

SNM Survey Optional 1 Questions

1. Please answer YES or NO to the following questions:

	Yes	No
a. Do you think that most students at your school smoke cigarettes?	<input type="radio"/>	<input type="radio"/>
b. Do you think that most students at your school drink alcohol?	<input type="radio"/>	<input type="radio"/>
c. Do you think that most students at your school smoke marijuana?	<input type="radio"/>	<input type="radio"/>

2. How much do you approve or disapprove of people your age:

	Strongly Disapprove	Disapprove	Not Sure	Approve	Strongly Approve
Smoking cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drinking alcohol	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Smoking marijuana (pot, weed)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. How much do you think students at your school approve or disapprove of people your age:

	Strongly Disapprove	Disapprove	Not Sure	Approve	Strongly Approve
Smoking cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drinking alcohol	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Smoking marijuana (pot, weed)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. When I choose not to drink, it is because ...

	Very True	Somewhat True	A Little True	Not True at All
It's against my personal beliefs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It's bad for my health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My close friends don't drink	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Most students at my school don't drink	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I don't want to get in trouble with my parents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I don't want to disappoint my parents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It's against school rules	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If I was caught drinking, I would be ineligible to participate in school sports and activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It could affect my grades	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I don't want to deal with the legal consequences if I get caught drinking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I don't want to jeopardize my future plans (college, career, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. When I choose not to smoke, it is because ...

	Very True	Somewhat True	A Little True	Not True at All
It's against my personal beliefs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It's bad for my health and could shorten my life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Most students at my school don't smoke	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I don't want to get in trouble with my parents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I don't want to disappoint my parents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It's against school rules	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It would negatively affect my sports performance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It could negatively affect my physical appearance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I don't want to become addicted to cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It is illegal for people my age	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I don't think it's cool	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My parents smoke or someone else in my family smokes, and I don't like it	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6. Please answer YES or NO to the following questions:

	Yes	No
Do you prefer to date someone who doesn't smoke?	<input type="radio"/>	<input type="radio"/>
Do you prefer to date someone who doesn't drink alcohol?	<input type="radio"/>	<input type="radio"/>
Do you prefer to hang out with people who don't smoke?	<input type="radio"/>	<input type="radio"/>
Do you prefer to hang out with people who don't drink alcohol?	<input type="radio"/>	<input type="radio"/>
Do you prefer parties where people aren't smoking?	<input type="radio"/>	<input type="radio"/>
Do you prefer parties where people aren't drinking alcohol?	<input type="radio"/>	<input type="radio"/>

7. How often do your friends pressure you to:

	Never	Rarely	Sometimes	Most of the Time	Always
Smoke cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drink alcohol	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Smoke marijuana (pot, weed)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. When you go out in the evening or on the weekend, how often do your parents:

	Never	Rarely	Sometimes	Most of the Time	Always
Ask who you will be with	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ask what you will be doing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ask where you are going	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ask if there will be alcohol where you are going	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ask if other parents will be present to supervise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Contact other parents to confirm what you've told them	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Set a time when you should be home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wait up until you are home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Check to see if you have been drinking (smell your breath, talk to you, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. How much do you think your parents approve or disapprove of you and other people your age:

Strongly Disapprove Disapprove Not Sure Approve Strongly Approve

Smoking cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drinking alcohol	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Smoking marijuana (pot, weed)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. Picture of poster goes here	Have you seen this poster before? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Not Sure	If you answered Yes -	Very Believable	Somewhat Believable	A Little Believable	Not Believable at All
		How believable was the message on the poster?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. Have you seen a poster at your school that says "[Message]"? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Not Sure	If you answered Yes -	Very Believable	Somewhat Believable	A Little Believable	Not Believable at All
	How believable was the message on the poster?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. How often if ever do you...	Never	Once or Twice a Year	Once or Twice a Month	Once or Twice a Week	3 or More Times a Week
Talk to your friends about the messages on the posters?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Talk to your teachers about the messages on the posters?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Talk with any other school staff member (e.g., coach, guidance counselor) about the messages on the posters?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Talk to your parents about the messages on the posters?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Talk to your brothers and sisters or other family members about the messages on the posters?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

12. Have you seen the [name will vary by campaign] in the bathrooms at your school?

Yes No Not Sure

13. If you answered YES to the last question, how believable was the information presented in the [name will vary by campaign]?

Very Believable Somewhat Believable A Little Believable Not Believable at All