <u>NO</u> | |
|---|------------|-----------|-----|
| a. Spend time with friends? | 1 | 0 | 52/ |
| b. Read a book or magazine not assigned at school? | 1 | 0 | 53/ |
| c. Do any chores around the house? | 1 | 0 | 54/ |
| d. Work for pay? | 1 | 0 | 55/ |
| e. Do homework? | 1 | 0 | 56/ |
| f. Go to a lesson or activity such as sports or a club? | 1 | 0 | 57/ |
| g. Watch TV? | 1 | 0 | 58/ |
| h. Go to the shopping mall? | 1 | 0 | 59/ |
| i. Do things with your brothers or sisters | 1 | 0 | 60/ |
| NO BROTHERS OR SISTERS..... | 2 | | |

14. After a usual school day, where do you go between the time school lets out and dinner time?
 (CIRCLE AS MANY ANSWERS AS APPLY.)

| | | |
|---|---|-----|
| Home..... | 1 | 61/ |
| After school care/extended day care.... | 2 | 62/ |
| To the playground..... | 3 | 63/ |
| To the library..... | 4 | 64/ |
| To the mall..... | 5 | 65/ |
| To a relative's house..... | 6 | 66/ |
| To a friend's house..... | 7 | 67/ |
| To work or a job..... | 8 | 68/ |
| Somewhere else (PLEASE WRITE WHERE).... | 9 | 69/ |

15. If you go home after school lets out, is an adult usually present when you get there?

| | | |
|------------------------------------|---|-----|
| Yes..... | 1 | |
| No..... | 0 | 70/ |
| Go somewhere else after school.... | 2 | |

Please turn to next page.

16. How far do you think you will go in school? Do you think you will:
(CIRCLE ONLY ONE ANSWER.)

- Leave high school before graduation..... 1 71/
- Graduate from high school..... 2
- Get some college or other training..... 3
- Graduate from college..... 4
- Get more than 4 years of college..... 5
- Something else? (PLEASE WRITE WHAT)
- _____ 6
- _____ 7
- Already left school..... 7

17. Do you belong to any clubs, teams, or school activities, either in or out of school?

- Yes..... 1 72/
- No..... 0

18. Not counting jobs around the house, do you sometimes work for pay such as babysitting, paper route, or yard work for neighbors?

- Yes..... 1 73/
- No..(SKIP TO Q.23, ON PAGE 9)..... 0

19. If you do any work for pay outside your own home, what do you do?
(What are your duties?)

20. When you do these kinds of jobs, how often do you usually work?

- About once a month..... 1 74/
- A few times a month..... 2
- About once a week..... 3
- A few times a week..... 4
- 4 or more times a week..... 5
- Every day..... 6

Please turn to next page.

21. In the last three (3) months, how many hours have you worked in a usual week? (WRITE USUAL NUMBER OF HOURS PER WEEK YOU WORKED IN BOX.)

|_____|
HOURS PER WEEK

12-13/

22. How much money do you USUALLY MAKE in a week? (WRITE AMOUNT YOU USUALLY MAKE PER WEEK IN BOXES.)

\$ |_____| . |_____| PER WEEK
DOLLARS CENTS

14-19/

23. In the last year, about how many times have you: (CIRCLE THE NUMBER UNDER YOUR ANSWER FOR EACH ITEM.)

| | NEVER | ONCE | TWICE | MORE THAN TWICE | |
|--|-------|------|-------|-----------------|-----|
| a. Stayed out later than your parent(s) said you should? | 0 | 1 | 2 | 3 | 20/ |
| b. Hurt someone badly enough to need bandages or a doctor? | 0 | 1 | 2 | 3 | 21/ |
| c. Lied to your parent(s) about something important? | 0 | 1 | 2 | 3 | 22/ |
| d. Taken something from a store without paying for it? | 0 | 1 | 2 | 3 | 23/ |
| e. Damaged school property on purpose? | 0 | 1 | 2 | 3 | 24/ |
| f. Gotten drunk? | 0 | 1 | 2 | 3 | 25/ |
| g. Had to bring your parent(s) to school because of something you did wrong? | 0 | 1 | 2 | 3 | 26/ |
| i. Skipped a day of school without permission? | 0 | 1 | 2 | 3 | 27/ |
| j. Stayed out at least one night without permission? | 0 | 1 | 2 | 3 | 28/ |

Please turn to next page.

