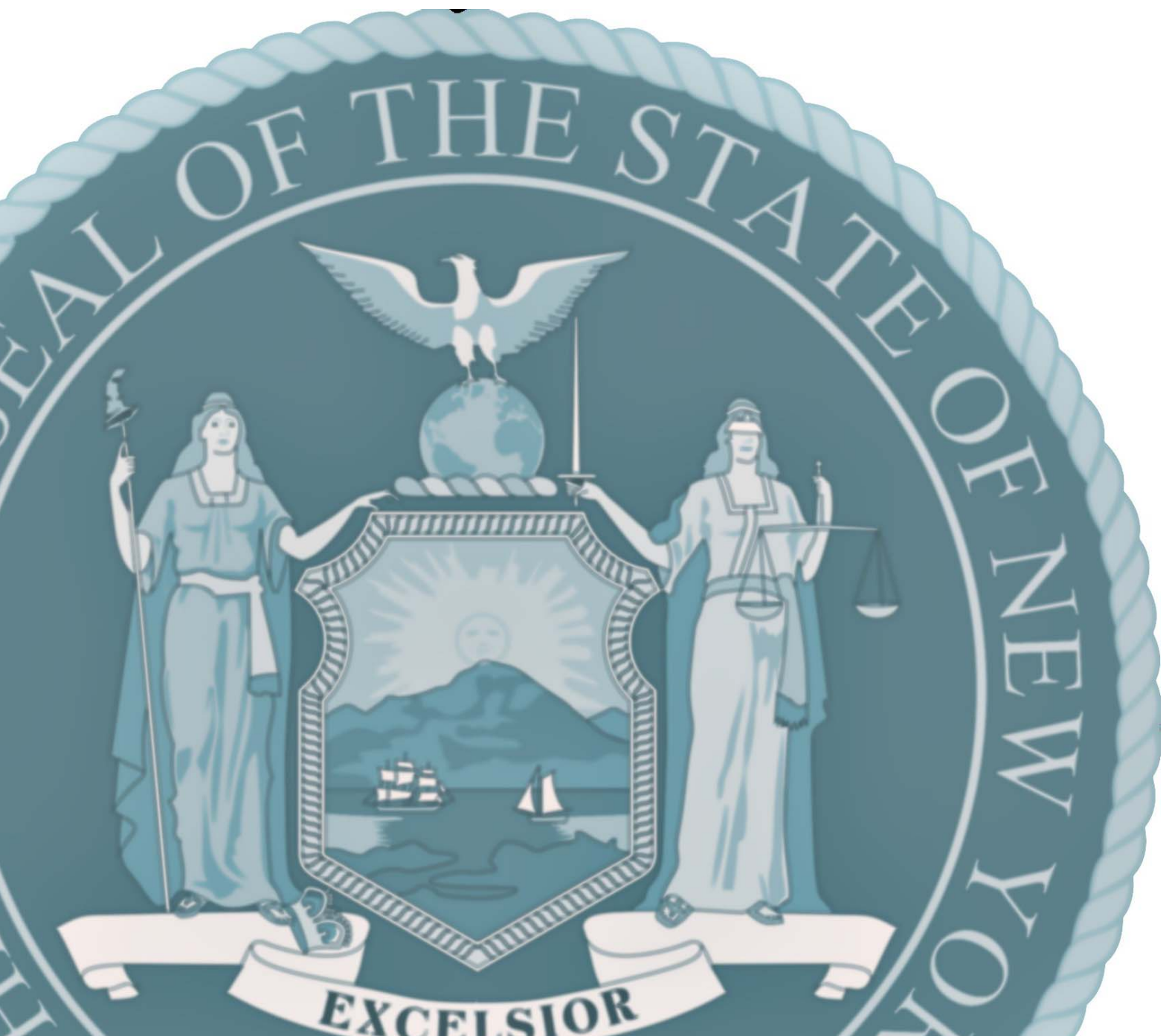


# 2019 New York Prevention Needs Assessment Survey



Survey Results for:  
**Steuben County**

Sponsored by:  
Steuben Prevention Coalition  
TST BOCES  
555 Warren Rd.  
Ithaca, NY 14850

## 2019 Prevention Needs Assessment Survey Profile Report

This report summarizes the findings from the Prevention Needs Assessment (PNA) Survey that was conducted during 2019. The results are presented along with comparisons to the Monitoring the Future Survey (A nation-wide survey of grades 8, 10, and 12) and the Bach Harrison Norm (BH Norm). The BH Norm is described in more detail on page 7 of this report.

The survey was designed to assess students' involvement in a specific set of problem behaviors, as well as their exposure to a set of scientifically validated risk and protective factors. The risk and protective factors have been shown to influence the likelihood of academic success, school dropout, substance abuse, violence, and delinquency among youth.

Table 1 contains the characteristics of the students who completed the survey from your community. When using the information in this report, please pay attention to the number and percentage

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of students who participated from your community. The sample size for this survey administration was 2,921 students. If 60% or more of the sample participated, the report is a good indicator of the levels of substance use, risk, protection, and antisocial behavior. If fewer than 60% participated, a review of who participated should be completed prior to generalizing the results to the entire community.

## The Risk and Protective Factor Model of Substance Abuse Prevention

Prevention is a science. The Risk and Protective Factor Model of Prevention is a proven way of reducing substance abuse and its related consequences.

This model is based on the simple premise that to prevent a problem from happening, we need to identify the factors that increase the risk of that problem developing and then find ways to reduce the risks. Just as medical researchers have found risk factors for heart disease such as diets high in fat, lack of exercise, and smoking; a team of researchers at the University of Washington have defined a set of risk factors for youth problem behaviors.

**Risk factors** are characteristics of school, community and family environments, and of students and their peer groups known to predict increased likelihood of drug use, delinquency, school dropout, and violent behaviors among youth. For example, children who live in disorganized and crime-ridden neighborhoods are more likely to become involved in crime and drug use than children who live in safe neighborhoods.

**Table 1. Characteristics of Participants**

Student Totals						
Total Students	Steuben County					
	2015		2017		2019	
	Number	Percent	Number	Percent	Number	Percent
	2357	100	2635	100	2545	100
Grade						
<b>8</b>	907	38.5	879	33.4	909	35.7
<b>10</b>	877	37.2	912	34.6	884	34.7
<b>12</b>	573	24.3	844	32.0	752	29.5
Gender						
<b>Male</b>	1120	47.7	1308	49.8	1262	49.8
<b>Female</b>	1227	52.3	1318	50.2	1273	50.2
Ethnicity						
<b>Native American</b>	26	1.1	36	1.4	34	1.3
<b>Asian</b>	47	2.0	45	1.7	46	1.8
<b>African American</b>	64	2.7	57	2.2	59	2.3
<b>Pacific Islander</b>	14	0.6	3	0.1	3	0.1
<b>Hispanic</b>	45	1.9	44	1.7	44	1.7
<b>White</b>	1993	84.8	2242	85.5	2174	86.0
<b>Multi-racial</b>	161	6.9	194	7.4	168	6.6

Table 1. represents the total survey population. Students were given the option to skip questions, and not all students completed the survey. The percentages in remaining tables/figures of this report reflect the percent of students responding to each question, rather than the percent of the total survey population.

# Risk and Protective Factors

The chart at the bottom of the page shows the links between the 20 risk factors and six problem behaviors. The check marks indicate where at least two well designed, published research studies have shown a link between the risk factor and the problem behavior.

**Protective factors** exert a positive influence and buffer against the negative influence of risk, thus reducing the likelihood that adolescents will engage in problem behaviors. Protective factors identified through research include strong bonding to family, school, community and peers, and healthy beliefs and clear standards for behavior. Protective bonding depends on three conditions:

- **Opportunities** for young people to actively contribute
- **Skills** to be able to successfully contribute
- **Consistent recognition** or reinforcement for their efforts and accomplishments

Bonding confers a protective influence only when there is a positive climate in the bonded community. Peers and adults in these schools, families and neighborhoods must communicate healthy values and set clear standards for behavior in order to ensure a protective effect. For example, strong bonds to antisocial peers would not be likely to reinforce positive behavior.

Research on risk and protective factors has important implications for children’s academic success, positive youth development, and prevention of health and behavior problems. In order to promote academic success and positive youth development and to prevent problem behaviors, **it is necessary to address the factors that predict these outcomes.** By measuring risk and protective factors in a population, specific risk factors that are elevated and widespread can be identified and targeted by policies, programs, and actions shown to reduce those risk factors and to promote protective factors.

Each risk and protective factor can be linked to specific types of interventions that have been shown to be effective in either reducing risk(s) or enhancing protection(s). The steps outlined here will help make key decisions regarding allocation of resources, how and when to address specific needs, and which strategies are most effective and known to produce results.

In addition to helping assess current conditions and prioritize areas of greatest need, data from this survey can be a powerful tool in applying for and complying with several federal programs, outlined later in this report, such as the Strategic Prevention Framework process. The survey also gathers valuable data which allows state and local agencies to address other prevention issues related to academic achievement, mental health, gang involvement, health and fitness, and personal safety.

**Risk Factors for Adolescent Problem Behavior**

Problem Behaviors	Community							Family				School		Peer/Individual						
	Availability of Drugs	Availability of Firearms	Community Laws & Norms Favorable Toward Drug Use, Firearms, & Crime	Media Portrayals of the Behavior	Transitions and Mobility	Low Neighborhood Attachment and Community Disorganization	Extreme Economic Deprivation	Family History of the Problem Behavior	Family Management Problems	Family Conflict	Favorable Parental Attitudes & Involvement in the Problem Behavior	Academic Failure Beginning in Late Elementary School	Lack of Commitment to School	Early & Persistent Antisocial Behavior	Rebelliousness	Gang Involvement	Friends Who Engage in the Problem Behavior	Favorable Attitudes Toward the Problem Behavior	Early Imitation of the Problem Behavior	Constitutional Factors
Substance Abuse	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Delinquency		✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Teen Pregnancy							✓	✓	✓		✓	✓	✓				✓	✓	✓	
School Drop-Out					✓		✓	✓	✓		✓	✓	✓	✓			✓	✓	✓	
Violence	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Depression & Anxiety					✓			✓	✓	✓		✓		✓						✓

# Building a Strategic Prevention Framework

The survey is an important data source for the Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Prevention (CSAP) Strategic Prevention Framework (SPF). CSAP created the SPF model to guide states and communities in creating planned, data-driven, effective, and sustainable prevention programs. Each part represents an interdependent element of the ongoing process of prevention coordination.

**Assessment: Profile Population Needs, Resources, and Readiness to Address the Problems and Gaps in Service Delivery.** The SPF begins with an assessment of the needs in the community that is based on data. One of the primary sources of needs assessment data is this Prevention Needs Assessment Survey (PNA). While planning prevention services, communities are urged to collect and use multiple data sources, including archival and social indicators, assessment of existing resources, key informant interviews, and community readiness. The PNA results presented in this Profile Report will help you to identify needs for prevention services. PNA data include adolescent substance use, anti-social behavior, and many of the risk and protective factors that predict adolescent problem behaviors.

**Capacity: Mobilize and/or Build Capacity to Address Needs.** Engagement of key stakeholders at the State and community levels is critical to plan and implement successful prevention activities that will be sustained over time. Some of the key tasks to mobilize the state and communities are to work with leaders and stakeholders to build coalitions, provide training, leverage resources, and help sustain prevention activities.

**Planning: Develop a Comprehensive Strategic Plan.** States and communities should develop a strategic plan that articulates not only a vision for the prevention activities, but also strategies for organizing and implementing prevention efforts. The strategic plan should be based on the assessments conducted during Step 1. The Plan should address the priority needs, build on identified resources/strengths, set measurable objectives, and identify how progress will be monitored. Plans should be adjusted with ongoing needs assessment and monitoring activities.

**Implementation: Implement Evidence-based Prevention Programs and Infrastructure Development Activities.** By measuring and identifying the risk factors and other causal factors that contribute to the targeted problems specified in your strategic plan, programs can be implemented that will reduce the prioritized substance abuse problems. After completing Steps 1, 2, and 3, communities will be able to choose prevention strategies that



## Building a Strategic Prevention Framework (Continued)

have been shown to be effective, are appropriate for the population served, can be implemented with fidelity, are culturally appropriate, and can be sustained over time. SAMHSA developed an internet tool located at [www.samhsa.gov/nrepp](http://www.samhsa.gov/nrepp) for identifying Best Practice Programs. Another way to access the resources is from this address: [www.nrepp.samhsa.gov](http://www.nrepp.samhsa.gov).

**Evaluation: Monitor Process, Evaluate Effectiveness, Sustain Effective Programs/Activities, and Improve or Replace Those That Fail.** Finally, ongoing monitoring and evaluation are essential to determine if the desired outcomes are achieved, assess service delivery quality, identify successes, encourage needed improvement, and promote sustainability of effective policies, programs, and practices. The OPNA allows communities to monitor levels of ATOD use, antisocial behavior, risk, and protection.

**Sustainability and Cultural Competence: Incorporate principles of cultural competence and sustainability in each of the five elements.** At the center of the SPF model, sustainability and cultural competence play a key role in assessment, capacity appraisal, planning, implementation and evaluation, ensuring successful, long lasting prevention programs.

**Sustainability is accomplished by utilizing a comprehensive approach.** States and communities should plan adaptive, flexible programs around a variety of resources, funding, and organizations. An inclusive design helps build sustainable programs and achieve sustainable outcomes. A strategic plan that dynamically responds to changing issues, data, priorities, and resources is more likely to achieve long term results.

Sharing information gathered during the evaluation stage with key stakeholders, forging partnerships and encouraging creative collaboration all enhance sustainability.

**Cultural Competence recognizes unique needs, styles, values and beliefs of the recipients of prevention efforts.** Culturally competent prevention strategies use interventions, evaluations and communication strategies appropriate to their intended community. Cultural issues reflect a range of influences and are not just a matter of ethnic or racial identity. Learning to communicate with audiences from diverse geographic, cultural, economic, social, and linguistic backgrounds can increase program efficacy and ensure sustainable results.

Whether enlisting extended family networks as a prevention resource for single parent households, or ensuring there are resources available to bridge language gaps, cultural competency will help you recognize differences in prevention needs and tailor prevention approaches accordingly.

A one-size-fits-all program is less effective than a program that draws on community-based values, traditions, and customs and works with knowledgeable people from the community to develop focused interventions, communication, and support.

