

2013 Minnesota Student Survey Tables

Alternative Schools and Area Learning Centers

Fall 2013

**Minnesota Student Survey Interagency Team:
Minnesota Department of Education
Minnesota Department of Human Services
Minnesota Department of Health
Minnesota Department of Public Safety**

For more information contact:

**Sheila Oehrlein, Supervisor
Safety, Health and Nutrition, Minnesota Department of Education
ph: 651-582-8448 e: sheila.oehrlein@state.mn.us**

or

**Ann Kinney, Senior Research Scientist
Minnesota Center for Health Statistics, Minnesota Department of Health
ph: 651-201-5946 e: ann.kinney@state.mn.us**

In Appreciation

We are indebted to the students, parents, teachers, Minnesota Student Survey coordinators, principals and superintendents across the state that agreed to participate in and supported the student survey when it was administered in the first half of 2013. These data are made available as a result of their interest and time and we are grateful for their efforts.

We are also indebted to the many state agency staff, especially the analysts with the Minnesota Center for Health Statistics at the Minnesota Department of Health, for their tireless work on making these data available.

2013 MINNESOTA STUDENT SURVEY

Survey Participation

The 2013 Minnesota Student Survey was administered in the first half of 2013 to public school students in alternative schools and area learning centers. Students who were dually enrolled in alternative schools or area learning centers and regular public schools participated with their regular public schools. The Grade 9/11 survey version was used for students in grades 7-12 who participated in alternative schools and area learning centers.

All schools and districts that participated in the survey followed federal laws regarding parental notification as required by the Family Educational Rights and Privacy Act (FERPA) and the Protection of Pupil Rights Amendment (PPRA). PPRA requires that schools that participate in the survey notify parents of the survey administration, provide parents the opportunity to review the survey instrument, and allow parents to opt their child out of participating.

Mode of Administration

In 2013, for the first time, schools could choose to administer the survey by computer or by using the traditional paper and pencil survey. Each participating school had to choose one method or the other. Overall, 35% of all public school students took the survey by computer and 65% used the paper survey. The survey questions that students saw on their computer screens were the same as those in the paper survey booklets.

Researchers find that the mode of administration (in this case, computer or paper) may sometimes influence survey results in subtle ways. Students may feel that one method offers more privacy or anonymity than the other, or they may simply feel more comfortable with one method. The Minnesota Student Survey research team will be analyzing the results of the 2013 survey to see if they can detect any influence of the mode of administration on survey results.

Items on the Tables

The accompanying set of tables includes the responses for all survey items. Items are ordered within the tables according to meaningful domains; the order items appear on the tables is not necessarily the order they appeared in the survey. A Table of Contents is provided on pages v-vi.

New Questions and Year-to-Year Comparisons

Many of the 2013 survey instrument questions were changed from the 2010 survey instrument. While some questions stayed the same, other questions had updated or improved wording. Some entirely new questions were added and some questions were dropped. New questions are noted on each table. Caution must be used when making comparisons over time for any questions in which the wording has changed.

Please note that although these surveys are given repeatedly over time, student populations may change between administrations of the survey.

Validity of Responses

Approximately 5% of the surveys were eliminated from analyses because gender was missing, responses were highly inconsistent, or there was a pattern of likely exaggeration.

**2013 MINNESOTA STUDENT SURVEY
TABLE OF CONTENTS**

Table	Subject Area	Page
DEMOGRAPHICS		
Table 1	Demographic description	1
SCHOOL		
Table 2	School plans; IEP participation; Changing schools; Academic performance	2
Table 3	Feelings about school	3
Table 4	Feelings about school; Skipping school	4
Table 5	Time away from class	5
Table 6	Perceptions of safety; After school supervision	6
Table 7	Being bullied for specific reasons	7
Table 8	Victimization at school; Cyberbullying	8
Table 9	Being bullied or harassed at school	9
Table 10	Bullying or harassing other students at school	10
ACTIVITIES		
Table 11a-b	Use of time	11-12
Table 12a-b	Enrichment activities	13-14
Table 13	Reasons for participation in activities	15
FAMILY AND RELATIONSHIPS		
Table 14	Family composition and situations	16
Table 15	Parental communication	17
Table 16	Perceptions of family and others caring	18
RISK FACTORS		
Table 17	Family substance abuse; Physical and sexual violence	19
Table 18	Relationship violence	20
HEALTH AND SAFETY		
Table 19	General health and health conditions	21
Table 20	Health care access	22
Table 21	Physical activity; Sleep; Use of indoor tanning device	23
Table 22	Eating meals	24
Table 23a-b	Nutrition	25-26
Table 24	Vehicle safety	27
MENTAL HEALTH		
Table 25a-c	Self description	28-30
Table 26a-b	Emotional well-being and distress	31-32
Table 27	Self-inflicted injury; Suicidal thoughts and suicidal behavior	33
Table 28	Problematic and antisocial behavior	34

Continued on the next page

2013 MINNESOTA STUDENT SURVEY
TABLE OF CONTENTS, continued

Table	Subject Area	Page
SUBSTANCE USE		
Table 29	Summary of substance use	35
Table 30	Substance use among 5 th grade students	36
Table 31	Tobacco use	37
Table 32	Exposure to secondhand smoke	38
Table 33	Alcohol use frequency and quantity	39
Table 34	Access to alcohol	40
Table 35	Age of first use of alcohol and marijuana	41
Table 36	Use of marijuana and prescription drugs	42
Table 37	Prescription drug use	43
Table 38	Hallucinogen, ecstasy, cocaine and heroin use	44
Table 39	Methamphetamine, over-the-counter drug, synthetic drug and inhalant use	45
Table 40	Perceived risk of harm from substance use	46
Table 41	Perceptions of others' disapproval of substance use	47
Table 42	Feelings and perceptions of other's feelings about alcohol use	48
Table 43	Use of tobacco, alcohol and marijuana	49
Table 44	Perceptions of others' use of tobacco, alcohol and marijuana	50
Table 45a-b	Consequences of substance use	51-52
SEXUAL HEALTH AND PROTECTIVE FACTORS		
Table 46	Sexual orientation; Sexual behavior	53
Table 47	Sexual behavior	54
Table 48	Reasons for sexual abstinence	55

2013 Minnesota Student Survey

TABLE 1
DEMOGRAPHIC DESCRIPTION
Alternative Schools and Area Learning Centers

		Gender			
		Male		Female	
		N	%	N	%
Total number of surveys		1,072	100%	915	100%
Age	12	1	0%	1	0%
	13	5	0%	7	1%
	14	45	4%	32	3%
	15	108	10%	98	11%
	16	220	21%	209	23%
	17	339	32%	311	34%
	18	257	24%	187	20%
	19-20	92	9%	64	7%
	21 or older	2	0%	4	0%
	No answer	3	0%	2	0%
Are you a member of any of the following ethnic or cultural groups?[^] Hispanic or Latino/a	Yes	167	16%	133	15%
	No	817	76%	720	79%
	Not answered	88	8%	62	7%
Are you a member of any of the following ethnic or cultural groups?[^] Somali	Yes	13	1%	7	1%
	No	888	83%	789	86%
	Not answered	171	16%	119	13%
Are you a member of any of the following ethnic or cultural groups?[^] Hmong	Yes	19	2%	15	2%
	No	882	82%	780	85%
	Not answered	171	16%	120	13%
In addition, what is your race?[^] (If more than one describes you, mark ALL that apply)	American Indian only	51	5%	54	6%
	Asian only	40	4%	34	4%
	Black, African or African American only	116	11%	92	10%
	Native Hawaiian or Pacific Islander only	7	1%	7	1%
	White only	609	57%	525	57%
	Multiple Races (checked more than one)	142	13%	137	15%
	No answer	107	10%	66	7%

[^] New question in 2013.

2013 Minnesota Student Survey

TABLE 2
SCHOOL PLANS; IEP PARTICIPATION; CHANGING
SCHOOLS; ACADEMIC PERFORMANCE

Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
What is the MAIN thing you plan to do right AFTER high school?^	I don't plan to graduate from high school	2%	1%
	Get my GED	2%	3%
	Go to a two-year community or technical college	30%	30%
	Go to a four-year college or university	18%	31%
	Get a license or certificate in a career field	3%	8%
	Attend an apprenticeship program	1%	0%
	Join the military	12%	3%
	Work at a job	22%	16%
	Other	10%	7%
Do you have an IEP or get special education services?	Yes	16%	14%
	No	84%	86%
Since the beginning of this school year, how many times have you changed schools?	0 times	56%	57%
	1 time	33%	28%
	2 times	7%	10%
	3 or more times	4%	5%
How would you describe your grades this school year?^	Mostly As	11%	18%
	Mostly Bs	26%	38%
	Mostly Cs	31%	23%
	Mostly Ds	12%	6%
	Mostly Fs	4%	3%
	Mostly Incompletes	3%	4%
	None of these letter grades	13%	8%

^ New question in 2013.

