

**Ross Valley School District  
5th Grade  
Spring 2008**

**Technical Report**

**Core Module**



**Ross Valley School District**

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**Sample Characteristics**

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*Note: Tables 3.1 through 5.3 include results by gender.*

**Table 1.1**

***Student Sample Characteristics***

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	Grade 5
<b>Student Sample Size</b>	
Target Sample	191
Final Sample (Number of Respondents)	145
<b>Average Response Rate</b>	<b>76%</b>

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**Table 2.1*****Age of Sample***

	Grade 5 %	Total
7 years old, or younger than 7	0	
8 years old	0	
9 years old	0	
10 years old	60	
11 years old	39	
12 years old	1	
13 years old or older than 13	0	

*Question ES 2, 4: How old are you? What grade are you in?*

**Table 2.2*****Gender of Sample***

	Grade 5 %	Total
Female	58	
Male	42	

*Question ES 3: Are you female or male?*

**Table 2.3*****Number of Times Moved, Past Year***

	Grade 5 %	Total
0 times	75	
1 time	15	
2 times or more times	10	

*Question ES 5: During the past year, how many times have you moved (changed where you live)?*

**Table 2.4*****Perceived Ability With School Work***

	Grade 5 %	Total
One of the best students	22	
Better than most students	27	
About the same as others	44	
Don't do as well as most others	7	

*Question ES 16: How well do you do in your school work?*

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## Alcohol and Other Drug (AOD) Use

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**Table 3.1**

***Ever Used Alcohol or Other Drugs, Lifetime***

	Grade 5		
	Female %	Male %	Total %
Alcohol, one or two sips	38	50	43
Alcohol, a full glass	2	3	3
Inhalants (to get high)	0	2	1
Marijuana *	0	0	0
<i>None of the above</i>	60	47	54
<i>Any of the above</i>	40	53	46

*Questions ES 32, 33, 34: Have you ever drunk beer, wine, or other alcohol? Have you ever sniffed something through your nose to get "high?" Have you ever smoked any marijuana (pot, grass, weed)?*

**Table 3.2**

***Any Alcohol Use, Past Month***

	Grade 5		
	Female %	Male %	Total %
No	91	83	88
Yes, I drank one or two sips	9	15	11
Yes, I drank a full glass	0	2	1

*Question ES 39: In the past month, did you drink any beer, wine or other alcohol?*

**\* = CDE-Recommended SDFSC/TUPE Performance Indicator**

**Table 3.3*****Any AOD Use Before/During School, Lifetime***

	Grade 5		
	Female %	Male %	Total %
No	100	100	100
Yes	0	0	0

*Question ES 35: Have you ever used alcohol or an illegal drug like marijuana before school or at school?*

**Table 3.4*****Perception of Health Risk of Alcohol and Marijuana Use***

	Grade 5		
	Female %	Male %	Total %
<b>Alcohol</b>			
No, not bad	10	2	6
Yes, a little bad	41	66	51
Yes, very bad	49	33	43
<b>Marijuana</b>			
No, not bad	1	7	4
Yes, a little bad	2	5	3
Yes, very bad	71	78	74
I don't know what marijuana is	25	10	19

*Question ES 37-38: Do you think drinking alcohol (beer, wine, liquor) is bad for a person's health?  
Do you think using marijuana (pot, grass, weed) is bad for a person's health?*

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## Tobacco Use

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**Table 4.1**

***Lifetime and Current Use of Cigarettes and Smokeless Tobacco***

	Grade 5		
	Female %	Male %	Total %
<b>Ever smoked a cigarette *</b>	1	3	2
Part of a cigarette, like one or two puffs	1	3	2
A whole cigarette	0	0	0
Smoked a cigarette in the past month	1	2	1
Ever chewed tobacco or snuff	1	0	1

*Questions ES 30, 40, 31. Have you... In the past month, did you...*

**Table 4.2**

***Perception of Health Risk of Cigarette Smoking***

	Grade 5		
	Female %	Male %	Total %
No, not bad	4	0	2
Yes, a little bad	0	3	1
Yes, very bad	96	97	97

