DELAWARE 5TH GRADE STUDENT ASSENT AND SURVEY INSTRUCTIONS

This survey is part of a study the University of Delaware does every year to provide information on student behaviors and beliefs, including the use of cigarettes, alcohol and other drugs. Results are used to make better decisions about the kinds of programs and policies needed to support the health and well-being of Delaware students.

All answers are entirely

- **Confidential**—no one will see your answers or know how you answered the questions
- **Anonymous**—do not put your name on the survey; we do not want to know how any one person answered, only about percentages of answers of all students combined
- **Voluntary**—there is no penalty if you choose not to fill out any part of the survey or all of it

This IS NOT A TEST, so there are no right or wrong answers. If you don't find an answer that fits exactly, choose the one that comes closest. If a question does not apply to you, or if you are not sure what it means, just leave it blank. Please work as quickly as you can. If you have any questions, raise your hand and I will come to help you. *Unless it says “Mark all that apply,” please mark only one answer for each question.* When you are finished, turn your booklet over and raise your hand; I will come around with an envelope for you to put your survey in. Then you can work quietly at your desk on something else until everyone has finished.

Remember:

- Read the instructions before you answer.
- Fill in the circle next to the answer you choose completely, like the example below:

I am in the 5th grade:

- Yes
- No
PLEASE ANSWER THE FOLLOWING QUESTIONS:

1. What is the zip code for your home address? Please write in the numbers, then fill in the proper circles.

   (Example)

   ZIP CODE

   1 9 7 1 6

   ☐ ☐ ☐ ☐ ☐

   ☐ ☐ ☐ ☐ ☐

2. Are you a:  
   ☐ Boy  ☐ Girl

3. Do you get a free or reduced cost lunch at school?  
   ☐ Yes  ☐ No

4. Are you Hispanic or Latino?  
   ☐ Yes  ☐ No

5. Which one of these groups BEST describes you? (CHOOSE ONLY ONE)  
   ☐ American Indian or Alaskan Native  ❌
   ☐ Asian  ❌
   ☐ Black or African American  ❌
   ☐ White/Caucasian  ☐
   ☐ Other __________________________

6. How old are you TODAY?  
   ☐ 9 years old or younger  ☐
   ☐ 10 years old  ☐
   ☐ 11 years old  ☐
   ☐ 12 years old or older  ☐

7. In the past 12 months, has any adult family member: (MARK ALL THAT APPLY)  
   ☐ Been in jail or prison  ☐
   ☐ Been active in the military  ☐
   ☐ Lost a job or been unable to find work (mother)  ☐
   ☐ Lost a job or been unable to find work (father)  ☐
   ☐ Left the family for some other reason  ☐

8. Which of the following people live with you most of the time? (MARK ALL THAT APPLY)  
   ☐ Mother(s)  ☐
   ☐ Father(s)  ☐
   ☐ Foster parent(s)  ☐
   ☐ Guardian(s)  ☐
   ☐ Grandparent(s), aunt(s), uncle(s)  ☐
   ☐ Stepparent(s)  ☐
   ☐ Brother(s), stepbrother(s)  ☐
   ☐ Sister(s), stepsister(s)  ☐
   ☐ Non-family member(s)  ☐

9. Which of the people who live with you right now work to earn money to pay the bills and buy the food? (MARK ALL THAT APPLY)  
   ☐ Mother(s)/step-mother(s)  ☐
   ☐ Father(s)/step-father(s)  ☐
   ☐ Foster parent(s)  ☐
   ☐ Guardian(s)  ☐
   ☐ Brother(s) or sister(s)  ☐
   ☐ Grandmother(s)  ☐
   ☐ Grandfather(s)  ☐
   ☐ Other adult(s)  ☐
   ☐ No one  ☐

10. What ONE category best describes your grades on your last report card?  
    ☐ Mostly A’s  ☐
    ☐ Mostly B’s  ☐
    ☐ Mostly C’s  ☐
    ☐ Mostly D’s or F’s  ☐

11. How many times has your family moved since you started Kindergarten?  
    ☐ We have not moved  ☐
    ☐ 1 time  ☐
    ☐ 2 times  ☐
    ☐ 3 or more times  ☐

12. Do you take medicine to help you concentrate better in school?  
    ☐ No ☐
    ☐ Yes ☐
13. How tall are you without your shoes on?
Directions:
Write your height in the shaded blank boxes. Fill in the matching circle below each number.

14. How much do you weigh without your shoes on?
Directions:
Write your weight in the shaded blank boxes. Fill in the matching circle below each number.