2013 Minnesota Student Survey

TABLE 3
FEELINGS ABOUT SCHOOL[^]
Alternative Schools and Area Learning Centers

		Gender		
		Male	Female	
		%	%	
How often do you care about doing well in school?	All of the time	26%	36%	
	Most of the time	41%	45%	
	Some of the time	28%	17%	
	None of the time	4%	1%	
How often do you pay attention in class?	All of the time	13%	16%	
	Most of the time	54%	61%	
	Some of the time	30%	22%	
	None of the time	3%	2%	
How often do you go to class unprepared?	All of the time	6%	4%	
	Most of the time	13%	6%	
	Some of the time	51%	40%	
	None of the time	31%	49%	
How much do you agree or disagree with each of the following statements?	If something interests me, I try to learn more about it.	Strongly agree	57%	55%
		Agree	40%	43%
		Disagree	2%	2%
		Strongly disagree	1%	0%
	I think things I learn in school are useful.	Strongly agree	14%	15%
		Agree	55%	62%
		Disagree	27%	18%
		Strongly disagree	5%	4%
	Being a student is one of the most important parts of who I am.	Strongly agree	12%	17%
		Agree	37%	43%
		Disagree	36%	32%
		Strongly disagree	15%	8%

[^] All questions on this table were new in 2013.

2013 Minnesota Student Survey

**TABLE 4
FEELINGS ABOUT SCHOOL; SKIPPING SCHOOL[^]
Alternative Schools and Area Learning Centers**

			Gender	
			Male %	Female %
How much do you agree or disagree with each of the following statements?	Overall, adults at my school treat students fairly.	Strongly agree	29%	32%
		Agree	51%	47%
		Disagree	13%	16%
		Strongly disagree	7%	5%
	Adults at my school listen to the students.	Strongly agree	26%	31%
		Agree	54%	51%
		Disagree	15%	15%
		Strongly disagree	5%	4%
	The school rules are fair.	Strongly agree	22%	24%
		Agree	52%	51%
		Disagree	20%	19%
		Strongly disagree	6%	6%
	At my school, teachers care about students.	Strongly agree	30%	38%
		Agree	54%	53%
		Disagree	11%	7%
		Strongly disagree	4%	2%
	Most teachers at my school are interested in me as a person.	Strongly agree	23%	30%
		Agree	50%	47%
		Disagree	20%	18%
		Strongly disagree	6%	5%
During the last 30 days, how many times have you skipped school or cut classes, but NOT a full day of school, without being excused?	None	49%	49%	
	Once or twice	24%	24%	
	3 to 5 times	13%	15%	
	6 to 9 times	6%	6%	
	10 or more times	7%	6%	
During the last 30 days, how many times have you skipped school or cut a FULL day of school or classes, without being excused?	None	56%	51%	
	Once or twice	24%	27%	
	3 to 5 times	12%	13%	
	6 to 9 times	4%	5%	
	10 or more times	5%	4%	

[^] All questions on this table were new in 2013.

2013 Minnesota Student Survey

**TABLE 5
TIME AWAY FROM CLASS[^]**

Alternative Schools and Area Learning Centers

<i>During the last 30 days, how many times have you...</i>		Gender	
		Male	Female
		%	%
...gone to the nurses office?	None	77%	67%
	Once or twice	18%	23%
	3 to 5 times	3%	7%
	6 to 9 times	1%	2%
	10 or more times	1%	1%
...stayed home because you were sick?	None	42%	31%
	Once or twice	43%	43%
	3 to 5 times	11%	20%
	6 to 9 times	3%	4%
	10 or more times	1%	2%
...been sent to the office for discipline?	None	75%	84%
	Once or twice	18%	11%
	3 to 5 times	5%	4%
	6 to 9 times	1%	1%
	10 or more times	1%	0%
...had in-school suspension (ISS)?	None	92%	94%
	Once or twice	5%	5%
	3 to 5 times	2%	1%
	6 to 9 times	1%	0%
	10 or more times	0%	0%
...been suspended from school (out-of-school suspension/ OSS)?	None	88%	92%
	Once or twice	9%	6%
	3 to 5 times	2%	1%
	6 to 9 times	1%	0%
	10 or more times	1%	0%

[^] All questions on this table were new in 2013.

2013 Minnesota Student Survey

TABLE 6
PERCEPTIONS OF SAFETY; AFTER SCHOOL SUPERVISION
Alternative Schools and Area Learning Centers

			Gender	
			Male	Female
			%	%
How much do you agree or disagree with each of the following statements?	I feel safe going to and from school.	Strongly agree	53%	50%
		Agree	43%	45%
		Disagree	3%	4%
		Strongly disagree	1%	1%
	I feel safe at school.	Strongly agree	45%	45%
		Agree	46%	47%
		Disagree	7%	6%
		Strongly disagree	3%	2%
	I feel safe in my neighborhood.	Strongly agree	52%	46%
		Agree	41%	44%
		Disagree	5%	8%
		Strongly disagree	2%	1%
	I feel safe at home.^	Strongly agree	60%	55%
		Agree	35%	39%
		Disagree	4%	4%
		Strongly disagree	1%	2%
Where do you usually GO after school?^ (Mark all that apply)	I stay at my school or go to another school		11%	9%
	Your home or another home such as a friend's, relative's or neighbor's		83%	91%
	A rec, community or other youth center		8%	4%
	A park or other outdoor space		16%	10%
	A library		4%	4%
	A church, synagogue, mosque, or other spiritual/religious place		3%	3%
	A job		27%	28%
	Some other place, such as a mall or movie theatre		19%	23%
During a typical week, how often are you home alone or somewhere unsupervised after school?	0 days		28%	28%
	1 day		11%	13%
	2 days		13%	11%
	3 days		10%	14%
	4 days		7%	7%
	5 days		31%	27%

^ New question in 2013.

2013 Minnesota Student Survey

**TABLE 7
BEING BULLIED FOR SPECIFIC REASONS[^]
Alternative Schools and Area Learning Centers**

<i>During the last 30 days, how often have other students harassed or bullied you for any of the following reasons?</i>	Gender		
	Male	Female	
	%	%	
Your race, ethnicity or national origin	Never	90%	91%
	Once or twice	6%	8%
	About once a week	1%	1%
	Several times a week	1%	0%
	Every day	1%	0%
Your religion	Never	94%	95%
	Once or twice	4%	4%
	About once a week	1%	1%
	Several times a week	1%	0%
	Every day	1%	0%
Your gender (being male or female)	Never	96%	92%
	Once or twice	2%	6%
	About once a week	1%	1%
	Several times a week	0%	0%
	Every day	1%	1%
Because you are gay or lesbian or because someone thought you were	Never	94%	91%
	Once or twice	3%	6%
	About once a week	1%	1%
	Several times a week	1%	1%
	Every day	1%	1%
A physical or mental disability	Never	94%	95%
	Once or twice	2%	3%
	About once a week	2%	1%
	Several times a week	1%	1%
	Every day	1%	0%
Your weight or physical appearance	Never	84%	76%
	Once or twice	9%	16%
	About once a week	3%	4%
	Several times a week	1%	3%
	Every day	2%	2%

[^] All questions on this table were new in 2013.

2013 Minnesota Student Survey

TABLE 8
VICTIMIZATION AT SCHOOL; CYBERBULLYING[^]
Alternative Schools and Area Learning Centers

			Gender	
			Male	Female
			%	%
During the last 30 days, on how many days have other students at school...	...stolen or deliberately damaged your property such as clothing, books or car?	0 days	88%	90%
		1 day	7%	6%
		2 or 3 days	3%	3%
		4 or 5 days	1%	1%
		6 or more days	2%	1%
	...offered, sold or given you an illegal drug?	0 days	78%	79%
		1 day	5%	7%
		2 or 3 days	5%	7%
		4 or 5 days	3%	2%
		6 or more days	9%	6%
	...threatened or injured you with a weapon (gun, knife, club, etc.)?	0 days	93%	95%
		1 day	3%	3%
		2 or 3 days	2%	1%
		4 or 5 days	1%	0%
		6 or more days	1%	1%
During the last 30 days, how often have you been bullied through e-mail, chat rooms, instant messaging, websites or texting?	Never	89%	76%	
	Once or twice	6%	18%	
	About once a week	1%	4%	
	Several times a week	2%	2%	
	Every day	2%	1%	

[^] All questions on this table were new in 2013.

2013 Minnesota Student Survey

TABLE 9
BEING BULLIED OR HARASSED AT SCHOOL[^]
Alternative Schools and Area Learning Centers

<i>During the last 30 days, how often have other students at school...</i>		Gender	
		Male	Female
		%	%
...pushed, shoved, slapped, hit or kicked you when they weren't kidding around?	Never	91%	92%
	Once or twice	6%	6%
	About once a week	1%	1%
	Several times a week	0%	1%
	Every day	1%	1%
...threatened to beat you up?	Never	88%	90%
	Once or twice	8%	8%
	About once a week	2%	1%
	Several times a week	1%	1%
	Every day	1%	1%
...spread mean rumors or lies about you?	Never	84%	71%
	Once or twice	10%	20%
	About once a week	3%	5%
	Several times a week	1%	2%
	Every day	2%	2%
...made sexual jokes, comments or gestures towards you?	Never	85%	72%
	Once or twice	8%	17%
	About once a week	2%	4%
	Several times a week	1%	4%
	Every day	4%	3%
...excluded you from friends, other students or activities?	Never	89%	82%
	Once or twice	6%	11%
	About once a week	2%	2%
	Several times a week	1%	2%
	Every day	1%	2%

[^] All questions on this table were new in 2013.

