



2025 Minnesota Student Survey JCF Tables

December 2025

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In Appreciation

The Minnesota Student Survey (MSS) Interagency Team is indebted to the students, parents, teachers, district assessment coordinators, school and district administrators, principals, and superintendents across the state that agreed to participate in and supported the MSS when it was administered in the first half of 2025. These data are made available as a result of their interest and time, and we are grateful for their efforts.

The planning and implementation of the 2025 Minnesota Student Survey administration resulted from an important collaborative effort among members of the MSS Interagency team, local educators and health professionals, researchers, and community members throughout the state of Minnesota – all of whom encouraged and supported school participation in the MSS.

Members of the MSS Interagency Team include Seyma Birinci, Tai Do, Holly Ponto, and Lana Peterson at the Department of Education; Bob Kuziej, Kat Panas, Molly Meyer, Mark Lee, and Dan Fernandez-Baca at the Department of Health; Phyllis Bengtson, Jeffrey Carpenter, Andrea Orengo, Michele Maruska, Marcos Perez, and Andrea Abel at the Department of Human Services; and Amy Dorman at the Department of Public Safety.

We also thank Allie Hawley March at the Department of Health, Maira Rosas-Lee (formerly with the Department of Education), and Jacquelyn Freund of EpiCog for their valuable contributions to the successful collection of 2025 MSS data.

2025 Minnesota Student Survey

Survey Participation

The 2025 Minnesota Student Survey (MSS) was administered in the first half of 2025 to students in grades 5, 8, 9, and 11 statewide. The survey was voluntary at all levels; districts, schools, parents, and students could all choose to opt out. Many traditional public school districts (61%) chose to participate. Across the state, approximately 50% of fifth graders, 50% of eighth graders, 46% of ninth graders, and 36% of eleventh graders participated in the 2025 MSS. Overall participation across the four grades was approximately 45% of total enrollment.

Results from regular public schools, charter schools, and online schools are included in these tables. Results from nonpublic schools, alternative learning centers, and juvenile correctional facilities are released separately.

All schools and districts that participated in the survey followed federal laws regarding parental notification as required by 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 (Juvenile Correctional Facilities are exempt from this requirement).

Mode of Administration

In 2025, all levels of the MSS were administered online. Only Juvenile Correctional Facilities could choose to administer the MSS on paper.

Items on the Tables

The tables in this report include the responses for all survey items. Items are ordered within the tables by an overarching subject area; the order that items appear on the tables is not necessarily the order that they appeared on the survey.

The table of contents is provided on pages vi-vii. The grade five survey version was shorter than the grade eight survey version, which in turn was shorter than the grade nine and eleven version. The grade five and grade eight versions did not include items appropriate only for older students. Items found on some versions of the survey but not on others are identified on the tables.

Gender Breakdown in Reports

This report comes in two formats: by grade and grade-and-gender. Fifth grade surveys asked “are you a boy or girl” while all other grades were asked about their sex assigned at birth (as on original birth certificate). The grade-and-gender breakdowns are available when counts for sex assigned at birth are at least 25 male and 25 female respondents in each grade level cell.

New Questions and Year-to-Year Comparisons

While most MSS survey questions stayed the same as previous administrations, 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, the student populations change between administrations of the survey.

Validity of Responses

Caution was taken to identify invalid responses and remove them from the survey results. Surveys were removed when responses were highly inconsistent, when there was a pattern of likely exaggeration, when the survey was completed outside of school hours (this did not apply to online students), or when the survey was clearly a test of the online system. In addition, surveys were removed when only the background section of the survey was answered. In total, approximately 3.5% of cases were removed from the 2025 survey data.

Online Access to MSS Data

Data from the Minnesota Student Survey (MSS) are available on the Minnesota Department of Education's [Data Reports and Analytics page](https://public.education.mn.gov/MDEAnalytics/DataTopic.jsp?TOPICID=242) (<https://public.education.mn.gov/MDEAnalytics/DataTopic.jsp?TOPICID=242>). This web report provides access to all state, county, and district level data and provides options for filtering the data in multiple ways.

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TABLE 1A
DEMOGRAPHIC DESCRIPTION
JUVENILE CORRECTION FACILITIES

	Level	
	Level 3	
	N	%
Total number of surveys		
	204	100%
What is your grade in school right now?		
Not Applicable	71	35%
7th Grade	6	3%
8th Grade	15	7%
9th Grade	32	16%
10th Grade	31	15%
11th Grade	49	24%
What was your sex assigned at birth (as on your original birth certificate)?^		
Male	169	83%
Female	32	16%
No answer	3	1%
Age^^		
10 years old	0	0%
11 years old	2	1%
12 years old	3	1%
13 years old	14	7%
14 years old	15	7%
15 years old	40	20%
16 years old	37	18%
17 years old	64	31%
18 years old	28	14%
19-20 years old	1	0%
How do you describe yourself? (Mark ALL that apply)		
American Indian or Alaskan Native only	23	11%
Asian, South Asian or Asian American only	3	1%
Black, African or African American only	70	34%
Hispanic or Latino/Latina only	15	7%
White only	46	23%
Multiple Races (checked more than one)	46	23%
No answer	1	0%

^ Level 1 survey asked "Are you a boy or girl" and included "Option not listed" as a response option

^^ Students who select "9 years old or younger" or "21 years old or older" were excluded from this report.

TABLE 1B
DEMOGRAPHIC DESCRIPTION
JUVENILE CORRECTION FACILITIES

	Level	
	Level 3	
	N	%
If you are American Indian or Alaskan Native, which group best describes you? (Mark ALL that apply)		
Anishinaabe/ Ojibwe	28	14%
Dakota/Lakota	9	4%
Other tribal affiliation	15	7%
If you are Asian or Asian American, which group best describes you? (Mark ALL that apply)		
Karen	2	1%
Korean	1	0%
Lao	1	0%
If you are Black, African or African American, which group best describes you? (Mark ALL that apply)		
African American	80	39%
Ethiopian – Other	1	0%
Liberian	5	2%
Nigerian	1	0%
Somali	6	3%
Other Black, African or African American	23	11%

TABLE 1B (CONT.)
DEMOGRAPHIC DESCRIPTION
JUVENILE CORRECTION FACILITIES

	Level	
	Level 3	
	N	%
If you are Hispanic or Latino/Latina, which group best describes you? (Mark ALL that apply)		
Guatemalan	3	1%
Mexican	21	10%
Puerto Rican	7	3%
Salvadoran	3	1%
Spanish/Spanish-American	3	1%
Other Hispanic or Latino/Latina	4	2%

TABLE 2
GENDER EXPRESSION; SEXUAL ORIENTATION; GENDER IDENTITY*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
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	6%
Somewhat feminine	5%
Equally feminine and masculine	14%
Somewhat masculine	15%
Very or mostly masculine	59%
How do you describe your sexual orientation?	
Straight (heterosexual)	85%
Asexual	0%
Bisexual	6%
Gay or Lesbian	1%
Questioning/Not sure	1%
Pansexual	0%
Queer	0%
I don't describe myself in any of these ways	4%
I am not sure what this question means	1%
What is your gender identity? (Mark ALL that apply)	
Agender	2%
Boy/man (cisgender, which means your gender identity matches your sex assigned at birth)	79%
Boy/man (transgender, which means your gender identity does not match your sex assigned at birth)	1%
Genderfluid, gender non-conforming, or genderqueer	1%
Girl/woman (cisgender, which means your gender identity matches your sex assigned at birth)	15%
Girl/woman (transgender, which means your gender identity does not match your sex assigned at birth)	1%
Two spirit	1%
Questioning/ unsure	2%
Identity not listed	1%

* Level 1 surveys did not ask these questions.

