Wyoming Project AWARE Student Survey - High School

<u>Instructions:</u> Thank you for taking part in this survey. The purpose of the survey is to learn how students in our schools feel about their community, peers, and family. We also want to learn about their knowledge of mental health and substance use supports. Your answers give us important information that will help Wyoming communities to become even better!

- The survey is completely voluntary and anonymous, which means your teachers and family will not see your answers. No one will ever see how you filled out your survey.
- This is not a test, so there are no right or wrong answers. We just want to know how you feel.
- Please read each item carefully. Most questions ask for only one answer. You may select more than one answer on the questions that have: "Select all that apply" next to a square box. If you do not find an answer that fits exactly, use the one that comes closest. If you are unsure of what it means, just leave it blank. You can skip any questions that you do not wish to answer.
- If you need help reading a question, you may ask an adult in the room.

1. What is your grade?

This survey should take you about 20 minutes. Thank you for taking this survey!

To begin, the following questions ask about your experiences at school and your community.

	0	9
	0	11
2.	What a	activities do you normally participate in? Select all that apply.
		I play on or help with sports teams at school
		I play on or help with sports teams in the community
		I join clubs or organizations at school (e.g., school newspaper, student government,
		school plays, language clubs, hobby clubs, drama club, debate)
		I join clubs or organizations outside of school (e.g., 4-H, Scouts, Boys and Girls Clubs,
		YWCA, YMCA, community gym/pool, youth groups)
		I take lessons or practice a hobby in music, art, drama, or dance
		I help other people without getting paid (e.g., volunteering)
		I work for money (e.g., babysitting, yard work)
		None of the above

3. On most days, how much time do you spend with no adult at home before a O There is almost always an adult at home with me before and after sch		ost days, how much time do you spend with no adult at home before and after school? There is almost always an adult at home with me before and after school		
	0	1-2 hours		
	0	3-4 hours		
	0	5 or more hours		
4.	There is an adult I know who believes that I will be a success.			
	0	Not at all true		
	0	A little true		
	0	Pretty much true		
	0	Very much true		
5.	There	is an adult I know who listens to me when I have something to say.		
	0	Not at all true		
	0	A little true		
	0	Pretty much true		
	0	Very much true		
6.	There	is an adult I know who really cares about me.		
	0	Not at all true		
	0	A little true		
	0	Pretty much true		
	0	Very much true		
7.	There	There is a student at my school who cares about me.		
	0	Not at all true		
	0	A little true		
	0	Pretty much true		
	0	Very much true		
8.	There	is a student at my school who helps me when I'm having a hard time.		
	0	Not at all true		
	0	A little true		
	0	Pretty much true		
	0	Very much true		
9.	In the	last month, how many days did you not go to school because you felt unsafe at school		
or on your way to or from school?		your way to or from school?		
	0	0 days		

o 1 dayo 2 or 3 dayso 4 or more days

10. Bullying is when someone repeatedly harms you or intimidates you for any reason.			
to Ale	to the Last consider have a change have 19 at 20		
	e last month, have you been bullied?		
C			
C	No (Skip to 12)		
11. IF YE	TO BULLYING: In what way(s) were you bullied? Select all that apply.		
	Someone said things about me to make other students laugh (made fun of)		
	Someone called me (or my family) bad names		
	Someone spread a false rumor or lied about me		
	I was left out on purpose by other kids when it was time to do an activity		
	Someone said negative things about my culture, race/ethnicity, or religion		
	I was electronically bullied through texting, Instagram, Facebook, or other social media		
	I was pushed, shoved, or physically hurt		
	I was bullied by a sibling		
	Other (specify:)		
	12. Suppose someone was trying to start a physical fight with you. What would you think about		
first v	vhen you decide what to do?		
C	What my friends would think		
C	What my parents would think		
c	Whether I would get into trouble at school		
c	Whether I would get hurt		
c	My personal feelings about fighting		
c	Other (specify:)		

The next section asks about your experiences and feelings about drugs and alcohol.