2013 Minnesota Student Survey

TABLE 10
BULLYING OR HARASSING OTHER STUDENTS AT SCHOOL^
Alternative Schools and Area Learning Centers

			Gender	
			Male %	Female %
During the last 30 days, how many times at school have YOU...^	...pushed, shoved slapped, hit or kicked someone when you weren't kidding around?	Never	88%	94%
		Once or twice	8%	5%
		About once a week	1%	0%
		Several times a week	1%	0%
		Every day	1%	1%
	...threatened or beat someone up?	Never	85%	88%
		Once or twice	11%	10%
		About once a week	2%	1%
		Several times a week	1%	1%
		Every day	2%	1%
	...spread mean rumors or lies about someone else?	Never	94%	93%
		Once or twice	3%	6%
		About once a week	1%	1%
		Several times a week	1%	0%
		Every day	1%	1%
	...made sexual jokes, comments or gestures towards someone else?	Never	86%	91%
		Once or twice	7%	6%
		About once a week	2%	1%
		Several times a week	2%	1%
		Every day	3%	1%
...excluded someone from friends, other students or activities?	Never	93%	92%	
	Once or twice	3%	7%	
	About once a week	0%	0%	
	Several times a week	1%	0%	
	Every day	2%	1%	
During the last 30 days, on how many days did you carry a weapon such as a gun, knife, or club ON SCHOOL PROPERTY?	0 days	89%	96%	
	1 day	3%	2%	
	2 or 3 days	2%	1%	
	4 or 5 days	1%	0%	
	6 or more days	5%	2%	

^ All questions on this table were new in 2013.

2013 Minnesota Student Survey

**TABLE 11A
USE OF TIME[^]**

Alternative Schools and Area Learning Centers

<i>During a typical school day, how many hours do you do each of the following outside of school?</i>		Gender	
		Male	Female
		%	%
Study or do homework	0 hours	61%	49%
	1 hour	26%	34%
	2 hours	8%	12%
	3 to 5 hours	3%	4%
	6 or more hours	1%	1%
Read for pleasure	0 hours	70%	57%
	1 hour	20%	26%
	2 hours	6%	9%
	3 to 5 hours	3%	5%
	6 or more hours	2%	3%
Do creative things such as music or arts and crafts	0 hours	40%	30%
	1 hour	26%	31%
	2 hours	14%	19%
	3 to 5 hours	10%	11%
	6 or more hours	9%	9%
Go outside, take a walk or go for a bike ride	0 hours	31%	39%
	1 hour	29%	33%
	2 hours	18%	17%
	3 to 5 hours	12%	7%
	6 or more hours	10%	4%
During a typical week, how many hours do you work for pay outside of the regular school day?	0 hours	47%	54%
	1 to 2 hours	7%	7%
	3 to 5 hours	10%	8%
	6 to 10 hours	8%	7%
	11 to 20 hours	10%	13%
	21 to 30 hours	10%	8%
	31 or more hours	8%	4%

[^] All questions on this table were new in 2013.

2013 Minnesota Student Survey

**TABLE 11B
USE OF TIME[^]**

Alternative Schools and Area Learning Centers

<i>During a typical school day, how many hours do you do each of the following outside of school?</i>		Gender	
		Male	Female
		%	%
Watch TV shows, movies or videos on a TV, computer or phone	0 hours	10%	10%
	1 hour	26%	22%
	2 hours	26%	24%
	3 to 5 hours	21%	23%
	6 or more hours	17%	21%
Talk on the phone or use an app	0 hours	23%	14%
	1 hour	29%	24%
	2 hours	21%	17%
	3 to 5 hours	11%	19%
	6 or more hours	16%	27%
Text	0 hours	18%	11%
	1 hour	25%	15%
	2 hours	14%	11%
	3 to 5 hours	12%	14%
	6 or more hours	31%	49%
Play video or online games	0 hours	26%	58%
	1 hour	22%	21%
	2 hours	18%	10%
	3 to 5 hours	16%	5%
	6 or more hours	18%	6%
Use the computer	0 hours	32%	35%
	1 hour	29%	27%
	2 hours	15%	16%
	3 to 5 hours	9%	9%
	6 or more hours	15%	13%

[^] All questions on this table were new in 2013.

2013 Minnesota Student Survey

**TABLE 12A
ENRICHMENT ACTIVITIES[^]**

Alternative Schools and Area Learning Centers

			Gender	
			Male	Female
			%	%
Does your school or community offer a variety of programs for people your age to participate in outside of the regular school day?	Yes		31%	33%
	No		17%	16%
	I don't know what programs are available in my community		52%	51%
During a typical week, how often do you participate in the following activities outside of the regular school day?	Club or community sports teams, such as park and rec teams, in-house teams or traveling teams	0 days	88%	92%
		1 day	4%	4%
		2 days	3%	2%
		3 to 4 days	1%	1%
		5 or more days	4%	1%
	School sports teams	0 days	88%	93%
		1 day	4%	1%
		2 days	2%	2%
		3 to 4 days	2%	1%
		5 or more days	4%	2%
	School sponsored activities or clubs that are not sports, such as drama, music, chess or science club	0 days	92%	95%
		1 day	4%	4%
		2 days	2%	1%
		3 to 4 days	0%	1%
		5 or more days	1%	0%

[^] All questions on this table were new in 2013.

2013 Minnesota Student Survey

**TABLE 12B
ENRICHMENT ACTIVITIES[^]**

Alternative Schools and Area Learning Centers

<i>During a typical week, how often do you participate in the following activities outside of the regular school day?</i>		Gender	
		Male	Female
		%	%
Tutoring, homework help or academic programs	0 days	93%	95%
	1 day	4%	3%
	2 days	2%	1%
	3 to 4 days	1%	1%
	5 or more days	0%	0%
Leadership activities such as student government, youth councils or committees	0 days	94%	94%
	1 day	3%	4%
	2 days	2%	2%
	3 to 4 days	1%	0%
	5 or more days	1%	0%
Lessons, such as music, dance, tennis or karate lessons	0 days	92%	91%
	1 day	4%	3%
	2 days	1%	4%
	3 to 4 days	1%	1%
	5 or more days	2%	1%
Other community clubs and programs such as 4-H, Scouts, Y-clubs or Community Ed	0 days	93%	96%
	1 day	4%	1%
	2 days	2%	1%
	3 to 4 days	1%	1%
	5 or more days	1%	0%
Religious activities such as religious services, education or youth group	0 days	89%	86%
	1 day	7%	9%
	2 days	2%	4%
	3 to 4 days	1%	1%
	5 or more days	1%	0%

[^] All questions on this table were new in 2013.

2013 Minnesota Student Survey

TABLE 13
REASONS FOR PARTICIPATION IN ACTIVITIES
Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
What are the reasons you don't participate in activities, programs or clubs outside of the regular school day? (Mark all that apply)	I do not know what is available in my community	33%	32%
	Activities are not available in my community	6%	4%
	Activities cost too much	20%	30%
	My parents (or guardians) won't let me	3%	5%
	My friends are not there	18%	23%
	I am not interested	59%	55%
	I am too busy with other things, such as a job or homework	29%	37%
	I don't have a way to get there or home	15%	26%
	I have to take care of other family members	6%	15%
	It is not a safe place	2%	1%
	Other	25%	21%

2013 Minnesota Student Survey

TABLE 14
FAMILY COMPOSITION AND SITUATIONS
Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
Which adults do you live with?	Both biological parents	31%	27%
	Both adoptive parents	1%	1%
	Mother and stepfather	9%	8%
	Father and stepmother	2%	2%
	Mother and partner	3%	4%
	Father and partner	0%	0%
	Mother only	30%	33%
	Father only	8%	8%
	Sometimes with mother, sometimes with father	3%	1%
	Other (relatives, foster care, etc)	9%	13%
	No Adults	4%	3%
During the past 12 months, have you stayed in a shelter, somewhere not intended as a place to live, or someone else's home because you had no other place to stay?^	No	85%	84%
	Yes, with my parents or an adult family member	8%	7%
	Yes, on my own without any adult family members	8%	10%
Have any of your parents or guardians ever been in jail or prison?^	None of my parents or guardians has ever been in jail or prison	59%	54%
	Yes, I have a parent or guardian in jail or prison right now	7%	6%
	Yes, I have had a parent or guardian in jail or prison in the past	36%	42%

^ New question in 2013.