TABLE 3
SCHOOL PLANS; ACADEMIC ADVISING; IEP; CHANGING SCHOOLS; ACADEMIC PERFORMANCE
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
What is the MAIN thing you plan to do RIGHT AFTER high school?*	
I don't plan to graduate from high school	3%
Get my GED	15%
Go to a two-year community or technical college	9%
Go to a four-year college or university	19%
Get a license or certificate in a career field	9%
Attend an apprenticeship program	2%
Join the military	5%
Work at a job	22%
Other	17%
Has an adult in your school helped you think about education options for after high school (college or other training program)?**	
Yes	72%
No	28%
Has an adult in your school helped you find career-focused field experiences (job shadowing, work-based learning, service learning, career camps, apprenticeships)?**	
Yes	70%
No	30%
Do you receive special education services as part of an IEP (individualized education program)?	
Yes	53%
No	37%
Not sure	11%
Since the beginning of this school year, have you changed schools?	
Yes	53%
No	47%
How would you describe your grades this school year?	
Mostly A's	33%
Mostly B's	37%
Mostly C's	16%
Mostly D's	6%
Mostly F's	4%
Mostly Incompletes	3%
None of these letter grades	1%

* Level 1 surveys did not ask this question.

** Level 1 and 2 surveys did not ask this question.

TABLE 4
TRANSPORTATION TO AND FROM SCHOOL*^
JUVENILE CORRECTION FACILITIES

No data in this table.

* Level 3 and JCF survey did not ask this question.

TABLE 5
SCHOOL ATTENDANCE
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
During the last 30 days, how many times did you miss a full day of school? (Do not include school-sponsored activities like field trips, sports, academic or music events)^	
None	55%
Once or twice	19%
3 to 5 times	12%
6 or more times	15%
During the last 30 days, how many times did you miss part of a day of school such as coming late, leaving early or missing class time during the day? (Do not include school-sponsored activities like field trips, sports, academic, or music events)	
None	41%
Once or twice	24%
3 to 5 times	18%
6 to 9 times	6%
10 or more times	11%
AMONG THOSE WHO MISSED PART OF OR A FULL DAY OF SCHOOL: What are the reasons you missed a full or part of a day of school in the last 30 days? (Mark ALL that apply)	
Felt sick	33%
Medical, dental or other health-related appointment	23%
Felt very sad, hopeless, anxious, stressed or angry	17%
Didn't get enough sleep	26%
Didn't feel safe at school	6%
Had to work (for pay or to help with a family business or chores)	2%
Had to take care of or help someone else (child, sibling, relative, etc.)^	6%
Behind in schoolwork or not prepared for a test or class assignment	10%
Bored with or not interested in school	22%
Suspended from school	20%
Other reason	33%
Was in quarantine^^	2%
Did not want to go^^	32%
Did not feel like I belonged at school^^	7%
Hung out with friends instead^^	17%
Was out of town^^	15%
Had a religious holiday or cultural event^^	1%
Had issues with transportation^^	12%

^ Change in response option wording from 2022.

^^ New response option in 2025.

TABLE 6
DISCIPLINE; FEELINGS ABOUT SCHOOL
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
During the last 30 days, how many times did you get sent out of the classroom for discipline?	
None	67%
Once or twice	17%
3 to 5 times	10%
6 to 9 times	2%
10 or more times	4%
How often do you care about doing well in school?	
All of the time	35%
Most of the time	39%
Some of the time	22%
None of the time	5%
How often do you go to class unprepared?	
All of the time	12%
Most of the time	17%
Some of the time	46%
None of the time	25%
How often do you pay attention in class?	
All of the time	23%
Most of the time	48%
Some of the time	25%
None of the time	5%

TABLE 7
FEELINGS ABOUT SCHOOL
JUVENILE CORRECTION FACILITIES

	Level
	Level 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	51%
Agree	46%
Disagree	3%
Strongly disagree	0%
I think things I learn at school are useful.	
Strongly agree	17%
Agree	55%
Disagree	23%
Strongly disagree	5%
Being a student is one of the most important parts of who I am.	
Strongly agree	16%
Agree	34%
Disagree	40%
Strongly disagree	11%
Overall, adults at my school treat students fairly.	
Strongly agree	25%
Agree	54%
Disagree	19%
Strongly disagree	3%
Adults at my school listen to the students.	
Strongly agree	24%
Agree	49%
Disagree	24%
Strongly disagree	3%
The school rules are fair	
Strongly agree	20%
Agree	56%
Disagree	21%
Strongly disagree	3%
At my school, teachers care about students.	
Strongly agree	28%
Agree	53%
Disagree	15%
Strongly disagree	4%
Most teachers at my school are interested in me as a person.	
Strongly agree	23%
Agree	51%
Disagree	22%
Strongly disagree	4%

TABLE 8A
PRESENCE OF A SCHOOL RESOURCE/POLICE OFFICER*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
Is there a police officer or School Resource Officer (SRO) at your school?	
Yes	57%
No	23%
I don't know	19%
IF POLICE OFFICER OR SRO AT SCHOOL: If I knew about something unsafe or illegal at my school, I would tell the SRO or police officer.	
Strongly agree	29%
Agree	21%
Disagree	24%
Strongly disagree	26%
IF POLICE OFFICER OR SRO AT SCHOOL: I would feel comfortable going to my school's police officer or SRO if I was having problems or needed help.	
Strongly agree	24%
Agree	27%
Disagree	25%
Strongly disagree	24%
IF POLICE OFFICER OR SRO AT SCHOOL: I think it is a good idea to have an SRO or police officer at our school.	
Strongly agree	31%
Agree	37%
Disagree	14%
Strongly disagree	17%

* Level 1 survey did not ask these questions.

TABLE 8B
COMFORT GOING TO POLICE OFFICER*
JUVENILE CORRECTION FACILITIES

No data in this table.

* Level 3 and JCF survey did not ask this question.

TABLE 9
PERCEPTIONS OF SAFETY
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
How much do you agree or disagree with each of the following statements?	%
I feel safe going to and from school.	
Strongly agree	42%
Agree	47%
Disagree	9%
Strongly disagree	2%
I feel safe at school.	
Strongly agree	38%
Agree	49%
Disagree	12%
Strongly disagree	2%
I feel safe in my neighborhood.	
Strongly agree	41%
Agree	45%
Disagree	12%
Strongly disagree	2%
I feel safe at home.	
Strongly agree	55%
Agree	36%
Disagree	7%
Strongly disagree	2%

TABLE 10
AFTER SCHOOL SUPERVISION
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
During a typical week, where do you go after school?^ (Mark ALL that apply)	
I stay at my school or go to another school	11%
My home or another home such as a friend's, relative's or neighbor's	82%
A rec, community or other youth center	17%
A park or other outdoor space	23%
A library	9%
A church, synagogue, mosque, or other spiritual/religious place	6%

^ Change in question wording and response options from 2022.

TABLE 11
BEING BULLIED FOR SPECIFIC REASONS
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
During the last 30 days, how often have other students harassed or bullied you?^	
Never	77%
Once or twice	13%
Three or more times	10%
IF BULLIED DURING THE LAST 30 DAYS, for which of these reasons were you harassed or bullied?^^ (Mark ALL that apply)	
Your race, ethnicity or national origin	27%
Your religion or religious beliefs, including a lack of religious beliefs (e.g., agnosticism or atheism)	11%
Your sex or gender (being male, female, transgender, genderqueer, genderfluid.)^^^	11%
Your gender expression (your style, dress, or the way you walk or talk)*	27%
Because you are bisexual, gay, lesbian, asexual, pansexual, queer, or because someone thought you were*	18%
A physical or mental disability	22%
Your size or weight	29%
Your physical appearance	42%
Reason not listed^^^^	42%

* Level 1 surveys did not ask this question.

^ New question in 2025.

^^ Change in question wording from 2022.

^^^ Level 1 survey item was worded "Your gender (being male or female)".

^^^^ New response option in 2025.

TABLE 12
BEING BULLIED OR HARRASSED AT SCHOOL
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
During the last 30 days, how often have other students at school...	%
...pushed, shoved, slapped, hit or kicked you when they weren't kidding around?	
Never	91%
Once or twice	5%
About once a week	2%
Several times a week	2%
Every day	1%
...threatened to beat you up?	
Never	77%
Once or twice	14%
About once a week	4%
Several times a week	3%
Every day	3%
...spread mean rumors or lies about you?	
Never	66%
Once or twice	22%
About once a week	3%
Several times a week	3%
Every day	6%
...made sexual jokes, comments or gestures towards you?*	
Never	84%
Once or twice	9%
About once a week	3%
Several times a week	3%
Every day	1%
...excluded you from friends, other students or activities?	
Never	83%
Once or twice	10%
About once a week	2%
Several times a week	3%
Every day	3%
Bullied once or more in the last 30 days^	
No	57%
Yes	43%
Bullied weekly or more in last 30 days^	
No	83%
Yes	17%
Bullied daily in the last 30 days^	
No	91%
Yes	9%

* Level 1 surveys did not ask this question.