## Validity Measures

**Honesty:** Because the survey was anonymous, and because confidentiality was stressed through the survey's administration process, most of the reasons for students to exaggerate or deny behaviors were eliminated. However, Bach Harrison has built several checks into the data analysis to minimize the impact of students who were either not truthful in their responses or who did not take the survey seriously. Surveys were eliminated from the final data reported in this report for meeting one or more the following five pre-determined dishonesty indicators:

1. In response to a question about whether or not they had been honest in completing the survey, the students indicated that they were "Not Honest At All" in completing the survey.
2. The students indicated that they had used a non-existent, fictitious drug in their lifetime or in the past 30 days.
3. The students reported an impossibly high level of multiple drug use (having used substances on 120 or more occasions in the past 30 days).
4. The students indicated past-month use rates that were higher than lifetime use rates. The student can make one mistake, which is then recoded so that the lifetime is equal to the 30 day value.
5. The students reported an age that was inconsistent with their grade or their school; for example, a 10-year-old 12th grader or 19-year-old 6th grader.

Additionally, if a student did not answer enough of the validity questions to determine whether or not they were honest in their responses to the five criteria, their survey data were also removed from the final analysis presented in this report.

## How to Read the Charts

There are four types of charts presented in this report:

1. Substance use charts
2. Antisocial behavior (ASB) and Gambling charts
3. Risk factor charts
4. Protective factor charts.

Data from the charts are also presented in Tables 3 through 10. Additional data found in later tables are explained at the end of this section.

### Understanding the Format of the Charts

There are several graphical elements common to all the charts. Understanding the format of the charts and what these elements represent is essential in interpreting the results of the PNA survey.

**The Bars** on substance use and antisocial behavior charts represent the percentage of students in that grade who reported a given behavior. The bars on the risk and protective factor charts represent the percentage of students whose answers reflect significant risk or protection in that category. Each set of differently colored bars represents one of the past administrations of the PNA. By looking at the percentages over time, it is possible to identify trends in substance use and antisocial behavior. By studying the percentage of youth at risk and with protection over time, it is possible to determine whether the percentage of students at risk or with protection is increasing, decreasing, or staying the same. This information is important when deciding which risk and protective factors warrant attention.

**Dots and Diamonds** provide points of comparison to larger samples. The dots on the charts represent the percentage of all of the youth surveyed who reported substance use, problem behavior, elevated risk, or elevated protection. Please note that the dot represents the aggregate results of all participating students rather than a random sample of students. The survey results provide considerable information for communities to use in planning

## How to Read the Charts (Continued)

prevention services. The diamonds represent national data from either the Monitoring the Future (MTF) Survey or the Bach Harrison Norm (BH Norm). The BH Norm was developed by Bach Harrison L.L.C. to provide states and communities with the ability to compare their results on risk, protection, and antisocial measures with more national measures. Survey participants from eleven statewide surveys and one large regional survey across the nation were combined into a database of approximately 970,000 students. The results were weighted to make the contribution of each state and region proportional to its share of the national population. Bach Harrison analysts then calculated rates for antisocial behavior and for students at risk and with protection. The results appear on the charts as BH Norm. In order to keep the BH Norm relevant, it is updated approximately every few years as new data become available.

A comparison to survey-wide and national results provides additional information for your community in determining the relative importance of levels of alcohol, tobacco and other drug (ATOD) use, antisocial behavior, risk, and protection. Information about other students in the state and the nation can be helpful in determining the seriousness of a given level of problem behavior. Scanning across the charts, it is important to observe the factors that differ the most from the BH Norm. This is the first step in identifying the levels of risk and protection that are higher or lower than those in other communities. The risk factors that are higher than the BH Norm and the protective factors are lower than the BH Norm are probably the factors that you should consider addressing when planning prevention programs.

### Cut-Points

Before the percentage of youth at risk on a given scale could be calculated, a scale value or cut-point needed to be determined that would separate the at-risk group from the not at-risk group. The Prevention Needs Assessment (PNA) survey was designed to assess adolescent substance use, anti-social behavior, and the risk and protective factors that predict these adolescent problem behaviors. Once the PNA survey had been given to over 460,000 youth nationwide, it was possible to select two groups of youth, one that was more at risk for problem behaviors and another group that was less at risk. A cut-point score was then determined for each risk and protective factor scale

that best divided the youth from the two groups into their appropriate group, more at-risk or less at-risk. The criteria for separating youth into the more at-risk and the less at-risk groups included academic grades (the more at-risk group received “D” and “F” grades, the less at-risk group received “A” and “B” grades), ATOD use (the more at-risk group had more regular use, the less at-risk group had no drug use and use of alcohol or tobacco on only a few occasions), and antisocial behavior (the more at-risk group had two or more serious delinquent acts in the past year, the less at-risk group had no serious delinquent acts).

The cut-points that were determined by analyzing the results of the more at-risk and less at-risk groups will remain constant and will be used to produce the profiles for future surveys.

Since the cut-points for each scale will remain fixed, the percentage of youth above the cut-point on a scale (at-risk) will provide a method for evaluating the progress of prevention programs over time. For example, if the percentage of youth at risk for family conflict in a community prior to implementing a community-wide family/parenting program was 60% and then decreased to 50% one year after the program was implemented, the program would be viewed as helping to reduce family conflict.

### Lifetime, 30 Day & Heavy ATOD Use Charts

There are three types of use measured on the ATOD charts.

**Lifetime use** is a measure of the percentage of students who tried the particular substance at least once in their lifetime and is used to show the percentage of students who have had experience with a particular substance.

**30-day use** is a measure of the percentage of students who used the substance at least once in the 30 days prior to taking the survey and is a more sensitive indicator of the level of current use of the substance.

**Heavy use** is measured in two ways: *binge drinking* (five or more drinks in a row over the last two weeks), and use of *one-half a pack or more of cigarettes per day*.

### Supplement 1. ATOD Questions

This contains the full wording for the ATOD questions.

## How to Read the Charts (Continued)

### Antisocial Behavior, Driving and Alcohol, and Gambling Charts

**Antisocial behavior (ASB)** is a measure of the percentage of students who report any involvement during the past year with the eight antisocial behaviors listed in the charts.

**Driving and Alcohol** is a measure of the percentage of students who report drinking and driving, or being a passenger in a car where the driver had been drinking in the past 30 days.

**Gambling Behavior** is a measure of the percentage of students who report any involvement during the past year with the ten types of gambling listed in the charts. *Gambled in the Past Year* is a measure of any participation in any of the gambling types whatsoever.

### Risk and Protective Factor Charts

Risk and protective factor scales measure specific aspects of a youth's life experience that predict whether he/she will engage in problem behaviors. The scales, defined in Table 2, are grouped into four domains: community, family, school, and peer/individual. The risk and protective factor charts show the percentage of students at risk and with protection for each of the scales.

## Tables

The tables are a list of the numbers and percents presented in the report. Before each table group is a summary of what is detailed in that section.

### Tables in this Report

Tables 3 and 4 detail the Risk and Protective Scales.

Tables 5 to 8 detail ATOD Use, Problem ATOD Use, and Alcohol and Driving Behaviors.

Tables 9 and 10 show Antisocial and Gambling Behaviors.

Table 11, Sources and Places of Student Alcohol Use, presents the percentages of how and where students obtained and used alcohol during the past year. The data focus on a subgroup of students who indicated at least one means of obtaining or using alcohol. (Students reporting no alcohol use are not represented.) It is important to note that the table represents a subgroup of users and not the entire survey population. Additionally, the smaller the sample, the more dramatic the influence of a student's responses. For example, if only one student in a particular grade reported where he/she obtained alcohol, each category would show up as either 0% or 100%. The table indicates the sample size for each grade surveyed to help clarify the value of the data.

Table 12, Drug Free Communities Report. It contains information required by communities with Drug Free Communities Grants, such as the perception of the risks of ATOD use, perception of parent and peer disapproval of ATOD use, past 30-day use, and average age of first use.

Table 13, Youth Perceptions of Substance Use. Youth often overestimate the percentage of their peers who are using substances. Youth perceptions of the percentage of their peers who use cigarettes, alcohol, marijuana, and other illegal drugs are shown in these tables.

Table 14, Additional Items. It contains information such as the parent attitudes regarding drinking, problems associated with drinking, types of substances used in vaping, and questions about suicide.

Finally, extra questions your agency might have included on the questionnaire are listed.



## What are the numbers telling you?

Review the charts and data tables presented in this report. Note your findings as you discuss the following questions.

**Which 3-5 risk factors** appear to be higher than you would want when compared to the Bach Harrison Norm?

**Which 3-5 protective factors** appear to be lower than you would want when compared to the Bach Harrison Norm?

**Which levels of 30-day drug use** are increasing and/or unacceptably high? Which substances are your students using the most? At which grades do you see unacceptable usage levels?

**Which antisocial behaviors** are increasing and/or unacceptably high? Which behaviors are your students exhibiting the most? At which grades do you see unacceptable behavior levels?

## How to identify high priority problem areas

Once you have familiarized yourself with the data, you can begin to identify priorities.

**Look across the charts** for items that stand out as either much higher or much lower than the others.

**Compare your data** with statewide, and/or national data. Differences of 5% between local and other data are probably significant.

**Prioritize problems for your area** according to the issues you've identified. Which can be realistically addressed with the funding available to your community? Which problems fit best with the prevention resources at hand?

**Determine the standards and values** held within your community. For example: Is it acceptable in your community for a percentage of high school students to drink alcohol regularly as long as that percentage is lower than the overall state rate?

## Use these data for planning.

Once priorities are established, use data to guide your prevention efforts.

**Substance use and antisocial behavior data** are excellent tools to raise awareness about the problems and promote dialogue.

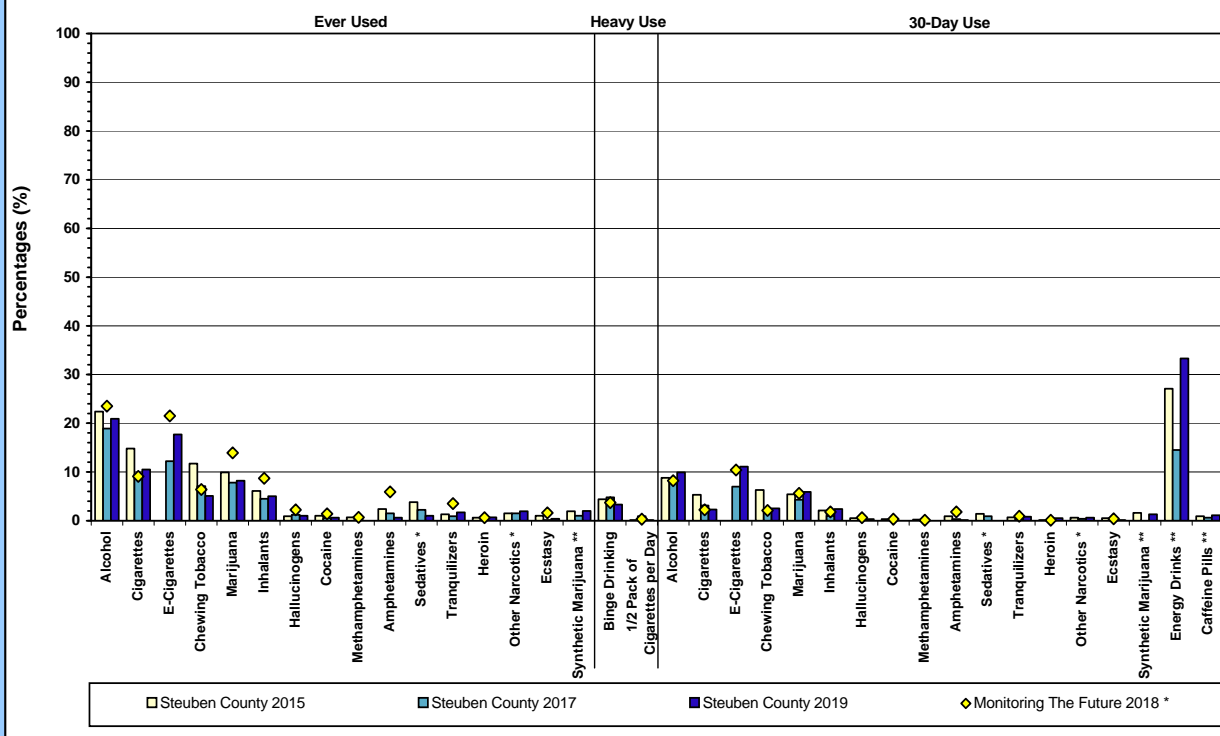
**Risk and protective factor data** can be used to identify exactly where the community needs to take action.

**Promising approaches** for any prevention goal are available through resources listed on the last page of this report. These contacts are a great resource for information about programs that have been proven effective in addressing the risk factors that are high in your community, and improving the protective factors that are low.

	Sample	Priority Rate 1	Priority Rate 2	Priority Rate 3
<b>Risk Factors</b>	6th grad Fav. Attitude to Drugs (Peer/Indiv. Scale) @ 15% (8% > 8-state av.)			
<b>Protective Factors</b>	10th grad - Rewards for prosocial involm. (School Domain) 40% (down 5% from 2 yrs ago & 16% below state av.)			
<b>30-day Substance Abuse</b>	8th grad Binge Drinking @ 13% (5% above state av.)			
<b>Antisocial Behavior</b>	12th grad - Drunk/High at School @ 21% (about same as state, but remains a priority.)			