2013 Minnesota Student Survey

TABLE 15
PARENTAL COMMUNICATION
Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
Can you talk to your father about problems you are having?	Yes, most of the time	31%	21%
	Yes, some of the time	18%	20%
	No, not very often	15%	16%
	No, not at all	12%	15%
	My father is not around	23%	27%
Can you talk to your mother about problems you are having?	Yes, most of the time	44%	42%
	Yes, some of the time	26%	27%
	No, not very often	14%	15%
	No, not at all	10%	9%
	My mother is not around	6%	7%

2013 Minnesota Student Survey

TABLE 16
PERCEPTIONS OF FAMILY AND OTHERS CARING
Alternative Schools and Area Learning Centers

<i>How much do you feel ...</i>		Gender	
		Male	Female
		%	%
... your parents care about you?	Not at all	5%	5%
	A little	7%	9%
	Some	12%	14%
	Quite a bit	23%	21%
	Very much	53%	52%
... other adult relatives care about you?	Not at all	5%	7%
	A little	9%	13%
	Some	17%	21%
	Quite a bit	33%	25%
	Very much	35%	34%
... friends care about you?	Not at all	5%	4%
	A little	7%	11%
	Some	25%	21%
	Quite a bit	36%	33%
	Very much	27%	31%
... teachers/ other adults at school care about you?	Not at all	13%	10%
	A little	18%	19%
	Some	34%	30%
	Quite a bit	23%	25%
	Very much	12%	16%
... adults in your community care about you?	Not at all	33%	35%
	A little	24%	23%
	Some	23%	22%
	Quite a bit	11%	13%
	Very much	9%	8%

2013 Minnesota Student Survey

**TABLE 17
FAMILY SUBSTANCE ABUSE; PHYSICAL AND
SEXUAL VIOLENCE**

Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
Do you live with anyone who drinks too much alcohol? [^]	Yes	17%	21%
	No	83%	79%
Do you live with anyone who uses illegal drugs or abuses prescription drugs? [^]	Yes	15%	21%
	No	85%	79%
Does a parent or other adult in your home regularly swear at you, insult you or put you down? [^]	Yes	20%	26%
	No	80%	74%
Has a parent or other adult in your household ever hit, beat, kicked or physically hurt you in any way? [^]	Yes	21%	25%
	No	79%	75%
Have your parents or other adults in your home ever slapped, hit, kicked, punched or beat each other up? [^]	Yes	14%	21%
	No	86%	79%
Has any adult or other person outside of the family ever touched you sexually against your wishes or forced you to touch them sexually?	Yes	4%	21%
	No	96%	79%
Has any older or stronger member of your family ever touched you or had you touch them sexually?	Yes	3%	14%
	No	97%	86%

[^] New question in 2013.

2013 Minnesota Student Survey

**TABLE 18
RELATIONSHIP VIOLENCE[^]**

Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
Have you ever had a boyfriend or girlfriend in a dating or serious relationship who called you names or put you down verbally?	Yes	18%	45%
	No	82%	55%
Have you ever had a boyfriend or girlfriend in a dating or serious relationship who hit, slapped or physically hurt you on purpose?	Yes	13%	26%
	No	87%	74%
Have you ever had a boyfriend or girlfriend in a dating or serious relationship who pressured you into having sex when you did not want to?	Yes	10%	28%
	No	90%	72%
Have YOU ever done any of the following to a boyfriend or girlfriend in a dating or serious relationship: called him/her names or put him/her down verbally?	Yes	13%	28%
	No	87%	72%
Have YOU ever done any of the following to a boyfriend or girlfriend in a dating or serious relationship: hit, slapped or physically hurt him/her on purpose?	Yes	3%	16%
	No	97%	84%
Have YOU ever done any of the following to a boyfriend or girlfriend in a dating or serious relationship: pressured him/her into having sex when he/she did not want to?	Yes	7%	4%
	No	93%	96%

[^] All questions on this table were new in 2013.

2013 Minnesota Student Survey

TABLE 19
GENERAL HEALTH AND HEALTH CONDITIONS
Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
How would you describe your health in general?^	Excellent	20%	11%
	Very good	28%	22%
	Good	34%	40%
	Fair	14%	21%
	Poor	3%	6%
Do you have any physical disabilities, or long-term health problems (such as asthma, cancer, diabetes, epilepsy or something else)? Long-term means lasting 6 months or more.^	Yes	14%	21%
	No	86%	79%
Has a doctor or nurse ever told you that you have asthma?	Yes	19%	26%
	No	81%	74%
Has a doctor or nurse ever told you that you have diabetes?^	Yes	2%	1%
	No	98%	99%
Has a doctor or nurse ever told you that you have pre-diabetes?^	Yes	3%	3%
	No	97%	97%
Has a doctor or nurse ever told you that you have an allergy that requires you to carry an epi-pen?^	Yes	4%	4%
	No	96%	96%
Do you have any long-term mental health, behavioral or emotional problems? Long-term means lasting 6 months or more.^	Yes	21%	40%
	No	79%	60%
How would YOU describe your weight?	Underweight	12%	9%
	About the right weight	69%	53%
	Overweight	19%	38%
Weight status according to Body Mass Index (BMI)**	Not overweight	68%	67%
	Overweight	16%	20%
	Obese	16%	14%

^ New question in 2013.

** Body Mass Index (BMI) is a number calculated from a child's self-reported weight and height. BMI is calculated using a standard formula. BMI-for-age percentiles are used to interpret BMI numbers for children and teens. CDC BMI-for-age growth charts were used to determine weight status according to BMI for participants in the Minnesota Student Survey.

Not overweight: Less than the 85th percentile
 Overweight: 85th to less than the 95th percentile
 Obese: Equal to or greater than the 95th percentile

2013 Minnesota Student Survey

**TABLE 20
HEALTH CARE ACCESS**

Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
When was the last time you saw a doctor or nurse for a check-up or physical exam when you were not sick or injured?	During the last year	56%	68%
	Between 1 and 2 years ago	27%	19%
	More than 2 years ago	12%	9%
	Never	5%	4%
When was the last time you saw a dentist or dental hygienist for a regular check-up, exam or teeth cleaning or other dental work?^	During the last year	59%	61%
	Between 1 and 2 years ago	22%	22%
	More than 2 years ago	14%	15%
	Never	4%	2%
Have you ever been treated for a mental health, emotional or behavioral problem? (Mark ALL that apply)	No	73%	56%
	Yes, during the last year	14%	28%
	Yes, more than a year ago	16%	23%
Have you ever been treated for an alcohol or drug problem? (Mark ALL that apply)	No	82%	83%
	Yes, during the last year	13%	9%
	Yes, more than a year ago	7%	9%

^ New question in 2013.

2013 Minnesota Student Survey

**TABLE 21
PHYSICAL ACTIVITY; SLEEP; USE OF INDOOR
TANNING DEVICE[^]**

Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
During the last 7 days, on how many days were you physically active for a total of AT LEAST 60 MINUTES PER DAY?	0 days	17%	25%
	1 day	9%	13%
	2 days	11%	19%
	3 days	14%	15%
	4 days	11%	9%
	5 days	11%	9%
	6 days	6%	3%
	7 days	20%	9%
During a typical school week, on how many days do you go to physical education (PE or gym) classes?	0 days	67%	75%
	1 day	4%	3%
	2 days	3%	4%
	3 days	4%	4%
	4 days	2%	2%
	5 days	20%	13%
During a typical school night, how many hours of sleep do you get?	4 hours or less	13%	11%
	5 hours	17%	15%
	6 hours	23%	23%
	7 hours	25%	27%
	8 hours	16%	16%
	9 hours	3%	5%
	10 or more hours	2%	3%
During the last 12 months, how many times did you use an indoor tanning device such as a sunlamp, sunbed or tanning booth?	0 times	94%	73%
	1 or 2 times	3%	8%
	3 to 9 times	1%	8%
	10 to 19 times	1%	5%
	20 to 39 times	1%	4%
	40 or more times	0%	2%

[^] All questions on this table were new in 2013.

2013 Minnesota Student Survey

**TABLE 22
EATING MEALS**

Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
During the last 7 days, on how many days did you eat breakfast?^	0 days	19%	15%
	1 day	8%	11%
	2 days	15%	15%
	3 days	13%	14%
	4 days	11%	11%
	5 days	9%	11%
	6 days	5%	3%
	7 days	20%	21%
During the last 30 days, have you had to skip meals because your family did not have enough money to buy food?^	Yes	14%	16%
	No	86%	84%
During a typical school week, where do you usually get your lunch?^ (Mark ALL that apply)	I usually don't eat lunch	26%	31%
	Regular school lunch from the cafeteria	58%	56%
	The a la carte line (buy individual items)	4%	2%
	School store or vending machine	7%	11%
	Fast food restaurant, gas station or somewhere else outside of school	23%	19%
	I bring lunch from home	10%	14%
Do you currently get free or reduced-price lunch at school?	Yes	54%	60%
	No	46%	40%

^ New question in 2013.

2013 Minnesota Student Survey

**TABLE 23A
NUTRITION[^]**

Alternative Schools and Area Learning Centers

During the last 7 days, how many times did you...		Gender	
		Male	Female
		%	%
During the last 7 days, how many times did you drink 100% fruit juices such as orange, apple or grape juice?	I did NOT eat or drink this	22%	20%
	1 to 3 times in the last 7 days	39%	43%
	4 to 6 times in the last 7 days	15%	13%
	1 time per day	7%	6%
	2 times per day	7%	7%
	3 times per day	3%	4%
	4 or more times per day	7%	6%
During the last 7 days, how many times did you eat fruit?	I did NOT eat or drink this	19%	14%
	1 to 3 times in the last 7 days	35%	40%
	4 to 6 times in the last 7 days	17%	18%
	1 time per day	12%	11%
	2 times per day	6%	9%
	3 times per day	4%	4%
	4 or more times per day	6%	5%
During the last 7 days, how many times did you eat green salad, potatoes, carrots or other vegetables (Do not count French fries, fried potatoes, or potato chips)?	I did NOT eat or drink this	22%	15%
	1 to 3 times in the last 7 days	34%	36%
	4 to 6 times in the last 7 days	17%	21%
	1 time per day	14%	14%
	2 times per day	6%	8%
	3 times per day	3%	3%
	4 or more times per day	5%	3%
During the last 7 days, how many times did you eat from a fast food restaurant, including carry-out or delivery?	I did NOT eat or drink this	22%	18%
	1 to 3 times in the last 7 days	50%	56%
	4 to 6 times in the last 7 days	14%	14%
	1 time per day	8%	5%
	2 times per day	3%	3%
	3 times per day	1%	2%
	4 or more times per day	2%	2%

[^] All questions on this table were new in 2013.