^ These are computed variables based on combinations of responses to the first five questions on this table.

TABLE 13
BEING CYBERBULLIED
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
During the last 30 days, how often have you been cyberbullied? (Count being bullied through texting, Instagram, Snapchat, TikTok or other social media)^	
Never	88%
Once or twice	10%
Three or more times	3%

^ Change in response options from 2022.

TABLE 14A
AVAILABILITY OF COMMUNITY PROGRAMS
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
Does your school or community offer a variety of programs for people your age to participate in outside of the regular school day?	
Yes	53%
No	21%
I don't know what programs are available in my community	26%

TABLE 14B
ENRICHMENT ACTIVITIES
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
During a typical week, how often do you participate in activities outside of the regular school day?^	
0 days	34%
1 day	9%
2 days	12%
3 days	12%
4 days	6%
5 or more days	27%
During a typical week, do you participate in the following activities outside of the regular school day?^^ (Mark ALL that apply)	
Sports activities or physical activities^^^	43%
School sponsored activities or clubs that are not sports, such as drama, music, chess, or science club	8%
Tutoring, homework help, or academic programs	5%
Leadership activities such as student government, youth councils, or committees	7%
Artistic activities, such as music, dance, drawing, photography, or pottery	6%
Cultural heritage programs	3%
Other community clubs and programs such as 4-H, Scouts, Y-clubs, or Community Ed	4%
Religious activities such as religious services, education, or youth group	9%

^ New question in 2025.

^^ Response options changed from 2022.

^^^ New response option in 2025.

TABLE 15
REASONS FOR NOT PARTICIPATING IN ENRICHMENT ACTIVITIES*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
IF NO PARTICIPATION: What are the reasons you don't participate in any activities, programs or clubs outside of the regular school day? (Mark ALL that apply)	
I do not know what is available in my community.	23%
Activities are not available in my community.	8%
Activities cost too much.	10%
My parents (or guardians) won't let me.	6%
My friends are not there.	8%
I am not interested.	50%
I am too busy with other things, such as a job or homework.	19%
I don't have a way to get there or home.	8%
I have to take care of other family members.	2%
It is not a safe place.	6%
Other	15%

* Level 1 survey did not ask this question.

TABLE 16
QUALITY OF YOUTH ACTIVITIES[^]
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
When you do spend time doing activities outside of the regular school day, how often do you...	%
...feel safe?	
Rarely or never	12%
Sometimes	17%
Often	27%
Very often	43%
...learn skills like teamwork or leadership?	
Rarely or never	14%
Sometimes	24%
Often	35%
Very often	27%
...develop trusting relationships with peers your age?	
Rarely or never	16%
Sometimes	23%
Often	33%
Very often	28%
...develop trusting relationships with adults?	
Rarely or never	19%
Sometimes	28%
Often	32%
Very often	21%
...help make decisions?	
Rarely or never	16%
Sometimes	25%
Often	32%
Very often	27%
...do something that gives you joy and energy?	
Rarely or never	11%
Sometimes	21%
Often	32%
Very often	36%
...learn skills that you can use in a future job?	
Rarely or never	16%
Sometimes	21%
Often	35%
Very often	27%

[^] These items are a subscale of the Constructive Use of Time Scale from the Developmental Assets Profile (DAP) (Search Institute, Minneapolis, MN).

TABLE 17
LIVING SITUATIONS
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
Have you ever been in foster care?^	
Yes	35%
No	65%
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?^* (Mark ALL that apply)	
No	74%
Yes, I was with my parents or an adult family member	9%
Yes, I was on my own without any adult family member	16%
Has there been an adult in your household who makes sure your basic needs were met, such as looking after your safety and making sure you have clean clothes and enough to eat?^*^^	
Never	10%
Rarely	7%
Sometimes	10%
Most of the time	15%
Always	57%
Have any of your parents or guardians ever been in jail or prison?^*	
Yes	60%
No	40%
IF YOU HAVE OR HAVE HAD PARENT OR GUARDIAN IN JAIL OR PRISON: Did you live with a parent or guardian at the time they went to jail or prison?*	
Yes	68%
No	32%

* Level 1 surveys did not ask this question.

^ Response options changed from 2022.

^^ New question in 2025.

TABLE 18
COMMUNICATION WITH ADULTS
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
Which of these adults can you talk to about problems you are having? (Mark ALL that apply)	
Parent or guardian	74%
Adult at school	17%
Some other adult	29%
I don't have any adults that I can talk to about problems I am having	12%

TABLE 19
PERCEPTIONS OF FAMILY AND OTHERS CARING
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
How much do you feel...	%
...your parents care about you?	
Not at all	13%
A little	4%
Some	9%
Quite a bit	10%
Very much	65%
...other adult relatives care about you?	
Not at all	5%
A little	9%
Some	15%
Quite a bit	17%
Very much	54%
...friends care about you?	
Not at all	9%
A little	3%
Some	17%
Quite a bit	25%
Very much	46%
...teachers at school care about you?	
Not at all	18%
A little	10%
Some	28%
Quite a bit	20%
Very much	24%
...other adults at school care about you?	
Not at all	16%
A little	12%
Some	24%
Quite a bit	22%
Very much	25%
...adults in your community care about you?	
Not at all	16%
A little	14%
Some	26%
Quite a bit	20%
Very much	24%

TABLE 20
ADVERSE CHILDHOOD EXPERIENCES*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
Do you live with anyone who drinks too much alcohol?	
Yes	24%
No	76%
Do you live with anyone who uses illegal drugs or abuses prescription drugs?	
Yes	21%
No	79%
Do you live with anyone who is depressed or has any other mental health issues?	
Yes	29%
No	71%
Does a parent or other adult in your home regularly swear at you, insult you or put you down?	
Yes	23%
No	77%
Has a parent or other adult in your home ever hit, beat, kicked or physically hurt you in any way?	
Yes	31%
No	69%
Have your parents or other adults in your home ever slapped, hit, kicked, punched or beat each other up?	
Yes	27%
No	73%
Has anyone who was not a relative/family member ever pressured, tricked, or forced you to do something sexual or done something sexual to you against your wishes?	
Yes	19%
No	81%
Has any relative/family member ever pressured, tricked, or forced you to do something sexual or done something sexual to you?	
Yes	11%
No	89%
Have you ever traded sex or sexual activity to receive money, food, drugs, alcohol, a place to stay, or anything else?*	
Yes	9%
No	91%
ACEs Score-short^	
None	25%
One	23%
Two	13%
Three	7%
Four or more	31%

* Level 1 survey did not ask these questions.

** Level 2 survey did not ask this question.

^ An adverse childhood experience (ACE) describes a traumatic experience in a person's life occurring before age 18. The ACEs Score-short is a measure of cumulative exposure to adverse childhood conditions, and combines the responses to all but the last question in this table plus the responses to the first question about parental incarceration (See Table 17).

TABLE 21A
GUN VIOLENCE[^]
JUVENILE CORRECTION FACILITIES

		Level
		Level 3
		%
Have you ever experienced people using guns to threaten or hurt others in person?		
Yes		43%
No		57%

[^] New question in 2025.

TABLE 21B
RELATIONSHIP VIOLENCE*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
Have you been in a casual or serious relationship where your partner ever physically hurt you on purpose (shoved, kicked, slapped, punched, pulled hair, strangled, injured you with an object or weapon, etc.)?	
Yes	22%
No	78%
Have you been in a casual or serious relationship where your partner ever verbally hurt or controlled you (called you names, told you what you could wear or eat, told you who you could see or talk to, threatened you, blamed you for their behavior, etc.)?	
Yes	26%
No	74%
Have you been in a casual or serious relationship where your partner ever pressured, tricked, or forced you to do something sexual, or did something sexual to you against your wishes?*	
Yes	14%
No	86%
Have YOU ever pressured, tricked, or forced someone to do something sexual, or have you done something sexual to someone against their wishes?*	
Yes	10%
No	85%
Not sure	4%

* Level 1 survey did not ask these questions.

