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# Youth Questionnaire

**PLEASE NOTE:**

There are 10 sections in this questionnaire

Read instructions in each section carefully.

Please do not leave any item unanswered (unless asked to skip).

Choose just one out of the different options given to you for each item unless asked otherwise.

Please be frank while responding.

There are no right or wrong answers. Each of us have our own individual way of living so please respond accordingly.

Your responses will be kept strictly confidential.

**Please fill in the following details and then proceed further.**

**Section 1**

DATE \_\_\_\_\_

NAME OF YOUTH \_\_\_\_\_

YOUR AGE \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

ADDRESS \_\_\_\_\_  
Street City Zip Code

**PLEASE CHECK ONLY ONE OF THE OPTIONS:**

**RACE/ETHNICITY**

White (European American)

Native American

Asian American

Black (African American)

Black (Other)

Mexican American (Latino)

Other Latin or Spanish heritage

Other: \_\_\_\_\_

Multiracial

**SEX**

Male

Female

**Section 2: This section has some questions regarding people living at your home.**

**PLEASE CHECK ONLY ONE OF THE OPTIONS**

1. DO YOU LIVE WITH YOUR MOTHER?

- Yes
- No

2. HOW WELL DO YOU GET ALONG WITH YOUR MOTHER?

- Well
- Fairly well
- Poorly

3. IF YOU ARE NOT LIVING WITH YOUR MOTHER, WHAT IS THE REASON?

- Divorced/ Separated
- Deceased
- Hospitalized
- Incarcerated
- Other (Specify) \_\_\_\_\_

4. HOW OFTEN DO YOU SEE YOUR MOTHER, IF YOU DO NOT LIVE WITH HER?

- Daily
- Weekly
- Monthly
- Several times a year
- Once a year
- Not at all

5. ARE YOU LIVING WITH YOUR GRANDMOTHER?

- Yes
- No

6. DESCRIBE HOW WELL YOU GET ALONG WITH YOUR GRANDMOTHER.

- Well
- Fairly well
- Poorly
- N/A

7. ARE YOU LIVING WITH YOUR AUNT?

- Yes
- No

8. DESCRIBE HOW WELL YOU GET ALONG WITH YOUR AUNT.

- Well
- Fairly well
- Poorly
- N/A

9. ARE YOU LIVING WITH ANY OTHER ADULT FEMALES BESIDES SISTERS?

- Yes
- No

10. DESCRIBE HOW WELL YOU GET ALONG WITH THIS ADULT FEMALE WHO IS NOT YOUR SISTER.

- Well
- Fairly well
- Poorly
- N/A

11. ARE YOU LIVING WITH YOUR FATHER?

- Yes
- No

12. DESCRIBE HOW WELL YOU GET ALONG WITH YOUR FATHER.

- Well
- Fairly well
- Poorly

13. IF YOU ARE NOT LIVING WITH YOUR FATHER, WHAT IS THE REASON?

- Divorced/Separated
- Deceased
- Hospitalized
- Incarcerated
- Other \_\_\_\_\_

14. HOW OFTEN DO YOU SEE YOUR FATHER, IF YOU DO NOT LIVE WITH HIM?

- Daily
- Weekly
- Monthly
- Several times a year
- Once a year
- Not at all

15. ARE YOU LIVING WITH YOUR MOTHER'S BOYFRIEND?

- Yes
- No

16. DESCRIBE HOW WELL YOU GET ALONG WITH YOUR MOTHER'S BOYFRIEND.

- Well
- Fairly well
- Poorly
- N/A

17. ARE YOU LIVING WITH YOUR STEPFATHER?

- Yes
- No

18. DESCRIBE HOW WELL YOU GET ALONG WITH YOUR STEPFATHER.

- Well
- Fairly well
- Poorly
- N/A

19. ARE YOU LIVING WITH ANY OTHER ADULT MALES BESIDES BROTHERS?

- Yes
- No

20. DESCRIBE HOW WELL YOU GET ALONG WITH THIS ADULT MALE WHO IS NOT YOUR BROTHER.

- Well
- Fairly well
- Poorly
- N/A

21. HOW MANY BROTHERS AND SISTERS LIVE WITH YOU?

- None
- 1
- 2
- 3
- 4 or more
- I have no brothers or sisters

**Section 3: This section is about some of your family activities.**

Please **CHECK ONLY ONE OPTION** that best describes your family.

