

2016 Minnesota Student Survey Tables

Juvenile Correctional Facilities

September 2016

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:

Lisa Burton, Special Projects and Evaluation Manager
Minnesota Department of Education
Phone: 651-582-8488
E-mail: lisa.burton@state.mn.us

Ann Kinney, Senior Research Scientist
Minnesota Department of Health
Phone: 651-201-5946
E-mail: 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 2016. 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.

2016 MINNESOTA STUDENT SURVEY

Survey Participation

The 2016 Minnesota Student Survey was administered in the first half of 2016 to students in juvenile correctional facilities. The Grade 9/11 survey version was used for students who participated in these settings.

Mode of Administration

In 2016, facilities could choose to administer the online or with the traditional paper survey. Methods could not be mixed within a single facility. The survey questions online were the same as those in the paper survey booklets.

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

Some of the 2016 survey instrument questions were changed from the 2013 survey instrument. While most questions stayed the same, other questions were updated with changes to the question or response options. 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

Caution was taken to identify invalid responses and remove them from the analysis. Surveys were eliminated when responses were highly inconsistent or there was a pattern of likely exaggeration. The exact percentage of surveys removed will be available in September 2016.

**2016 MINNESOTA STUDENT SURVEY
TABLE OF CONTENTS**

Table	Subject Area	Page
DEMOGRAPHICS		
Table 1	Demographic description	1
Table 2	Sexual orientation; Gender identity; Gender expression	2
SCHOOL		
Table 3	School plans; IEPs; Changing schools; Academic performance	3
Table 4	Feelings about school	4
Table 5	Feelings about school; Skipping school	5
Table 6	Time away from class	6
Table 7	Interactions with a school resource/police officer	7
Table 8	Perceptions of safety	8
Table 9a-b	After-school supervision	9-10
Table 10a-b	Being bullied for specific reasons	11-12
Table 11	Being bullied or harassed at school; Being cyberbullied	13
Table 12	Bullying or harassing other students at school	14
ACTIVITIES		
Table 13a-b	Enrichment activities	15-16
Table 14	Quality of youth activities	17
FAMILY AND RELATIONSHIPS		
Table 15	Family composition and situations	18
Table 16	Parental communication	19
Table 17	Perceptions of family and others caring	20
RISK FACTORS		
Table 18	Family substance abuse; Physical and sexual violence	21
Table 19	Relationship violence	22
HEALTH AND SAFETY		
Table 20	General health and health conditions	23
Table 21	Health care access	24
Table 22	Physical activity; Sleep; Use of indoor tanning device	25
Table 23	Eating meals	26
Table 24a-b	Nutrition	27-28
Table 25	Vehicle safety	29
MENTAL HEALTH		
Table 26a-c	Self description	30-32
Table 27a-b	Emotional well-being and distress	33-34
Table 28	Self-inflicted injury; Suicidal thoughts and suicidal behavior	35
BEHAVIOR		
Table 29	Problematic and antisocial behavior	36
Table 30a-c	Gambling behavior	37-39

Continued on the next page

2016 MINNESOTA STUDENT SURVEY
TABLE OF CONTENTS, continued

Table	Subject Area	Page
SUBSTANCE USE		
Table 31	Summary of substance use	40
Table 32	Substance use among 5 th grade students	41
Table 33	Tobacco use	42
Table 34	Exposure to secondhand smoke	43
Table 35	Alcohol use frequency and quantity	44
Table 36	Age of first use of alcohol and marijuana	45
Table 37	Use of marijuana and prescription drugs	46
Table 38	Prescription drug use	47
Table 39	Hallucinogen, ecstasy, cocaine and heroin use	48
Table 40	Methamphetamine, over-the-counter drug, synthetic drug and inhalant use	49
Table 41	Perceived risk of harm from substance use	50
Table 42	Perceptions of others' disapproval of substance use	51
Table 43	Perceptions about alcohol use	52
Table 44	Use of tobacco, alcohol and marijuana	53
Table 45	Perceptions of others' use of tobacco, alcohol and marijuana	54
Table 46a-b	Consequences of substance use	55-56
SEXUAL HEALTH AND PROTECTIVE FACTORS		
Table 47a-b	Sexual behavior	57-58

2016 Minnesota Student Survey

**TABLE 1
DEMOGRAPHIC DESCRIPTION**

Juvenile Correctional Facilities

		Gender			
		Male		Female	
		N	%	N	%
Total number of surveys		141	100%	73	100%
Age	11	0	0%	0	0%
	12	1	1%	2	3%
	13	0	0%	5	7%
	14	13	9%	6	8%
	15	27	19%	15	21%
	16	31	22%	21	29%
	17	42	30%	21	29%
	18	24	17%	3	4%
	19-20	3	2%	0	0%
	21 or older	0	0%	0	0%
	No answer	0	0%	0	0%
Are you a member of any of the following ethnic or cultural groups? Hispanic or Latino/a	Yes	21	15%	13	18%
	No	108	77%	59	81%
	Not answered	12	9%	1	1%
Are you a member of any of the following ethnic or cultural groups? Somali	Yes	4	3%	1	1%
	No	121	86%	64	88%
	Not answered	16	11%	8	11%
Are you a member of any of the following ethnic or cultural groups? Hmong	Yes	3	2%	0	0%
	No	118	84%	65	89%
	Not answered	20	14%	8	11%
In addition, what is your race? (If more than one describes you, mark ALL that apply)	American Indian only	7	5%	3	4%
	Asian only	2	1%	0	0%
	Black, African or African American only	43	30%	7	10%
	Native Hawaiian or Pacific Islander only	0	0%	0	0%
	White only	58	41%	42	58%
	Multiple Races (checked more than one)	20	14%	17	23%
	No answer	11	8%	4	5%

2016 Minnesota Student Survey

TABLE 2 SEXUAL ORIENTATION; GENDER IDENTITY; GENDER EXPRESSION

Juvenile Correctional Facilities

		Male	Female
		%	%
Which of the following best describes you?	Heterosexual (straight)	90%	49%
	Bisexual	7%	33%
	Gay or lesbian	3%	10%
	Not sure (questioning)	0%	8%
Do you consider yourself transgender, genderqueer, genderfluid, or unsure about your gender identity?^	Yes	4%	6%
	No	96%	94%
A person's appearance, style, dress, or the way they walk or talk may affect how people describe them. How do you think other people at school would describe you?^	Very or mostly feminine	4%	42%
	Somewhat feminine	7%	24%
	Equally feminine and masculine	7%	25%
	Somewhat masculine	28%	3%
	Very or mostly masculine	55%	7%

^ New questions in 2016.

2016 Minnesota Student Survey

TABLE 3 SCHOOL PLANS; IEP; CHANGING SCHOOLS; ACADEMIC PERFORMANCE

Juvenile Correctional Facilities

		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%	3%
	Get my GED	8%	1%
	Go to a two-year community or technical college	23%	34%
	Go to a four-year college or university	26%	30%
	Get a license or certificate in a career field	6%	10%
	Attend an apprenticeship program	0%	0%
	Join the military	11%	1%
	Work at a job	15%	16%
	Other	9%	4%
	Do you have an IEP or get special education services?	Yes	62%
No		38%	64%
Since the beginning of this school year, how many times have you changed schools?	0 times	29%	21%
	1 time	26%	25%
	2 times	17%	29%
	3 or more times	28%	25%
How would you describe your grades this school year?	Mostly As	24%	21%
	Mostly Bs	36%	27%
	Mostly Cs	21%	30%
	Mostly Ds	6%	1%
	Mostly Fs	4%	3%
	Mostly Incompletes	6%	16%
	None of these letter grades	3%	1%