2013 Minnesota Student Survey

**TABLE 23B
NUTRITION**

Alternative Schools and Area Learning Centers

How many cans, bottles or glasses of each of the following did you drink yesterday?		Gender	
		Male	Female
		%	%
Milk	0	30%	42%
	1 to 2	47%	42%
	3 to 4	14%	10%
	5 to 6	5%	3%
	7 or more	5%	2%
Pop or soda	0	29%	37%
	1 to 2	43%	41%
	3 to 4	15%	15%
	5 to 6	7%	4%
	7 or more	7%	4%
Sports drinks, such as Gatorade or Powerade	0	61%	69%
	1 to 2	24%	22%
	3 to 4	8%	6%
	5 to 6	4%	2%
	7 or more	3%	1%
Energy drinks, such as Red Bull or Jolt[^]	0	71%	80%
	1 to 2	20%	14%
	3 to 4	4%	3%
	5 to 6	2%	2%
	7 or more	3%	1%
Other sugar-sweetened drinks, such as sweet tea, lemonade, coffee drinks or juice drinks[^]	0	41%	36%
	1 to 2	37%	41%
	3 to 4	15%	16%
	5 to 6	3%	4%
	7 or more	3%	3%
Water	0	9%	8%
	1 to 2	25%	27%
	3 to 4	21%	26%
	5 to 6	18%	15%
	7 or more	26%	24%

[^] New question in 2013.

2013 Minnesota Student Survey

**TABLE 24
VEHICLE SAFETY**

Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
When driving a car, how often do you wear a seat belt?	I don't drive a car	34%	40%
	I never do this	4%	1%
	Sometimes	9%	6%
	Often	9%	7%
	Always	45%	46%
When driving a car, how often do you read incoming text messages or emails?^	I don't drive a car	39%	46%
	I never do this	22%	23%
	Sometimes	24%	18%
	Often	8%	8%
	Always	7%	6%
When driving a car, how often do you send text messages or emails?^	I don't drive a car	39%	47%
	I never do this	27%	25%
	Sometimes	20%	17%
	Often	7%	6%
	Always	7%	5%
When driving a car, how often do you make or answer a phone call?^	I don't drive a car	38%	46%
	I never do this	12%	14%
	Sometimes	26%	21%
	Often	14%	11%
	Always	10%	7%
How often do you wear a seat belt when you ride in the FRONT seat of a car?^	I don't ride in the front seat	1%	0%
	Always	67%	71%
	Often	15%	16%
	Sometimes	12%	9%
	I never wear a seatbelt	4%	2%
How often do you wear a seat belt when you ride in the BACK seat of a car?^	I don't ride in the back seat	6%	5%
	Always	43%	45%
	Often	16%	19%
	Sometimes	22%	24%
	I never wear a seatbelt	12%	8%

^ New question in 2013.

2013 Minnesota Student Survey

**TABLE 25A
SELF DESCRIPTION[^]**

Alternative Schools and Area Learning Centers

<i>In general, how does each of the following statements describe you?</i>		Gender	
		Male	Female
		%	%
I feel in control of my life and future.	Not at all or rarely	9%	11%
	Somewhat or sometimes	29%	34%
	Very or often	35%	30%
	Extremely or almost always	28%	25%
I feel good about myself.	Not at all or rarely	7%	20%
	Somewhat or sometimes	28%	37%
	Very or often	40%	26%
	Extremely or almost always	25%	17%
I feel good about my future.	Not at all or rarely	11%	14%
	Somewhat or sometimes	33%	34%
	Very or often	32%	30%
	Extremely or almost always	25%	22%
I deal with disappointment without getting too upset.	Not at all or rarely	13%	24%
	Somewhat or sometimes	36%	41%
	Very or often	34%	25%
	Extremely or almost always	17%	10%
I find good ways to deal with things that are hard in my life.	Not at all or rarely	13%	19%
	Somewhat or sometimes	35%	43%
	Very or often	35%	26%
	Extremely or almost always	18%	12%
I am thinking about what my purpose is in life.	Not at all or rarely	12%	12%
	Somewhat or sometimes	27%	27%
	Very or often	33%	30%
	Extremely or almost always	28%	31%

[^] All questions on this table were new in 2013. These items are adapted from the Developmental Assets Profile (DAP) under a license agreement with Search Institute, Minneapolis, MN.

2013 Minnesota Student Survey

**TABLE 25B
SELF DESCRIPTION[^]**

Alternative Schools and Area Learning Centers

<i>In general, how does each of the following statements describe you?</i>		Gender	
		Male	Female
		%	%
I say no to things that are dangerous or unhealthy.	Not at all or rarely	15%	15%
	Somewhat or sometimes	38%	37%
	Very or often	26%	24%
	Extremely or almost always	21%	23%
I build friendships with other people.	Not at all or rarely	9%	13%
	Somewhat or sometimes	29%	34%
	Very or often	40%	33%
	Extremely or almost always	23%	19%
I express my feelings in proper ways.	Not at all or rarely	16%	18%
	Somewhat or sometimes	37%	43%
	Very or often	31%	28%
	Extremely or almost always	15%	11%
I plan ahead and make good choices.	Not at all or rarely	14%	16%
	Somewhat or sometimes	39%	43%
	Very or often	33%	27%
	Extremely or almost always	14%	14%
I stay away from bad influences.	Not at all or rarely	21%	22%
	Somewhat or sometimes	39%	39%
	Very or often	23%	22%
	Extremely or almost always	17%	17%
I resolve conflicts without anyone getting hurt.	Not at all or rarely	13%	12%
	Somewhat or sometimes	36%	39%
	Very or often	33%	32%
	Extremely or almost always	18%	18%

[^] All questions on this table were new in 2013. These items are adapted from the Developmental Assets Profile (DAP) under a license agreement with Search Institute, Minneapolis, MN.

2013 Minnesota Student Survey

**TABLE 25C
SELF DESCRIPTION[^]**

Alternative Schools and Area Learning Centers

<i>In general, how does each of the following statements describe you?</i>		Gender	
		Male	Female
		%	%
I accept people who are different from me.	Not at all or rarely	5%	4%
	Somewhat or sometimes	17%	13%
	Very or often	40%	26%
	Extremely or almost always	38%	57%
I am sensitive to the needs and feelings of others.	Not at all or rarely	12%	8%
	Somewhat or sometimes	32%	24%
	Very or often	34%	34%
	Extremely or almost always	22%	34%
I feel valued and appreciated by others.	Not at all or rarely	11%	18%
	Somewhat or sometimes	37%	41%
	Very or often	37%	26%
	Extremely or almost always	14%	14%
I am included in family tasks and decisions.	Not at all or rarely	15%	19%
	Somewhat or sometimes	33%	33%
	Very or often	35%	29%
	Extremely or almost always	16%	19%
I am given useful roles and responsibilities.	Not at all or rarely	13%	12%
	Somewhat or sometimes	32%	32%
	Very or often	37%	35%
	Extremely or almost always	18%	21%

[^] All questions on this table were new in 2013. These items are adapted from the Developmental Assets Profile (DAP) under a license agreement with Search Institute, Minneapolis, MN.

2013 Minnesota Student Survey

TABLE 26A EMOTIONAL WELL-BEING AND DISTRESS[^]

Alternative Schools and Area Learning Centers

<i>During the last 12 months, have you had SIGNIFICANT problems with...</i>		Gender	
		Male	Female
		%	%
...feeling very trapped, lonely, sad, blue, depressed or hopeless about the future?	Yes	38%	63%
	No	62%	37%
...sleep trouble, such as bad dreams, sleeping restlessly or falling asleep during the day?	Yes	43%	69%
	No	57%	31%
...feeling very anxious, nervous, tense, scared, panicked or like something bad was going to happen?	Yes	37%	67%
	No	63%	33%
...becoming very distressed and upset when something reminded you of the past?	Yes	40%	70%
	No	60%	30%
...thinking about ending your life or committing suicide?	Yes	19%	35%
	No	81%	65%

[^] All questions on this table were new in 2013. Items are adapted from the GAIN Short Screener (GAIN-SS) under a license agreement with Chestnut Health Systems, Inc.

Question introduction reads: This question asks about SIGNIFICANT problems. Problems are considered significant when you have them for two or more weeks, when they keep coming back, keep you from meeting your responsibilities, or make you feel like you can't go on.

2013 Minnesota Student Survey

**TABLE 26B
EMOTIONAL WELL-BEING AND DISTRESS**

Alternative Schools and Area Learning Centers

The data included in this table are based on questions that appear only in the Level I (5th grade) version of the 2013 Minnesota Student Survey.