** Level 2 survey did not ask this question.

TABLE 22
PHYSICAL HEALTH
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
How would you describe your health in general?	
Excellent	24%
Very good	34%
Good	28%
Fair	12%
Poor	2%
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	22%
No	78%
Has a doctor or nurse ever told you that you have diabetes?	
Yes	5%
No	95%
Has a doctor or nurse ever told you that you have pre-diabetes?	
Yes	6%
No	94%
Has a doctor or nurse ever told you that you have asthma?	
Yes	27%
No	73%
Has a doctor or nurse ever told you that you have an allergy that requires you to carry an epi-pen?	
Yes	8%
No	92%
Weight status	
Normal	56%
Underweight	3%
Overweight	15%
Obese	26%

* Level 1 survey did not ask this question. 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. Underweight: Less than the 5th percentile Not overweight or underweight: 5th to less than the 85th percentile Overweight: 85th to less than the 95th percentile Obese: Equal to or greater than the 95th percentile

TABLE 23
MENTAL HEALTH
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
Do you have any long-term mental health, behavioral or emotional problems? Long-term means lasting 6 months or more.*	
Yes	47%
No	53%
Have you ever been treated for a mental health, emotional or behavioral problem? (Mark ALL that apply)	
No	37%
Yes, during the last year	44%
Yes, more than a year ago	24%
Have you ever been treated for an alcohol or drug problem? (Mark ALL that apply)*	
No	69%
Yes, during the last year	24%
Yes, more than a year ago	8%
When you are feeling upset, stressed or having problems, how comfortable are you talking to a counselor or social worker at school?	
Very comfortable	16%
Somewhat comfortable	48%
Not at all comfortable	30%
There is no counselor or social worker at my school	5%

* Level 1 survey did not ask this question.

TABLE 24
ORAL HEALTH
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
When was the last time you saw a dentist for a check-up, exam, or teeth cleaning or other dental work?	
During the last year	58%
Between 1 and 2 years ago	21%
More than 2 years ago	18%
Never	4%
Have you had any dental problems during the past 12 months?^	
Yes	49%
No	51%
Have you had any of the following dental problems during the past 12 months? (Mark ALL that apply)	
Toothaches or pain	26%
Decayed teeth or cavities	21%
Swollen, painful or bleeding gums	10%
Could not eat certain foods because of a dental problem	8%
Missed one or more school days because of a dental problem	7%
IF ONE OR MORE DENTAL PROBLEMS: Have you had this dental problem treated by a dentist?	
Yes	41%
No, but I will see a dentist	45%
No, I am not able to get dental treatment	14%

^ New question in 2025.

TABLE 25A
PHYSICAL ACTIVITY AND SLEEP
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
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	15%
1 day	2%
2 days	5%
3 days	9%
4 days	10%
5 days	10%
6 days	5%
7 days	45%
During a typical school night, how many hours of sleep do you get?	
4 hours or less	13%
5 hours	6%
6 hours	17%
7 hours	14%
8 hours	34%
9 hours	10%
10 or more hours	6%

TABLE 25B
SOCIAL MEDIA USE[^]
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
During an average week when you are in school, on how many school nights do you use technology between midnight and 5AM? (Count time spent playing games, watching videos, texting, or using social media on your devices.)	
0 school nights	37%
1 school night	7%
2 school nights	9%
3 school nights	8%
4 school nights	7%
5 school nights	31%
In a typical week, how often do you use social media?*	
I do not use social media	31%
Less than once a week	4%
A couple days a week	8%
About once a day	4%
Several times a day	29%
About once an hour or more	24%
IF USE SOCIAL MEDIA: Do you feel that you might have a problem with spending too much time on social media?*	
Yes	34%
No	66%
IF USE SOCIAL MEDIA: Do you skip important social or recreational activities like sports or being with friends or relatives to be on social media?*	
Yes	15%
No	85%
IF USE SOCIAL MEDIA: Do you have trouble getting your homework, chores, or other major responsibilities done because you were spending time on social media?*	
Yes	35%
No	65%

* Level 1 survey did not ask this question.

[^] New questions in 2025.

TABLE 26A
EATING LUNCH
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
During a typical school week, where do you usually get your lunch? (Mark the number of days for each)	%
I don't eat lunch^^	
0 days	53%
1 day	11%
2 days	7%
3 days	9%
4 days	4%
5 days	16%
Regular school lunch from the cafeteria	
0 days	27%
1 day	10%
2 days	11%
3 days	4%
4 days	4%
5 days	45%
The a la carte line (buy individual items)	
0 days	62%
1 day	9%
2 days	8%
3 days	11%
4 days	3%
5 days	7%
School store or vending machine	
0 days	50%
1 day	10%
2 days	9%
3 days	13%
4 days	4%
5 days	14%
Fast food restaurant, gas station or somewhere else outside of school	
0 days	42%
1 day	11%
2 days	12%
3 days	10%
4 days	7%
5 days	18%
I bring lunch from home	
0 days	62%
1 day	7%
2 days	9%
3 days	5%
4 days	4%
5 days	12%

^ Response options have changed from 2022.

^^ Change in question wording from 2022.

TABLE 26B
EATING BREAKFAST; SKIPPING MEALS
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
During a typical school week, where do you usually get your breakfast? (Mark the number of days for each)	%
I don't eat breakfast^	
0 days	52%
1 day	7%
2 days	9%
3 days	6%
4 days	4%
5 days	22%
Regular school breakfast from the cafeteria^	
0 days	42%
1 day	11%
2 days	9%
3 days	7%
4 days	4%
5 days	27%
The a la carte line (buy individual items)^	
0 days	71%
1 day	8%
2 days	9%
3 days	7%
4 days	1%
5 days	5%
School store or vending machine^	
0 days	64%
1 day	10%
2 days	9%
3 days	7%
4 days	5%
5 days	6%
Fast food restaurant, gas station or somewhere else outside of school^	
0 days	51%
1 day	10%
2 days	11%
3 days	12%
4 days	4%
5 days	12%
I eat breakfast from home^	
0 days	45%
1 day	11%
2 days	11%
3 days	6%
4 days	6%
5 days	22%
During the last 30 days, have you had to skip meals because your family did not have enough money to buy food?	
Yes	9%
No	91%

^ New questions in 2025.

TABLE 26C
FRUIT AND VEGETABLE CONSUMPTION*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
During the last 7 days, how many times did you...?	%
...drink 100% fruit juices such as orange, apple or grape juice? (Do not count punch, Kool-Aid, sports drinks or other fruit-flavored drinks)	
I did NOT eat or drink this	23%
1 to 3 times in the last 7 days	25%
4 to 6 times in the last 7 days	15%
1 time per day	11%
2 times per day	12%
3 times per day	5%
4 or more times per day	10%
...eat fruit? (Do not count fruit juice)	
I did NOT eat or drink this	13%
1 to 3 times in the last 7 days	22%
4 to 6 times in the last 7 days	17%
1 time per day	15%
2 times per day	10%
3 times per day	9%
4 or more times per day	12%
...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%
1 to 3 times in the last 7 days	27%
4 to 6 times in the last 7 days	17%
1 time per day	12%
2 times per day	10%
3 times per day	4%
4 or more times per day	10%
...eat from a fast food restaurant, including carry-out or delivery?	
I did NOT eat or drink this	52%
1 to 3 times in the last 7 days	24%
4 to 6 times in the last 7 days	6%
1 time per day	7%
2 times per day	4%
3 times per day	2%
4 or more times per day	5%
Servings of fruits, fruit juice and vegetables per day during the last 7 days^	
Less than five	75%
Five or more	25%

* Level 1 survey did not ask these questions.

^ This is a computed variable based on combinations of responses to the first three questions on this table.