2016 Minnesota Student Survey

**TABLE 4
FEELINGS ABOUT SCHOOL**

Juvenile Correctional Facilities

		Male	Female	
		%	%	
How often do you care about doing well in school?	All of the time	34%	26%	
	Most of the time	41%	39%	
	Some of the time	21%	32%	
	None of the time	4%	3%	
How often do you go to class unprepared?	All of the time	8%	0%	
	Most of the time	8%	19%	
	Some of the time	56%	39%	
	None of the time	29%	42%	
How often do you pay attention in class?	All of the time	18%	11%	
	Most of the time	57%	50%	
	Some of the time	22%	36%	
	None of the time	3%	3%	
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	61%	47%
		Agree	37%	49%
		Disagree	1%	4%
		Strongly disagree	1%	0%
	I think things I learn in school are useful.	Strongly agree	19%	11%
		Agree	60%	63%
		Disagree	14%	25%
		Strongly disagree	6%	1%
	Being a student is one of the most important parts of who I am.	Strongly agree	10%	13%
		Agree	43%	32%
		Disagree	33%	40%
		Strongly disagree	14%	15%

2016 Minnesota Student Survey

**TABLE 5
FEELINGS ABOUT SCHOOL; SKIPPING SCHOOL**

Juvenile Correctional Facilities

		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	23%	11%
		Agree	53%	63%
		Disagree	18%	25%
		Strongly disagree	6%	1%
	Adults at my school listen to the students.	Strongly agree	17%	21%
		Agree	56%	54%
		Disagree	21%	24%
		Strongly disagree	6%	1%
	The school rules are fair.	Strongly agree	16%	13%
		Agree	59%	60%
		Disagree	18%	21%
		Strongly disagree	7%	7%
	At my school, teachers care about students.	Strongly agree	24%	25%
		Agree	49%	57%
		Disagree	21%	15%
		Strongly disagree	5%	3%
	Most teachers at my school are interested in me as a person.	Strongly agree	15%	28%
		Agree	47%	46%
		Disagree	28%	19%
		Strongly disagree	10%	7%
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	63%	49%	
	Once or twice	14%	13%	
	3 to 5 times	8%	11%	
	6 to 9 times	4%	13%	
	10 or more times	11%	14%	
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	70%	61%	
	Once or twice	10%	18%	
	3 to 5 times	9%	10%	
	6 to 9 times	2%	7%	
	10 or more times	9%	4%	

2016 Minnesota Student Survey

TABLE 6 TIME AWAY FROM CLASS

Juvenile Correctional Facilities

<i>During the last 30 days, how many times have you...</i>		Male	Female
		%	%
...gone to the nurses office?	None	60%	51%
	Once or twice	33%	32%
	3 to 5 times	3%	8%
	6 to 9 times	1%	7%
	10 or more times	2%	1%
...stayed home because you were sick?	None	74%	56%
	Once or twice	18%	26%
	3 to 5 times	4%	11%
	6 to 9 times	1%	6%
	10 or more times	2%	1%
...been sent to the office for discipline?	None	76%	75%
	Once or twice	15%	14%
	3 to 5 times	6%	8%
	6 to 9 times	1%	1%
	10 or more times	2%	1%
...had in-school suspension (ISS)?	None	86%	78%
	Once or twice	7%	11%
	3 to 5 times	3%	10%
	6 to 9 times	2%	0%
	10 or more times	2%	1%
...been suspended from school (out-of-school suspension/ OSS)?	None	80%	83%
	Once or twice	14%	14%
	3 to 5 times	4%	1%
	6 to 9 times	0%	1%
	10 or more times	2%	0%

2016 Minnesota Student Survey

**TABLE 7
INTERACTIONS WITH A SCHOOL RESOURCE/POLICE
OFFICER[^]**

Juvenile Correctional Facilities

		Male	Female
		%	%
Is there a police officer or School Resource Officer (SRO) at your school?	Yes	61%	58%
	No	23%	27%
	I don't know	17%	15%

Juvenile Correctional Facilities

<i>INCLUDES ONLY THOSE WHO HAVE A SCHOOL RESOURCE OR POLICE OFFICER (SRO) AT THEIR SCHOOL</i>		Male	Female
		%	%
If I knew about something unsafe or illegal at my school, I would tell the SRO or police officer	Strongly agree	13%	17%
	Agree	32%	24%
	Disagree	22%	41%
	Strongly disagree	33%	17%
I would feel comfortable going to my school's police officer/SRO if I was having problems or needed help	Strongly agree	17%	10%
	Agree	26%	27%
	Disagree	28%	46%
	Strongly disagree	29%	17%
I think it is a good idea to have an SRO or police officer at our school	Strongly agree	26%	34%
	Agree	35%	46%
	Disagree	14%	17%
	Strongly disagree	26%	2%

[^] All questions on this table were new in 2016.

2016 Minnesota Student Survey

TABLE 8 PERCEPTIONS OF SAFETY

Juvenile Correctional Facilities

			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	48%	39%
		Agree	42%	47%
		Disagree	6%	7%
		Strongly disagree	4%	7%
	I feel safe at school.	Strongly agree	43%	39%
		Agree	44%	46%
		Disagree	9%	11%
		Strongly disagree	4%	4%
	I feel safe in my neighborhood.	Strongly agree	45%	36%
		Agree	41%	49%
		Disagree	9%	11%
		Strongly disagree	5%	4%
	I feel safe at home.	Strongly agree	63%	42%
		Agree	29%	43%
		Disagree	4%	11%
		Strongly disagree	4%	4%

2016 Minnesota Student Survey

TABLE 9A
AFTER SCHOOL SUPERVISION

Juvenile Correctional Facilities

<i>During a typical week, how often do you go to the following places after school?</i>		Male %	Female %
I stay at my school or go to another school	0 days	75%	86%
	1 day	10%	3%
	2 days	1%	4%
	3 to 4 days	3%	3%
	5 days	11%	4%
My home or another home such as a friend's, relative's or neighbor's	0 days	39%	27%
	1 day	5%	7%
	2 days	11%	14%
	3 to 4 days	13%	15%
	5 days	33%	37%
A rec, community or other youth center	0 days	60%	70%
	1 day	14%	13%
	2 days	10%	6%
	3 to 4 days	5%	6%
	5 days	11%	6%
A park or other outdoor space	0 days	50%	63%
	1 day	16%	15%
	2 days	14%	11%
	3 to 4 days	8%	6%
	5 days	14%	6%
A library	0 days	79%	76%
	1 day	12%	11%
	2 days	6%	7%
	3 to 4 days	2%	4%
	5 days	2%	1%
A church, synagogue, mosque, or other spiritual/religious place	0 days	77%	85%
	1 day	18%	14%
	2 days	3%	0%
	3 to 4 days	1%	1%
	5 days	2%	0%
A job	0 days	71%	77%
	1 day	8%	0%
	2 days	5%	1%
	3 to 4 days	8%	13%
	5 days	10%	9%

2016 Minnesota Student Survey

TABLE 10A BEING BULLIED FOR SPECIFIC REASONS

Juvenile Correctional Facilities

<i>During the last 30 days, how often have other students harassed or bullied you for any of the following reasons?</i>		Male	Female
		%	%
Your race, ethnicity or national origin	Never	87%	88%
	Once or twice	7%	7%
	About once a week	3%	1%
	Several times a week	2%	3%
	Every day	1%	1%
Your religion	Never	89%	92%
	Once or twice	6%	7%
	About once a week	1%	1%
	Several times a week	2%	0%
	Every day	1%	0%
Your gender (being male, female, transgender, etc.)[^]	Never	93%	93%
	Once or twice	1%	4%
	About once a week	3%	3%
	Several times a week	1%	0%
	Every day	2%	0%
Your gender expression (your style, dress, or the way you walk or talk)^{^^}	Never	86%	65%
	Once or twice	9%	24%
	About once a week	2%	6%
	Several times a week	1%	3%
	Every day	3%	3%

[^] Change in question wording from 2013 survey to include "transgender, etc."

^{^^} New question in 2016.