Students in Alternative Schools and Area Learning Centers completed the Level III (9th-12th grade) version of the survey.

2013 Minnesota Student Survey

TABLE 27
SELF-INFLICTED INJURY; SUICIDAL THOUGHTS AND SUICIDAL BEHAVIOR[^]
Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
During the last 12 months, how many times did you do something to purposely hurt or injure yourself without wanting to die, such as cutting, burning, or bruising yourself on purpose?	0 times	82%	63%
	1 or 2 times	8%	13%
	3 to 5 times	4%	7%
	6 to 9 times	2%	5%
	10 to 19 times	2%	4%
	20 or more times	3%	8%
Have you ever seriously considered attempting suicide? (Mark all that apply)	No	70%	50%
	Yes, during the last year	15%	29%
	Yes, more than a year ago	18%	33%
Have you ever actually attempted suicide? (Mark all that apply)	No	84%	70%
	Yes, during the last year	7%	14%
	Yes, more than a year ago	11%	20%

[^] All questions on this table were new in 2013.

2013 Minnesota Student Survey

TABLE 28
PROBLEMATIC AND ANTISOCIAL BEHAVIOR
Alternative Schools and Area Learning Centers

<i>During the last 12 months...</i>			Gender	
			Male	Female
			%	%
...did you do any of the following TWO OR MORE TIMES?^	Lie or con to get things you wanted or to avoid having to do something	Yes	57%	56%
		No	43%	44%
	Have a hard time paying attention at school, work or home	Yes	62%	71%
		No	38%	29%
	Have a hard time listening to instructions at school, work or home	Yes	50%	55%
		No	50%	45%
	Be a bully or threaten other people	Yes	14%	12%
		No	86%	88%
	Start fights with other people	Yes	19%	16%
		No	81%	84%
...run away from home?	Never		81%	76%
	Once or twice		14%	19%
	3 to 5 times		3%	3%
	6 to 9 times		1%	1%
	10 or more times		1%	1%
...damaged or destroyed property?	Never		62%	75%
	Once or twice		24%	18%
	3 to 5 times		8%	5%
	6 to 9 times		2%	2%
	10 or more times		3%	1%
...hit or beat up another person?	Never		69%	78%
	Once or twice		20%	17%
	3 to 5 times		7%	3%
	6 to 9 times		1%	1%
	10 or more times		3%	1%
...taken something from a store without paying for it?	Never		68%	68%
	Once or twice		17%	18%
	3 to 5 times		5%	7%
	6 to 9 times		4%	3%
	10 or more times		5%	5%

^ New questions in 2013. Items are adapted from the GAIN Short Screener (GAIN-SS) under a license agreement with Chestnut Health Systems, Inc.

2013 Minnesota Student Survey

**TABLE 29
SUMMARY OF SUBSTANCE USE ***

Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
Use of any tobacco products during the past 30 days	No	41%	43%
	Yes	59%	57%
Frequent (20+ days) use of any tobacco products during the past 30 days	No	65%	65%
	Yes	35%	35%
Frequent binge drinking in the past year (typically drank 5 or more drinks at a time and drank on 10 or more occasions during the past year)	No	82%	89%
	Yes	18%	11%
Any alcohol and/or other drug use during the past year (excluding tobacco)	No alcohol or marijuana or other drug use in the past year	25%	21%
	Used only alcohol in the past year	13%	13%
	Used alcohol and marijuana in past year, but not other drugs	24%	22%
	Used marijuana-or-other drugs but not alcohol in the past year	10%	12%
	Used alcohol and marijuana-or-other drugs in the past year	28%	32%

* These are all computed variables based on combinations of responses to two or more survey items.

2013 Minnesota Student Survey

**TABLE 30
SUBSTANCE USE AMONG 5TH GRADE STUDENTS**

Alternative Schools and Area Learning Centers

The data included in this table are based on questions that appear only in the Level I (5th grade) version of the 2013 Minnesota Student Survey.

Students in Alternative Schools and Area Learning Centers completed the Level III (9th-12th grade) version of the survey.

2013 Minnesota Student Survey

**TABLE 31
TOBACCO USE**

Alternative Schools and Area Learning Centers

<i>During the last 30 days, on how many days did you ...</i>		Gender	
		Male	Female
		%	%
...smoke a cigarette?	0 days	47%	46%
	1 to 2 days	7%	8%
	3 to 5 days	5%	4%
	6 to 9 days	3%	3%
	10 to 19 days	7%	5%
	20 to 29 days	5%	6%
	All 30 days	25%	28%
...smoke cigars, cigarillos or little cigars?	0 days	65%	82%
	1 to 2 days	12%	8%
	3 to 5 days	8%	4%
	6 to 9 days	5%	2%
	10 to 19 days	4%	1%
	20 to 29 days	2%	0%
	All 30 days	3%	2%
...use chewing tobacco, snuff or dip?	0 days	80%	95%
	1 to 2 days	7%	3%
	3 to 5 days	4%	1%
	6 to 9 days	2%	0%
	10 to 19 days	3%	0%
	20 to 29 days	1%	0%
	All 30 days	3%	0%

2013 Minnesota Student Survey

TABLE 32 EXPOSURE TO SECONDHAND SMOKE[^]

Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
During the last 7 days, on how many days were you in the same room as someone who was smoking cigarettes?	0 days	29%	24%
	1 or 2 days	20%	16%
	3 or 4 days	14%	12%
	5 or 6 days	7%	10%
	All 7 days	31%	37%
During the last 7 days, on how many days did you ride in a car with someone who was smoking cigarettes?	0 days	31%	30%
	1 or 2 days	21%	19%
	3 or 4 days	16%	14%
	5 or 6 days	7%	9%
	All 7 days	24%	29%

[^] All questions on this table were new in 2013.

2013 Minnesota Student Survey

TABLE 33
ALCOHOL USE FREQUENCY AND QUANTITY
Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
During the last 30 days, on how many days did you drink one or more drinks of an alcoholic beverage?	0 days	51%	55%
	1 or 2 days	20%	22%
	3 to 5 days	12%	11%
	6 to 9 days	9%	6%
	10 to 19 days	6%	4%
	20 to 29 days	1%	0%
	All 30 days	1%	1%
During the last 12 months, on how many occasions (if any) have you had alcoholic beverages to drink?	0	39%	36%
	1-2	13%	17%
	3-5	11%	11%
	6-9	8%	9%
	10-19	9%	10%
	20-39	8%	7%
	40+	12%	9%
If you drink beer/wine/wine coolers/liquor, generally, how much (if any) do you drink at one time?	I don't drink beer/wine/wine coolers/liquor	45%	42%
	1 glass/can/drink	6%	10%
	2 glasses/cans/drinks	6%	8%
	3 glasses/cans/drinks	8%	13%
	4 glasses/cans/drinks	8%	11%
	5 or more glasses/cans/drinks	27%	16%
During the past 30 days, on how many days did you have 5 or more drinks in a row, that is, within a couple of hours?^	0 days	64%	71%
	1 day	11%	9%
	2 days	8%	8%
	3 to 5 days	8%	7%
	6 to 9 days	6%	3%
	10 to 19 days	2%	1%
	20 or more days	2%	1%

^ New question in 2013.

2013 Minnesota Student Survey

TABLE 34 ACCESS TO ALCOHOL

Alternative Schools and Area Learning Centers

INCLUDES ONLY THOSE WHO USED ALCOHOL IN THE LAST 30 DAYS		Gender	
		Male	Female
		%	%
If you used alcohol in the last 30 days, how did you get it? (Mark all that apply)	I bought alcohol at gas stations or convenience stores	5%	2%
	I bought alcohol at bars or restaurants	5%	2%
	I bought alcohol at liquor or other stores [^]	20%	14%
	I bought alcohol on the internet	3%	1%
	I got alcohol from friends	41%	54%
	I got alcohol from my parents	9%	9%
	I got alcohol from other family members	12%	11%
	I got alcohol by getting someone else to buy for me	38%	45%
	I got alcohol at parties [^]	40%	47%
	I took alcohol from my home	16%	17%
	I took alcohol from a friend's home	9%	9%
	I took alcohol from stores	9%	5%

[^] New question in 2013.

2013 Minnesota Student Survey

TABLE 35
AGE OF FIRST USE OF ALCOHOL AND MARIJUANA
Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
How old were you when you had your first drink of an alcoholic beverage, such as beer, wine, wine coolers and liquor, other than a few sips?	I have never had a drink of alcohol other than a few sips	19%	15%
	10 years old or younger	17%	12%
	11 years old	6%	6%
	12 years old	11%	12%
	13 years old	13%	14%
	14 years old	14%	16%
	15 years old	9%	15%
	16 years old	6%	9%
	17 years old or older	5%	3%
How old were you when you tried marijuana (pot, weed) or hashish (hash, hash oil) for the first time?	I have never tried marijuana or hashish	26%	22%
	10 years old or younger	11%	4%
	11 years old	5%	5%
	12 years old	13%	10%
	13 years old	13%	16%
	14 years old	13%	18%
	15 years old	11%	14%
	16 years old	6%	7%
	17 years old or older	3%	4%

2013 Minnesota Student Survey

TABLE 36
USE OF MARIJUANA AND PRESCRIPTION DRUGS
Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
During the last 30 days, on how many days did you use marijuana or hashish?	0 days	52%	55%
	1 to 2 days	9%	10%
	3 to 5 days	5%	6%
	6 to 9 days	4%	5%
	10 to 19 days	5%	8%
	20 to 29 days	9%	7%
	All 30 days	16%	10%
During the last 12 months, on how many occasions (if any) have you used marijuana or hashish?	0	42%	38%
	1-2	7%	11%
	3-5	5%	7%
	6-9	3%	5%
	10-19	4%	6%
	20-39	5%	7%
	40+	34%	26%
During the last 30 days, on how many days did you use prescription drugs not prescribed for you? [^]	0 days	81%	76%
	1 to 2 days	6%	10%
	3 to 5 days	5%	6%
	6 to 9 days	3%	4%
	10 to 19 days	3%	3%
	20 to 29 days	2%	1%
	All 30 days	2%	1%

[^] New question in 2013.