<table>
<thead>
<tr>
<th>Height</th>
<th>Height</th>
<th>Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feet</td>
<td>Inches</td>
<td>Pounds</td>
</tr>
<tr>
<td>5</td>
<td>7</td>
<td>1</td>
</tr>
</tbody>
</table>

---

How much time do you spend on a school day (before and after school):

15. Online on a computer (not for school work), tablet, phone, watching TV, or playing computer/video games?
- No Time
- An hour or less
- One to two hours
- Two to five hours
- More than five hours

16. Doing school work at home?
- No Time
- An hour or less
- One to two hours
- Two to five hours
- More than five hours

17. Physically playing, exercising, or playing sports?
- No Time
- An hour or less
- One to two hours
- Two to five hours
- More than five hours

18. Reading for pleasure (not for school)?
- No Time
- An hour or less
- One to two hours
- Two to five hours
- More than five hours

19. Outside of school, what kinds of activities do you participate in: (MARK ALL THAT APPLY)
- Sports
- Church youth group
- Youth organizations such as 4-H, YMCA, et cetera
- Service activities
- Music lessons or band participation
- Gymnastics, zumba, ballet or other dance
- Boxing, kick-boxing, Karate or other martial arts
- Other lessons
- Other organized activities
<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>20. I feel safe in my school.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. I feel safe in my neighborhood.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22. I get along well with my parent(s) (foster parent, guardian) most of the time.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23. Most kids at this school obey the teachers.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24. There is an adult present where I go after school.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25. The bad behavior of some kids in this school (talking, fighting) keeps teachers from teaching the other kids who want to learn.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26. Fighting is a problem in this school.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>27. I often talk to my parent(s) (foster parent, guardian) about how things are going at school.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>28. My parent(s) (foster parent, guardian) knows where I am most of the time when I am NOT in school.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>29. My parent(s) (foster parent, guardian) knows what I am doing most of the time when I am NOT in school.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30. My parent(s) (foster parent, guardian) asks me if I've gotten my homework done.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31. Do any of your friends smoke cigarettes?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32. Do any of your friends drink alcohol?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>33. This year, have you been in a physical fight at school</td>
<td></td>
<td></td>
</tr>
<tr>
<td>34. This year, have you been in a physical fight in your neighborhood?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>35. During the past 30 days, have you been bullied at school?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>36. Do you know places where students your age can buy cigarettes?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>37. Do you know places where students your age can get alcohol without paying for it?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>38. During the past year, have you seen or heard adults in your home hurting each other?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>39. During this school year, have you had any lessons in school about making good decisions, setting goals, or resolving problems with other people?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### PLEASE ANSWER YES OR NO TO THESE QUESTIONS:

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>40. In the past month, have you stolen (not borrowed) something?</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>41. In the past month, have you <strong>purposefully</strong> damaged or destroyed something that didn't belong to you?</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>42. Teachers in my school treat students with respect.</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>43. Have you hit anyone in the past month with the intention of hurting them?</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>44. Has your parent(s) (foster parent, guardian) spoken to at least two of your friends' in the past month?</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>45. During the past 30 days, have you lied to your parent (foster parent, guardian) about where you were or what you were doing?</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>46. If you break your parents' rules, will you definitely be punished?</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>47. If you break the school rules, will you definitely be punished?</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>48. My parent(s) (foster parent, guardian) shows me they are proud of me.</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>49. My parent(s) (foster parent, guardian) listens to me when I talk to them.</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>50. I can count on my parent(s) (foster parent, guardian) to be there when I need them.</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>51. I am comfortable sharing my thoughts and feelings with my parent(s) (foster parent, guardian).</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>52. How many days in the past 7 days did you eat breakfast?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ 0 days</td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ 1 day</td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ 2 days</td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ 3 days</td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ 4 days</td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ 5 days</td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ 6 days</td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ 7 days</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>53. If you had a personal problem, who would you most likely talk to? (Select only one response)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ No one</td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ My parent, stepparent, or guardian</td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ My brother(s), sister(s) or other relatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ My teacher(s)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Other adult(s) in my school</td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Other adult(s) outside of school</td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ My friend(s)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ My friends' parent(s)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ My grandparent(s)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
These questions ask about food you ate or drank in the past 7 days at home, at school, at restaurants, or anywhere else. Mark ONE answer in each row:

<table>
<thead>
<tr>
<th></th>
<th>0 times in 7 days</th>
<th>1 to 3 times in 7 days</th>
<th>4 to 6 times in 7 days</th>
<th>1 time per day</th>
<th>2 times per day</th>
<th>3 times per day</th>
<th>4 or more times per day</th>
</tr>
</thead>
<tbody>
<tr>
<td>54. In the past 7 days, you ate fruit:</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>55. In the past 7 days, you ate green salad:</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>56. In the past 7 days, you ate other vegetables (not counting carrots, potatoes, or green salad):</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>57. In the past 7 days, you drank soda:</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>

**PLEASE ANSWER THE FOLLOWING QUESTIONS:**

58. Have you ever smoked most of a cigarette (more than a few puffs)?
- □ Yes
- □ No

59. Is it easy or hard for someone your age to get cigarettes?
- □ Easy
- □ Hard
- □ I'm not sure

60. Is it easy or hard for someone your age to get alcohol (beer, wine, or liquor)?
- □ Easy
- □ Hard
- □ I'm not sure

61. Is it easy or hard for someone your age to get marijuana (weed or pot)?
- □ Easy
- □ Hard
- □ I'm not sure

62. How old were you the first time you smoked a cigarette?
- □ I've never smoked
- □ 6 years old or younger
- □ 7 years old
- □ 8 years old
- □ 9 years old
- □ 10 years old
- □ 11 years old
- □ 12 years old or older