13. I have learned about drugs and alcohol at my school.

- o I have not received any information from school
- o I have received very little information
- o I have received some information
- o I have received a lot of information

-	had concerns about drugs, alcohol, or some other substance-related issue, would you
	all that apply.
	talk to a teacher or another adult from my school
	talk to my parents or someone else in my family
	0
	get help from a therapist
	call or text a hotline (telephone number that anyone can use to get help)
	search social media/online/apps
	, ,
	not know what to do
15. Where	e do you normally learn about drugs and alcohol? Select all that apply.
	Social media/online/apps
	My parents/ family
	My friends
	My teachers/ school
	My doctor/therapist
	My church/religious community
	Books or magazines/ podcasts/ TV
	Law enforcement or other community organizations (for example, DARE)
	Other (specify)
	None - I have not received information about drugs and alcohol.
	g, Juuling, or electronic vapor products include e-cigarettes, e-cigars, e-pipes, vape pipes, pens, e-hookahs, mods, and hookah pens.
-	you ever used an electronic vapor product? Select all that apply.
	Yes, tobacco/nicotine (e-cigarette)
	Yes, cannabis - marijuana (primarily THC)
	Yes, cannabis - hemp (primarily CBD)
	Yes, synthetics (Spice, K2, etc.)
	Yes, other substance
	No (skip to 19)
17. IF YES	TO USE: How easy is it for you to get vaping products?
0	Easy
0	Somewhat easy
0	Not easy at all

18. IF YES TO USE: Where do you get vaping/Juuling products? Select all that apply.		
		The store
		The internet
		I took it from someone/somewhere
		Friends
		Siblings
		Parents / guardians
		Other adults
		Relatives
		Other (please specify)
19. Wh	at c	do you think is in a vaping pen or e-cigarette? Select all that apply.
		Water
		Oil
		Cancer-causing chemicals
		Tobacco / nicotine
		Drugs such as CBD, THC, and synthetic drugs
		Metals such as nickel, tin, and lead
		Flavorings
		Chemicals that are unstable and can explode
		Tiny particles that can go into your lungs and other organs
		Other: Specify I don't know
		I don't know
20. Mo	st k	ids my age think vaping is cool.
	0	Not at all true
	0	A little true
	0	Pretty much true
	0	Very much true
21. Ho	w m	nuch do you think people harm themselves when they vape nicotine (tobacco)?
	0	Not at all
	0	A little
	0	A lot
22. Ho	w m	nuch do you think people harm themselves when they vape marijuana?
	0	Not at all
	0	A little
	0	A lot

- 23. Suppose someone was trying to get you to try some drugs. What would you think about first when you decide what to do?
 - What my friends would think
 - What my parents would think
 - o Whether I would get caught
 - o Whether I would get sick/hurt
 - My personal feelings about drugs
 - o Other (specify: _____)

The next set of questions ask about your family. Family includes those that you live with (for example, biological, adoptive, foster, stepfamily, or other guardians).

- 24. My family members really help and support one another.
 - Not at all true
 - A little true
 - Pretty much true
 - Very much true
- 25. I can count on my family to support me 100% no matter what.
 - Not at all true
 - o A little true
 - Pretty much true
 - Very much true

The next set of questions ask about your knowledge, feelings and experiences related to mental health.

- 26. People at my school talk openly about mental health, for example, how they think, feel, and handle problems.
 - Not at all true
 - A little true
 - Pretty much true
 - Very much true
- 27. My school encourages students to take care of their mental health (how they think, feel, and handle problems).
 - Not at all true
 - A little true
 - Pretty much true
 - Very much true

28.	At my school, I have learned about mental health (what it is, how to take care of myself, what to do if I need help, etc.).		
	0	I have not received any information from school	
	0	I have received very little information	
	0	I have received some information	
	0	I have received a lot of information	
29.	Where	do you normally learn about mental health? Select all that apply.	
		Social media/online/apps	
		My parents/ family	
		My friends	
		My teachers/ school	
		My doctor/therapist	
		My church/religious community	
		Books or magazines/podcasts/ TV	
		Other (specify)	
		None - I have not received information about mental health.	
	0	nily is generally caring and understanding of people with a mental health illness. Not at all true A little true Pretty much true	
31.		Very much true ids my age are generally caring and understanding of people with a mental health	
	illness.		
	0	Not at all true A little true	
	0		
	0	Pretty much true	
	0	Very much true I don't know	
	0	T don't know	
32.	People	with a mental health illness can get better.	
	0	Not at all true	
	0	A little true	
	0	Pretty much true	
	0	Very much true	