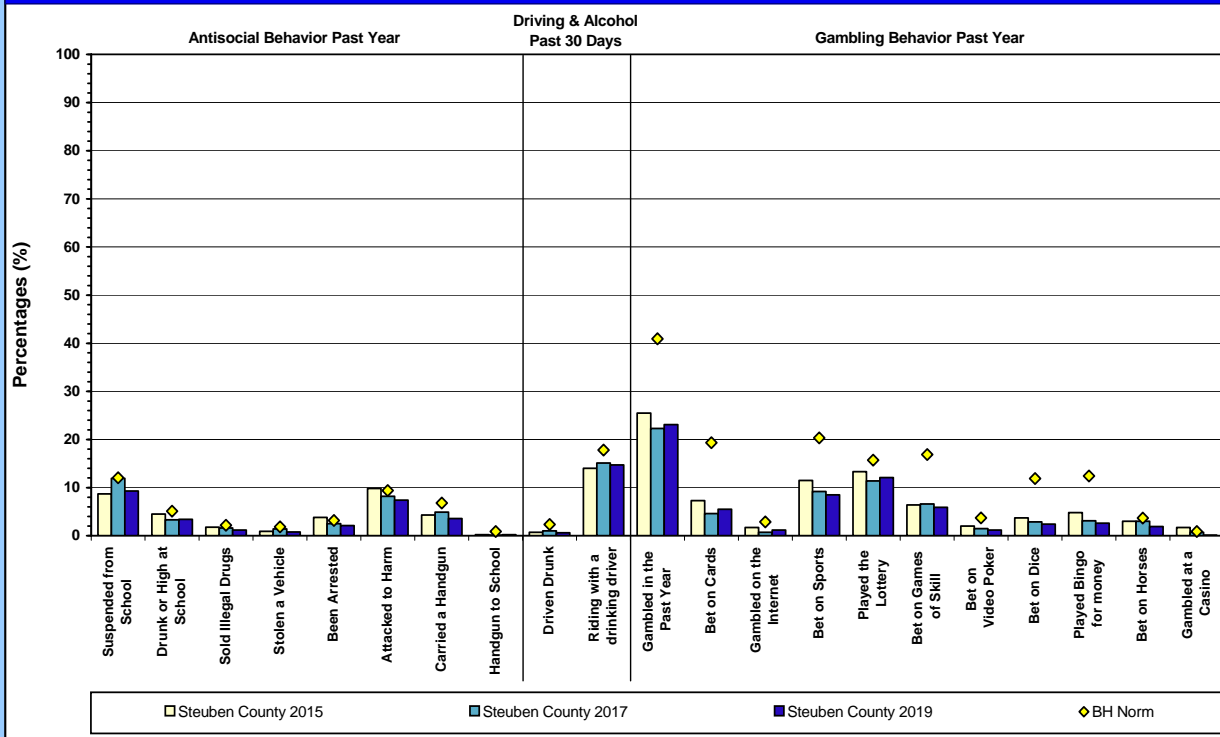
# Substance Use and Antisocial Behavior

LIFETIME, 30 DAY & HEAVY ATOD USE  
2019 Steuben County, Grade 8



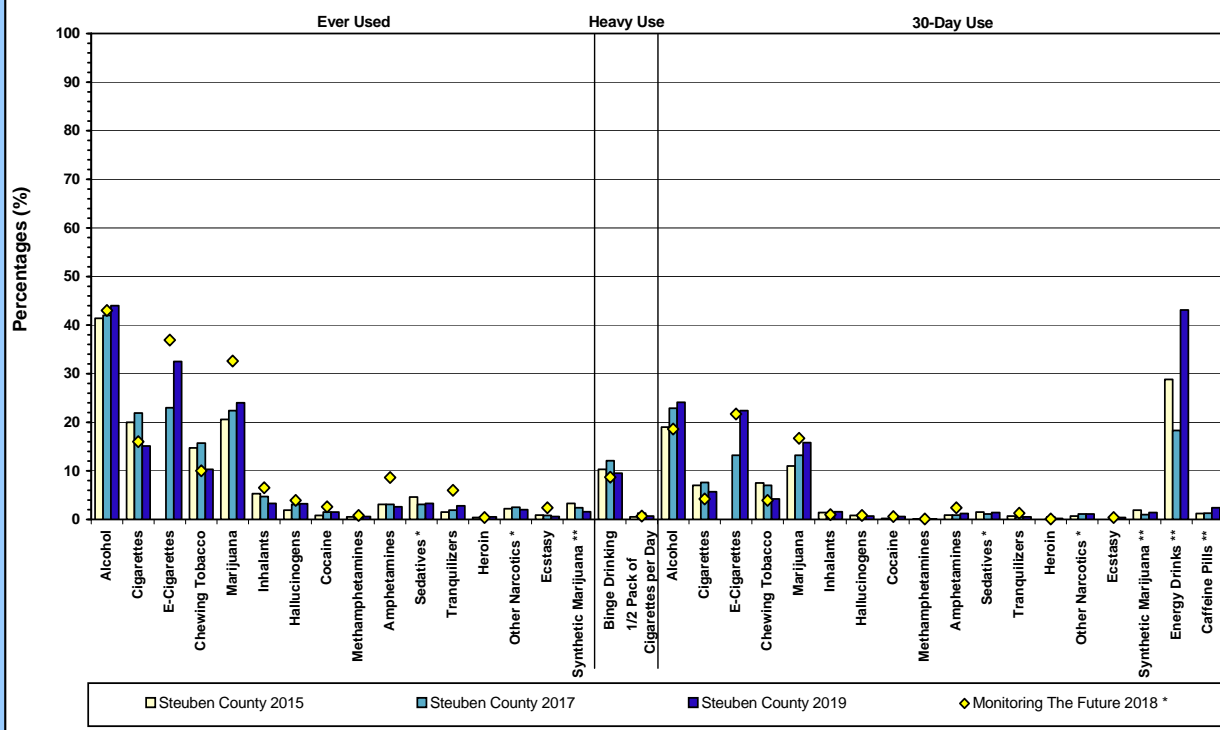
\* MTF does not publish an 8th, 10th, or a combined grade value for "Sedatives" or "Other Narcotics".  
 \*\* MTF does not collect data on those substances.

ANTISOCIAL BEHAVIOR AND GAMBLING  
2019 Steuben County, Grade 8



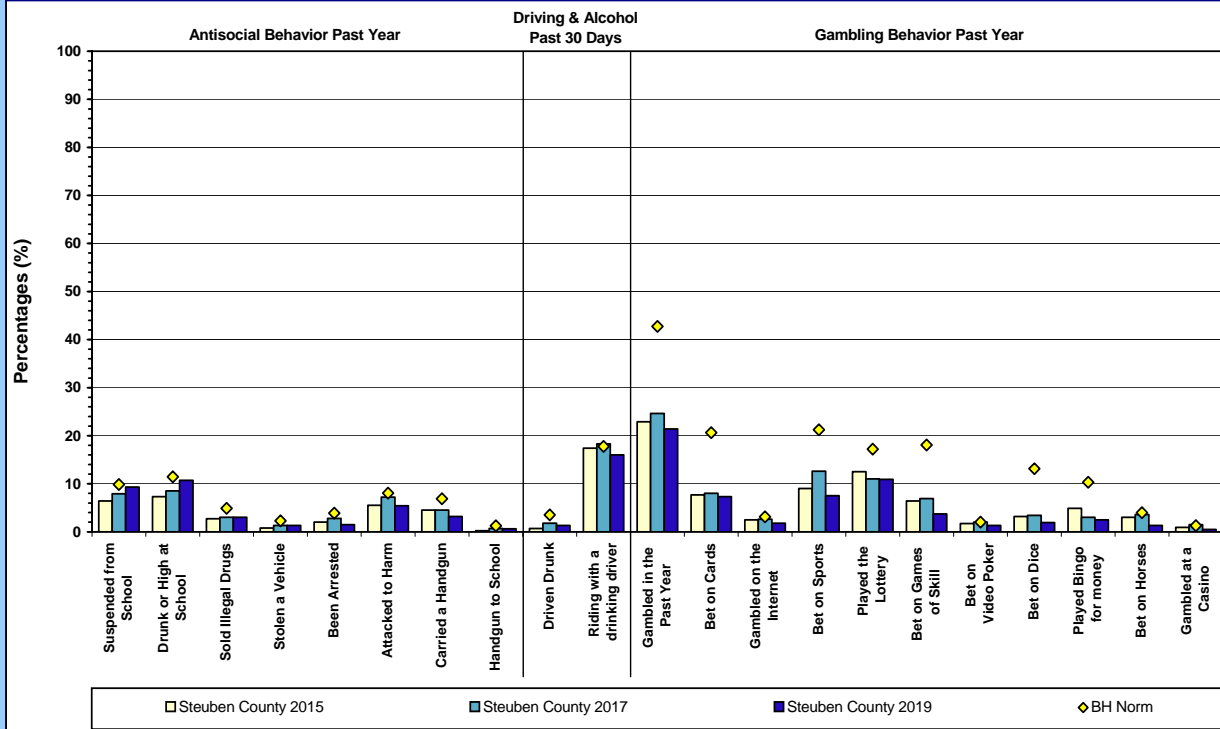
# Substance Use and Antisocial Behavior

LIFETIME, 30 DAY & HEAVY ATOD USE  
2019 Steuben County, Grade 10



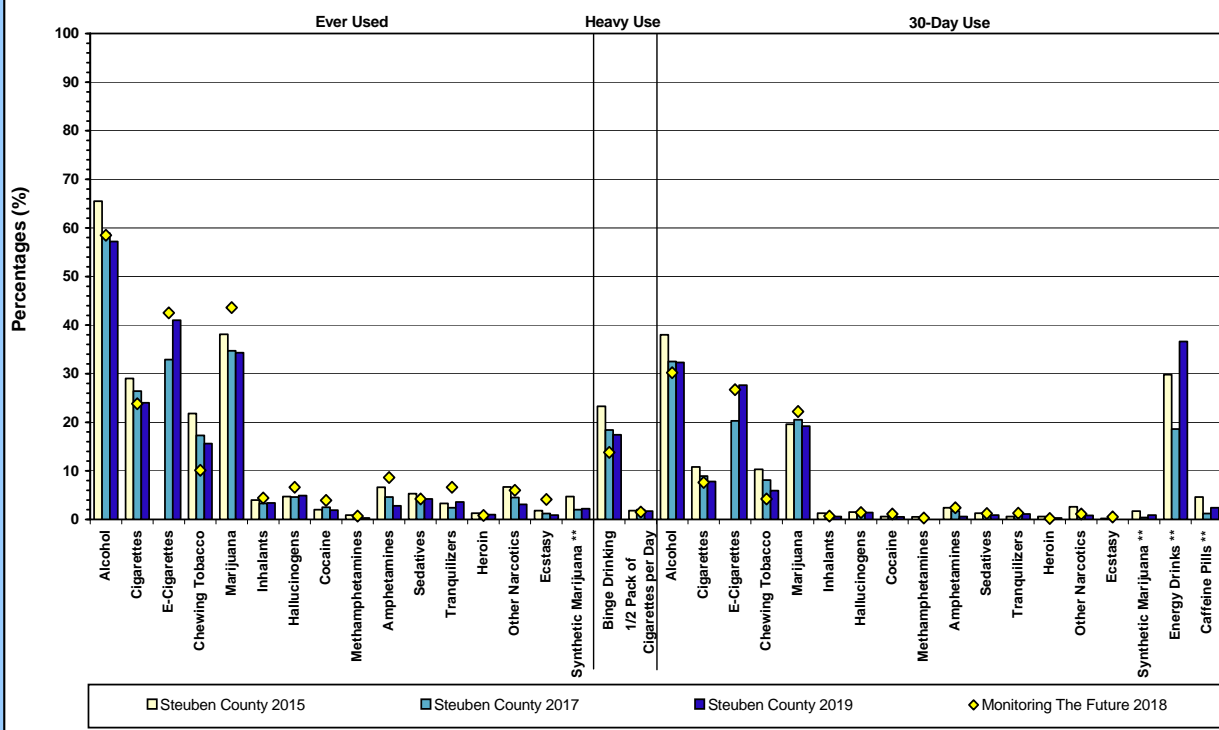
\* MTF does not publish an 8th, 10th, or a combined grade value for "Sedatives" or "Other Narcotics".  
 \*\* MTF does not collect data on those substances.