*Question ES 36: Do you think smoking cigarettes is bad for a person's health?*

**\* = CDE-Recommended SDFSC/TUPE Performance Indicator**

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## Violence and Safety

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**Table 5.1**

***Perceived Feeling Safe At or Outside of School***

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	Grade 5		
	Female %	Male %	Total %
<b>Do you feel safe at school?</b>			
No, never	5	2	3
Yes, some of the time	4	12	8
Yes, most of the time	33	31	32
Yes, all of the time *	58	56	57
<b>Do you feel safe outside of school?</b>			
No, never	6	0	3
Yes, some of the time	17	13	15
Yes, most of the time	42	57	48
Yes, all of the time	36	30	34

*Question ES 28, 29: Do you feel safe at school? Do you feel safe outside of school?*

***\* = To be used for the CDE-Recommended SDFSC/TUPE Performance Indicator  
"The percentage of students that feel very safe at school"***

**Table 5.2**  
***Frequency of Being Harassed on School Property***

	Grade 5		
	Female %	Male %	Total %
<b>Been hit or pushed</b>			
No, never	66	58	63
Yes, some of the time	28	37	31
Yes, most of the time	2	3	3
Yes, all of the time	4	2	3
<b>Mean rumors spread about you</b>			
No, never	57	62	58
Yes, some of the time	34	35	35
Yes, most of the time	4	3	3
Yes, all of the time	6	0	3

*Question ES 23, 24: Do other kids hit or push you at school when they are not just playing around?  
Do other kids at school spread mean rumors or lies about you?*

**Table 5.3**  
***Frequency of Harassing on School Property, Past Year***

	Grade 5		
	Female %	Male %	Total %
<b>Have hit or pushed other kids</b>			
0 times	73	58	66
1 time	15	27	20
2 times	6	7	7
3 or more times	6	8	7
<b>Have spread mean rumors about other kids</b>			
0 times	66	84	73
1 time	19	14	18
2 times	8	2	6
3 or more times	6	0	4

*Question ES 21, 22: During the past year, how many times have you...hit or pushed other kids at school when you were not playing around? ...spread mean rumors or lies about other kids at school?*

**Table 5.4*****Weapons (Gun or Knife) on School Property, Past Year***

	Grade 5 %	Total
<b>Brought weapon to school</b>		
No	96	
Yes	4	
<b>Saw another kid with a weapon at school</b>		
No	89	
Yes	11	

*Question ES 25, 26: During the past year... did you ever bring a gun or knife to school? ...have you ever seen another kid with a gun or knife at school?*

**Table 5.5*****Frequency of Being Home Without Adult Supervision***

	Grade 5 %	Total
No, never	38	
Yes, some of the time	52	
Yes, most of the time	7	
Yes, all of the time	3	

*Question ES 27: Are you home alone after school?*

**Table 5.6*****Frequency of Seat Belt and Helmet Use***

	Grade 5 %	Total
<b>When you ride in a car do you wear a seat belt?</b>		
No, never	0	
Yes, some of the time	1	
Yes, most of the time	17	
Yes, all of the time	82	
<b>When you ride a bicycle do you wear a helmet?</b>		
I do not ride a bicycle	8	
No, never	1	
Yes, some of the time	2	
Yes, most of the time	17	
Yes, all of the time	72	

*Question ES 7, 8: When you ride in a car do you wear a seat belt? When you ride a bicycle do you wear a helmet?*

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## Physical Health

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**Table 6.1**

***Breakfast Consumption***

	Grade 5 %	Total
No	10	
Yes	90	

*Question ES 6: Did you eat breakfast this morning?*

**Table 6.2**

***Exercise During Week***

	Grade 5 %	Total
0 days	1	
1 day	2	
2 days	5	
3 days	14	
4 days	16	
5 days	19	
6 or 7 days	42	