2016 Minnesota Student Survey

TABLE 10B BEING BULLIED FOR SPECIFIC REASONS

Juvenile Correctional Facilities

<i>During the last 30 days, how often have other students harassed or bullied you for any of the following reasons?</i>		Male	Female
		%	%
Because you are gay, lesbian or bisexual, or because someone thought you were	Never	90%	86%
	Once or twice	1%	9%
	About once a week	3%	6%
	Several times a week	1%	0%
	Every day	4%	0%
A physical or mental disability	Never	88%	86%
	Once or twice	5%	7%
	About once a week	2%	4%
	Several times a week	1%	1%
	Every day	3%	1%
Your size or weight[^]	Never	83%	71%
	Once or twice	6%	15%
	About once a week	7%	7%
	Several times a week	2%	6%
	Every day	3%	1%
Your physical appearance[^]	Never	81%	63%
	Once or twice	8%	24%
	About once a week	7%	3%
	Several times a week	1%	4%
	Every day	3%	7%

[^] Change in question wording from 2013.

2016 Minnesota Student Survey

TABLE 11
BEING BULLIED OR HARASSED AT SCHOOL; BEING ...

Juvenile Correctional Facilities

		Male	Female	
		%	%	
During the last 30 days, on how many days have other students at school...	...pushed, shoved slapped, hit or kicked you when they weren't kidding around?	Never	88%	92%
		Once or twice	8%	4%
		About once a week	2%	3%
		Several times a week	1%	0%
		Every day	1%	1%
	...threatened to beat you up?	Never	84%	81%
		Once or twice	10%	10%
		About once a week	2%	4%
		Several times a week	1%	4%
		Every day	3%	1%
	...spread mean rumors or lies about you?	Never	77%	54%
		Once or twice	15%	32%
		About once a week	2%	3%
		Several times a week	3%	3%
		Every day	3%	8%
	...made sexual jokes, comments or gestures towards you?	Never	87%	61%
		Once or twice	7%	20%
		About once a week	2%	7%
		Several times a week	1%	8%
		Every day	3%	4%
...excluded you from friends, other students or activities?	Never	83%	67%	
	Once or twice	9%	7%	
	About once a week	2%	10%	
	Several times a week	1%	10%	
	Every day	4%	7%	
During the last 30 days, how often have you been bullied through e-mail, chat rooms, instant messaging, websites or texting?	Never	87%	76%	
	Once or twice	8%	10%	
	About once a week	1%	8%	
	Several times a week	2%	1%	
	Every day	1%	4%	

2016 Minnesota Student Survey

TABLE 12
BULLYING OR HARASSING OTHER STUDENTS AT SCHOOL
Juvenile Correctional Facilities

			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	82%	83%
		Once or twice	12%	13%
		About once a week	4%	3%
		Several times a week	1%	1%
		Every day	1%	0%
	...threatened or beat someone up?	Never	77%	69%
		Once or twice	15%	23%
		About once a week	2%	4%
		Several times a week	3%	3%
		Every day	3%	1%
	...spread mean rumors or lies about someone else?	Never	89%	83%
		Once or twice	7%	13%
		About once a week	1%	1%
		Several times a week	1%	3%
		Every day	2%	0%
	...made sexual jokes, comments or gestures towards someone else?	Never	91%	85%
		Once or twice	4%	10%
		About once a week	1%	4%
		Several times a week	1%	1%
		Every day	3%	0%
...excluded someone from friends, other students or activities?	Never	86%	76%	
	Once or twice	8%	14%	
	About once a week	1%	3%	
	Several times a week	2%	4%	
	Every day	2%	3%	

2016 Minnesota Student Survey

**TABLE 13A
ENRICHMENT ACTIVITIES**

Juvenile Correctional Facilities

		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	35%	39%	
	No	32%	28%	
	I don't know what programs are available in my community	33%	33%	
During a typical week, how often do you participate in the following activities outside of the regular school day?	Sports teams, such as park and rec teams, school teams, in-house teams or traveling teams[^]	0 days	65%	83%
		1 day	4%	3%
		2 days	8%	3%
		3 to 4 days	5%	6%
		5 or more days	19%	6%
	School sponsored activities or clubs that are not sports, such as drama, music, chess or science club	0 days	88%	87%
		1 day	5%	4%
		2 days	3%	4%
		3 to 4 days	2%	3%
		5 or more days	3%	1%
	Tutoring, homework help or academic programs	0 days	88%	89%
		1 day	4%	3%
		2 days	4%	6%
		3 to 4 days	3%	3%
		5 or more days	2%	0%

[^] Change in question wording from 2013.

2016 Minnesota Student Survey

TABLE 13B ENRICHMENT ACTIVITIES

Juvenile Correctional Facilities

<i>During a typical week, how often do you participate in the following activities outside of the regular school day?</i>		Male	Female
		%	%
Leadership activities such as student government, youth councils or committees	0 days	89%	97%
	1 day	4%	0%
	2 days	2%	0%
	3 to 4 days	1%	1%
	5 or more days	4%	1%
Artistic lessons, such as music or dance[^]	0 days	86%	84%
	1 day	6%	3%
	2 days	2%	6%
	3 to 4 days	1%	6%
	5 or more days	5%	1%
Physical activity lessons, such as tennis or karate[^]	0 days	85%	96%
	1 day	2%	1%
	2 days	4%	1%
	3 to 4 days	2%	1%
	5 or more days	6%	0%
Other community clubs and programs such as 4-H, Scouts, Y-clubs or Community Ed	0 days	88%	93%
	1 day	2%	4%
	2 days	7%	1%
	3 to 4 days	2%	1%
	5 or more days	2%	0%
Religious activities such as religious services, education or youth group	0 days	80%	80%
	1 day	10%	14%
	2 days	7%	4%
	3 to 4 days	0%	1%
	5 or more days	3%	0%

[^] Change in question wording from 2013.

2016 Minnesota Student Survey

TABLE 14 QUALITY OF YOUTH ACTIVITIES[^]

Juvenile Correctional Facilities

<i>When you spend time doing activities outside of the regular school day, how often do you...</i>		Male	Female
		%	%
...feel safe?	Rarely or never	10%	9%
	Sometimes	12%	20%
	Often	31%	42%
	Very often	47%	29%
...learn skills like teamwork or leadership?	Rarely or never	22%	22%
	Sometimes	27%	40%
	Often	26%	26%
	Very often	25%	12%
...develop trusting relationships with peers your age?	Rarely or never	24%	19%
	Sometimes	28%	35%
	Often	25%	28%
	Very often	24%	18%
...develop trusting relationships with adults?	Rarely or never	21%	30%
	Sometimes	34%	32%
	Often	24%	23%
	Very often	22%	14%
...help make decisions?	Rarely or never	21%	16%
	Sometimes	27%	32%
	Often	30%	36%
	Very often	22%	16%
...do something that gives you joy and energy?	Rarely or never	17%	17%
	Sometimes	20%	29%
	Often	29%	22%
	Very often	34%	32%
...learn skills that you can use in a future job?	Rarely or never	17%	25%
	Sometimes	29%	35%
	Often	35%	29%
	Very often	20%	12%

[^] All questions on this table were new in 2016. These items are a subscale of the Constructive Use of Time Scale from the Developmental Assets Profile (DAP) (Search Institute, Minneapolis, ...