ANTISOCIAL BEHAVIOR AND GAMBLING  
2019 Steuben County, Grade 10



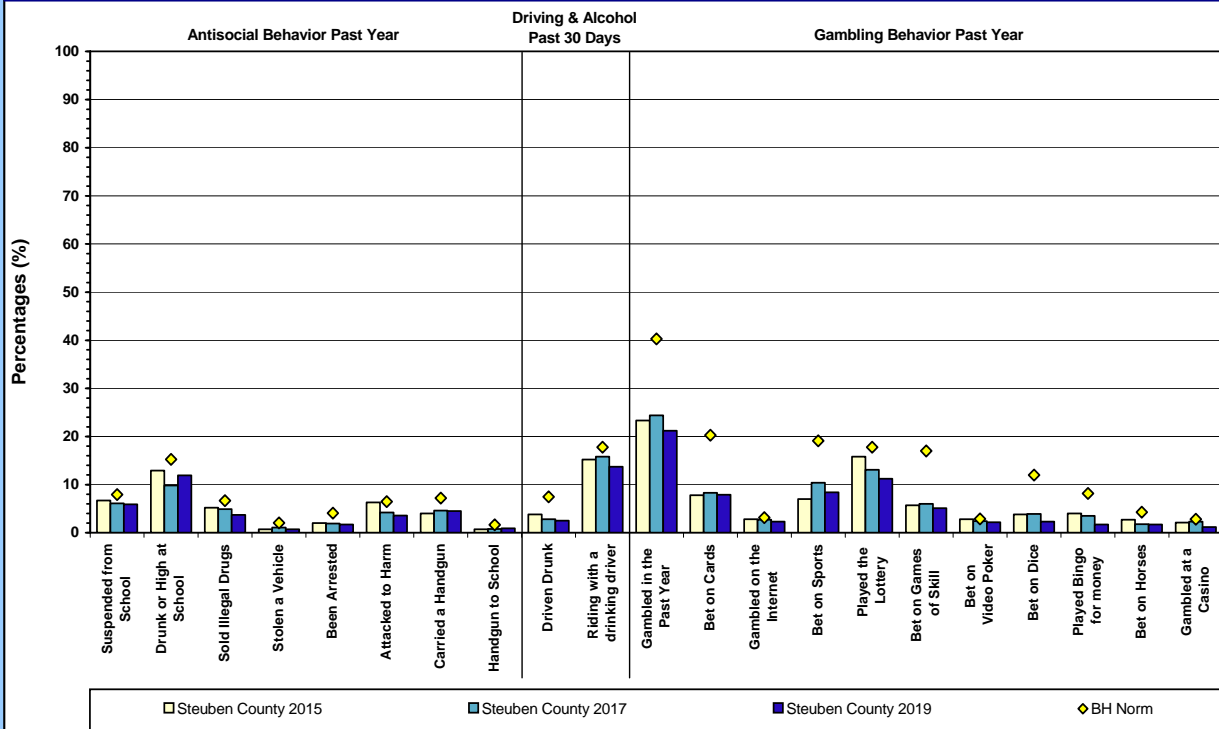
# Substance Use and Antisocial Behavior

LIFETIME, 30 DAY & HEAVY ATOD USE  
2019 Steuben County, Grade 12



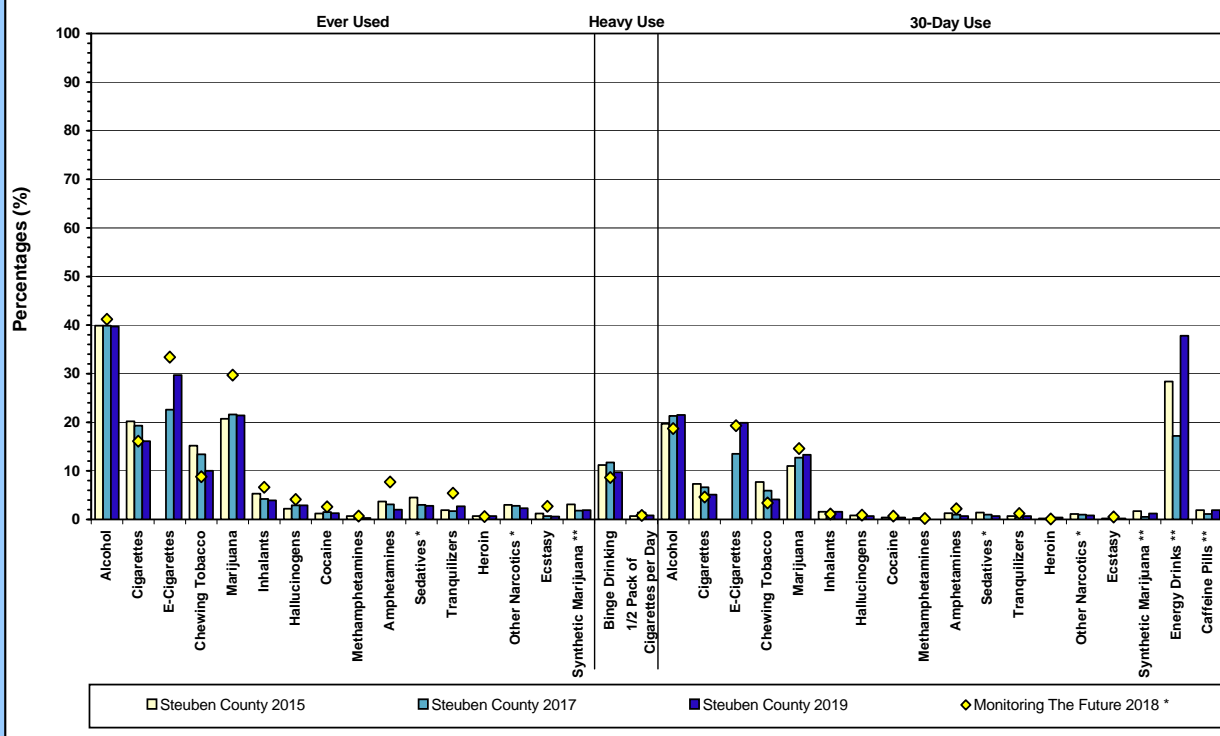
\*\* MTF does not collect data on those substances.

ANTISOCIAL BEHAVIOR AND GAMBLING  
2019 Steuben County, Grade 12



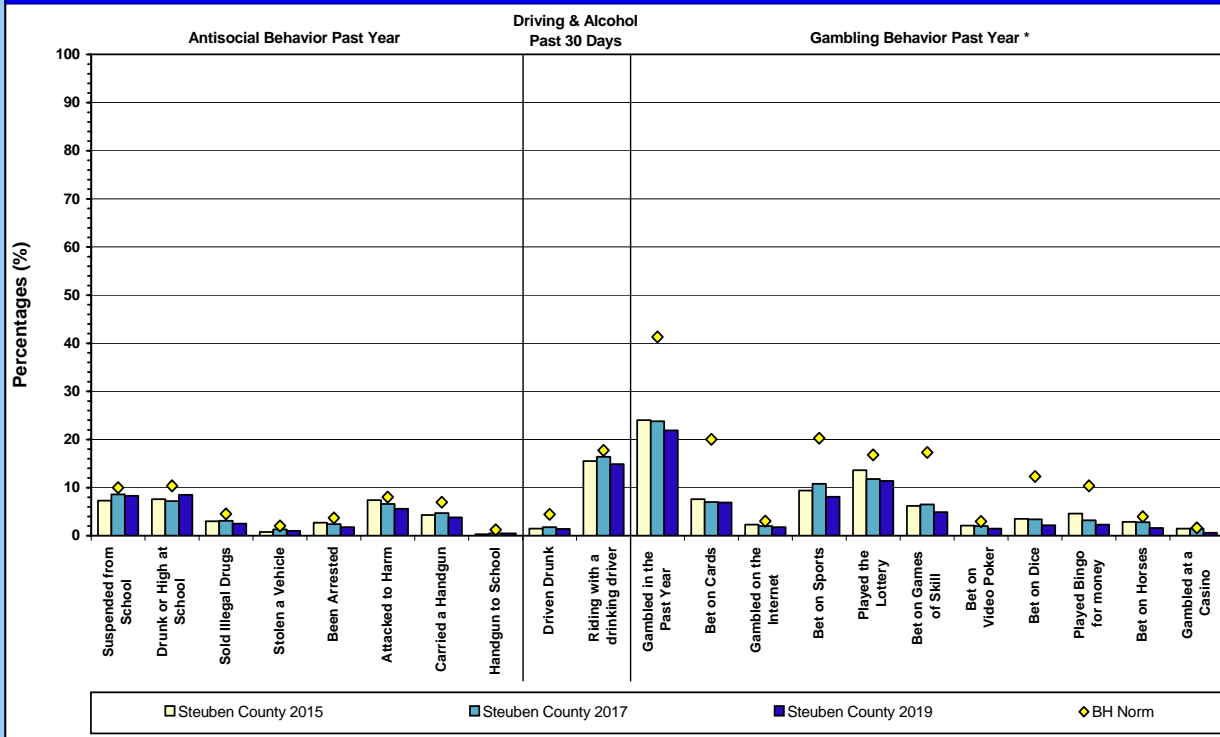
# Substance Use and Antisocial Behavior

LIFETIME, 30 DAY & HEAVY ATOD USE  
2019 Steuben County, All Grades



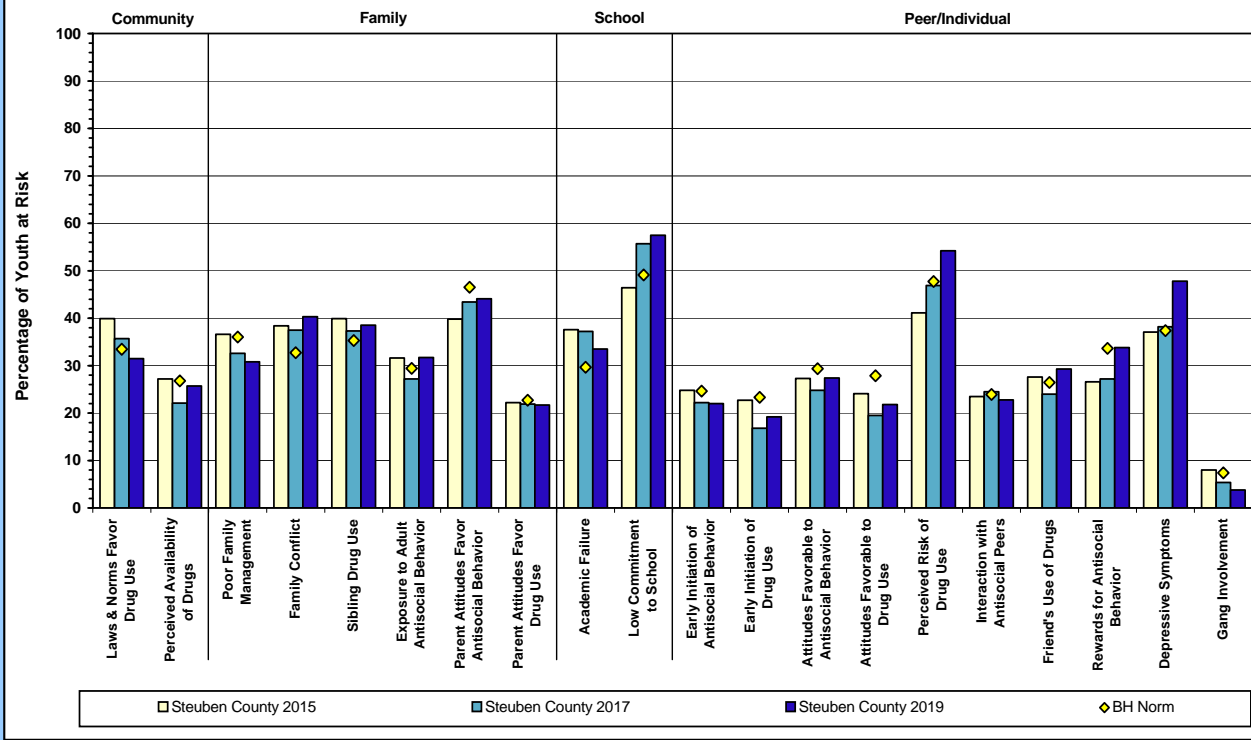
\* MTF does not publish an 8th, 10th, or a combined grade value for "Sedatives" or "Other Narcotics".  
 \*\* MTF does not collect data on those substances.