63. Have you ever used an E-cigarette or Vaped?
- □ Yes
- □ No

64. Is it easy or hard for someone your age to get E-cigarettes or Vape products?
- □ Easy
- □ Hard
- □ I'm not sure

65. If you wanted to get cigarettes, MARK ALL THE PLACES you could get them.
- □ From my friends or other kids I know
- □ From my brothers, sisters, or cousins
- □ From my parents (with them knowing)
- □ From my parents (without them knowing)
- □ From other adults (with them knowing)
- □ From other adults (without them knowing)
- □ From a vending machine
- □ From a store cashier or clerk

66. Does anybody living in your home smoke cigarettes or tobacco? (MARK ALL THAT APPLY)
- □ No one
- □ Mother or Stepmother
- □ Father or Stepfather
- □ Brother(s) or Stepbrothers(s)
- □ Sister(s) or Stepsister(s)
- □ Other household member(s)

67. Have you ever had a drink of alcohol (wine, beer, liquor), more than just a sip?
- □ Yes
- □ No
68. How old were you the first time you had a drink of alcohol, (wine, beer, or liquor) more than just a sip?  
- I've never drunk alcohol  
- 6 years old or younger  
- 7 years old  
- 8 years old  
- 9 years old  
- 10 years old  
- 11 years old  
- 12 years old or older  

69. Have you ever smoked marijuana (pot, weed)?  
- Yes  
- No  

REMEMBER THAT YOUR ANSWERS ARE PRIVATE. PLEASE MARK THE ANSWER IN EACH ROW THAT COMES CLOSEST TO SHOWING HOW OFTEN YOU HAVE EVER USED EACH:

<table>
<thead>
<tr>
<th>Drug Type</th>
<th>NEVER</th>
<th>BEFORE, BUT NOT IN PAST YEAR</th>
<th>A FEW TIMES IN PAST YEAR</th>
<th>ONCE OR TWICE A MONTH</th>
<th>ONCE OR TWICE A WEEK</th>
<th>ALMOST EVERY DAY</th>
</tr>
</thead>
<tbody>
<tr>
<td>72. Cigarettes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>73. E-cigarette or Vape</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>74. Cigars</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>75. Chewing tobacco, snuff, dip (Skoal, Red Man, Snus)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>76. Alcohol (beer, wine coolers, liquor)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>77. Marijuana (pot, weed)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>78. Inhalants (sniffing glue, sprays, gasoline)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>79. Prescription painkillers (Codeine, OxyContin, Percocet) to get high</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>80. Ritalin, Adderall, Strattera, Concerta, or Cylert to get high</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>81. Other prescription drugs to get high</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>82. Dactyls (rubes, dacks)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>83. Over-the-counter drugs to get high (3C, cough syrup, antihistamines)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**How Much Do People Risk Harm Themselves If They:**

<table>
<thead>
<tr>
<th>Question</th>
<th>No Risk</th>
<th>A Little Risk</th>
<th>A Lot of Risk</th>
<th>Don't Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>84. Smoke one or more packs of cigarettes a day?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>85. Try one or two drinks of alcohol (beer, wine, liquor)?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>86. Drink one or two drinks of alcohol nearly every day?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>87. Try marijuana once or twice?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>88. Smoke marijuana every week?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>89. Take a prescription drug that was not prescribed for them?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>90. Sniff glue or spray cans once or twice?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>91. Sniff glue or spray cans every week?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

92. On how many of the past 7 days did you spend at least one hour doing a physical activity that made your heart beat fast and made you breathe hard (such as running, jogging, soccer, dancing, swimming, tennis, biking)?

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days
- 6 days
- 7 days

93. Which of the following people would you say give you a lot of support and encouragement (Mark All That Apply)?

- No one
- My parent, stepparent, or guardian
- My brother(s), sister(s), or other relatives
- My teacher(s)
- Other adult(s) in my school
- Other adult(s) outside of school
- My friend(s)
- My friends’ parent(s)
- My grandparent(s)

94. How often do you wear a seat belt?

- Never
- Hardly ever
- About half the time
- Usually
- Always

95. On an average school night, how many hours of sleep do you get?

- 4 or less hours
- 5 hours
- 6 hours
- 7 hours
- 8 hours
- 9 hours
- 10 or more hours

96. Which of the following have you done for money in the past year? (Mark All That Apply)

- Played lottery or scratch-off tickets
- Bet on team sports
- Played cards for money or prizes
- Played Bingo for money or prizes
- Bet on games of skill, such as basketball (HORSE, GHOST)
- Bet on video games
- Played gambling games on the Internet
- Played fantasy sports

---

**The End -- Thank you again for being an important part of this study.**