2013 Minnesota Student Survey

TABLE 37 PRESCRIPTION DRUG USE[^]

Alternative Schools and Area Learning Centers

<i>During the last 12 months, on how many occasions have you used any of the following prescription drugs that were NOT prescribed for you or that you took ONLY to get high?</i>		Gender	
		Male	Female
		%	%
Stimulants such as Benzedrine (bennies, speed, uppers) or diet pills	0	93%	92%
	1 to 2	2%	3%
	3 to 5	1%	2%
	6 to 9	1%	1%
	10 to 19	1%	0%
	20 to 39	1%	1%
	40 or more	1%	1%
ADHD or ADD drugs like Ritalin (hyper pills)	0	86%	83%
	1 to 2	3%	4%
	3 to 5	3%	4%
	6 to 9	3%	2%
	10 to 19	1%	3%
	20 to 39	2%	1%
	40 or more	2%	3%
Pain relievers such as OxyContin, Percocet, Vicodin or others	0	87%	83%
	1 to 2	2%	4%
	3 to 5	3%	4%
	6 to 9	2%	3%
	10 to 19	2%	2%
	20 to 39	2%	1%
	40 or more	2%	2%
Tranquilizers such as Valium, Xanax or sedatives or barbiturates	0	91%	89%
	1 to 2	2%	3%
	3 to 5	2%	3%
	6 to 9	2%	2%
	10 to 19	1%	1%
	20 to 39	1%	1%
	40 or more	1%	2%

[^] Responses for 30-day (found on Table 36) and 12-month misuse of prescription drugs are inconsistent for some students. This may be due to the misinterpretation of a skip instruction on the survey or to slight differences in how the questions were worded. Due to these methodological issues, the results for these questions cannot be compared to the results from previous years.

2013 Minnesota Student Survey

**TABLE 38
HALLUCINOGEN, ECSTASY, COCAINE AND
HEROIN USE[^]**

Alternative Schools and Area Learning Centers

<i>During the last 12 months, on how many occasions (if any) have you used...</i>		Gender	
		Male	Female
		%	%
...LSD (acid), PCP (wet sticks or dipped joints), or other psychedelics (mushrooms, angel dust)?	0	88%	90%
	1 to 2	6%	6%
	3 to 5	2%	2%
	6 to 9	1%	1%
	10 to 19	1%	1%
	20 to 39	1%	0%
	40 or more	1%	0%
...MDMA (E, X, ecstasy), GHB (G, Liquid E, Liquid X, roofies) or Ketamine (Special K)?	0	91%	92%
	1 to 2	4%	5%
	3 to 5	2%	2%
	6 to 9	1%	1%
	10 to 19	1%	0%
	20 to 39	1%	0%
	40 or more	1%	0%
...crack, coke or cocaine in any other form?	0	90%	90%
	1 to 2	5%	5%
	3 to 5	1%	2%
	6 to 9	1%	1%
	10 to 19	1%	1%
	20 to 39	1%	1%
	40 or more	1%	0%
...heroin?	0	94%	96%
	1 to 2	3%	2%
	3 to 5	1%	0%
	6 to 9	1%	1%
	10 to 19	0%	0%
	20 to 39	1%	0%
	40 or more	0%	1%

[^] Due to methodological issues with these questions (e.g. the possible misinterpretation of a skip instruction on the survey), the results for these questions cannot be compared to the results from previous years.

2013 Minnesota Student Survey

**TABLE 39
METHAMPHETAMINE, OVER-THE-COUNTER DRUG, SYNTHETIC
DRUG AND INHALANT USE^{^^}**

Alternative Schools and Area Learning Centers

During the last 12 months, on how many occasions (if any) have you ...		Gender	
		Male	Female
		%	%
...used methamphetamine (meth, glass, crank, crystal meth, ice)?	0	95%	94%
	1 to 2	2%	3%
	3 to 5	1%	1%
	6 to 9	1%	0%
	10 to 19	0%	1%
	20 to 39	0%	0%
	40 or more	1%	0%
...used over-the-counter drugs such as cough syrup, cold medicine or diet pills that you took only to get high?[^]	0	89%	86%
	1 to 2	4%	4%
	3 to 5	2%	3%
	6 to 9	2%	2%
	10 to 19	1%	2%
	20 to 39	1%	1%
	40 or more	1%	1%
...used synthetic drugs such as bath salts (Ivory Wave, White Lightning) or synthetic marijuana (K2, Gold) that you took only to get high?[^]	0	89%	89%
	1 to 2	4%	4%
	3 to 5	2%	1%
	6 to 9	1%	2%
	10 to 19	1%	1%
	20 to 39	1%	1%
	40 or more	2%	2%
...sniffed glue or huffed or inhaled the contents of aerosol spray cans or other gases to get high?	0	96%	94%
	1 to 2	2%	3%
	3 to 5	1%	1%
	6 to 9	1%	1%
	10 to 19	0%	0%
	20 to 39	0%	0%
	40 or more	0%	0%

[^] New question in 2013.

^{^^} Due to methodological issues with these questions (e.g. the possible misinterpretation of a skip instruction on the survey), the results for these questions cannot be compared to the results from previous years.

2013 Minnesota Student Survey

**TABLE 40
PERCEIVED RISK OF HARM FROM SUBSTANCE
USE**

Alternative Schools and Area Learning Centers

<i>How much do you think people risk harming themselves physically or in other ways if they...</i>		Gender	
		Male	Female
		%	%
... smoke one or more packs of cigarettes per day?	No risk	16%	11%
	Slight risk	17%	15%
	Moderate risk	27%	24%
	Great risk	40%	50%
... have five or more drinks of an alcoholic beverage once or twice per week?	No risk	19%	10%
	Slight risk	28%	24%
	Moderate risk	31%	32%
	Great risk	22%	34%
... smoke marijuana once or twice per week?	No risk	56%	46%
	Slight risk	21%	26%
	Moderate risk	12%	13%
	Great risk	11%	15%
... use prescription drugs not prescribed for them? [^]	No risk	16%	9%
	Slight risk	16%	17%
	Moderate risk	29%	29%
	Great risk	38%	45%

[^] New question in 2013.

2013 Minnesota Student Survey

**TABLE 41
PERCEPTIONS OF OTHERS' DISAPPROVAL OF
SUBSTANCE USE[^]**

Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
How wrong do your parents feel it would be for you to smoke cigarettes?	Not at all wrong	19%	14%
	A little bit wrong	21%	24%
	Wrong	25%	21%
	Very wrong	35%	41%
How wrong do your parents feel it would be for you to have one or more drinks of alcoholic beverage nearly every day?	Not at all wrong	14%	7%
	A little bit wrong	18%	13%
	Wrong	25%	25%
	Very wrong	43%	55%
How wrong do your parents feel it would be for you to smoke marijuana?	Not at all wrong	21%	14%
	A little bit wrong	19%	18%
	Wrong	18%	18%
	Very wrong	42%	51%
How wrong do your parents feel it would be for you to use prescription drugs not prescribed for you?	Not at all wrong	10%	5%
	A little bit wrong	6%	6%
	Wrong	17%	15%
	Very wrong	67%	74%
How wrong do your friends feel it would be for you to smoke cigarettes?	Not at all wrong	52%	50%
	A little bit wrong	21%	24%
	Wrong	14%	13%
	Very wrong	13%	13%
How wrong do your friends feel it would be for you to have one or more drinks of alcoholic beverage nearly every day?	Not at all wrong	47%	37%
	A little bit wrong	23%	27%
	Wrong	16%	19%
	Very wrong	14%	16%
How wrong do your friends feel it would be for you to smoke marijuana?	Not at all wrong	63%	58%
	A little bit wrong	16%	18%
	Wrong	9%	9%
	Very wrong	12%	14%
How wrong do your friends feel it would be for you to use prescription drugs not prescribed for you?	Not at all wrong	33%	30%
	A little bit wrong	18%	21%
	Wrong	20%	20%
	Very wrong	29%	30%

[^] All questions on this table were new in 2013.