ANTISOCIAL BEHAVIOR AND GAMBLING  
2019 Steuben County, All Grades

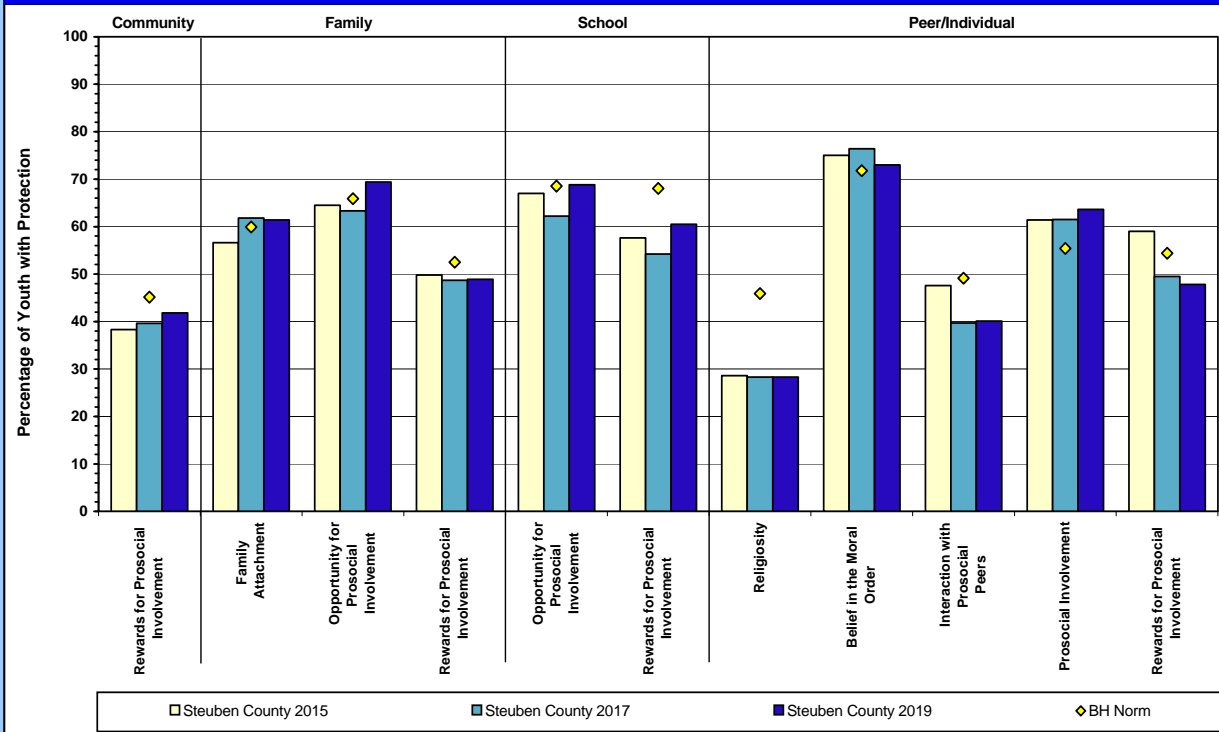


# Risk and Protective Factor Profiles

## RISK PROFILE 2019 Steuben County, Grade 8

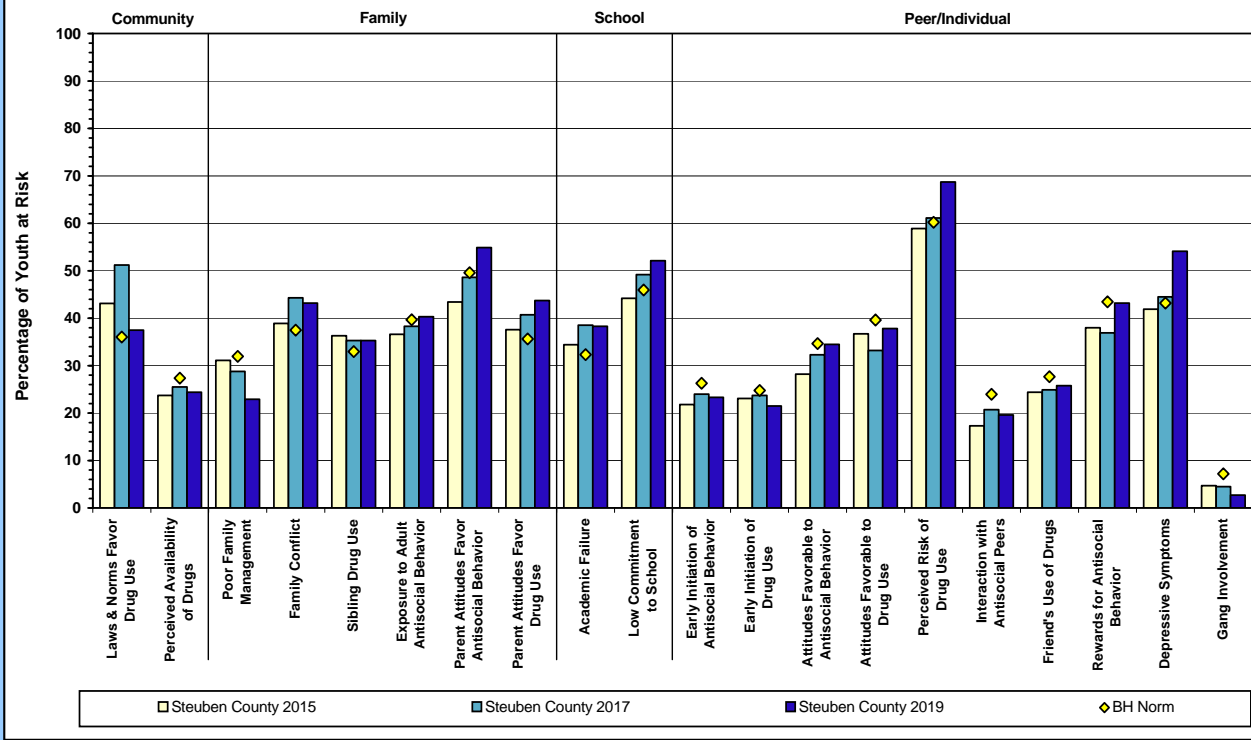


## PROTECTIVE PROFILE 2019 Steuben County, Grade 8

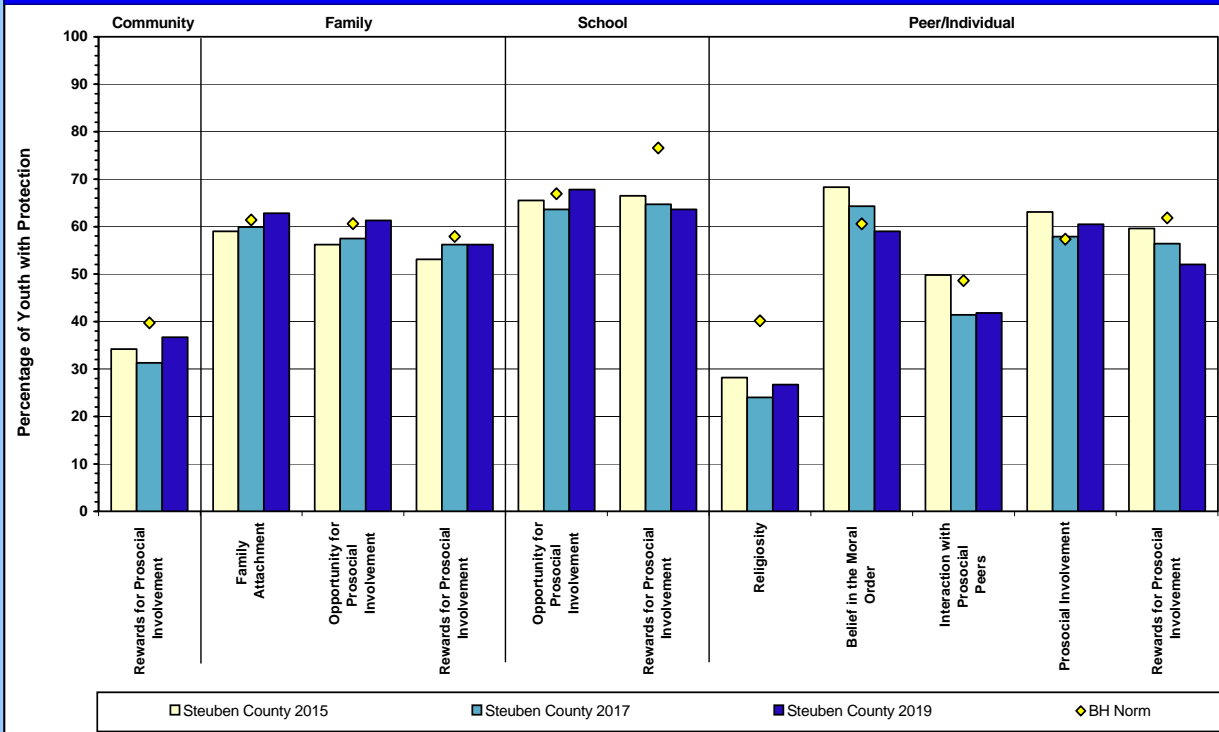


# Risk and Protective Factor Profiles

## RISK PROFILE 2019 Steuben County, Grade 10

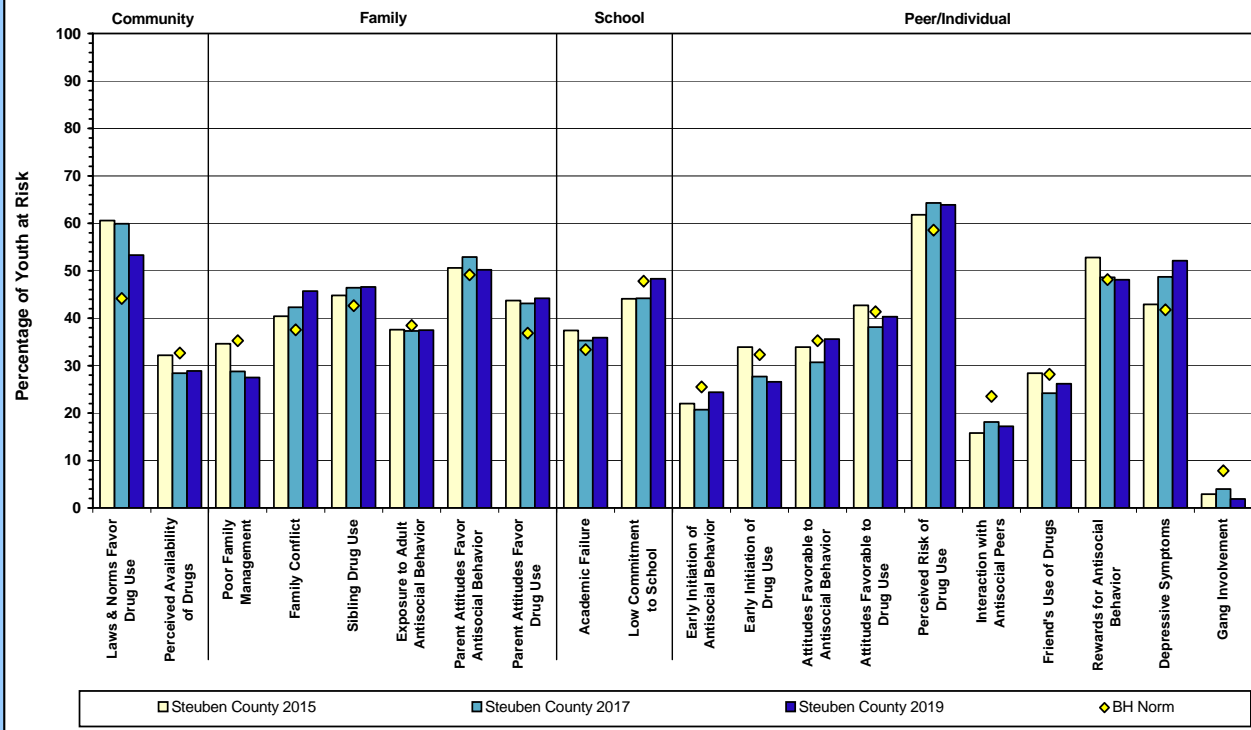


## PROTECTIVE PROFILE 2019 Steuben County, Grade 10

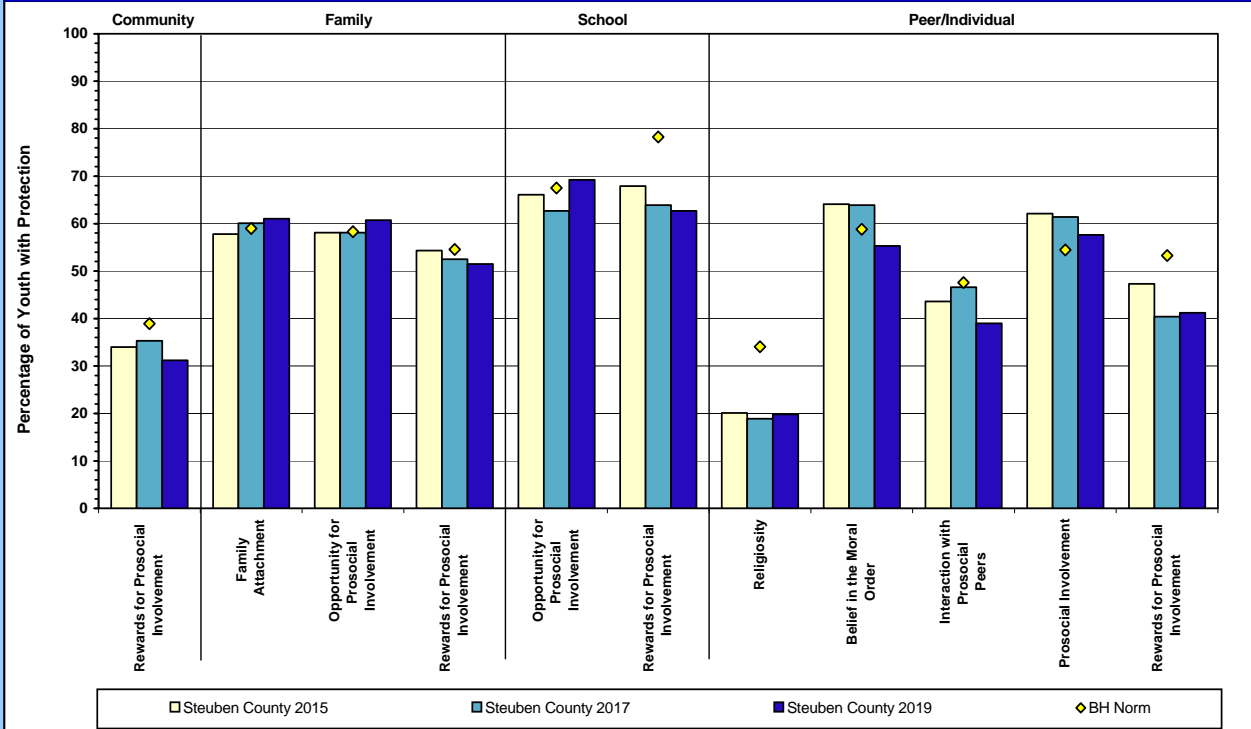


# Risk and Protective Factor Profiles

## RISK PROFILE 2019 Steuben County, Grade 12



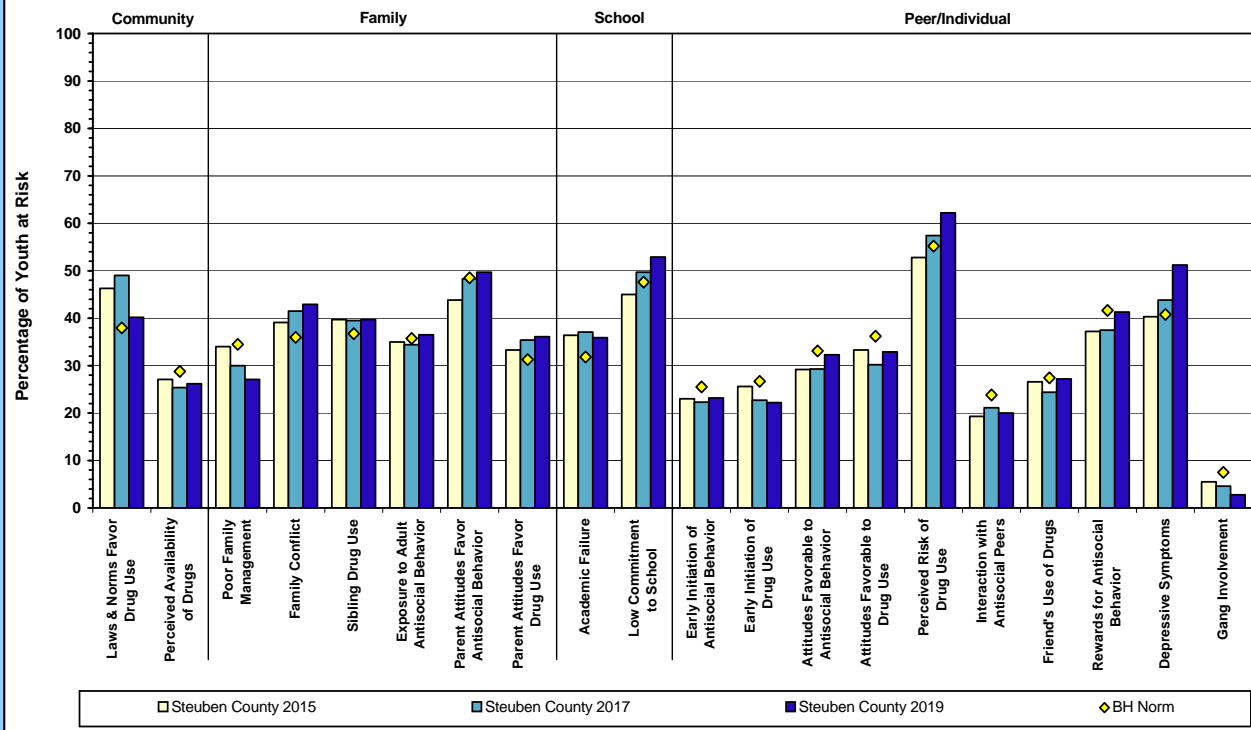
## PROTECTIVE PROFILE 2019 Steuben County, Grade 12