TABLE 26D
MILK AND WATER CONSUMPTION*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
During the last 7 days, how many times did you drink...?	%
... a glass of milk? (Count the milk you drank in a cup, from a carton, or with cereal)	
I did NOT eat or drink this	26%
1 to 3 times in the last 7 days	18%
4 to 6 times in the last 7 days	11%
1 time per day	5%
2 times per day	10%
3 times per day	16%
4 or more times per day	15%
... a glass or drink of tap water from a drinking fountain, faucet or sink?	
I did NOT eat or drink this	13%
1 to 3 times in the last 7 days	14%
4 to 6 times in the last 7 days	10%
1 time per day	7%
2 times per day	7%
3 times per day	9%
4 or more times per day	39%
... a bottle of water (plain water that is not flavored or carbonated)?	
I did NOT eat or drink this	40%
1 to 3 times in the last 7 days	16%
4 to 6 times in the last 7 days	8%
1 time per day	8%
2 times per day	3%
3 times per day	8%
4 or more times per day	17%

* Level 1 survey did not ask these questions.

TABLE 26E
SUGAR-SWEETENED BEVERAGE CONSUMPTION*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
During the last 7 days, how many times did you drink...?	%
... a can, bottle or glass of pop or soda, such as Coke, Pepsi or Sprite (Do not count diet pop or diet soda)?	
I did NOT eat or drink this	48%
1 to 3 times in the last 7 days	31%
4 to 6 times in the last 7 days	10%
1 time per day	3%
2 times per day	3%
3 times per day	2%
4 or more times per day	3%
... a can, bottle or glass of a sports drink, such as Gatorade or Powerade? (Do not count low-calorie sports drinks such as Propel or G2)	
I did NOT eat or drink this	63%
1 to 3 times in the last 7 days	17%
4 to 6 times in the last 7 days	8%
1 time per day	5%
2 times per day	3%
3 times per day	2%
4 or more times per day	1%
... a can, bottle or glass of an energy drink, such as Rockstar, Red Bull, Monster or Full Throttle?	
I did NOT eat or drink this	76%
1 to 3 times in the last 7 days	7%
4 to 6 times in the last 7 days	6%
1 time per day	7%
2 times per day	4%
3 times per day	1%
4 or more times per day	1%
... a can, bottle or glass of coffee or tea that had sugar, syrups or honey added to it? (Count coffee/ tea you added a sweetener to/ already had sweetener, e.g. Arizona Iced Tea/Frappuccinos. Don't count artificial sweeteners e.g. Splenda/diet drinks)	
I did NOT eat or drink this	72%
1 to 3 times in the last 7 days	16%
4 to 6 times in the last 7 days	4%
1 time per day	4%
2 times per day	2%
3 times per day	1%
4 or more times per day	1%
... a can, bottle or glass of a sweetened fruit drink, such as Kool-Aid, Capri Sun or lemonade? (Do not include 100% fruit juice, such as 100% pure orange juice)	
I did NOT eat or drink this	47%
1 to 3 times in the last 7 days	21%
4 to 6 times in the last 7 days	14%
1 time per day	9%
2 times per day	3%
3 times per day	3%
4 or more times per day	3%

* Level 1 survey did not ask these questions.

TABLE 27
VEHICLE SAFETY
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
When driving a car, truck or SUV, how often do you handle your phone to do things like send or read text messages, take pictures, use social media, stream videos, or videochat?* [^]	
I don't drive a car, truck or SUV	43%
Never	21%
Sometimes	27%
Always	9%
How often do you wear a seat belt when you are driving or riding in a car, truck, or SUV? ^{^ ^}	
Never	11%
Sometimes	40%
Always	49%

* Level 1 and 2 surveys did not ask this question.

[^] Response options changed from 2022.

^{^ ^} On the Level 1 survey, this question was worded 'How often do you wear a seat belt when you are riding in a car, truck or SUV?'

TABLE 28A
SELF DESCRIPTION[^]
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
In general, how does each of the following statements describe you?	%
I feel in control of my life and future.^{^^}	
Not at all or rarely	17%
Somewhat or sometimes	24%
Very or often	32%
Extremely or almost always	27%
I feel good about myself.	
Not at all or rarely	9%
Somewhat or sometimes	23%
Very or often	35%
Extremely or almost always	32%
I feel good about my future.	
Not at all or rarely	15%
Somewhat or sometimes	22%
Very or often	37%
Extremely or almost always	26%
I deal with disappointment without getting too upset.	
Not at all or rarely	16%
Somewhat or sometimes	39%
Very or often	33%
Extremely or almost always	12%
I find good ways to deal with things that are hard in my life.	
Not at all or rarely	13%
Somewhat or sometimes	37%
Very or often	35%
Extremely or almost always	15%
I am thinking about what my purpose is in life.^{^^^}	
Not at all or rarely	10%
Somewhat or sometimes	28%
Very or often	38%
Extremely or almost always	24%

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

^{^^} On the Level 1 survey, this item was worded 'I can shape and influence what happens in my life and future.'

^{^^^} On the Level 1 survey, this item was worded 'I think about what I want to do in my life when I grow up.'

TABLE 28B
SELF DESCRIPTION[^]
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
In general, how does each of the following statements describe you?	%
I say no to things that are dangerous or unhealthy.	
Not at all or rarely	18%
Somewhat or sometimes	34%
Very or often	31%
Extremely or almost always	17%
I build friendships with other people.	
Not at all or rarely	12%
Somewhat or sometimes	23%
Very or often	41%
Extremely or almost always	24%
I express my feelings in proper ways.	
Not at all or rarely	15%
Somewhat or sometimes	44%
Very or often	27%
Extremely or almost always	14%
I plan ahead and make good choices.	
Not at all or rarely	16%
Somewhat or sometimes	38%
Very or often	32%
Extremely or almost always	14%
I stay away from bad influences.	
Not at all or rarely	17%
Somewhat or sometimes	39%
Very or often	30%
Extremely or almost always	14%
I resolve conflicts without anyone getting hurt.	
Not at all or rarely	17%
Somewhat or sometimes	33%
Very or often	34%
Extremely or almost always	16%

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

TABLE 28C
SELF DESCRIPTION[^]
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
In general, how does each of the following statements describe you?	%
I accept people who are different from me.	
Not at all or rarely	10%
Somewhat or sometimes	19%
Very or often	37%
Extremely or almost always	34%
I am sensitive to the needs and feelings of others.	
Not at all or rarely	16%
Somewhat or sometimes	36%
Very or often	30%
Extremely or almost always	18%
I feel valued and appreciated by others.	
Not at all or rarely	16%
Somewhat or sometimes	28%
Very or often	40%
Extremely or almost always	16%
I am included in family tasks and decisions.	
Not at all or rarely	18%
Somewhat or sometimes	25%
Very or often	31%
Extremely or almost always	26%
I am given useful roles and responsibilities.	
Not at all or rarely	13%
Somewhat or sometimes	18%
Very or often	42%
Extremely or almost always	26%

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

TABLE 29A
EMOTIONAL WELL-BEING AND DISTRESS*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
Over the last two weeks, how often have you been bothered by...?	%
...little interest or pleasure in doing things?	
Not at all	45%
Several days	35%
More than half the days	13%
Nearly every day	8%
...feeling down, depressed or hopeless?	
Not at all	49%
Several days	27%
More than half the days	13%
Nearly every day	10%
...feeling nervous, anxious or on edge?	
Not at all	40%
Several days	31%
More than half the days	14%
Nearly every day	15%
...not being able to stop or control worrying?	
Not at all	47%
Several days	24%
More than half the days	18%
Nearly every day	11%

* Level 1 survey did not ask these questions.

TABLE 29B
EMOTIONAL WELL-BEING AND DISTRESS*
JUVENILE CORRECTION FACILITIES

No data in this table.

* Only the Level 1 survey asked these questions.

TABLE 30
SELF-INFLICTED INJURY; SUICIDAL THOUGHTS AND SUICIDAL BEHAVIOR*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
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, scratching or bruising yourself on purpose?	
0 times	72%
1 or 2 times	9%
3 to 5 times	6%
6 to 9 times	5%
10 to 19 times	2%
20 or more times	5%
Have you ever seriously considered attempting suicide? (Mark ALL that apply)	
No	62%
Yes, during the last year	21%
Yes, more than a year ago	19%
Have you ever actually attempted suicide? (Mark ALL that apply)	
No	69%
Yes, during the last year	15%
Yes, more than a year ago	19%

* Level 1 survey did not ask these questions.