1. How often does your family have dinner together?

- Never
- 1 to 3 times a week
- 4 or more times a week
- Daily

2. How many holidays (e.g., Christmas, birthdays) does your family celebrate together?

- All of them
- Most of them
- Very few of them
- None of them

3. How often do you do activities (i.e. church, sports, meetings) with your family?

- Never
- Once a month
- Once a week
- More than once a week

If you do activities with your family, what are they?

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**Section 4: This section talks about some supervision techniques that your parents use.**

**Please CHECK ONLY ONE OPTION**

**1. WHAT TIME IS YOUR CURFEW ON SCHOOL NIGHTS?**

- Before 6 pm
- Between 6 pm and 8 pm
- After 8 pm, but before 10 pm
- After 10 pm, but before midnight
- No curfew

**2. WHAT TIME IS YOUR CURFEW ON WEEKEND NIGHTS?**

- Before 6 pm
- Between 6 pm and 8 pm
- After 8 pm, but before 10 pm
- After 10 pm, but before midnight
- No curfew

**3. DO YOU HAVE SPECIFIC CHORES AROUND THE HOUSE? (e.g., cleaning house/room, yard work, taking out the trash, etc.)**

- Yes
- No

**4. IN GENERAL, HOW OFTEN DO YOU DO THESE CHORES?**

- Always
- Most of the time
- Sometimes
- Not at all

**5. IN GENERAL, DO YOU DO THESE CHORES**

- Without being told to do them
- Only after being told to do them
- Only after repeated warnings
- Not at all, even after repeated warnings

**6. WHAT TIME DO YOU GET HOME ON SCHOOL NIGHTS?**

- Before 6 pm
- Between 6 pm and 8 pm
- After 8 pm, but before 10 pm
- After 10 pm, but before midnight
- After midnight

**7. WHAT TIME DO YOU GET HOME ON WEEKENDS?**

- Before 6 pm
- Between 6pm and 8pm
- After 8 pm, but before 10 pm
- After 10 pm, but before midnight
- After midnight

**Section 5: In the following questions more than one answer may apply.**

**Please CHECK ONLY ONE OPTION.**

1. *How often do you drink alcoholic beverages like beer, wine, mixed drinks, or hard liquor?*

- never
- once or twice a year
- once or twice a month
- every weekend
- several times a week
- everyday

2. *When did you have your last drink of alcohol?*

- 1. never
- 2. not for over a year
- 3. between six months and a year ago
- 4. several weeks ago
- 5. last week
- 6. yesterday
- 7. today

3. *When you drink alcoholic beverages, what do you drink?*

- do not drink
- wine
- beer
- mixed drinks
- hard liquor

4. *When you drink alcohol, how much do you drink?*

- do not drink
- 1 drink
- 2 drinks
- 3-5 drinks
- 6 or more drinks

**Section 6: This section asks questions about your friends.**

**Please CHECK ONLY ONE OPTION**

1. **WHAT ARE THE AGE DIFFERENCES BETWEEN YOU AND YOUR FRIENDS?**

- All friends are no more than 2 years or older than you
- 1 friend is more than 2 years older than you
- 2 friends are more than 2 years older than you
- 3 or more friends are more than 2 years older than you

2. HOW MANY FRIENDS ARE INVOLVED IN THE JUVENILE COURT SYSTEM?

- No friends are involved in the system
- 1 friend is involved in the system
- 2 friends are involved in the system
- 3 or more friends are involved in the system

3. HOW MANY FRIENDS WERE INVOLVED IN THE CRIME THAT YOU COMMITTED?

- No friends were involved
- 1 or more friends were involved
- 1 or more friends were involved in other crimes, but not this one
- 1 or more friends were involved in this crime and in others