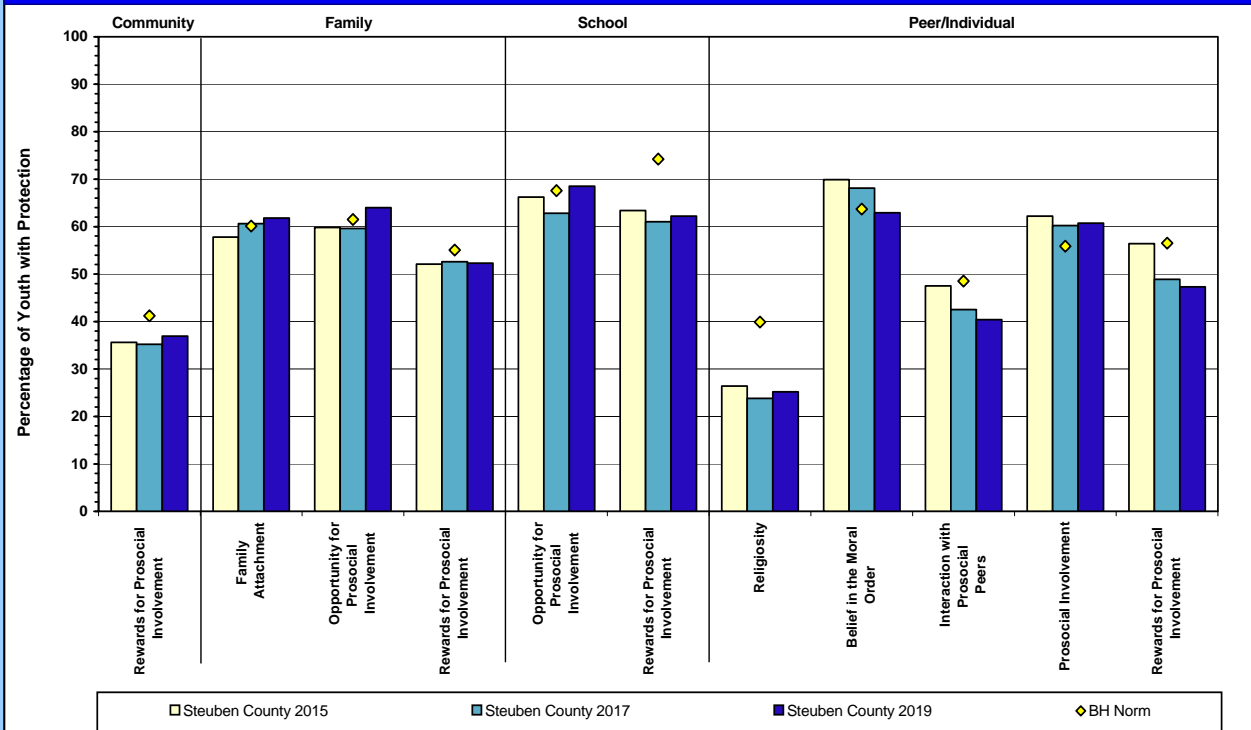


# Risk and Protective Factor Profiles

## RISK PROFILE 2019 Steuben County, All Grades



## PROTECTIVE PROFILE 2019 Steuben County, All Grades



## Risk and Protective Scale Definitions

**Table 2. Scales that Measure the Risk and Protective Factors Shown in the Profiles**

<i>Community Domain Risk Factors</i>	
<b>Laws and Norms Favorable Toward Drug Use</b>	Research has shown that legal restrictions on alcohol and tobacco use, such as raising the legal drinking age, restricting smoking in public places, and increased taxation have been followed by decreases in consumption. Moreover, national surveys of high school seniors have shown that shifts in normative attitudes toward drug use have preceded changes in prevalence of use.
<b>Scale Questions for Laws and Norms Favorable Toward Drug Use</b>	<i>If a kid drank some beer, nine or hard liquor (for example, vodka, whiskey or gin) in your neighborhood would he or she be caught by the police?</i>
	<i>If a kid smoked marijuana in your neighborhood, would he or she be caught by the police?</i>
	<i>If a kid carried a handgun in your neighborhood, would he or she be caught by the police?</i>
	<i>How wrong would most adults (over 21) in your neighborhood think it is for kids your age to use marijuana?</i>
	<i>How wrong would most adults (over 21) in your neighborhood think it is for kids your age to drink alcohol?</i>
<b>Perceived Availability of Drugs</b>	The availability of cigarettes, alcohol, marijuana, and other illegal drugs has been related to the use of these substances by adolescents.
	<i>If you wanted to get some cigarettes, how easy would it be for you to get some?</i>
<b>Scale Questions for Perceived Availability of Drugs</b>	<i>If you wanted to get some beer, nine or hard liquor (for example, vodka, whiskey or gin), how easy would it be for you to get some?</i>
	<i>If you wanted to get some marijuana, how easy would it be for you to get some?</i>
	<i>If you wanted to get a drug like cocaine, LSD, or amphetamines, how easy would it be for you to get some?</i>
	<i>If you wanted to get some cigarettes, how easy would it be for you to get some?</i>
<i>Community Domain Protective Factors</i>	
<b>Rewards for Prosocial Involvement</b>	Rewards for positive participation in activities helps youth bond to the community, thus lowering their risk for substance use.
<b>Scale Questions for Rewards for Prosocial Involvement</b>	<i>My neighbors notice when I am doing a good job and let me know about it.</i>
	<i>There are people in my neighborhood who are proud of me when I do something well.</i>
	<i>There are people in my neighborhood who encourage me to do my best.</i>
<i>Family Domain Risk Factors</i>	
<b>Poor Family Management</b>	Parents' use of inconsistent and/or unusually harsh or severe punishment with their children places them at higher risk for substance use and other problem behaviors. Also, parents' failure to provide clear expectations and to monitor their children's behavior makes it more likely that they will engage in drug abuse whether or not there are family drug problems.
<b>Scale Questions for Poor Family Management</b>	<i>The rules in my family are clear.</i>
	<i>When I am not at home, one of my parents knows where I am and who I am with.</i>
	<i>If you drank some beer or nine or liquor (for example, vodka, whiskey or gin) without your parents' permission, would you be caught by your parents?</i>
	<i>My family has clear rules about alcohol use.</i>
	<i>My family has clear rules about other drug use.</i>
	<i>If you carried a handgun without your parents' permission, would you be caught by your parents?</i>
	<i>If you skipped school, would you be caught by your parents?</i>
	<i>My parents ask if I've gotten my homework done.</i>
<i>Would your parents know if you did not come home on time?</i>	

## Risk and Protective Scale Definitions

**Table 2. Scales that Measure the Risk and Protective Factors Shown in the Profiles**

<i>Family Domain Risk Factors (Continued)</i>	
<b>Family Conflict</b>	Children raised in families high in conflict, whether or not the child is directly involved in the conflict, appear at risk for both delinquency and drug use.
<b>Scale Questions for Family Conflict</b>	<i>People in my family often insult or yell at each other.</i>
	<i>We argue about the same things in my family over and over.</i>
	<i>People in my family have serious arguments.</i>
<b>Sibling Drug Use and Exposure to Adult Antisocial Behavior</b>	When children are raised in a family with a history of problem behaviors (e.g., violence or ATOD use), the children are more likely to engage in these behaviors.
<b>Scale Questions for Sibling Drug Use</b>	<i>Have any of your brothers or sisters ever:</i>
	<i>drunk beer, wine or hard liquor (for example, vodka, whiskey or gin)?</i>
	<i>smoked marijuana?</i>
	<i>smoked cigarettes?</i>
<b>Scale Questions for Exposure to Adult Antisocial Behavior</b>	<i>About how many adults (over 21) have you known personally who in the past year have:</i>
	<i>used marijuana, crack, cocaine, or other drugs?</i>
	<i>sold or dealt drugs?</i>
	<i>done other things that could get them in trouble with the police like stealing, selling stolen goods, mugging or assaulting others, etc.?</i>
	<i>gotten drunk or high?</i>
<b>Parental Attitudes Favorable Toward Antisocial Behavior and Parental Attitudes Favorable Toward Drugs</b>	In families where parents use illegal drugs, are heavy users of alcohol, or are tolerant of children's use, children are more likely to become drug abusers during adolescence. The risk is further increased if parents involve children in their own drug (or alcohol) using behavior, for example, asking the child to light the parent's cigarette or get the parent a beer from the refrigerator.
<b>Scale Questions for Parental Attitudes Favorable Toward Antisocial Behavior</b>	<i>How wrong do your parents feel it would be for YOU to steal something worth more than \$5?</i>
	<i>How wrong do your parents feel it would be for YOU to draw graffiti, write things, or draw pictures on buildings or other property (without the owner's permission)?</i>
	<i>How wrong do your parents feel it would be for YOU to pick a fight with someone?</i>
<b>Scale Questions for Parental Attitudes Favorable Toward Drug Use</b>	<i>How wrong do your parents feel it would be for YOU to drink beer, wine or hard liquor (for example, vodka, whiskey or gin) regularly?</i>
	<i>How wrong do your parents feel it would be for YOU to smoke cigarettes?</i>
	<i>How wrong do your parents feel it would be for YOU to smoke marijuana?</i>
<i>Family Domain Protective Factors</i>	
<b>Family Attachment</b>	Young people who feel that they are a valued part of their family are less likely to engage in substance use and other problem behaviors.
<b>Scale Questions for Family Attachment</b>	<i>Do you feel very close to your mother?</i>
	<i>Do you share your thoughts and feelings with your mother?</i>
	<i>Do you share your thoughts and feelings with your father?</i>
	<i>Do you feel very close to your father?</i>

## Risk and Protective Scale Definitions

**Table 2. Scales that Measure the Risk and Protective Factors Shown in the Profiles**

<i>Family Domain Protective Factors (Continued)</i>	
<b>Opportunities for Prosocial Involvement</b>	Young people who are exposed to more opportunities to participate meaningfully in the responsibilities and activities of the family are less likely to engage in drug use and other problem behaviors.
<b>Scale Questions for Opportunities for Prosocial Involvement</b>	<i>If I had a personal problem, I could ask my mom or dad for help.</i>
	<i>My parents give me lots of chances to do fun things with them.</i>
	<i>My parents ask me what I think before most family decisions affecting me are made</i>
<b>Rewards for Prosocial Involvement</b>	When parents, siblings, and other family members praise, encourage, and attend to things done well by their child, children are less likely to engage in substance use and problem behaviors.
<b>Scale Questions for Rewards for Prosocial Involvement</b>	<i>My parents notice when I am doing a good job and let me know about it.</i>
	<i>How often do your parents tell you they're proud of you for something you've done?</i>
	<i>Do you enjoy spending time with your mother?</i>
	<i>Do you enjoy spending time with your father?</i>
<i>School Domain Risk Factors</i>	
<b>Academic Failure</b>	Beginning in the late elementary grades (grades 4-6) academic failure increases the risk of both drug abuse and delinquency. It appears that the experience of failure itself, for whatever reasons, increases the risk of problem behaviors.
<b>Scale Questions for Academic Failure</b>	<i>Putting them all together, what were your grades like last year?</i>
	<i>Are your school grades better than the grades of most students in your class?</i>
<b>Low Commitment to School</b>	Surveys of high school seniors have shown that the use of drugs is significantly lower among students who expect to attend college than among those who do not. Factors such as liking school, spending time on homework, and perceiving the coursework as relevant are also negatively related to drug use.
<b>Scale Questions for Low Commitment to School</b>	<i>During the LAST FOUR WEEKS how many whole days of school have you missed because you skipped or "cut"?</i>
	<i>How often do you feel that the school work you are assigned is meaningful and important?</i>
	<i>How interesting are most of your courses to you?</i>
	<i>How important do you think the things you are learning in school are going to be for your later life?</i>
	<i>Now, thinking back over the past year in school, how often did you enjoy being in school?</i>
	<i>Now, thinking back over the past year in school, how often did you hate being in school?</i>
<i>Now, thinking back over the past year in school, how often did you try to do your best work in school?</i>	
<i>School Domain Protective Factors</i>	
<b>Opportunities for Prosocial Involvement</b>	When young people are given more opportunities to participate meaningfully in important activities at school, they are less likely to engage in drug use and other problem behaviors.
<b>Scale Questions for Opportunities for Prosocial Involvement</b>	<i>In my school, students have lots of chances to help decide things like class activities and rules.</i>
	<i>There are lots of chances for students in my school to get involved in sports, clubs, or other school activities outside of class.</i>
	<i>There are lots of chances for students in my school to talk with a teacher one-on-one.</i>
	<i>I have lots of chances to be part of class discussions or activities.</i>

## Risk and Protective Scale Definitions

**Table 2. Scales that Measure the Risk and Protective Factors Shown in the Profiles**

<i>School Domain Protective Factors (Continued)</i>	
<b>Rewards for Prosocial Involvement</b>	When young people are recognized and rewarded for their contributions at school, they are less likely to be involved in substance use and other problem behaviors.
<b>Scale Questions for Rewards for Prosocial Involvement</b>	<i>My teachers notice when I am doing a good job and lets me know about it.</i>
	<i>The school lets my parents know when I have done something well.</i>
	<i>My teachers praise me when I work hard in school.</i>
<i>Peer-Individual Risk Factors</i>	
<b>Early Initiation of Antisocial Behavior and Early Initiation of Drug Use</b>	Early onset of drug use predicts misuse of drugs. The earlier the onset of any drug use, the greater the involvement in other drug use and the greater frequency of use. Onset of drug use prior to the age of 15 is a consistent predictor of drug abuse, and a later age of onset of drug use has been shown to predict lower drug involvement and a greater probability of discontinuation of use.
<b>Scale Questions for Early Initiation of Antisocial Behavior</b>	<i>How old were you when you first...</i>
	<i>got suspended from school?</i>
	<i>got arrested?</i>
	<i>carried a handgun?</i>
<b>Scale Questions for Early Initiation of Drug Use</b>	<i>attacked someone with the idea of seriously hurting them?</i>
	<i>How old were you when you first...</i>
	<i>smoked a cigarette, even just a puff?</i>
	<i>had more than a sip or two of beer, wine or hard liquor (for example, vodka, whiskey or gin)?</i>
<b>Scale Questions for Early Initiation of Drug Use</b>	<i>began drinking alcoholic beverages regularly, that is, at least once or twice a month?</i>
	<i>smoked marijuana?</i>
<b>Attitudes Favorable Toward Antisocial Behavior and Attitudes Favorable Toward Drug Use</b>	During the elementary school years, most children express anti-drug, anti-crime, and pro-social attitudes and have difficulty imagining why people use drugs or engage in antisocial behaviors. However, in middle school, as more youth are exposed to others who use drugs and engage in antisocial behavior, their attitudes often shift toward greater acceptance of these behaviors. Youth who express positive attitudes toward drug use and antisocial behavior are more likely to engage in a variety of problem behaviors, including drug use.
<b>Scale Questions for Attitudes Favorable Toward Antisocial Behavior</b>	<i>How wrong do you think it is for someone your age to...</i>
	<i>take a handgun to school?</i>
	<i>steal anything worth more than \$5?</i>
	<i>pick a fight with someone?</i>
	<i>attack someone with the idea of seriously hurting them?</i>
<b>Scale Questions for Attitudes Favorable Toward Drug Use</b>	<i>stay away from school all day when their parents think they are at school?</i>
	<i>How wrong do you think it is for someone your age to...</i>
	<i>drink beer, wine or hard liquor (for example, vodka, whiskey or gin) regularly?</i>
	<i>smoke cigarettes?</i>
	<i>smoke marijuana?</i>
	<i>use LSD, cocaine, amphetamines or another illegal drug?</i>