2016 Minnesota Student Survey

**TABLE 15
FAMILY COMPOSITION AND SITUATIONS**

Juvenile Correctional Facilities

		Male	Female
		%	%
Which adults do you live with?	Both biological parents	16%	14%
	Both adoptive parents	6%	3%
	Mother and stepfather	8%	17%
	Father and stepmother	3%	1%
	Mother and partner	2%	8%
	Father and partner	1%	1%
	Mother only	31%	33%
	Father only	8%	6%
	Sometimes with mother, sometimes with father	5%	4%
	Other (relatives, foster care, etc)	13%	7%
	No adults	6%	6%
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	72%	63%
	Yes, with my parents or an adult family member	12%	10%
	Yes, on my own without any adult family members	19%	31%
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	43%	40%
	Yes, I have a parent or guardian in jail or prison right now	11%	19%
	Yes, I have had a parent or guardian in jail or prison in the past	52%	50%

2016 Minnesota Student Survey

**TABLE 16
PARENTAL COMMUNICATION**

Juvenile Correctional Facilities

		Male	Female
		%	%
Can you talk to your father about problems you are having?	Yes, most of the time	26%	15%
	Yes, some of the time	24%	15%
	No, not very often	13%	22%
	No, not at all	7%	12%
	My father is not around	29%	36%
Can you talk to your mother about problems you are having?	Yes, most of the time	54%	40%
	Yes, some of the time	24%	24%
	No, not very often	10%	22%
	No, not at all	5%	10%
	My mother is not around	6%	4%

2016 Minnesota Student Survey

TABLE 17
PERCEPTIONS OF FAMILY AND OTHERS CARING
Juvenile Correctional Facilities

<i>How much do you feel ...</i>		Male	Female
		%	%
... your parents care about you?	Not at all	5%	6%
	A little	4%	17%
	Some	5%	10%
	Quite a bit	15%	17%
	Very much	71%	50%
... other adult relatives care about you?	Not at all	6%	11%
	A little	5%	13%
	Some	12%	17%
	Quite a bit	22%	26%
	Very much	55%	33%
... friends care about you?	Not at all	5%	10%
	A little	10%	16%
	Some	24%	17%
	Quite a bit	25%	22%
	Very much	36%	35%
... teachers/ other adults at school care about you?	Not at all	19%	14%
	A little	19%	30%
	Some	28%	29%
	Quite a bit	18%	14%
	Very much	17%	13%
... adults in your community care about you?	Not at all	28%	39%
	A little	25%	27%
	Some	18%	16%
	Quite a bit	14%	7%
	Very much	15%	11%

2016 Minnesota Student Survey

TABLE 18 FAMILY SUBSTANCE ABUSE; PHYSICAL AND SEXUAL VIOLENCE

Juvenile Correctional Facilities

		Male	Female
		%	%
Do you live with anyone who drinks too much alcohol?	Yes	18%	14%
	No	82%	86%
Do you live with anyone who uses illegal drugs or abuses prescription drugs?	Yes	17%	17%
	No	83%	83%
Does a parent or other adult in your home regularly swear at you, insult you or put you down?	Yes	18%	41%
	No	82%	59%
Has a parent or other adult in your household ever hit, beat, kicked or physically hurt you in any way?	Yes	21%	40%
	No	79%	60%
Have your parents or other adults in your home ever slapped, hit, kicked, punched or beat each other up?	Yes	14%	36%
	No	86%	64%
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	9%	47%
	No	91%	53%
Has any older or stronger member of your family ever touched you or had you touch them sexually?	Yes	5%	25%
	No	95%	75%

2016 Minnesota Student Survey

TABLE 19 RELATIONSHIP VIOLENCE

Juvenile Correctional Facilities

		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	20%	49%
	No	80%	51%
Have you ever had a boyfriend or girlfriend in a dating or serious relationship who hit, slapped or physically hurt you on purpose?	Yes	17%	34%
	No	83%	66%
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	12%	41%
	No	88%	59%
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	22%	36%
	No	78%	64%
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	6%	19%
	No	94%	81%
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	8%	1%
	No	92%	99%

2016 Minnesota Student Survey

TABLE 20 GENERAL HEALTH AND HEALTH CONDITIONS

Juvenile Correctional Facilities

		Male	Female
		%	%
How would you describe your health in general?	Excellent	33%	13%
	Very good	32%	22%
	Good	23%	46%
	Fair	9%	14%
	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	19%	28%
	No	81%	72%
Has a doctor or nurse ever told you that you have asthma?	Yes	18%	24%
	No	82%	76%
Has a doctor or nurse ever told you that you have an allergy that requires you to carry an epi-pen?	Yes	4%	6%
	No	96%	94%
Do you have any long-term mental health, behavioral or emotional problems? Long-term means lasting 6 months or more.	Yes	49%	82%
	No	51%	18%
Weight status according to Body Mass Index (BMI)**	Not overweight	72%	40%
	Overweight	14%	34%
	Obese	14%	25%

** 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

2016 Minnesota Student Survey

TABLE 21 HEALTH CARE ACCESS

Juvenile Correctional Facilities

		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	66%	77%
	Between 1 and 2 years ago	18%	15%
	More than 2 years ago	9%	7%
	Never	7%	0%
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	63%	70%
	Between 1 and 2 years ago	20%	20%
	More than 2 years ago	15%	10%
	Never	1%	0%
Have you ever been treated for a mental health, emotional or behavioral problem? (Mark ALL that apply)	No	47%	17%
	Yes, during the last year	39%	69%
	Yes, more than a year ago	29%	38%
Have you ever been treated for an alcohol or drug problem? (Mark ALL that apply)	No	56%	50%
	Yes, during the last year	36%	44%
	Yes, more than a year ago	12%	13%

2016 Minnesota Student Survey

**TABLE 22
PHYSICAL ACTIVITY; SLEEP; USE OF INDOOR
TANNING DEVICE**

Juvenile Correctional Facilities

		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	14%	23%
	1 day	7%	19%
	2 days	6%	14%
	3 days	12%	10%
	4 days	11%	16%
	5 days	11%	7%
	6 days	4%	4%
	7 days	36%	7%
During a typical school week, on how many days do you go to physical education (PE or gym) classes?	0 days	35%	44%
	1 day	4%	14%
	2 days	9%	10%
	3 days	8%	3%
	4 days	7%	7%
	5 days	37%	21%
During a typical school night, how many hours of sleep do you get?	4 hours or less	9%	6%
	5 hours	8%	13%
	6 hours	19%	17%
	7 hours	23%	16%
	8 hours	23%	34%
	9 hours	12%	7%
	10 or more hours	5%	7%
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	95%	91%
	1 or 2 times	2%	4%
	3 to 9 times	3%	1%
	10 to 19 times	0%	1%
	20 to 39 times	0%	1%
	40 or more times	0%	0%

2016 Minnesota Student Survey

TABLE 23 EATING MEALS

Juvenile Correctional Facilities

		Male	Female
		%	%
During the last 30 days, have you had to skip meals because your family did not have enough money to buy food?	Yes	6%	7%
	No	94%	93%
During a typical school week, where do you usually get your lunch? (Mark ALL that apply)	I usually don't eat lunch	15%	27%
	Regular school lunch from the cafeteria	78%	76%
	The a la carte line (buy individual items)	6%	7%
	School store or vending machine	11%	9%
	Fast food restaurant, gas station or somewhere else outside of school	13%	16%
	I bring lunch from home	6%	14%
Do you currently get free or reduced-price lunch at school?	Yes	63%	68%
	No	37%	32%

2016 Minnesota Student Survey

TABLE 24A
NUTRITION

Juvenile Correctional Facilities

		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	15%	23%
	1 to 3 times in the last 7 days	26%	30%
	4 to 6 times in the last 7 days	12%	9%
	1 time per day	21%	29%
	2 times per day	10%	3%
	3 times per day	4%	1%
	4 or more times per day	13%	4%
During the last 7 days, how many times did you eat fruit?	I did NOT eat or drink this	10%	9%
	1 to 3 times in the last 7 days	22%	22%
	4 to 6 times in the last 7 days	10%	17%
	1 time per day	19%	20%
	2 times per day	14%	16%
	3 times per day	6%	6%
	4 or more times per day	18%	10%
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%	19%
	1 to 3 times in the last 7 days	20%	24%
	4 to 6 times in the last 7 days	11%	13%
	1 time per day	19%	18%
	2 times per day	14%	16%
	3 times per day	5%	4%
	4 or more times per day	9%	6%
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	60%	54%
	1 to 3 times in the last 7 days	20%	23%
	4 to 6 times in the last 7 days	6%	16%
	1 time per day	5%	6%
	2 times per day	5%	0%
	3 times per day	2%	0%
	4 or more times per day	3%	1%