2013 Minnesota Student Survey

**TABLE 42
FEELINGS AND PERCEPTIONS OF OTHERS' FEELINGS
ABOUT ALCOHOL USE[^]**

Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
How do you feel about each of the following statements: Parents and other adults should clearly communicate with their children about the importance of not using alcohol?	Strongly agree	35%	42%
	Agree	30%	33%
	Neither agree nor disagree	27%	18%
	Disagree	3%	3%
	Strongly disagree	5%	4%
How do you feel about each of the following statements: Drinking alcohol is never a good thing for anyone my age to do?	Strongly agree	27%	30%
	Agree	22%	26%
	Neither agree nor disagree	33%	28%
	Disagree	10%	10%
	Strongly disagree	8%	6%
How do you think MOST STUDENTS in your school feel about each of the following statements: Parents and other adults should clearly communicate with their children about the importance of not using alcohol?	Strongly agree	18%	16%
	Agree	25%	24%
	Neither agree nor disagree	36%	37%
	Disagree	11%	13%
	Strongly disagree	10%	11%
How do you think MOST STUDENTS in your school feel about each of the following statements: Drinking alcohol is never a good thing for anyone my age to do?	Strongly agree	15%	12%
	Agree	16%	16%
	Neither agree nor disagree	37%	34%
	Disagree	17%	21%
	Strongly disagree	15%	16%

[^] All questions on this table were new in 2013.

2013 Minnesota Student Survey

TABLE 43
USE OF TOBACCO, ALCOHOL AND MARIJUANA[^]
Alternative Schools and Area Learning Centers

<i>How often do you use each of the following?</i>		Gender	
		Male	Female
		%	%
Tobacco (cigarettes, chew)	Never	44%	44%
	Tried once or twice	5%	7%
	Once or twice a year	2%	4%
	Once a month	5%	2%
	Twice a month	2%	2%
	Once a week	6%	5%
	Daily	35%	36%
Alcohol (beer, wine, liquor)	Never	37%	36%
	Tried once or twice	9%	9%
	Once or twice a year	11%	13%
	Once a month	14%	15%
	Twice a month	13%	14%
	Once a week	14%	11%
	Daily	3%	1%
Marijuana (pot, hash, hash oil)	Never	42%	43%
	Tried once or twice	9%	12%
	Once or twice a year	6%	5%
	Once a month	5%	5%
	Twice a month	4%	7%
	Once a week	9%	10%
	Daily	25%	19%

[^] All questions on this table were new in 2013.

2013 Minnesota Student Survey

**TABLE 44
PERCEPTIONS OF OTHERS' USE OF TOBACCO,
ALCOHOL AND MARIJUANA[^]**

Alternative Schools and Area Learning Centers

<i>In your opinion, how often do you think MOST STUDENTS in your school use each of the following?</i>		Gender	
		Male	Female
		%	%
Tobacco (cigarettes, chew)	Never	11%	8%
	Tried once or twice	5%	4%
	Once or twice a year	2%	1%
	Once a month	3%	2%
	Twice a month	2%	2%
	Once a week	10%	8%
	Daily	66%	75%
Alcohol (beer, wine, liquor)	Never	12%	6%
	Tried once or twice	6%	3%
	Once or twice a year	3%	2%
	Once a month	7%	5%
	Twice a month	10%	8%
	Once a week	36%	42%
	Daily	27%	33%
Marijuana (pot, hash, hash oil)	Never	12%	6%
	Tried once or twice	6%	3%
	Once or twice a year	2%	1%
	Once a month	5%	2%
	Twice a month	3%	4%
	Once a week	17%	13%
	Daily	55%	70%

[^] All questions on this table were new in 2013.

2013 Minnesota Student Survey

TABLE 45A
CONSEQUENCES OF SUBSTANCE USE
Alternative Schools and Area Learning Centers

<i>During the last 12 months ...</i>		Gender	
		Male	Female
		%	%
...have you found that you had to use a lot more alcohol or drugs than before to get the same effect?	No or no use	77%	76%
	Yes	23%	24%
...have you tried to cut down on your use of alcohol or drugs but couldn't?	No or no use	85%	84%
	Yes	15%	16%
...have you continued to use alcohol or drugs even though you knew it was hurting your relationships with friends or family?	No or no use	82%	79%
	Yes	18%	21%
...how many times have you spent all or most of the day using alcohol or drugs, or getting over their effects?	0 times or no use	68%	66%
	1 time	7%	9%
	2 times	5%	7%
	3 or more times	19%	17%
...how many times have you given up important social or recreational activities like sports or being with friends or relatives to use alcohol or drugs or to get over their effects?	0 times or no use	83%	80%
	1 time	7%	6%
	2 times	4%	5%
	3 or more times	6%	9%
...how many times have you missed work or school, or neglected other major responsibilities because of alcohol or drug use?	0 times or no use	82%	81%
	1 time	6%	8%
	2 times	5%	3%
	3 or more times	7%	8%

2013 Minnesota Student Survey

**TABLE 45B
CONSEQUENCES OF SUBSTANCE USE**

Alternative Schools and Area Learning Centers

<i>During the last 12 months, how many times...</i>		Gender	
		Male	Female
		%	%
...have you driven a motor vehicle after using alcohol or drugs?	0 times or no use	77%	83%
	1 time	7%	8%
	2 times	5%	3%
	3 or more times	11%	7%
...have you hit someone or become violent while using alcohol or drugs?	0 times or no use	88%	88%
	1 time	6%	6%
	2 times	2%	3%
	3 or more times	4%	3%
...have you used so much alcohol or drugs that the next day you could not remember what you had said or done?	0 times or no use	73%	69%
	1 time	8%	12%
	2 times	6%	7%
	3 or more times	13%	12%
...have you used more alcohol or drugs than you intended to?	0 times or no use	75%	70%
	1 time	8%	9%
	2 times	5%	8%
	3 or more times	12%	14%
...has alcohol or drug use left you feeling depressed, agitated, paranoid, or unable to concentrate?	0 times or no use	79%	66%
	1 time	6%	11%
	2 times	5%	7%
	3 or more times	11%	16%
...has alcohol or drug use caused you problems with the law?	0 times or no use	75%	82%
	1 time	13%	10%
	2 times	7%	5%
	3 or more times	5%	3%

2013 Minnesota Student Survey

TABLE 46
SEXUAL ORIENTATION; SEXUAL BEHAVIOR
Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
Which of the following best describes you?^	Heterosexual (straight)	93%	73%
	Bisexual	2%	19%
	Gay or lesbian	2%	4%
	Not sure (questioning)	2%	5%
Have you ever had sexual intercourse ('had sex')?	Yes	73%	78%
	No	27%	22%
During the last 12 months, with how many different male partners have you had sexual intercourse?	None	89%	29%
	1 person	4%	29%
	2 persons	2%	19%
	3 persons	1%	9%
	4 persons	2%	5%
	5 persons	0%	3%
	6 or more persons	2%	6%
During the last 12 months, with how many different female partners have you had sexual intercourse?	None	34%	86%
	1 person	22%	8%
	2 persons	13%	3%
	3 persons	10%	1%
	4 persons	7%	1%
	5 persons	3%	0%
	6 or more persons	10%	0%
How many times have you been pregnant or gotten someone pregnant?	0 times	85%	78%
	1 time	8%	18%
	2 or more times	3%	4%
	Not sure	4%	0%

^ New question in 2013.

2013 Minnesota Student Survey

**TABLE 47
SEXUAL BEHAVIOR**

Alternative Schools and Area Learning Centers

INCLUDES ONLY THOSE WHO HAVE EVER HAD SEXUAL INTERCOURSE		Gender	
		Male	Female
		%	%
Have you talked with your partner(s) about protecting yourselves from getting sexually transmitted infections/HIV/AIDS?	Never	32%	25%
	Not with every partner	20%	21%
	At least once with every partner	48%	54%
Have you talked with your partner(s) about preventing pregnancy?	Never	24%	21%
	Not with every partner	22%	22%
	At least once with every partner	54%	58%
The LAST time you had sexual intercourse, what ONE method did you or your partner use to prevent pregnancy?^	No method was used to prevent pregnancy	13%	21%
	Birth control pills	21%	16%
	Condoms	39%	26%
	Depo-Provera/any birth control shot, Nuva Ring/any birth control ring, Implanon/any implant or any IUD	8%	21%
	Withdrawal (pull-out)	12%	14%
	Some other method	1%	2%
	Not sure	5%	1%
The LAST time you had sexual intercourse, did you or your partner use a condom?	Yes	54%	41%
	No	46%	59%
Did you drink alcohol or use drugs before you had sexual intercourse the LAST time?^	Yes	31%	25%
	No	69%	75%

^ New question in 2013.

2013 Minnesota Student Survey

TABLE 48 REASONS FOR SEXUAL ABSTINENCE

Alternative Schools and Area Learning Centers

		Gender	
		Male	Female
		%	%
If you do not have sexual intercourse, what factors influence your choice not to? (Mark all that apply)	I don't want to have sex	22%	50%
	My partner doesn't want to have sex[^]	11%	5%
	I have not had a chance to have sex[^]	39%	18%
	My friends don't have sex	2%	9%
	I don't think it's right for a person my age to have sex	16%	28%
	I have chosen to wait until I am married	16%	34%
	My religious or spiritual beliefs	10%	17%
	My parent(s) would object	11%	22%
	What my parents have taught me about sex	8%	13%
	What sex education at school has taught me	7%	14%
	Fear of pregnancy	22%	43%
	Fear of sexually transmitted diseases	20%	35%
	Other reason(s)	42%	38%

[^] New question in 2013.