## Risk and Protective Scale Definitions

**Table 2. Scales that Measure the Risk and Protective Factors Shown in the Profiles**

<i>Peer-Individual Risk Factors (Continued)</i>	
<b>Perceived Risk of Drug Use</b>	Young people who do not perceive drug use to be risky are far more likely to engage in drug use.
<b>Scale Questions for Perceived Risk of Drug Use</b>	<i>How much do you think people risk harming themselves (physically or in other ways) if they:</i>
	<i>smoke one or more packs of cigarettes per day?</i>
	<i>try marijuana once or twice?</i>
	<i>smoke marijuana regularly?</i>
	<i>take one or two drinks of an alcoholic beverage (beer, wine, or liquor) nearly every day?</i>
<b>Interaction with Antisocial Peers</b>	Young people who associate with peers who engage in problem behaviors are at higher risk for engaging in antisocial behavior themselves.
<b>Scale Questions for Interaction with Antisocial Peers</b>	<i>Think of your four best friends (the friends you feel closest to). In the past year (12 months), how many of your best friends have:</i>
	<i>been suspended from school?</i>
	<i>carried a handgun?</i>
	<i>sold illegal drugs?</i>
	<i>stolen or tried to steal a motor vehicle such as a car or motorcycle?</i>
	<i>been arrested?</i>
	<i>dropped out of school?</i>
<b>Friends' Use of Drugs</b>	Young people who associate with peers who engage in alcohol or substance abuse are much more likely to engage in the same behavior. Peer drug use has consistently been found to be among the strongest predictors of substance use among youth. Even when young people come from well-managed families and do not experience other risk factors, spending time with friends who use drugs greatly increases the risk of that problem developing.
<b>Scale Questions for Friends' Use of Drugs</b>	<i>Think of your four best friends (the friends you feel closest to). In the past year (12 months), how many of your best friends have:</i>
	<i>smoked cigarettes?</i>
	<i>tried beer, wine or hard liquor (for example, vodka, whiskey or gin) when their parents didn't know about it?</i>
	<i>used marijuana?</i>
	<i>used LSD, cocaine, amphetamines, or other illegal drugs?</i>
<b>Rewards for Antisocial Behavior</b>	Young people who receive rewards for their antisocial behavior are at higher risk for engaging further in antisocial behavior and substance use.
<b>Scale Questions for Rewards for Antisocial Behavior</b>	<i>What are the chances you would be seen as cool if you:</i>
	<i>smoked cigarettes?</i>
	<i>began drinking alcoholic beverages regularly, that is, at least once or twice a month?</i>
	<i>smoked marijuana?</i>
<b>Depressive Symptoms</b>	Young people who are depressed are overrepresented in the criminal justice system and are more likely to use drugs. Survey research and other studies have shown a link between depression and youth problem behaviors.
<b>Scale Questions for Depressive Symptoms</b>	<i>Sometimes I think that life is not worth it.</i>
	<i>At times I think I am no good at all.</i>
	<i>All in all, I am inclined to think that I am a failure.</i>
	<i>In the past year, have you felt depressed or sad MOST days, even if you felt OK sometimes?</i>

## Risk and Protective Scale Definitions

**Table 2. Scales that Measure the Risk and Protective Factors Shown in the Profiles**

<i>Peer-Individual Risk Factors (Continued)</i>	
<b>Gang Involvement</b>	Youth who belong to gangs are more at risk for antisocial behavior and drug use.
<b>Scale Question for Gang Involvement</b>	<i>Have you ever belonged to a gang?</i>
<i>Peer-Individual Protective Factors</i>	
<b>Religiosity</b>	Young people who regularly attend religious services are less likely to engage in problem behaviors.
<b>Scale Question for Religiosity</b>	<i>How often do you attend religious services or activities?</i>
<b>Belief in the Moral Order</b>	Young people who have a belief in what is “right” or “wrong” are less likely to use drugs.
<b>Scale Questions for Belief in the Moral Order</b>	<i>It is all right to beat up people if they start the fight.</i>
	<i>It is important to be honest with your parents, even if they become upset or you get punished.</i>
	<i>I think it is okay to take something without asking if you can get away with it.</i>
	<i>I think sometimes it’s okay to cheat at school.</i>
<b>Interaction with Prosocial Peers</b>	Young people who associate with peers who engage in prosocial behavior are more protected from engaging in antisocial behavior and substance use.
<b>Scale Questions for Interaction with Antisocial Peers</b>	<i>Think of your four best friends (the friends you feel closest to). In the past year (12 months), how many of your best friends have:</i>
	<i>participated in clubs, organizations or activities at school?</i>
	<i>made a commitment to stay drug-free?</i>
	<i>tried to do well in school?</i>
	<i>liked school?</i>
	<i>regularly attended religious services?</i>
<b>Prosocial Involvement</b>	Participation in positive school and community activities helps provide protection for youth.
<b>Scale Questions for Prosocial Involvement</b>	<i>How many times in the past year (12 months) have you:</i>
	<i>participated in clubs, organizations or activities at school?</i>
	<i>done extra work on your own for school?</i>
	<i>volunteered to do community service?</i>
<b>Rewards for Prosocial Involvement</b>	Young people who are rewarded for working hard in school and the community are less likely to engage in problem behavior.
<b>Scale Questions for Rewards for Prosocial Involvement</b>	<i>What are the chances you would be seen as cool if you:</i>
	<i>worked hard at school?</i>
	<i>defended someone who was being verbally abused at school?</i>
	<i>regularly volunteered to do community service?</i>

# Risk and Protective Factor Tables

**Table 3. Percentage of Students Reporting Protection**

Protective Factors	Grade 8				Grade 10				Grade 12				Total			
	2015	2017	2019	BH Norm	2015	2017	2019	BH Norm	2015	2017	2019	BH Norm	2015	2017	2019	BH Norm
<b>Community Domain</b>																
Rewards for Prosocial Involvement	38.3	39.6	41.8	45.1	34.2	31.3	36.7	39.7	34.0	35.3	31.2	38.9	35.6	35.2	36.9	41.2
<b>Family Domain</b>																
Family Attachment	56.6	61.8	61.4	59.9	59.0	59.9	62.8	61.4	57.8	60.1	61.0	59.0	57.8	60.6	61.8	60.1
Opportunity for Prosocial Involvement	64.5	63.3	69.4	65.9	56.2	57.5	61.3	60.6	58.1	58.1	60.7	58.3	59.8	59.6	64.0	61.5
Rewards for Prosocial Involvement	49.8	48.7	48.9	52.5	53.1	56.2	56.2	57.9	54.3	52.5	51.5	54.6	52.1	52.6	52.3	55.1
<b>School Domain</b>																
Opportunity for Prosocial Involvement	67.0	62.2	68.8	68.5	65.5	63.6	67.8	66.9	66.1	62.7	69.2	67.5	66.2	62.8	68.5	67.6
Rewards for Prosocial Involvement	57.6	54.2	60.5	68.0	66.5	64.7	63.6	76.6	67.9	63.9	62.7	78.3	63.4	61.0	62.2	74.2
<b>Peer-Individual Domain</b>																
Religiosity	28.6	28.3	28.3	45.9	28.2	24.0	26.7	40.2	20.1	18.9	19.8	34.0	26.4	23.8	25.2	39.9
Belief in the Moral Order	75.0	76.4	73.0	71.8	68.3	64.3	59.0	60.6	64.1	63.9	55.3	58.8	69.9	68.1	62.9	63.7
Interaction with Prosocial Peers	47.6	39.7	40.1	49.1	49.8	41.4	41.8	48.6	43.6	46.6	39.0	47.6	47.5	42.5	40.4	48.5
Prosocial Involvement	61.4	61.5	63.6	55.4	63.1	57.9	60.5	57.3	62.1	61.4	57.6	54.5	62.2	60.2	60.7	55.9
Rewards for Prosocial Involvement	59.0	49.5	47.8	54.4	59.6	56.4	52.0	61.8	47.3	40.4	41.2	53.3	56.4	48.9	47.3	56.5



# Risk and Protective Factor Tables

**Table 4. Percentage of Students Reporting Risk**

Risk Factors	Grade 8				Grade 10				Grade 12				Total			
	2015	2017	2019	BH Norm	2015	2017	2019	BH Norm	2015	2017	2019	BH Norm	2015	2017	2019	BH Norm
<b>Community Domain</b>																
Laws & Norms Favor Drug Use	39.9	35.7	31.5	33.5	43.1	51.2	37.5	36.0	60.6	59.9	53.3	44.2	46.3	49.0	40.2	38.0
Perceived Availability of Drugs	27.2	22.1	25.7	26.8	23.7	25.5	24.4	27.4	32.2	28.4	28.9	32.7	27.1	25.4	26.2	28.8
<b>Family Domain</b>																
Poor Family Management	36.6	32.6	30.8	36.0	31.1	28.8	22.9	32.0	34.6	28.8	27.5	35.2	34.0	30.0	27.1	34.5
Family Conflict	38.4	37.5	40.3	32.7	38.9	44.3	43.2	37.5	40.4	42.3	45.7	37.5	39.1	41.5	42.9	36.0
Sibling Drug Use	39.9	37.3	38.5	35.3	36.3	35.3	35.3	33.0	44.8	46.4	46.6	42.7	39.7	39.5	39.7	36.7
Exposure to Adult Antisocial Behavior	31.6	27.2	31.7	29.4	36.6	38.3	40.3	39.7	37.6	37.3	37.5	38.5	35.0	34.4	36.5	35.7
Parent Attitudes Favor Antisocial Behavior	39.8	43.4	44.1	46.5	43.4	48.6	54.9	49.6	50.6	52.9	50.2	49.1	43.8	48.3	49.7	48.5
Parent Attitudes Favor Drug Use	22.2	21.9	21.7	22.7	37.6	40.7	43.7	35.6	43.7	43.1	44.2	36.8	33.3	35.4	36.1	31.3
<b>School Domain</b>																
Academic Failure	37.6	37.2	33.5	29.6	34.4	38.5	38.3	32.3	37.4	35.3	35.9	33.4	36.4	37.1	35.9	31.8
Low Commitment to School	46.4	55.7	57.5	49.1	44.2	49.2	52.1	45.9	44.1	44.2	48.3	47.8	45.0	49.7	52.9	47.6
<b>Peer-Individual Domain</b>																
Early Initiation of Antisocial Behavior	24.8	22.2	22.0	24.6	21.8	24.0	23.3	26.3	22.0	20.7	24.4	25.5	23.0	22.3	23.2	25.5
Early Initiation of Drug Use	22.7	16.8	19.2	23.3	23.1	23.7	21.5	24.8	33.9	27.7	26.6	32.3	25.6	22.7	22.2	26.7
Attitudes Favorable to Antisocial Behavior	27.3	24.8	27.4	29.4	28.2	32.3	34.5	34.7	33.9	30.7	35.6	35.3	29.2	29.3	32.3	33.1
Attitudes Favorable to Drug Use	24.1	19.5	21.8	27.9	36.7	33.2	37.8	39.6	42.7	38.1	40.3	41.4	33.3	30.2	32.9	36.2
Perceived Risk of Drug Use	41.1	46.9	54.2	47.7	58.9	61.1	68.7	60.2	61.8	64.3	63.9	58.6	52.8	57.4	62.2	55.2
Interaction with Antisocial Peers	23.5	24.5	22.8	23.9	17.3	20.7	19.6	24.0	15.8	18.1	17.2	23.5	19.3	21.1	20.0	23.8
Friend's Use of Drugs	27.6	24.0	29.3	26.5	24.4	24.9	25.8	27.7	28.4	24.2	26.2	28.2	26.6	24.4	27.2	27.4
Rewards for Antisocial Behavior	26.6	27.2	33.8	33.7	38.0	36.9	43.2	43.5	52.8	48.6	48.1	48.1	37.2	37.5	41.3	41.6
Depressive Symptoms	37.1	38.2	47.8	37.4	41.9	44.5	54.1	43.2	42.9	48.7	52.1	41.8	40.3	43.8	51.2	40.8
Gang Involvement	8.0	5.4	3.8	7.4	4.7	4.5	2.7	7.2	2.9	4.0	1.9	7.9	5.5	4.6	2.8	7.5



## High Prevalence/Early Initiation Drugs

Alcohol, tobacco (cigarettes, smokeless, and vaporized), marijuana, and inhalants are the drugs first and most commonly abused by youth. The higher prevalence and earlier initiation of use makes monitoring these drugs useful when monitoring at-risk students for progression from experimentation to social use to addiction to these and other substances.

Because these drugs generally enjoy more social acceptability, their use may normalize the larger idea of drug use as acceptable. Another potential risk is their use may “prime” the brain for addiction to other substances.

The most common early initiation/higher prevalence substance used was alcohol (39.7% of students in this survey). The next most frequent drug used was e-cigarettes, with 29.7% indicating lifetime use.

## Prescription and Over-The Counter Drugs and Medications

In recent years, the non-medical use of prescription drugs has emerged as a major public health issue. According to the recent Monitoring the Future study, prescription drugs are the most abused category of drugs after alcohol, tobacco, and marijuana.

Students often believe these substances are safer than illicit drugs because they are prescribed by a doctor and dispensed by a pharmacist. This is particularly troubling given the adverse health consequences related to prescription drug abuse: physiological and psychological addiction, physical dependence, and the possibility of overdose. Recent studies have found that once access to prescription drugs is limited, some abusers have adopted the use of heroin or other illicit substances. In 2014, the CDC reported that 3 out of 4 new heroin users report having abused prescription opioids prior to using heroin.

In 2017, there were 3,224 overdose deaths involving opioids in New York, a rate of 16.1 deaths per 100,000 persons compared to the average

national rate of 14.6 deaths per 100,000 persons. The greatest rise occurred among synthetic opioid-involved deaths (predominantly fentanyl) with 2,238 deaths reported in 2017, up from the 210 deaths in 2013.

Heroin-involved deaths also rose in the same four-year period from 666 deaths to 1,356 deaths. Deaths involving prescription opioids have shown a slower increase since 2013 from 859 to 1,044 cases in 2017.

Although over-the-counter (OTC) medications represent less danger of fatal overdose, high perceived safety and lax control of distribution, in comparison to their prescription counterparts, in combination with the potential for abuse makes them worth monitoring.

The prescription drug most frequently used by students in this survey was prescription sedatives (2.8% of students indicating lifetime use). The next most frequently used substance was prescription tranquilizers (2.7% of students indicating lifetime use).

## Other Drugs

The Survey also measures the prevalence of use for a variety of other drugs. The rates for prevalence of use of these other drugs are generally lower than the rates for alcohol, tobacco, marijuana, and inhalants. Use of these other drugs tends to be concentrated in the upper grade levels.

The most frequently used substance in the “other” category in this survey was hallucinogens (2.9% of students indicating lifetime use).