TABLE 31
PROBLEMATIC AND ANTISOCIAL BEHAVIOR*^
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
During the last 12 months, how often have you...	%
...run away from home?	
Never	60%
Once or twice	22%
More than 3 times	17%
...damaged or destroyed property?	
Never	57%
Once or twice	27%
More than 3 times	15%
...hit or beat up another person?	
Never	45%
Once or twice	32%
More than 3 times	23%
...taken something from a store without paying for it?	
Never	55%
Once or twice	19%
More than 3 times	26%

* Level 1 survey did not ask these questions.

^ Response options have changed from 2022.

TABLE 32A
GAMBLING BEHAVIOR*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
During the last 12 months, how often have you gambled, made bets, bought lottery tickets or scratch offs, or made purchases in online games?^	
Not at all	61%
Less than once a month	13%
About once a month	9%
About once a week	5%
2 to 6 times a week	6%
Daily	6%
INCLUDES ONLY THOSE WHO HAVE PARTICIPATED IN ANY GAMBLING ACTIVITIES DURING THE LAST 12 MONTHS: Which of the following activities did you do? (Mark ALL that apply)	
...Bet on informal games of personal skill such as playing cards, video games, pool, golf, etc.^ ^	53%
...Bet on formal sports/events or games including esports^ ^	26%
...Bought lottery tickets or scratch offs^ ^	11%
...Gambled in a casino^ ^	17%
...Purchased mystery or random paid items (weapons/tools, power ups, new graphics, etc.) in online games without previewing the content first^ ^	18%

* Level 1 survey did not ask these questions.

^ New question in 2025.

^ ^ Change in response options from 2022.

TABLE 32B
GAMBLING BEHAVIOR*^
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
During the last 12 months, how often have you done the following gambling/betting activities? Includes all respondents, not just those who have gambled in the last 12 months.	%
Bet on informal games of personal skill such as playing cards, video games, pool, golf, etc.	
Not at all	73%
Once or twice	10%
Once or twice a month	10%
Once a week	5%
Daily	2%
Bet on formal sports events or games including esports	
Not at all	77%
Once or twice	9%
Once or twice a month	10%
Once a week	3%
Daily	1%
Bought lottery tickets or scratch offs	
Not at all	91%
Once or twice	3%
Once or twice a month	4%
Once a week	1%
Daily	1%
Gambled in a casino	
Not at all	93%
Once or twice	2%
Once or twice a month	3%
Once a week	1%
Daily	1%
Gambled for money online including loot boxes	
Not at all	90%
Once or twice	2%
Once or twice a month	4%
Once a week	2%
Daily	2%

* Level 1 survey did not ask these questions.

^ Change in response options from 2022.

TABLE 32C
GAMBLING BEHAVIOR*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
INCLUDES ONLY THOSE WHO HAVE PARTICIPATED IN ANY GAMBLING ACTIVITIES DURING THE LAST 12 MONTHS: During the last 12 months, how often have you...	%
...hidden your gambling/betting from your parents, other family members or teachers?	
Never	71%
Sometimes	12%
Many times	4%
All of the time	13%
...felt that you might have a problem with gambling/betting?	
Never	83%
Sometimes	14%
Many times	2%
All of the time	2%
...skipped hanging out with friends who do not gamble/bet to hang out with friends who do gamble/bet?	
Never	90%
Sometimes	4%
Many times	0%
All of the time	6%

* Level 1 survey did not ask these questions.

TABLE 33
SUMMARY OF SUBSTANCE USE*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
Have you EVER used the following?^ (Mark ALL that apply)	
...Nicotine/tobacco	72%
...Alcoholic beverages to drink	54%
...Marijuana (pot, weed) or hashish (hash, hash oil) (Do NOT count medical marijuana prescribed for you by a doctor)	68%
...I have never used any of the above	23%
Use of conventional tobacco products (cigarettes, cigars, smokeless tobacco) during the past 30 days^^	
No	79%
Yes	21%
Use of any tobacco products, including e-cigarettes and hookah, during the past 30 days^^	
No	61%
Yes	39%
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	88%
Yes	12%
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	35%
Used only alcohol in the past year	5%
Used alcohol and marijuana in past year, but not other drugs	14%
Used marijuana or other drugs but not alcohol in the past year	26%
Used alcohol and marijuana or other drugs in the past year	20%

* Level 1 survey did not ask these questions.

^ New question in 2025.

^^ This is a computed variable based on combinations of responses to two or more survey items.

TABLE 34
SUBSTANCE ABUSE*
JUVENILE CORRECTION FACILITIES

No data in this table.

* Only the Level 1 survey asked these questions.

TABLE 35A
TOBACCO USE*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
During the past 12 months, have you used the following?^	
...Nicotine/tobacco	50%
During the last 30 days, on how many days did you smoke a cigarette?^^	
0 days	84%
1 to 19 days	12%
20 or more days	4%
During the last 30 days, on how many days did you smoke cigars, cigarillos or little cigars?^^	
0 days	87%
1 to 19 days	9%
20 or more days	4%
During the last 30 days, on how many days did you use chewing tobacco, snuff or dip?^^	
0 days	94%
1 to 19 days	6%
20 or more days	1%
During the last 30 days, on how many days did you vape or use an e-cigarette that contains nicotine, such as JUUL, VUSE, NJOY, Puff Bar, Blu, or Bidi Stick?^^	
0 days	64%
1 to 19 days	18%
20 or more days	18%
During the last 30 days, on how many days did you use a hookah or a waterpipe to smoke tobacco?^^	
0 days	90%
1 to 19 days	7%
20 or more days	3%

* Level 1 survey did not ask these questions.

^ New question in 2025.

^^ Change in response options from 2022.

TABLE 35B
FLAVORED TOBACCO USE*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
IF VAPED IN PAST 30 DAYS: Which flavors of ecigarettes (or e-juice) have you used in the past 30 days? (Mark ALL that apply)	
Tobacco-flavored	21%
Menthol or mint	35%
Clove or spice	3%
Fruit	51%
Chocolate	10%
An alcoholic drink	10%
A non-alcoholic drink	6%
Candy, desserts, or other sweets	38%
Some other flavor	30%
No flavor (unflavored)	22%
IF VAPED IN PAST 30 DAYS: Student used a flavored e-cigarette in the past 30 days^	
No	15%
Yes	85%
IF SMOKED CIGARETTE IN PAST 30 DAYS: Student smoked a flavored (i.e., menthol) cigarette in the past 30 days	
No	45%
Yes	55%
IF SMOKED CIGAR IN PAST 30 DAYS: Student smoked a flavored cigar in the past 30 days	
No	61%
Yes	39%
IF USED SMOKELESS TOBACCO IN PAST 30 DAYS: Student used flavored smokeless tobacco in the past 30 days	
No	62%
Yes	38%
IF USED HOOKAH IN PAST 30 DAYS: Student used flavored hookah in the past 30 days	
No	53%
Yes	47%
IF PAST 30 DAYS TOBACCO USE: Student used a flavored tobacco product in the past 30 days^^	
No	73%
Yes	27%

* Level 1 survey did not ask these questions.

^ Tobacco-flavor is excluded from the definition of flavored e-cigarettes.

^^ This is a computed variable based on combinations of responses to two or more survey items.

TABLE 36
ACCESS TO E-CIGARETTES*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
IF VAPED IN PAST 30 DAYS: When you vaped or used an e-cigarette during the last 30 days, how did you get it? (Mark ALL that apply)	
I bought it at stores other than vape/tobacco shops (e.g., gas stations, convenience stores, grocery stores, discount stores, drug stores)^	32%
I bought it on the internet	11%
I bought it at vape shops or other stores that sell only e-cigarettes	51%
I got it from friends	32%
I got it from my parents or other family members^	10%
I got it by getting someone else to buy it for me	25%
I took it from my home or a friend's home^	8%
I got it some other way	29%
I got it at parties^	12%

* Level 1 survey did not ask this question.

^ New response option in 2025.