*Question ES 50: How many days each week do you exercise, dance, or play sports?*

**Table 6.3**

***Frequency of Daily Television Watching and Video Game Playing***

	Grade 5 %	Total
None, I didn't watch TV yesterday	41	
Less than 1 hour	23	
About 1 hour	24	
About 2 hours	7	
3 or more hours	4	

*Question ES 53: Yesterday, how much time did you spend watching TV or playing video games?*

**Table 6.4*****Body Image***

	Grade 5 %	Total
<b>Do you think you are...</b>		
Too skinny	6	
About right	83	
Too fat	10	
<b>Are you doing anything to try to lose weight?</b>		
No	69	
Yes	31	
<b>Ever been teased about your body at school?</b>		
No	74	
Yes	26	

*Question ES 47-49: Do you think you are too skinny, about right, or too fat? Are you doing anything to try to lose weight? Have other kids at school ever teased you about what your body looks like?*

**Table 6.5*****Students with Asthma***

	Grade 5 %	Total
No	86	
Yes	14	

*Question ES 52: Has a parent or some other adult ever told you that you have asthma?*

**Table 6.6*****Asthma Symptoms While Not Exercising***

	Grade 5 %	Total
No	89	
Yes	11	

*Question ES 51: When not exercising, do you ever have trouble breathing (for example, shortness-of-breath, wheezing, or a sense of tightness in your chest)?*

**Ross Valley School District**

**Resilience & Youth Development**

**Table 7.1**  
**External and Internal Asset Scores (High, Moderate, and Low)**

Percent of students scoring High, Moderate, and Low in Assets (%)	Grade 5		
	H	M	L
<b>Total External Assets</b>	80	20	0
Caring Relationships	86	13	1
High Expectations	89	11	0
Meaningful Participation	24	74	2
<b>School Environment *</b>	59	40	1
Caring Relationships: Adults in School *	60	38	3
High Expectations: Adults in School *	59	39	1
Meaningful Participation *	25	66	9
<b>Home Environment</b>	93	6	1
Caring Relationships: Adults in Home	88	11	1
High Expectations: Adults in Home	95	5	0
Meaningful Participation	18	81	1
<b>Personal School Connectedness</b>	67	31	2
<b>Peer Environment</b>			
High Expectations: Pro-social peers	52	47	1
<b>Total Internal Assets</b>	64	36	0
Empathy	43	55	3
Problem Solving	31	63	6
Goals and Aspirations	83	17	0

\* = CDE-Recommended SDFSC/TUPE Performance Indicator

**Ross Valley School District**

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**District After School Module**

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**Table 9.1**

***Destination After School***

	Grade 5	Total
	%	
Home (with an adult present)		
Home (without an adult present)		
Park or Recreation Center		
Community or Church Group		
After-School Program (at school)		
Tutoring / special class (at school)		
Some other place		

*Question 65: Where do you usually go right after school is over? (mark only ONE answer)*

**Table 9.2**

***Activities After School***

	Grade 5	Total
	%	
Homework or tutoring	0	
Private classes (art, music, dance)	0	
Play games / sport	0	
Hang out with friends	0	
TV / video games	0	
Religious activities	0	
Other	0	

*Question 66: What do you do after school is over? (Mark all that you do for about one hour or more)*

**Table 9.3*****After-School Program (ASP)***

	Grade 5 %	Total
My school doesn't have an ASP	0	
I don't know much about the ASP	0	
The ASP doesn't interest me	0	
The ASP is a safe place to be	0	
The ASP helps you with schoolwork	0	
The students really like it	0	
I would like to go to it	0	

*Question 67: If your school has an after-school program, please mark whether you agree with each of the following statements (Mark all that are true for you).*

**Table 9.4*****ASP Attendance***

	Grade 5 %	Total
0 days		
0 days, but I would like to go to the ASP		
1 day		
2 days		
3 days		
4 days		
5 days		

*Question H5: In a normal school week, how many days do you usually go to your school's after-school program in the afternoon?*