4. HOW MANY OF YOUR FRIENDS ARE INVOLVED IN A GANG?

- No friends are involved
- 1 or more friends are involved

5. DO YOU REGULARLY PARTICIPATE IN CHURCH ACTIVITIES?

- Yes
- No

6. DO YOU REGULARLY PARTICIPATE IN SCHOOL ACTIVITIES AFTER SCHOOL HOURS?

- Yes
- No

7. DO YOU REGULARLY PARTICIPATE IN COMMUNITY ACTIVITIES (e.g., boy's/girl's club, YMCA/YWCO)?

- Yes
- No

**Section 7: This section has some questions regarding your school.**

1. WHAT SCHOOL DO YOU ATTEND? \_\_\_\_\_

2. WHAT IS YOUR CURRENT GRADE LEVEL? \_\_\_\_\_

3. HAVE YOU EVER BEEN HELD BACK IN SCHOOL?

- Yes
- No

3. HOW MANY TIMES HAVE YOU BEEN IN IN-SCHOOL DETENTION THIS YEAR?

- None
- 1
- 2
- 3
- 4 or more

5. WERE YOUR PARENTS NOTIFIED?

- Yes
- No

6. HOW MANY TIMES WERE YOU IN IN-SCHOOL DETENTION LAST YEAR?

- None
- 1
- 2
- 3
- 4 or more

7. WERE YOUR PARENTS NOTIFIED?

- Yes
- No

8. HOW MANY TIMES HAVE YOU BEEN SUSPENDED THIS YEAR?

- None
- 1
- 2
- 3
- 4 or more

9. WERE YOUR PARENTS NOTIFIED?

- Yes
- No

10. HOW MANY TIMES WERE YOU SUSPENDED LAST YEAR?

- None
- 1
- 2
- 3
- 4 or more

11. WERE YOUR PARENTS NOTIFIED?

- Yes
- No

12. DO YOU LIKE SCHOOL?

- Very much
- It is all right
- Not at all

13. HOW REGULARLY DO YOU ATTEND SCHOOL?

- Everyday
- Most days
- Only sometimes
- Not at all

14. HOW EASY IS YOUR SCHOOLWORK?

- Very easy
- Kind of easy
- Sort of difficult
- Very difficult

**Section 8: This section is about other general questions.**

**Please CHECK ONLY ONE OPTION**

1. DO YOU HAVE ANY FRIENDS THAT YOU CAN TALK TO ABOUT YOUR PROBLEMS?

- Yes
- No

2. ARE THERE ANY ADULTS THAT YOU LIKE TO TALK TO ABOUT YOUR PROBLEMS?

- Yes
- No

3. HAS SOMEONE IMPORTANT TO YOU DIED OR MOVED AWAY WITHIN THE LAST 12 MONTHS?

- Yes
- No

4. HOW DID THE SITUATION AT HOME CHANGE?

- Home life is better
- Home life is worse
- Made no difference to me

5. HAS A PERSON MOVED INTO YOUR HOUSE WITHIN THE LAST YEAR?

- Yes
- No

6. HOW DID THE SITUATION AT HOME CHANGE AS A RESULT OF THIS PERSON COMING INTO YOUR HOUSE?

- Home life is better
- Home life is worse
- Made no difference to me

7. HOW MANY HOURS A WEEK ARE YOU EMPLOYED?

- Less than 5
- 6-10
- 11-19
- 20-30
- More than 30
- Not employed

**Section 9: This section is about other general questions.**

**Please CHECK ONLY ONE OPTION**

1. DO YOU THINK YOUR MOTHER (FEMALE CAREGIVER) DRINKS OR USES DRUGS TOO MUCH?

- Yes
- No
- Does not apply

2. DO YOU EVER WORRY BECAUSE OF YOUR MOTHER'S (FEMALE CAREGIVER'S) DRINKING OR DRUG USE?

- Yes
- No
- Does not apply

3. DO YOU THINK YOUR FATHER (MALE CAREGIVER) DRINKS OR USES DRUGS TOO MUCH?

- Yes
- No
- Does not apply

4. DO YOU EVER WORRY BECAUSE OF YOUR FATHER'S (MALE CAREGIVER'S) DRINKING OR DRUG USE?

- Yes
- No
- Does not apply

5. DO OTHER ADULTS IN YOUR HOME USE A LOT OF ALCOHOL/DRUGS?

- Yes
- No
- Does not apply

6. DO OTHER CHILDREN (UNDER 18 YEARS) IN THE HOME USE ALCOHOL/DRUGS?

- Yes
- No
- No other children in the home

**Section 10: This section is about criminal involvement in the family.**

1. ARE ANY MEMBERS OF YOUR FAMILY/HOUSEHOLD INVOLVED WITH THE COURT SYSTEM?

- No family members are involved
- A close family member has committed minor crimes
- A distant relative is heavily involved in the system
- A close family member has been imprisoned
- More than one member of the family has been involved

2. DO YOU EVER WORRY BECAUSE OF YOUR FAMILY'S INVOLVEMENT IN THE CRIMINAL COURT SYSTEM?

- Yes
- No
- Does not apply