24. What is your present religion, if any?

- Baptist..... 01
- Episcopalian..... 02
- Lutheran..... 03
- Methodist..... 04
- Presbyterian..... 05
- Roman Catholic..... 06
- Jewish..... 07
- Moslem..... 08
- Christian - nondenominational..... 09
- Protestant - nondenominational..... 10
- Other (PLEASE WRITE WHAT) _____ 11
- None or no religion..... 12

29-30/

25. In the past year, about how often have you attended religious services?

(CIRCLE ONE)

- More than once a week..... 6
- About once a week..... 5
- Two or three times a month..... 4
- About once a month..... 3
- Several times a year or less..... 2
- Not at all..(SKIP TO Q.27 on PAGE 11)... 1

31/

26. If you attend religious services:
(CIRCLE THE NUMBER UNDER THE ANSWER FOR EACH ITEM.)

| | <u>YES</u> | <u>NO</u> | |
|--|------------|-----------|-----|
| a. Do you usually go with your parent(s)? | 1 | 0 | 32/ |
| b. Would you go even if your parent(s) didn't? | 1 | 0 | 33/ |
| c. Do many of your friends go to religious services? | 1 | 0 | 34/ |
| d. Do some of your friends go to the same church or synagogue as you do? | 1 | 0 | 35/ |

Please turn to next page.

27. How many close friends do you have who are boys?
(WRITE NUMBER OF BOYS IN BOX.)

| |
BOYS

36-37/

None..... 00

28. How many close friends do you have who are girls?
(WRITE NUMBER OF GIRLS IN BOX.)

| |
GIRLS

39-39/

None..... 00

29. Are most of these close friends:

(CIRCLE ONE)

- In your grade..... 1
- In a higher grade..... 2
- In a lower grade..... 3
- Not in school..... 4
- Don't have any close friends..... 5

40/

30. How often do you feel lonely and wish you had more friends?

(CIRCLE ONE)

- Often..... 3
- Sometimes..... 2
- Hardly ever..... 1

41/

31. Have you ever smoked a cigarette?

- Yes..... 1
- No..... 0

42/

32. If you have ever smoked, have you smoked a cigarette in the past three (3) months?

- Yes..... 1
- No..... 0
- Never smoked..... 2

43/

Please turn to next page.

33. If you have ever smoked, how old were you when you first smoked a cigarette?
(WRITE AGE IN BOX.)

| |
AGE IN YEARS

44-45/

Never smoked..... 96

34. Have you ever drunk alcohol, other than just a sip or two?

Yes..... 1

46/

No..... 0

35. If you have ever drunk alcohol, have you drunk alcohol in the past three
(3) months?

Yes..... 1

No..... 0

47/

Have never drunk alcohol..... 2

36. If you have ever drunk alcohol, how old were you when you first drank
alcohol?
(WRITE AGE IN BOX.)

| |
AGE IN YEARS

48-49/

Have never drunk alcohol..... 96

37. Have you ever used marijuana?

Yes..... 1

50/

No..... 0

38. If you have ever used marijuana, have you used marijuana in the past
three (3) months?

Yes..... 1

No..... 0

51/

Never used marijuana..... 2

Please turn to next page.

39. If you have ever used marijuana, how old were you when you first used marijuana?
(WRITE AGE IN BOX.)

| |
AGE IN YEARS

52-53/

Never used marijuana..... 96

40. Have you ever used other drugs, such as LSD, cocaine, uppers or downers?

Yes..... 1
No..... 0

54/

41. If you have ever used other drugs, have you used any of them in the past three (3) months?

Yes..... 1
No..... 0
Never used these drugs..... 2

55/

42. If you have ever used other drugs, how old were you when you first used any of these drugs?
(WRITE AGE IN BOX.)

| |
AGE IN YEARS

56-57/

Never used these drugs..... 96

43. At what age, if at all, did you have your first date or begin going out alone with someone of the opposite sex?
(WRITE AGE IN BOX.)

| |
AGE IN YEARS

58-59/

Haven't started to date yet..... 00

44. If you have ever dated, about how often do you usually go out on a date?
(CIRCLE ONLY ONE ANSWER.)

Once or twice a week..... 1
Once or twice a month..... 2
Less than once or twice a month..... 3
Almost never..... 4
Haven't started dating yet..... 5

60/

45. If you go out on dates, do you usually go out with the same person?

Yes..... 1

No..... 0

Do not date..... 2

61/

46. What do you think is the best age, if any, for you to get married?
(WRITE AGE IN BOX.)

| |
AGE IN YEARS

Not getting married.....(SKIP TO Q.48)..... 00

62-63/

Other (PLEASE WRITE IN ANSWER)

..... 97

Don't know..... 98

47. What is the youngest age you can imagine yourself getting married?
(WRITE AGE IN BOX.)

| |
AGE IN YEARS

Other (PLEASE WRITE IN ANSWER)

64-65/

..... 97

Don't know..... 98

48. What do you think is the best age, if any, for you to have your first
child? (WRITE AGE IN BOX.)

| |
AGE IN YEARS

Not going to have children...(SKIP TO Q.50).. 00

66-67/

Other (PLEASE WRITE IN ANSWER)

..... 97

Don't know..... 98

Please turn to next page.