2016 Minnesota Student Survey

**TABLE 24B
NUTRITION**

Juvenile Correctional Facilities

How many cans, bottles or glasses of each of the following did you drink yesterday?		Male	Female
		%	%
Milk	0	13%	17%
	1 to 2	41%	50%
	3 to 4	37%	27%
	5 to 6	3%	4%
	7 or more	6%	1%
Pop or soda	0	67%	63%
	1 to 2	23%	30%
	3 to 4	5%	6%
	5 to 6	2%	1%
	7 or more	4%	0%
Sports drinks, such as Gatorade or Powerade	0	83%	76%
	1 to 2	9%	17%
	3 to 4	4%	4%
	5 to 6	2%	3%
	7 or more	2%	0%
Energy drinks, such as Red Bull or Jolt	0	89%	88%
	1 to 2	5%	4%
	3 to 4	3%	3%
	5 to 6	2%	3%
	7 or more	1%	1%
Other sugar-sweetened drinks, such as sweet tea, lemonade, coffee drinks or juice drinks	0	49%	38%
	1 to 2	38%	46%
	3 to 4	8%	7%
	5 to 6	2%	4%
	7 or more	3%	4%
Water	0	8%	3%
	1 to 2	14%	22%
	3 to 4	18%	28%
	5 to 6	21%	15%
	7 or more	39%	32%

2016 Minnesota Student Survey

**TABLE 25
VEHICLE SAFETY**

Juvenile Correctional Facilities

		Male	Female
		%	%
When driving a car, how often do you wear a seat belt?	I don't drive a car	45%	49%
	I never do this	4%	3%
	Sometimes	14%	14%
	Often	10%	9%
	Always	27%	26%
When driving a car, how often do you send or read incoming text messages or emails?^	I don't drive a car	48%	48%
	I never do this	19%	13%
	Sometimes	18%	26%
	Often	11%	3%
	Always	5%	10%
When driving a car, how often do you make or answer a phone call?	I don't drive a car	48%	48%
	I never do this	10%	9%
	Sometimes	18%	20%
	Often	13%	9%
	Always	11%	14%
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	3%	0%
	Always	57%	60%
	Often	18%	19%
	Sometimes	14%	21%
	I never wear a seatbelt	8%	0%
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	4%	3%
	Always	39%	41%
	Often	19%	13%
	Sometimes	23%	29%
	I never wear a seatbelt	16%	14%

^ Change in question wording from 2013.

2016 Minnesota Student Survey

TABLE 26A SELF DESCRIPTION[^]

Juvenile Correctional Facilities

<i>In general, how does each of the following statements describe you?</i>		Male	Female
		%	%
I feel in control of my life and future.	Not at all or rarely	16%	17%
	Somewhat or sometimes	23%	46%
	Very or often	30%	20%
	Extremely or almost always	30%	16%
I feel good about myself.	Not at all or rarely	11%	22%
	Somewhat or sometimes	25%	36%
	Very or often	25%	28%
	Extremely or almost always	38%	14%
I feel good about my future.	Not at all or rarely	16%	25%
	Somewhat or sometimes	26%	29%
	Very or often	31%	23%
	Extremely or almost always	27%	23%
I deal with disappointment without getting too upset.	Not at all or rarely	18%	28%
	Somewhat or sometimes	37%	42%
	Very or often	33%	20%
	Extremely or almost always	12%	10%
I find good ways to deal with things that are hard in my life.	Not at all or rarely	15%	23%
	Somewhat or sometimes	38%	43%
	Very or often	35%	20%
	Extremely or almost always	12%	13%
I am thinking about what my purpose is in life.	Not at all or rarely	18%	9%
	Somewhat or sometimes	22%	28%
	Very or often	38%	35%
	Extremely or almost always	22%	29%

[^] These items are adapted from the Developmental Assets Profile (DAP) under a license agreement with Search Institute, Minneapolis, MN.

2016 Minnesota Student Survey

TABLE 26B SELF DESCRIPTION[^]

Juvenile Correctional Facilities

<i>In general, how does each of the following statements describe you?</i>		Male	Female
		%	%
I say no to things that are dangerous or unhealthy.	Not at all or rarely	19%	28%
	Somewhat or sometimes	42%	33%
	Very or often	20%	23%
	Extremely or almost always	18%	16%
I build friendships with other people.	Not at all or rarely	11%	17%
	Somewhat or sometimes	27%	26%
	Very or often	38%	36%
	Extremely or almost always	23%	20%
I express my feelings in proper ways.	Not at all or rarely	20%	21%
	Somewhat or sometimes	35%	46%
	Very or often	36%	24%
	Extremely or almost always	9%	10%
I plan ahead and make good choices.	Not at all or rarely	16%	33%
	Somewhat or sometimes	40%	45%
	Very or often	33%	14%
	Extremely or almost always	11%	7%
I stay away from bad influences.	Not at all or rarely	19%	43%
	Somewhat or sometimes	50%	29%
	Very or often	20%	17%
	Extremely or almost always	11%	10%
I resolve conflicts without anyone getting hurt.	Not at all or rarely	14%	26%
	Somewhat or sometimes	44%	36%
	Very or often	30%	26%
	Extremely or almost always	13%	12%

[^] These items are adapted from the Developmental Assets Profile (DAP) under a license agreement with Search Institute, Minneapolis, MN.

2016 Minnesota Student Survey

TABLE 26C SELF DESCRIPTION[^]

Juvenile Correctional Facilities

<i>In general, how does each of the following statements describe you?</i>		Male	Female
		%	%
I accept people who are different from me.	Not at all or rarely	6%	3%
	Somewhat or sometimes	24%	12%
	Very or often	39%	38%
	Extremely or almost always	30%	48%
I am sensitive to the needs and feelings of others.	Not at all or rarely	17%	10%
	Somewhat or sometimes	42%	23%
	Very or often	24%	35%
	Extremely or almost always	18%	32%
I feel valued and appreciated by others.	Not at all or rarely	16%	25%
	Somewhat or sometimes	36%	36%
	Very or often	34%	26%
	Extremely or almost always	14%	13%
I am included in family tasks and decisions.	Not at all or rarely	20%	32%
	Somewhat or sometimes	24%	32%
	Very or often	36%	19%
	Extremely or almost always	20%	17%
I am given useful roles and responsibilities.	Not at all or rarely	14%	23%
	Somewhat or sometimes	27%	26%
	Very or often	39%	29%
	Extremely or almost always	21%	22%

[^] These items are adapted from the Developmental Assets Profile (DAP) under a license agreement with Search Institute, Minneapolis, MN.

2016 Minnesota Student Survey

TABLE 27A EMOTIONAL WELL-BEING AND DISTRESS[^]

Juvenile Correctional Facilities

		Male	Female
		%	%
Over the last 2 weeks, how often have you been bothered by little interest or pleasure in doing things?	Not at all	51%	21%
	Several days	25%	43%
	More than half the days	14%	15%
	Nearly every day	10%	22%
Over the last 2 weeks, how often have you been bothered by feeling down, depressed or hopeless?	Not at all	46%	14%
	Several days	27%	33%
	More than half the days	11%	17%
	Nearly every day	15%	35%

[^] Both questions on this table were new in 2016.