TABLE 37
EXPOSURE TO SECONDHAND SMOKE AND SECONDHAND AEROSOL*
JUVENILE CORRECTION FACILITIES

No data in this table.

* Only the Level 1 survey asked these questions.

TABLE 38
ALCOHOL USE FREQUENCY AND QUANTITY*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
During the past 12 months, have you used the following?^	
...Alcoholic beverages to drink	39%
During the last 30 days, on how many days did you drink one or more drinks of an alcoholic beverage?^^	
0 days	79%
1-19 days	15%
20 or more days	6%
During the last 12 months, on how many occasions have you had alcoholic beverages to drink?^^	
0	59%
1-2	14%
3-9	11%
10 or more	16%
If you drink beer/wine/wine coolers/liquor, generally how much do you drink at one time?	
No alcohol use	46%
1 glass/can/drink	12%
2 glasses/cans/drinks	6%
3 glasses/cans/drinks	8%
4 glasses/cans/drinks	4%
5 or more glasses/cans/drinks	24%
Binge drinking (4 or more drinks in a row (females) or 5 or more drinks in a row (males) within a couple of hours)^^^	
0 days	85%
1 to 19 days	11%
20 or more days	4%

* Level 1 survey did not ask these questions.

^ New question in 2025.

^^ Change in response options from 2022.

^^^ This is a computed variable based on combinations of responses to two or more survey items.

TABLE 39
ACCESS TO ALCOHOL*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
INCLUDES ONLY THOSE WHO USED ALCOHOL IN THE LAST 30 DAYS	%
When you used alcohol during the last 30 days, how did you get it? (Mark ALL that apply)	
I bought it at bars or restaurants or stores other than liquor stores (e.g., gas stations, convenience stores, grocery stores, discount stores, drug stores)^	19%
I bought it at liquor stores or other stores that sell only alcohol	35%
I bought alcohol on the internet	6%
I got alcohol from friends	42%
I got alcohol from my parents or other family members^	8%
I got alcohol by getting someone else to buy it for me	31%
I got alcohol at parties	27%
I took alcohol from my home or a friend's home^	23%
I got alcohol some other way	33%

* Level 1 survey did not ask these questions.

^ New response option in 2025.

TABLE 40
USE OF MARIJUANA*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
During the past 12 months, have you used the following?^	
...Marijuana (pot, weed) or hashish (hash, hash oil) (Do NOT count medical marijuana prescribed for you by a doctor)	53%
During the last 30 days, on how many days did you use marijuana?^^	
0 days	74%
1-19 days	11%
20 or more days	16%
IF EVER USED MARIJUANA, how old were you when you tried marijuana for the first time?^	
8 years old or younger	26%
9 or 10 years old	17%
11 or 12 years old	32%
13 or 14 years old	16%
15 or 16 years old	10%
17 years old or older	0%
IF USED MARIJUANA IN THE PAST 30 DAYS, in which ways did you use marijuana or other THC-containing products (e.g., edibles, beverages)? (Mark ALL that apply)^	
Smoke it (for example, in a joint, bong, pipe, or blunt)	81%
Eat it (for example, in gummies, brownies, cakes, cookies, or candy)	34%
Drink it (for example, in seltzers, tea, cola, or alcohol)	14%
Vape it (for example, in an e-cigarette-like vaporizer or another vaporizing)	45%
Dab it (for example, using a dabbing rig, knife, or dab pen)	30%
Use it some other way	22%

* Level 1 survey did not ask these questions.

^ New question in 2025.

^^ Change in response options from 2022.

TABLE 41
ACCESS TO MARIJUANA**
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
INCLUDES ONLY THOSE WHO USED MARIJUANA IN THE LAST 30 DAYS	%
When you used marijuana or other THC-containing products (e.g., edibles, beverages) during the last 30 days, how did you get it? (Mark ALL that apply)	
I bought it at dispensaries or other stores that sells only marijuana and other THC-containing products	19%
I bought it at bars or restaurants or stores other than dispensaries (e.g., gas stations, convenience stores, grocery stores, discount stores, drug stores)	5%
I bought it on the internet	18%
I got it from friends	52%
I got it from my parents or other family members	8%
I got it by getting someone else to buy it for me	19%
I got it at parties	18%
I took it from my home or a friend's home	16%
I got it some other way	34%

* Level 1 survey did not ask these questions.

^ New question in 2025.

TABLE 42
PRESCRIPTION AND OVER-THE-COUNTER DRUG USE*[^]
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
During the past 12 months, have you used the following?^	
...Over-the-counter drugs such as cough syrup, cold medicine, or diet pills that you took only to get high	14%
...Prescription stimulants such as Amphetamines or diet pills, without a doctor's prescription or differently than how a doctor told you to use it	3%
...Prescription ADHD or ADD drugs (Ritalin, Adderall, hyper pills), without a doctor's prescription or differently than how a doctor told you to use it	8%
...Prescription pain relievers (OxyContin, Percocet, Vicodin, or others), without a doctor's prescription or differently than how a doctor told you to use it	11%
...Prescription tranquilizers (Valium, Xanax, Klonopin, Ativan, anxiety pills, sedatives, or benzos (downers)), without a doctor's prescription or differently tha	11%

* Level 1 survey did not ask these questions.

^ Change in response options from 2022.

TABLE 43
OTHER DRUG AND INHALANT USE*^
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
During the past 12 months, have you used the following?^	
...Sniffed glue or huffed or inhaled the contents of aerosol spray cans or other gases to get high	4%
...LSD (acid), PCP (wet sticks or dipped joints) or other psychedelics (mushrooms, angel dust)	11%
...MDMA (E, X, ecstasy, Molly), GHB (G, Liquid E, Liquid X, roofies), or Ketamine (Special K)	6%
...Crack, coke, or cocaine in any form	8%
...Heroin (smack, junk, China White)	2%
...Methamphetamine (meth, glass, crank, crystal meth, ice)	4%
...Synthetic marijuana (K2, Gold) that you took only to get high	3%
...Any other synthetic drugs such as bath salts (Ivory Wave, White Lightning) that you took only to get high	1%

* Level 1 survey did not ask these questions.

^ Change in response options from 2022.

TABLE 44
PERCEIVED RISK OF HARM FROM SUBSTANCE USE*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
How much do you think people risk harming themselves physically or in other ways if they...	%
...smoke one or more packs of cigarettes per day?	
No risk	42%
Slight risk	11%
Moderate risk	19%
Great risk	28%
...have five or more drinks of an alcoholic beverage once or twice per week?	
No risk	32%
Slight risk	27%
Moderate risk	18%
Great risk	23%
...use marijuana once or twice per week?	
No risk	47%
Slight risk	32%
Moderate risk	6%
Great risk	14%
...use prescription drugs not prescribed for them?	
No risk	30%
Slight risk	16%
Moderate risk	17%
Great risk	37%
...vape or use e-cigarettes?	
No risk	38%
Slight risk	24%
Moderate risk	19%
Great risk	19%

* Level 1 survey did not ask these questions.

TABLE 45A
PERCEPTIONS OF PARENTS' DISAPPROVAL OF SUBSTANCE USE*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
How wrong do your PARENTS feel it would be for you to...	%
...smoke cigarettes?	
Not at all wrong	24%
A little bit wrong	15%
Wrong	14%
Very wrong	48%
...have one or more drinks of an alcoholic beverage nearly every day?	
Not at all wrong	19%
A little bit wrong	11%
Wrong	16%
Very wrong	54%
...use marijuana?	
Not at all wrong	30%
A little bit wrong	16%
Wrong	14%
Very wrong	40%
...use prescription drugs not prescribed for you?	
Not at all wrong	19%
A little bit wrong	7%
Wrong	15%
Very wrong	60%
...vape or use e-cigarettes?	
Not at all wrong	27%
A little bit wrong	18%
Wrong	15%
Very wrong	41%

* Level 1 survey did not ask these questions.