49. What is the youngest age you can imagine yourself having your first child? (WRITE AGE IN BOX.)

|_____|
AGE IN YEARS

Other (PLEASE WRITE IN ANSWER)

68-69/

..... 97

Don't know..... 98

50. Did you ever have a course or spend any time in class at school talking about sex education?

Yes.....(ANSWER A AND B)..... 1

70/

No.....(SKIP TO Q.51)..... 0

A. What grade were you in when you had this course or discussion? (WRITE GRADE IN BOX.)

|_____|
GRADE

71-72/

B. What year and month was that? (WRITE YEAR AND MONTH IN BOXES.)

|__|__| 19 |__|__|
MONTH YEAR

73-76/

51. Who, if anyone, in your family do you usually talk to about sex? (CIRCLE AS MANY ANSWERS AS APPLY.)

BEGIN DECK 43

- Mother..... 1 12/
- Father..... 2 13/
- Brother..... 3 14/
- Sister..... 4 15/
- Grandparent..... 5 16/
- Aunt..... 6 17/
- Uncle..... 7 18/
- Other Relative (WRITE IN RELATIONSHIP)..... 8 19/
- 9 20/
- No One..... 9

Please turn to next page.

52. When during the female monthly menstrual cycle, is pregnancy most likely to occur? (CIRCLE ONLY ONE ANSWER.)

- Right before the period begins..... 1
- During the period..... 2
- Right after the period ends..... 3
- About two weeks after the period begins..... 4
- Any time during the month..... 5
- Don't know..... 8

21/

53. Have you ever been away from your mother for at least two months (not counting summer camp)?

- Yes..... 1
- No..... 0

22/

54. Where were you the last time you were away from your mother for at least two months? Were you:

(CIRCLE ONE)

- At a boarding school..... 1
- In a hospital..... 2
- With your father..... 3
- With grandparent(s)..... 4
- With another relative..... 5
- Never separated from mother for 2 months..... 6
- Other (PLEASE TELL US WHAT THAT WAS) _____

23/

8

Please turn to next page.

55. How old were the last time you were away from your mother for at least two months? If you have been away from your mother more than once, how old were you the last time this happened? (WRITE AGE IN BOX.)

|_____|
AGE IN YEARS

24-25/

- Less than 1 year old..... 00
- Don't know..... 98
- Never separated from
mother for 2 months..... 99

56. Have you ever been away from your father for at least two (2) months (not counting summer camp)?

- Yes..... 1
- No..... 0

26/

57. Where were you the last time you were away from your father for at least 2 months? Were you:

(CIRCLE ONE)

- At a boarding school..... 1
- In a hospital..... 2
- With your mother..... 3
- With grandparent(s)..... 4
- With another relative..... 5
- Never separated from
father for 2 months..... 6
- Other (PLEASE TELL
US WHAT THAT WAS) _____
_____ 8

27/

58. How old were you the last time this happened? If you have been away from your father more than once, how old were you the last time this happened? (WRITE AGE IN BOX.)

|_____|
AGE IN YEARS

28-29/

- Less than 1 year old..... 00
- Don't know..... 98
- Never separated from
father for 2 months..... 99

YOU HAVE FINISHED THIS BOOKLET. PLEASE RETURN IT TO THE INTERVIEWER. IF ANY QUESTIONS WERE UNCLEAR, PLEASE ASK THE INTERVIEWER ABOUT THEM. THANK YOU!

INTERVIEWER:

1. Check Child Face Sheet (ITEM 3). Is child age 13 years or over?

Yes.(ADMINISTER CONFIDENTIAL CHILD CARD). 1

No..... 0

30/

2. Complete CSAS.

3. If you have not finished the Child Supplement, do so now.

4. In what language was this Child Self-Administered Supplement given?

English..... 1

Spanish..... 2

Other (SPECIFY)

_____ 3

31/

5. Please record your interview ID #: |__|__|__|__|__|__|

32-37/

6. Please sign your name here: _____