2016 Minnesota Student Survey

**TABLE 28
SELF-INFLICTED INJURY; SUICIDAL THOUGHTS AND
SUICIDAL BEHAVIOR**

Juvenile Correctional Facilities

		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	76%	43%
	1 or 2 times	9%	17%
	3 to 5 times	3%	10%
	6 to 9 times	3%	7%
	10 to 19 times	4%	7%
	20 or more times	5%	16%
Have you ever seriously considered attempting suicide? (Mark all that apply)	No	72%	31%
	Yes, during the last year	17%	49%
	Yes, more than a year ago	18%	41%
Have you ever actually attempted suicide? (Mark all that apply)	No	78%	44%
	Yes, during the last year	10%	36%
	Yes, more than a year ago	17%	36%

2016 Minnesota Student Survey

**TABLE 29
PROBLEMATIC AND ANTISOCIAL BEHAVIOR**

Juvenile Correctional Facilities

<i>During the last 12 months...</i>			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	61%	77%	
		No	39%	23%	
	Have a hard time paying attention at school, work or home	Yes	62%	81%	
		No	38%	19%	
	Have a hard time listening to instructions at school, work or home	Yes	60%	77%	
		No	40%	23%	
	Be a bully or threaten other people	Yes	27%	32%	
		No	73%	68%	
	Start fights with other people	Yes	31%	42%	
		No	69%	58%	
	...how often have you run away from home?	Never		62%	46%
		Once or twice		20%	22%
3 to 5 times		10%	22%		
6 to 9 times		4%	4%		
10 or more times		3%	6%		
...how often have you damaged or destroyed property?	Never		45%	35%	
	Once or twice		36%	35%	
	3 to 5 times		10%	19%	
	6 to 9 times		2%	4%	
	10 or more times		7%	6%	
...how often have you hit or beat up another person?	Never		44%	40%	
	Once or twice		26%	29%	
	3 to 5 times		14%	19%	
	6 to 9 times		5%	3%	
	10 or more times		11%	9%	
...how often have you taken something from a store without paying for it?	Never		47%	43%	
	Once or twice		23%	22%	
	3 to 5 times		8%	6%	
	6 to 9 times		8%	13%	
	10 or more times		14%	16%	

2016 Minnesota Student Survey

TABLE 30A GAMBLING BEHAVIOR[^]

Juvenile Correctional Facilities

<i>During the last 12 months, how often have you done the following gambling/betting activities?</i>		Male	Female
		%	%
Played cards, bet on sports teams or games of personal skill like video gaming, pool, golf or bowling	Not at all	55%	79%
	Less than once a month	13%	7%
	About once a month	10%	7%
	About once a week	7%	1%
	2 to 6 times a week	7%	4%
	Daily	9%	0%
Bought lottery tickets or scratch offs	Not at all	80%	82%
	Less than once a month	8%	12%
	About once a month	8%	4%
	About once a week	2%	0%
	2 to 6 times a week	1%	1%
	Daily	0%	0%
Gambled in a casino	Not at all	90%	96%
	Less than once a month	5%	3%
	About once a month	2%	1%
	About once a week	0%	0%
	2 to 6 times a week	1%	0%
	Daily	3%	0%
Gambled for money online	Not at all	94%	96%
	Less than once a month	0%	3%
	About once a month	1%	1%
	About once a week	3%	0%
	2 to 6 times a week	0%	0%
	Daily	2%	0%

[^] All questions on this table were new in 2016.

2016 Minnesota Student Survey

TABLE 30B GAMBLING BEHAVIOR[^]

Juvenile Correctional Facilities

<i>INCLUDES ONLY THOSE WHO HAVE PARTICIPATED IN ANY GAMBLING ACTIVITIES IN THE LAST 12 MONTHS</i>		Male	Female
		%	%
...hidden your gambling/betting from your parents, other family members or teachers?	Never	86%	90%
	Sometimes	9%	0%
	Many times	2%	10%
	All of the time	3%	0%
...felt that you might have a problem with gambling/betting?	Never	88%	90%
	Sometimes	9%	10%
	Many times	3%	0%
	All of the time	0%	0%
...skipped hanging out with friends who do not gamble/bet to hang out with friends who do gamble/bet?	Never	81%	95%
	Sometimes	9%	5%
	Many times	7%	0%
	All of the time	3%	0%

[^] All questions on this table were new in 2016.

2016 Minnesota Student Survey

**TABLE 31
SUMMARY OF SUBSTANCE USE****

Juvenile Correctional Facilities

		Male	Female
		%	%
Use of conventional tobacco products (cigarettes, cigars, smokeless tobacco) during the past 30 days	No	65%	50%
	Yes	35%	50%
Use of any tobacco products, including e-cigarettes and hookah, during the past 30 days	No	61%	46%
	Yes	39%	54%
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	84%	77%
	Yes	16%	23%
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	24%	20%
	Used only alcohol in the past year	9%	3%
	Used alcohol and marijuana in past year, but not other drugs	10%	5%
	Used marijuana or other drugs but not alcohol in the past year	19%	12%
	Used alcohol and marijuana or other drugs in the past year	39%	61%

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

^ New computed variable in 2016.

2016 Minnesota Student Survey

**TABLE 33
TOBACCO USE**

Juvenile Correctional Facilities

		Male	Female
<i>During the last 30 days, on how many days did you ...</i>		%	%
...smoke a cigarette?	0 days	67%	51%
	1 to 2 days	7%	11%
	3 to 9 days	4%	6%
	10 to 19 days	5%	7%
	20 to 29 days	7%	4%
	All 30 days	10%	20%
...smoke cigars, cigarillos or little cigars?	0 days	82%	74%
	1 to 2 days	4%	9%
	3 to 9 days	5%	9%
	10 to 19 days	3%	3%
	20 to 29 days	1%	1%
	All 30 days	5%	4%
...use chewing tobacco, snuff or dip?	0 days	88%	96%
	1 to 2 days	7%	1%
	3 to 9 days	2%	0%
	10 to 19 days	1%	3%
	20 to 29 days	1%	0%
	All 30 days	2%	0%
...use an electronic cigarette (e-cigarette, e-hookah, vaping pen)?^	0 days	77%	59%
	1 to 2 days	9%	14%
	3 to 9 days	3%	7%
	10 to 19 days	1%	10%
	20 to 29 days	3%	4%
	All 30 days	7%	6%
...use a hookah or a waterpipe to smoke tobacco?^	0 days	90%	77%
	1 to 2 days	6%	10%
	3 to 9 days	2%	7%
	10 to 19 days	1%	6%
	20 to 29 days	0%	0%
	All 30 days	2%	0%
During the last 30 days, on how many days did you smoke cigarettes or other tobacco products that were flavored to taste like mint or menthol?^	0 days	72%	57%
	1 to 2 days	7%	10%
	3 to 9 days	7%	4%
	10 to 19 days	4%	17%
	20 to 29 days	4%	4%
	All 30 days	7%	7%
During the last 30 days, on how many days did you use any tobacco product that was some other flavor, like candy, fruit, chocolate, clove, spice or alcoholic drinks?^	0 days	78%	79%
	1 to 2 days	5%	7%
	3 to 9 days	6%	1%
	10 to 19 days	2%	7%
	20 to 29 days	4%	4%
	All 30 days	4%	1%

^ New questions in 2016.

2016 Minnesota Student Survey

**TABLE 35
ALCOHOL USE FREQUENCY AND QUANTITY**

Juvenile Correctional Facilities

		Male	Female
		%	%
During the last 30 days, on how many days did you drink one or more drinks of an alcoholic beverage?	0 days	75%	64%
	1 or 2 days	8%	12%
	3 to 5 days	4%	7%
	6 to 9 days	4%	4%
	10 to 19 days	5%	10%
	20 to 29 days	2%	1%
	All 30 days	2%	1%
During the last 12 months, on how many occasions (if any) have you had alcoholic beverages to drink?	0	45%	32%
	1-2	15%	11%
	3-5	9%	14%
	6-9	5%	9%
	10-19	10%	9%
	20-39	6%	11%
	40+	11%	15%
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	49%	36%
	1 glass/can/drink	9%	5%
	2 glasses/cans/drinks	7%	11%
	3 glasses/cans/drinks	7%	11%
	4 glasses/cans/drinks	9%	11%
	5 or more glasses/cans/drinks	19%	27%
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	84%	69%
	1 day	7%	3%
	2 days	1%	9%
	3 to 5 days	2%	7%
	6 to 9 days	2%	6%
	10 to 19 days	2%	4%
	20 or more days	2%	1%

2016 Minnesota Student Survey

TABLE 36
AGE OF FIRST USE OF ALCOHOL AND MARIJUANA
Juvenile Correctional Facilities

		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	18%	17%
	10 years old or younger	21%	17%
	11 years old	5%	14%
	12 years old	13%	14%
	13 years old	12%	13%
	14 years old	14%	10%
	15 years old	7%	10%
	16 years old	6%	1%
	17 years old or older	3%	1%
How old were you when you tried marijuana (pot, weed) or hashish (hash, hash oil) for the first time? (Do NOT count medical marijuana prescribed for you by a doctor)^	I have never tried marijuana or hashish	27%	23%
	10 years old or younger	20%	6%
	11 years old	9%	11%
	12 years old	17%	16%
	13 years old	16%	19%
	14 years old	4%	14%
	15 years old	3%	11%
	16 years old	2%	0%
	17 years old or older	1%	0%

^ Change in question wording from 2013.

