

# Fremont Adolescent School Health Initiative

## Student Survey at Kennedy High

1. **Grade level:** (check one)     9<sup>th</sup>     10<sup>th</sup>     11<sup>th</sup>     12<sup>th</sup>

2. **Gender:** (check one)     Male     Female     Transgender

3. **How do you describe yourself?** (check one)

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> White            | <input type="checkbox"/> Asian Indian     | <input type="checkbox"/> Other: _____         |
| <input type="checkbox"/> Latino           | <input type="checkbox"/> Pacific Islander | <input type="checkbox"/> Prefer not to answer |
| <input type="checkbox"/> African American | <input type="checkbox"/> Middle Eastern   |   |
| <input type="checkbox"/> Asian            | <input type="checkbox"/> Multi-racial     |   |

4. **How important do you feel the following health topics are among students at your school?** (please check one answer for each health topic)

	Not so important	Somewhat important	Very important
a. Stress and depression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Violence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Alcohol and drug use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Tobacco use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Peer pressure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Nutrition and exercise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Pregnancy and STDs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. **Which of the following types of programs would you attend if they were available at your school?** (please check all that apply)

- Recreational programs like art or exercise classes and fun teen events
- Volunteering/Community Service
- Mentoring programs
- Homework help
- Confidential teen counseling
- Confidential medical and health education services

6. **How often does not having transportation keep you from doing things you need or want to do?** (check one)

- Never     Sometimes     Usually     Always

7. **If you needed confidential health services, how would you get there?** (check all that apply)

- Drive     Ride from parent or friend     Bus     Bicycle     Walk     Taxi

8. **If you needed information about the following teen health issues, who would you prefer to talk to about these issues?** (check one answer for each topic)

	Another student	An adult professional	Either
a. Stress and depression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Substance abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Sex education (including abstinence and/or safe sex)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**9. What types of low or no-cost resources would you like to see more of in your school or in your community?**

(check all that apply)

*To improve access to care:*

- More medical, health education and counseling services available at my school
- Better information about existing medical, health education and counseling services
- Transportation to medical or counseling services
- Other: \_\_\_\_\_

*To help with stress, depression and emotional well-being:*

- Counselors to help with stress, depression and other mental health issues
- More recreational programs for teens like art or exercise classes and fun teen events
- More activities that bring teens together with their families and community
- Programs to help students and families develop goals for the future
- Counselors to help with college or career decisions
- Options or classes for people who aren't interested in going to college
- Help with practical stuff like keeping a checking account and paying bills
- Other: \_\_\_\_\_

*To increase safety:*

- Conflict resolution programs
- Anger management programs
- School-wide programs around respect and diversity
- Programs to increase respect and safety around dating and relationship issues
- Adults on campus taking a stronger stance against violence and harassment
- School Resource Police Officers (SROs) on campus
- Neighborhood safety programs off campus
- Other: \_\_\_\_\_

*To decrease alcohol and drug abuse:*

- Alcohol and drug education
- Alcohol and drug treatment programs
- Confidential taxi program for teens that have been using alcohol or drugs
- Other: \_\_\_\_\_

*To improve nutrition and level of exercise:*

- Fun exercise classes (yoga, martial arts, basketball, etc.)
- Classes to teach you how to make low-cost and healthy foods
- Low-cost healthy food options for lunch at school
- Other: \_\_\_\_\_

*To decrease unplanned pregnancies and STDs:*

- Sex education (including abstinence, safe sex, birth control and STDs)
- Providing free condoms at school
- Free pregnancy and STD testing
- Other: \_\_\_\_\_

**10. How easy do you think it would be for you to get the following types of services if you needed them?**

(please check one answer for each type of service)

	Very Easy	Somewhat Easy	Somewhat Difficult	Very Difficult	Don't know
a. Medical care if you were sick or hurt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Help with routine check-ups including physical exams, vision testing, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Help with confidential issues like birth control/condoms or STDs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Counseling to help you deal with issues like stress, depression or family problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**11. Which of the following factors are most important in making it easy for you to access medical or counseling services?** (please check all that apply)

- Convenient hours and location
- Free or low-cost services
- Private/Confidential services
- They offer the services I need
- Teen-centered environment
- Staff that understand my needs
- Location in a safe neighborhood
- Other: \_\_\_\_\_

**12. If you needed health and wellness services, please check the nearby schools that you feel you would go to if they had health services available on their campus?** (check all that apply)

- Robertson
- Walters

**13. Do you feel you have someone to talk about:** (please check all that apply)

- Stress and depression
- Medical issues
- Family issues

**14. In the past month, how often did you feel depressed or sad?** (check one)

- Never
- Once or twice
- Several times
- Everyday or almost everyday

**15. In the past month, how often did you feel nervous, restless or stressed out?** (check one)

- Never
- Once or twice
- Several times
- Everyday or almost everyday

**16. In the past year, did you find yourself in trouble because of using drugs or alcohol?** (check one)

- Yes
- No

**17. In the past year, did you think seriously about dropping out of school?** (check one)

- Yes
- No

**18. Do you feel that you have goals and plans for the future?** (check one)

- Yes
- No

**19. At any time in your life, have you been homeless?** (check one)

- Yes
- No

**20. How safe do you feel at school?** (check one)

- Very safe
- Somewhat safe
- Neither safe nor unsafe
- Unsafe
- Very unsafe

**21. What do you think are the top causes of violence among students at your school?** (check all that apply)

- Diversity/Respect issues
- Students don't know how to deal with anger
- Gangs
- Alcohol/Drug abuse
- Dating violence
- Other: \_\_\_\_\_

**22. Do you feel that you answered these questions honestly?** (check one)

- Yes
- No