	0	Not at all true
	0	A little true
	0	Pretty much true
	0	Very much true
34. Pe	ople	with a mental health illness make me feel uncomfortable.
	0	Not at all true
	0	A little true
	0	Pretty much true
	0	Very much true
35. M	enta	I health illnesses are uncommon, and most people are not affected by them.
35. M	enta o	I health illnesses are uncommon, and most people are not affected by them. Not at all true
35. M		
35. M	0	Not at all true
35. M	0	Not at all true A little true
	0 0 0	Not at all true A little true Pretty much true
	0 0 0	Not at all true A little true Pretty much true Very much true
	o o o	Not at all true A little true Pretty much true Very much true with a mental health illness can lead normal lives.

33. Having a mental health illness is nothing to be ashamed of.

- 37. At school, I know where to go or who to contact for help when I am very sad, stressed, angry, out-of-control, or lonely.
 - o Yes

Very much true

- o No
- 38. In the past year, did you get help from a <u>school/guidance counselor</u> when you needed it (for example, because you felt very sad, stressed, angry, out-of-control, or lonely)?
 - o Does not apply, I didn't need help
 - o No, I didn't get help when I needed it
 - o No, I didn't know where to go for help when I needed it
 - o Yes, I got help when I needed it
- 39. In the past year, did you get help from a <u>therapist</u> when you needed it (for example, because you felt very sad, stressed, angry, out-of-control, or lonely)?
 - o Does not apply, I didn't need help
 - o No, I didn't get help when I needed it
 - o No, I didn't know where to go for help when I needed it
 - o Yes, I got help when I needed it

40. If I was feeling very sad, stressed, angry, out-of-control, or lonely, I would Select all that		
apply.		
	talk to a teacher or another adult from my school	
	talk to my parents or someone else in my family	
	get help from a school/guidance counselor	
	get help from a therapist	
	talk to my friends	
	call or text a hotline (telephone number that anyone can use to get help)	
	search social media/online/apps	
	deal with it on my own	
	be afraid to get help	
	not know what to do	
41. Which of the following do you use to help you when you feel sad, stressed, angry, out-of-control, or lonely during normal times? Select the top 3 activities.		
	Ignore my feelings and act like everything is normal	
	Spend more time alone	
	Spend more time on social media or gaming	
	Sleep or spend time in bed	
	Do something creative or a hobby	
	Talk to someone about how I'm feeling	
	Eat more food	
	Exercise more/spend more time outside	
	Learn about what makes me stressed/upset	
	Shop	
	Journal or draw/art	
	Listen to music	
	Drink alcohol or do drugs	
	Other (specify:)	

	of the following made you feel sad, stressed, angry, out-of-control, or lonely during the
•	O days? Select the top 3.
	Thinking about my future
	,
	Problems at home
	- 0 F F
	Social media
	,
	Medical concerns
	Traveling
	0 0 0 -
	Other (specify:)
	None of the above; I have not felt sad, stressed, angry, out-of-control, or lonely in the
	past 30 days.
43. In the	past month, the following happened to me. Select all that apply.
	broke up with my boyfriend/ girlfriend
	had a big fight or problem with a friend
	someone close to me died
	someone I know attempted suicide
	someone close to me used drugs or drank heavily
	none of these happened to me
These final que	estions ask for some general information about you.
44. Are yo	и
0	Male
_	Female
0	Prefer not to say
45 What i	race/ethnicity do you consider yourself?
0	White
0	Black
0	
0	Asian or Pacific Islander
0	Hispanic or Latino/a
0	Two or more races
	Prefer not to say

46. Do you have a parent in the military who:

- Is currently away from home because of military service and has been gone more than two weeks?
- Returned home after being away for more than two weeks because of military service in the last year?
- Is in the military but has not been away from home for more than two weeks because of military service in the last year?
- I do not have a parent active in the military.