2016 Minnesota Student Survey

TABLE 37
USE OF MARIJUANA AND PRESCRIPTION DRUGS
Juvenile Correctional Facilities

		Male	Female
		%	%
During the last 30 days, on how many days did you use marijuana or hashish? (Do NOT count medical marijuana prescribed for you by a doctor)^	0 days	69%	60%
	1 to 2 days	5%	13%
	3 to 5 days	4%	4%
	6 to 9 days	2%	7%
	10 to 19 days	3%	0%
	20 to 29 days	5%	6%
	All 30 days	12%	9%
During the last 12 months, on how many occasions (if any) have you used marijuana or hashish? (Do NOT count medical marijuana prescribed for you by a doctor)^	0	39%	32%
	1-2	7%	9%
	3-5	6%	9%
	6-9	2%	4%
	10-19	2%	4%
	20-39	6%	7%
	40+	37%	35%
During the last 30 days, on how many days did you use prescription drugs not prescribed for you?	0 days	77%	66%
	1 to 2 days	5%	14%
	3 to 5 days	3%	6%
	6 to 9 days	7%	7%
	10 to 19 days	2%	4%
	20 to 29 days	3%	3%
	All 30 days	3%	0%

^ Change in question wording from 2013.

2016 Minnesota Student Survey

TABLE 38 PRESCRIPTION DRUG USE[^]

Juvenile Correctional Facilities

<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>		Male	Female
		%	%
Stimulants such as Benzedrine (bennies, speed, uppers, pep pills) or diet pills	0	86%	77%
	1 to 2	2%	11%
	3 to 5	2%	4%
	6 to 9	5%	3%
	10 to 19	2%	3%
	20 or more	4%	1%
ADHD or ADD drugs like Ritalin (hyper pills)	0	86%	69%
	1 to 2	3%	10%
	3 to 5	2%	6%
	6 to 9	3%	4%
	10 to 19	2%	4%
	20 or more	5%	7%
Pain relievers such as Oxycodone, OxyContin (oxy), Percocet, Percodan, Vicodin or others	0	72%	56%
	1 to 2	5%	7%
	3 to 5	6%	10%
	6 to 9	5%	9%
	10 to 19	3%	7%
	20 or more	8%	11%
Tranquilizers such as Valium, Xanax, nerve pills or sedatives or barbiturates (downers)	0	66%	54%
	1 to 2	8%	10%
	3 to 5	7%	10%
	6 to 9	3%	6%
	10 to 19	4%	11%
	20 or more	13%	9%

[^] Due to methodological issues, results for these questions cannot be compared to the results from 2013.

2016 Minnesota Student Survey

**TABLE 39
HALLUCINOGEN, ECSTASY, COCAINE AND HEROIN
USE[^]**

Juvenile Correctional Facilities

<i>During the last 12 months, on how many occasions (if any) have you used...</i>		Male	Female
		%	%
...LSD (acid), PCP (wet sticks or dipped joints), or other psychedelics (mushrooms, angel dust)?	0	78%	70%
	1 to 2	10%	10%
	3 to 5	9%	4%
	6 to 9	2%	11%
	10 to 19	1%	0%
	20 or more	1%	4%
...MDMA (E, X, ecstasy), GHB (G, Liquid E, Liquid X, roofies) or Ketamine (Special K)?	0	85%	81%
	1 to 2	7%	7%
	3 to 5	3%	0%
	6 to 9	1%	3%
	10 to 19	3%	6%
	20 or more	2%	3%
...crack, coke or cocaine in any other form?	0	86%	77%
	1 to 2	5%	6%
	3 to 5	2%	3%
	6 to 9	0%	6%
	10 to 19	4%	4%
	20 or more	3%	4%
...heroin?	0	92%	94%
	1 to 2	4%	3%
	3 to 5	1%	0%
	6 to 9	0%	0%
	10 to 19	1%	1%
	20 or more	3%	1%

[^] Due to methodological issues, results for these questions cannot be compared to the results from 2013.

2016 Minnesota Student Survey

**TABLE 40
METHAMPHETAMINE, OVER-THE-COUNTER DRUG,
SYNTHETIC DRUG AND INHALANT USE[^]**

Juvenile Correctional Facilities

<i>During the last 12 months, on how many occasions (if any) have you ...</i>		Male	Female
		%	%
...used methamphetamine (meth, glass, crank, crystal meth, ice)?	0	88%	80%
	1 to 2	3%	6%
	3 to 5	0%	1%
	6 to 9	2%	3%
	10 to 19	2%	6%
	20 or more	5%	4%
...used over-the-counter drugs such as cough syrup, cold medicine or diet pills that you took only to get high?	0	68%	59%
	1 to 2	9%	11%
	3 to 5	7%	6%
	6 to 9	7%	9%
	10 to 19	2%	7%
	20 or more	7%	9%
...used synthetic drugs such as bath salts (Ivory Wave, White Lightning) or synthetic marijuana (K2, Gold) that you took only to get high?	0	75%	75%
	1 to 2	8%	9%
	3 to 5	4%	0%
	6 to 9	2%	3%
	10 to 19	3%	6%
	20 or more	8%	7%
...sniffed glue or huffed or inhaled the contents of aerosol spray cans or other gases to get high?	0	92%	89%
	1 to 2	5%	6%
	3 to 5	1%	3%
	6 to 9	1%	0%
	10 to 19	0%	0%
	20 or more	1%	3%

[^] Due to methodological issues, results for these questions cannot be compared to the results from 2013.

2016 Minnesota Student Survey

TABLE 41 PERCEIVED RISK OF HARM FROM SUBSTANCE USE

Juvenile Correctional Facilities

<i>How much do you think people risk harming themselves physically or in other ways if they...</i>		Male	Female
		%	%
... smoke one or more packs of cigarettes per day?	No risk	31%	16%
	Slight risk	14%	23%
	Moderate risk	22%	21%
	Great risk	33%	40%
... have five or more drinks of an alcoholic beverage once or twice per week?	No risk	31%	20%
	Slight risk	20%	11%
	Moderate risk	23%	34%
	Great risk	26%	34%
... smoke marijuana once or twice per week?	No risk	58%	44%
	Slight risk	21%	23%
	Moderate risk	9%	16%
	Great risk	13%	17%
... use prescription drugs not prescribed for them?	No risk	24%	14%
	Slight risk	17%	17%
	Moderate risk	26%	24%
	Great risk	33%	44%

2016 Minnesota Student Survey

**TABLE 42
PERCEPTIONS OF OTHERS' DISAPPROVAL OF
SUBSTANCE USE**

Juvenile Correctional Facilities

		Male	Female
		%	%
How wrong do your parents feel it would be for you to smoke cigarettes?	Not at all wrong	18%	9%
	A little bit wrong	17%	13%
	Wrong	28%	28%
	Very wrong	37%	51%
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%	4%
	A little bit wrong	10%	6%
	Wrong	31%	22%
	Very wrong	45%	68%
How wrong do your parents feel it would be for you to smoke marijuana?	Not at all wrong	21%	13%
	A little bit wrong	14%	10%
	Wrong	23%	19%
	Very wrong	42%	58%
How wrong do your parents feel it would be for you to use prescription drugs not prescribed for you?	Not at all wrong	12%	4%
	A little bit wrong	6%	3%
	Wrong	22%	16%
	Very wrong	60%	77%
How wrong do your friends feel it would be for you to smoke cigarettes?	Not at all wrong	50%	59%
	A little bit wrong	24%	10%
	Wrong	11%	12%
	Very wrong	15%	19%
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	44%	41%
	A little bit wrong	21%	17%
	Wrong	18%	20%
	Very wrong	17%	22%
How wrong do your friends feel it would be for you to smoke marijuana?	Not at all wrong	60%	62%
	A little bit wrong	16%	10%
	Wrong	10%	10%
	Very wrong	14%	17%
How wrong do your friends feel it would be for you to use prescription drugs not prescribed for you?	Not at all wrong	39%	41%
	A little bit wrong	14%	14%
	Wrong	17%	19%
	Very wrong	30%	26%