TABLE 45B
PERCEPTIONS OF FRIENDS' DISAPPROVAL OF SUBSTANCE USE*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
How wrong do your FRIENDS feel it would be for you to...	%
...smoke cigarettes?	
Not at all wrong	38%
A little bit wrong	14%
Wrong	16%
Very wrong	32%
...have one or more drinks of alcoholic beverage nearly every day?	
Not at all wrong	35%
A little bit wrong	19%
Wrong	17%
Very wrong	29%
...use marijuana?	
Not at all wrong	51%
A little bit wrong	15%
Wrong	14%
Very wrong	20%
...use prescription drugs not prescribed for you?	
Not at all wrong	33%
A little bit wrong	12%
Wrong	15%
Very wrong	41%
...vape or use e-cigarettes?	
Not at all wrong	52%
A little bit wrong	15%
Wrong	10%
Very wrong	23%

* Level 1 survey did not ask these questions.

TABLE 46
PERCEPTIONS ABOUT ALCOHOL USE*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
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	48%
Agree	30%
Neither agree nor disagree	13%
Disagree	3%
Strongly disagree	5%
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	51%
Agree	20%
Neither agree nor disagree	20%
Disagree	4%
Strongly disagree	5%
In your opinion, 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	31%
Agree	30%
Neither agree nor disagree	24%
Disagree	8%
Strongly disagree	7%
In your opinion, 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	33%
Agree	25%
Neither agree nor disagree	26%
Disagree	7%
Strongly disagree	8%

* Level 1 survey did not ask these questions.

TABLE 47A
USE OF TOBACCO, ALCOHOL, MARIJUANA AND E-CIGARETTES*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
How often do you use each of the following?	%
Tobacco (cigarettes, chew)^	
Never	63%
Tried once or twice	13%
Once or twice a month	9%
Once a week	3%
Daily	12%
Alcohol (beer, wine, liquor)^	
Never	42%
Tried once or twice	24%
Once or twice a month	16%
Once a week	10%
Daily	9%
Marijuana (pot, hash, hash oil)^	
Never	35%
Tried once or twice	14%
Once or twice a month	9%
Once a week	7%
Daily	36%
Vaping device or e-cigarette with nicotine^	
Never	37%
Tried once or twice	9%
Once or twice a month	10%
Once a week	5%
Daily	39%
Vaping device or e-cigarette with marijuana, THC or hash oil, or THC wax^	
Never	39%
Tried once or twice	14%
Once or twice a month	7%
Once a week	6%
Daily	35%
IF USED ALCOHOL AND MARIJUANA: In the last year, how often did you use alcohol and marijuana or other THC-containing products (e.g., edibles, beverages) at the same time?^^	
Usually	58%
Sometimes	33%
Never	9%

* Level 1 survey did not ask these questions.

^ Change in response options from 2022.

^^ New question in 2025.

TABLE 47B
PERCEPTIONS OF OTHERS' USE OF TOBACCO, ALCOHOL, MARIJUANA AND E-CIGARETTES*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
In your opinion, how often do you think MOST STUDENTS in your school use each of the following?	%
Tobacco (cigarettes, chew)^	
Never	43%
Tried once or twice	19%
Once or twice a month	13%
Once a week	7%
Daily	18%
Alcohol (beer, wine, liquor)^	
Never	27%
Tried once or twice	17%
Once or twice a month	21%
Once a week	17%
Daily	18%
Marijuana (pot, hash, hash oil)^	
Never	24%
Tried once or twice	14%
Once or twice a month	14%
Once a week	12%
Daily	35%
Vaping device or e-cigarette with nicotine^	
Never	21%
Tried once or twice	15%
Once or twice a month	10%
Once a week	10%
Daily	45%
Vaping device or e-cigarette with marijuana, THC or hash oil, or THC wax^	
Never	25%
Tried once or twice	12%
Once or twice a month	11%
Once a week	12%
Daily	41%

* Level 1 survey did not ask these questions.

^ Change in response options from 2022.

TABLE 48A
CONSEQUENCES OF SUBSTANCE USE*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
During the last 12 months ...	%
IF USED: Have you found that you had to use a lot more alcohol or drugs than before to get the same effect?	
Yes	41%
No	59%
IF USED: Have you tried to cut down on your use of alcohol or drugs but couldn't?	
Yes	30%
No	70%
IF USED: Have you continued to use alcohol or drugs even though you knew it was hurting your relationships with friends or family?	
Yes	45%
No	55%
IF USED: 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?	
Yes	30%
No	70%
IF USED: How many times have you spent all or most of the day using alcohol or drugs, or getting over their effects?	
0 times	48%
1 time	12%
2 times	14%
3 or more times	27%
IF USED: 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	58%
1 time	15%
2 times	8%
3 or more times	19%
IF USED: How many times have you missed work or school, or neglected other major responsibilities because of alcohol or drug use?	
0 times	57%
1 time	10%
2 times	13%
3 or more times	20%

* Level 1 survey did not ask these questions.

TABLE 48B
CONSEQUENCES OF SUBSTANCE USE*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
During the last 12 months ...	%
IF USED: How many times have you driven a motor vehicle after using alcohol or drugs?**	
0 times	56%
1 time	12%
2 times	5%
3 or more times	27%
IF USED: How many times have you hit someone or become violent while using alcohol or drugs?	
0 times	62%
1 time	18%
2 times	9%
3 or more times	10%
IF USED: How many times have you used so much alcohol or drugs that the next day you could not remember what you had said or done?	
0 times	52%
1 time	18%
2 times	12%
3 or more times	19%
IF USED: How many times have you used more alcohol or drugs than you intended to?	
0 times	51%
1 time	11%
2 times	12%
3 or more times	26%
IF USED: How many times has alcohol or drug use left you feeling depressed, agitated, paranoid, or unable to concentrate?	
0 times	48%
1 time	17%
2 times	14%
3 or more times	21%

* Level 1 survey did not ask these questions.

** Level 2 survey did not ask this question.

TABLE 49
SEXUAL BEHAVIOR*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
Have you ever had sex?	
Yes	70%
No	30%
IF EVER HAD SEX: During the last 12 months, how many different partners have you had sex with?^	
None	39%
1 person	16%
2 persons	12%
3 persons	9%
4 or more persons	23%
IF EVER HAD SEX: Did you drink alcohol or use drugs before you had sex the LAST time?	
Yes	42%
No	58%

* Level 1 and 2 surveys did not ask these questions.

^ Change in response option from 2022.

TABLE 50
PREVENTION OF PREGNANCY AND INFECTION*
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
INCLUDES ONLY THOSE WHO HAVE EVER HAD SEX	%
Have you talked with your partner(s) about protecting yourselves from getting sexually transmitted infections/HIV/AIDS?	
Never	33%
Not with every partner	15%
At least once with every partner	46%
Does not apply to me^	6%
Have you talked with your partner(s) about preventing pregnancy?	
Never	35%
Not with every partner	10%
At least once with every partner	47%
Does not apply to me^	7%
The LAST time you had sex, what method or methods did you or your partner use to prevent pregnancy? (Mark ALL that apply)	
No method was used to prevent pregnancy	35%
Birth control pills	18%
Condoms	24%
Birth control shot, ring, or patch^^	4%
Implant or IUD^^	4%
Withdrawal	10%
Not sure	12%
Not applicable	13%
The LAST time you had sex, did you or your partner use a condom or dental dam (barrier)?^^^	
Yes	31%
No	69%

* Level 1 and 2 surveys did not ask these questions.

^ New response option in 2025.

^^ Change in response option wording from 2022.

^^^ Change in question wording from 2022.

TABLE 51
RESOURCES IN THE HOME (PROXY FOR SES)^
JUVENILE CORRECTION FACILITIES

	Level
	Level 3
	%
About how many books are there in your home?	
Few (0-10)	43%
Enough to fill one shelf (11-25)	29%
Enough to fill one bookcase (26-100)	20%
Enough to fill several bookcases (more than 100)	8%
Do you have any of the following in your home?	
...Access to the internet	95%
...Your own bedroom	90%
...A desktop or laptop computer (including Chromebooks) that you can use	67%
...A tablet (for example, Surface Pro, iPad, Kindle Fire) that you can use	59%
...A smartphone (for example, iPhone, Samsung Galaxy, HTC One) that you can use	91%

^ Source: National Assessment of Educational Progress (NAEP)
 (https://nces.ed.gov/nationsreportcard/pdf/researchcenter/socioeconomic_factors.pdf).