2016 Minnesota Student Survey

TABLE 43 PERCEPTIONS ABOUT ALCOHOL USE

Juvenile Correctional Facilities

		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	46%	32%
	Agree	28%	38%
	Neither agree nor disagree	14%	17%
	Disagree	7%	0%
	Strongly disagree	5%	13%
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	36%	36%
	Agree	24%	23%
	Neither agree nor disagree	20%	20%
	Disagree	11%	7%
	Strongly disagree	8%	13%
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	25%	15%
	Agree	23%	22%
	Neither agree nor disagree	31%	41%
	Disagree	12%	12%
	Strongly disagree	9%	10%
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	20%	15%
	Agree	18%	16%
	Neither agree nor disagree	34%	38%
	Disagree	16%	16%
	Strongly disagree	12%	15%

2016 Minnesota Student Survey

TABLE 44
USE OF TOBACCO, ALCOHOL AND MARIJUANA
Juvenile Correctional Facilities

<i>How often do you use each of the following?</i>		Male	Female
		%	%
Tobacco (cigarettes, chew)	Never	39%	35%
	Tried once or twice	4%	4%
	Once or twice a year	4%	4%
	Once a month	1%	3%
	Twice a month	3%	1%
	Once a week	9%	9%
	Daily	40%	43%
Alcohol (beer, wine, liquor)	Never	32%	32%
	Tried once or twice	9%	12%
	Once or twice a year	13%	4%
	Once a month	8%	13%
	Twice a month	18%	16%
	Once a week	15%	16%
	Daily	4%	7%
Marijuana (pot, hash, hash oil)	Never	36%	38%
	Tried once or twice	8%	6%
	Once or twice a year	3%	3%
	Once a month	2%	1%
	Twice a month	4%	7%
	Once a week	9%	12%
	Daily	38%	32%

2016 Minnesota Student Survey

TABLE 45 PERCEPTIONS OF OTHERS' USE OF TOBACCO, ALCOHOL AND MARIJUANA

Juvenile Correctional Facilities

<i>In your opinion, how often do you think MOST STUDENTS in your school use each of the following?</i>		Male	Female
		%	%
Tobacco (cigarettes, chew)	Never	22%	10%
	Tried once or twice	6%	10%
	Once or twice a year	5%	1%
	Once a month	7%	3%
	Twice a month	7%	6%
	Once a week	12%	16%
	Daily	42%	53%
Alcohol (beer, wine, liquor)	Never	19%	15%
	Tried once or twice	3%	9%
	Once or twice a year	11%	3%
	Once a month	12%	4%
	Twice a month	11%	12%
	Once a week	19%	29%
	Daily	25%	28%
Marijuana (pot, hash, hash oil)	Never	18%	13%
	Tried once or twice	3%	7%
	Once or twice a year	3%	3%
	Once a month	10%	1%
	Twice a month	8%	9%
	Once a week	14%	19%
	Daily	44%	47%

2016 Minnesota Student Survey

**TABLE 46A
CONSEQUENCES OF SUBSTANCE USE**

Juvenile Correctional Facilities

<i>During the last 12 months ...</i>		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	68%	54%
	Yes	32%	46%
...have you tried to cut down on your use of alcohol or drugs but couldn't?	No or no use	82%	69%
	Yes	18%	31%
...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	72%	50%
	Yes	28%	50%
...were there any times when you felt such a strong desire or urge to drink alcohol or to use a drug that you couldn't resist or could not think of anything else?^	No or no use	75%	47%
	Yes	25%	53%
...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	64%	39%
	1 time	5%	10%
	2 times	3%	10%
	3 or more times	29%	41%
...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	77%	60%
	1 time	7%	6%
	2 times	3%	4%
	3 or more times	14%	30%
...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	68%	59%
	1 time	11%	7%
	2 times	4%	7%
	3 or more times	18%	27%

^ New question in 2016.

2016 Minnesota Student Survey

TABLE 46B CONSEQUENCES OF SUBSTANCE USE

Juvenile Correctional Facilities

<i>During the last 12 months, how many times...</i>		Male	Female
		%	%
...have you driven a motor vehicle after using alcohol or drugs?	0 times or no use	68%	63%
	1 time	5%	1%
	2 times	8%	17%
	3 or more times	20%	19%
...have you hit someone or become violent while using alcohol or drugs?	0 times or no use	80%	67%
	1 time	7%	10%
	2 times	4%	9%
	3 or more times	9%	14%
...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	66%	51%
	1 time	10%	10%
	2 times	9%	11%
	3 or more times	15%	27%
...have you used more alcohol or drugs than you intended to?	0 times or no use	69%	60%
	1 time	7%	13%
	2 times	6%	4%
	3 or more times	17%	23%
...has alcohol or drug use left you feeling depressed, agitated, paranoid, or unable to concentrate?	0 times or no use	71%	46%
	1 time	7%	11%
	2 times	9%	11%
	3 or more times	13%	31%
...has alcohol or drug use caused you problems with the law?	0 times or no use	59%	51%
	1 time	11%	9%
	2 times	10%	12%
	3 or more times	20%	29%

2016 Minnesota Student Survey

TABLE 47A SEXUAL BEHAVIOR

Juvenile Correctional Facilities

		Male	Female
		%	%
Have you ever had sexual intercourse ('had sex')?	Yes	82%	84%
	No	18%	16%
During the last 12 months, with how many different male partners have you had sexual intercourse?	None	90%	30%
	1 person	5%	16%
	2 persons	1%	18%
	3 persons	0%	13%
	4 persons	1%	6%
	5 persons	0%	3%
	6 or more persons	3%	13%
During the last 12 months, with how many different female partners have you had sexual intercourse?	None	24%	60%
	1 person	15%	18%
	2 persons	15%	10%
	3 persons	7%	3%
	4 persons	11%	6%
	5 persons	5%	3%
	6 or more persons	23%	0%
How many times have you been pregnant or gotten someone pregnant?	0 times	73%	80%
	1 time	16%	10%
	2 or more times	6%	9%
	Not sure	5%	1%

2016 Minnesota Student Survey

**TABLE 47B
SEXUAL BEHAVIOR
INCLUDES ONLY THOSE WHO HAVE EVER HAD SEXUAL
INTERCOURSE**

Juvenile Correctional Facilities

		Male	Female
		%	%
Have you talked with your partner(s) about protecting yourselves from getting sexually transmitted infections/HIV/AIDS?	Never	31%	33%
	Not with every partner	32%	32%
	At least once with every partner	37%	35%
Have you talked with your partner(s) about preventing pregnancy?	Never	33%	37%
	Not with every partner	33%	25%
	At least once with every partner	35%	39%
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	28%	31%
	Birth control pills	10%	2%
	Condoms	34%	24%
	Depo-Provera/any birth control shot, Nuva Ring/any birth control ring, Implanon/any implant or any IUD	13%	22%
	Withdrawal (pull-out)	14%	18%
	Some other method	0%	4%
	Not sure	1%	0%
The LAST time you had sexual intercourse, did you or your partner use a condom?	Yes	38%	33%
	No	62%	67%
Did you drink alcohol or use drugs before you had sexual intercourse the LAST time?	Yes	42%	43%
	No	58%	57%