# ATOD Tables

**Table 5. Number of Students Who Completed the Survey**

Number of Youth	Grade 8				Grade 10				Grade 12				Total			
	2015	2017	2019	MTF 2018 †	2015	2017	2019	MTF 2018 †	2015	2017	2019	MTF 2018 †	2015	2017	2019	MTF 2018 †
	907	879	909	†	877	912	884	†	573	844	752	†	2357	2635	2545	†

**Table 6. Percentage of Students Who Used ATODs During Their Lifetime**

Substance	Grade 8				Grade 10				Grade 12				Total			
	2015	2017	2019	MTF 2018 †	2015	2017	2019	MTF 2018 †	2015	2017	2019	MTF 2018 †	2015	2017	2019	MTF 2018 †
Alcohol	22.4	18.9	20.9	23.5	41.4	42.0	44.0	43.0	65.5	58.9	57.2	58.5	39.9	39.9	39.7	41.2
Cigarettes	14.8	9.5	10.5	9.1	20.0	21.9	15.1	16.0	29.0	26.4	24.0	23.8	20.2	19.3	16.1	16.1
E-Cigarettes	n/a	12.2	17.7	21.5	n/a	23.0	32.5	36.9	n/a	32.9	41.0	42.5	n/a	22.6	29.7	33.4
Chewing Tobacco	11.7	7.1	5.1	6.4	14.7	15.7	10.3	10.0	21.8	17.3	15.6	10.1	15.2	13.4	10.0	8.8
Marijuana	9.9	7.8	8.2	13.9	20.6	22.4	24.0	32.6	38.1	34.7	34.3	43.6	20.7	21.6	21.4	29.7
Inhalants	6.1	4.5	5.0	8.7	5.3	4.7	3.3	6.5	4.0	3.3	3.4	4.4	5.3	4.2	3.9	6.6
Hallucinogens	0.9	1.2	1.0	2.2	1.9	3.1	3.2	3.9	4.7	4.6	4.9	6.6	2.2	2.9	2.9	4.1
Cocaine	1.0	0.5	0.6	1.4	0.8	1.5	1.5	2.6	2.0	2.5	1.9	3.9	1.2	1.5	1.3	2.6
Methamphetamines	0.7	0.3	0.0	0.7	0.5	0.6	0.6	0.8	0.9	0.7	0.3	0.7	0.7	0.5	0.3	0.7
Amphetamines	2.4	1.5	0.6	5.9	3.1	3.1	2.6	8.6	6.6	4.6	2.8	8.6	3.7	3.1	2.0	7.7
Sedatives *	3.8	2.2	1.0	n/a	4.6	3.1	3.3	n/a	5.3	3.8	4.2	4.2	4.5	3.0	2.8	n/a
Tranquilizers	1.3	0.9	1.7	3.5	1.5	1.9	2.8	6.0	3.3	2.4	3.6	6.6	1.9	1.7	2.7	5.4
Heroin	0.6	0.1	0.7	0.6	0.4	0.6	0.5	0.4	1.3	0.4	1.0	0.8	0.7	0.4	0.7	0.6
Other Narcotics *	1.5	1.5	1.9	n/a	2.2	2.5	2.0	n/a	6.7	4.5	3.1	6.0	3.0	2.8	2.3	n/a
Ecstasy	1.0	0.1	0.4	1.6	0.9	0.8	0.6	2.4	1.8	1.2	0.9	4.1	1.2	0.7	0.6	2.7
Synthetic Marijuana **	1.9	1.0	2.0	n/a	3.3	2.4	1.6	n/a	4.7	2.0	2.2	n/a	3.1	1.8	1.9	n/a

† See the Monitoring The Future (MTF) website ( [www.monitoringthefuture.org](http://www.monitoringthefuture.org) ). MTF only surveys grades 8, 10 and 12.

\* MTF does not publish 8th, 10th, or combined grade values for "Sedatives" or "Other Narcotics".

\*\* MTF does not collect data on that substance at all.

**Table 7. Percentage of Students Who Used ATODs During The Past 30 Days**

Substance	Grade 8				Grade 10				Grade 12				Total			
	2015	2017	2019	MTF 2018 †	2015	2017	2019	MTF 2018 †	2015	2017	2019	MTF 2018 †	2015	2017	2019	MTF 2018 †
Alcohol	8.8	8.6	9.9	8.2	19.0	22.9	24.1	18.6	38.0	32.5	32.3	30.2	19.7	21.3	21.5	18.7
Cigarettes	5.3	3.1	2.3	2.2	7.0	7.6	5.7	4.2	10.8	8.9	7.8	7.6	7.3	6.6	5.1	4.6
E-Cigarettes	n/a	7.0	11.1	10.4	n/a	13.2	22.4	21.7	n/a	20.3	27.6	26.7	n/a	13.5	19.9	19.3
Chewing Tobacco	6.3	2.3	2.5	2.1	7.5	7.0	4.2	3.9	10.3	8.1	5.9	4.2	7.7	5.9	4.1	3.4
Marijuana	5.4	4.3	5.9	5.6	11.0	13.2	15.8	16.7	19.6	20.5	19.2	22.2	11.0	12.7	13.3	14.6
Inhalants	2.1	1.0	2.4	1.8	1.4	1.3	1.6	1.0	1.3	0.3	0.6	0.7	1.6	0.9	1.6	1.1
Hallucinogens	0.5	0.1	0.3	0.6	0.8	0.5	0.7	0.8	1.5	1.6	1.4	1.4	0.8	0.7	0.7	0.9
Cocaine	0.3	0.4	0.0	0.3	0.2	0.5	0.6	0.6	0.6	0.8	0.5	1.1	0.4	0.5	0.4	0.7
Methamphetamines	0.2	0.0	0.0	0.1	0.1	0.2	0.1	0.1	0.5	0.0	0.0	0.3	0.3	0.1	0.0	0.2
Amphetamines	0.9	0.3	0.1	1.8	0.9	0.9	1.2	2.4	2.4	1.7	0.6	2.4	1.3	1.0	0.7	2.2
Sedatives *	1.4	0.9	0.0	n/a	1.5	1.1	1.4	n/a	1.3	1.2	0.9	1.2	1.4	1.0	0.7	n/a
Tranquilizers	0.7	0.5	0.8	0.9	0.7	0.5	0.5	1.3	0.6	0.7	1.1	1.3	0.7	0.5	0.7	1.2
Heroin	0.1	0.0	0.5	0.1	0.0	0.5	0.2	0.1	0.6	0.1	0.3	0.2	0.2	0.2	0.4	0.1
Other Narcotics *	0.6	0.4	0.6	n/a	0.7	1.1	1.1	n/a	2.6	1.4	0.8	1.1	1.1	1.0	0.8	n/a
Ecstasy	0.5	0.0	0.1	0.4	0.0	0.2	0.4	0.4	0.2	0.5	0.0	0.5	0.2	0.3	0.2	0.5
Synthetic Marijuana **	1.6	0.0	1.3	n/a	1.9	1.0	1.4	n/a	1.7	0.4	0.9	n/a	1.7	0.5	1.2	n/a
Energy Drinks **	27.1	14.5	33.3	n/a	28.8	18.3	43.1	n/a	29.8	18.6	36.6	n/a	28.4	17.2	37.8	n/a
Caffeine Pills **	0.9	0.6	1.1	n/a	1.2	1.3	2.4	n/a	4.6	1.2	2.4	n/a	1.9	1.1	1.9	n/a

**Table 8. Percentage of Students With Problem ATOD Use**

Problem Use	2015	2017	2019	MTF 2018 †	2015	2017	2019	MTF 2018 †	2015	2017	2019	MTF 2018 †	2015	2017	2019	MTF 2018 †
Binge Drinking (past 2 weeks)	4.4	4.8	3.3	3.7	10.3	12.1	9.5	8.7	23.3	18.4	17.4	13.8	11.2	11.7	9.7	8.6
1/2 Pack of Cigarettes per Day	0.1	0.9	0.1	0.3	0.5	1.3	0.7	0.7	1.8	2.0	1.7	1.5	0.7	1.4	0.8	0.8
<b>Alcohol and Driving in the Past 30 Days</b>	2015	2017	2019	BH Norm	2015	2017	2019	BH Norm	2015	2017	2019	BH Norm	2015	2017	2019	BH Norm
Drinking and Driving	0.7	1.0	0.6	2.3	0.7	1.8	1.3	3.5	3.8	2.8	2.5	7.5	1.5	1.8	1.4	4.5
Riding with a Drinking Driver	14.0	15.1	14.7	17.8	17.4	18.3	16.0	17.8	15.2	15.8	13.7	17.8	15.5	16.4	14.9	17.7

† See the Monitoring The Future (MTF) website ( www.monitoringthefuture.org ). MTF only surveys grades 8, 10 and 12.

\* MTF does not publish 8th, 10th, or combined grade values for "Sedatives" or "Other Narcotics".

\*\* MTF does not collect data on that substance at all.

# ATOD Tables, Supplement 1

## Supplement 1. ATOD Questions

Cigarettes	"Have you ever smoked cigarettes?" And "How frequently have you smoked cigarettes during the past 30 days?"
Chewing Tobacco	"Have you ever used smokeless tobacco (chew, snuff, plug, dipping tobacco, or chewing tobacco)? " and "How frequently have you used smokeless tobacco during the past 30 days?"
<b>On how many occasions (if any) have you:</b>	
Alcohol	had alcoholic beverages (beer, wine, or hard liquor) to drink in your lifetime (or during the past 30 days) -- more than just a few sips?
E-Cigarettes	used electronic cigarettes, e-cigarettes, vape pens, or e-hookahs in your lifetime (or during the past 30 days)?
Marijuana	used marijuana (grass, pot) or hashish (hash, hash oil) in your lifetime (or during the past 30 days)?
Inhalants	sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high in your lifetime (or during the past 30 days)?
Hallucinogens	used LSD (acid) or other hallucinogens (like PCP, mescaline, peyote, "shrooms" or psilocybin) in your lifetime (or during the past 30 days)?
Cocaine	used cocaine (like cocaine powder) or "crack" (cocaine in chunk or rock form) in your lifetime (or during the past 30 days)?
Methamphetamines	used methamphetamines (meth, speed, crank, crystal meth) in your lifetime (or during the past 30 days)?
Amphetamines	used prescription stimulants or amphetamines (such as Ritalin, Adderall, or Dexedrine) not prescribed to you in your lifetime (or during the past 30 days)?
Sedatives	used prescription sedatives including barbiturates or sleeping pills (such as phenobarbital, Tuinal, Seconal, Ambien, Lunesta, or Sonata) not prescribed to you in your lifetime (or during the past 30 days)?
Tranquilizers	used prescription tranquilizers (such as Librium, Valium, Xanax, Ativan, Soma, or Klonopin) not prescribed to you in your lifetime (or during the past 30 days)?
Heroin	used heroin in your lifetime (or during the past 30 days)?
Other Narcotics	used prescription pain relievers (such as OxyContin, methadone, morphine, codeine, Demerol, Vicodin, or Percocet) not prescribed to you in your lifetime (or during the past 30 days)?
Ecstasy	used MDMA (X,E, or ecstasy) in your lifetime (or during the past 30 days)?
Synthetic Marijuana	used "synthetic marijuana" ("K2", "Spice") to get high in your lifetime (or during the past 30 days)?
Energy Drinks	drank energy drinks with caffeine (like Red Bull, Monster, Rockstar, or 5-Hour-Energy) during the past 30 days?
Caffeine Pills	used caffeine pills (No-Doz, Vivarin, Dexatrim) during the past 30 days?
<b>Problem Use</b>	
Binge Drinking (past 2 weeks)	Think back over the last two weeks. How many times have you had five or more alcoholic drinks in a row? ( A "drink" is a glass of wine, a bottle of beer, a wine cooler, a shot glass of liquor, or a mixed drink.)
1/2 Pack of Cigarettes per Day	How frequently have you smoked cigarettes during the past 30 days?
<b>Alcohol and Driving in the Past 30 Days</b>	
Drinking and Driving	During the past 30 days, how many times did you DRIVE a car or other vehicle when you had been drinking alcohol?
Riding with a Drinking Driver	During the past 30 days, how many times did you RIDE in a car or other vehicle driven by someone who had been drinking alcohol?

## Antisocial Behavior

The tables that follow present the rates of a variety of antisocial behaviors (ASB). Antisocial behavior may be outwardly directed, involving aggression against adults or peers, or might be behavior destructive to property, self, and others.

Less overt antisocial behavior includes addictive behavior (such as gambling) or dishonest communication with parents.

Rates of both antisocial behavior and gambling reflect reported behavior in the past year. Questions assess lifetime incidence of gambling, online betting, personal skills games (such as pool, darts, coin tossing, video games), and other ways as means to provide additional information about gambling involvement. Intervention programs that focus on diminishing rewards for ASB and increasing reinforcement for prosocial behavior can encourage young people to discard these detrimental behavioral strategies.

This first section presents the percentage of youth who reported engaging in various antisocial behaviors (e.g., attacking someone with the idea of seriously hurting them, selling illegal drugs, attending school while drunk or high), and related consequences (e.g., being suspended from school or arrested).

The most frequently reported antisocial behavior in this survey was having “been drunk or high at school?” reported by 8.5% of students.

## Gambling

Even though gambling activities are legally restricted to adults, there is clear evidence that underage youth actively participate in gambling.

Despite being promoted as a harmless form of entertainment, gambling operates on the same reward pathways and the same neurotransmitters as ATOD addiction. Youth gambling is associated with alcohol and drug use, truancy, low grades, and risk-taking behavior.

Overall, 21.9% of students in this state engaged in gambling for money or anything of value in their lifetime.

The most frequently reported form of gambling was “buying lottery or scratch-off tickets?” reported by 11.4% of students who had gambled in the past 12 months.

# Antisocial Behavior and Gambling Tables

**Table 9. Percentage of Students With Antisocial Behavior in the Past Year**

How many times in the past year (12 months) have you: (One or more times)	Grade 8				Grade 10				Grade 12				Total			
	2015	2017	2019	BH Norm	2015	2017	2019	BH Norm	2015	2017	2019	BH Norm	2015	2017	2019	BH Norm
Been Suspended from School	8.7	11.9	9.3	12.1	6.4	7.9	9.3	9.8	6.7	6.1	5.9	7.9	7.3	8.6	8.3	10.0
Been Drunk or High at School	4.5	3.3	3.4	5.1	7.3	8.5	10.7	11.4	12.9	9.8	11.9	15.2	7.6	7.2	8.5	10.4
Sold Illegal Drugs	1.8	1.6	1.2	2.2	2.7	3.0	3.0	4.9	5.2	4.9	3.7	6.7	3.0	3.1	2.5	4.5
Stolen or Tried to Steal a Motor Vehicle	0.9	1.4	0.8	1.8	0.8	1.3	1.3	2.3	0.7	1.1	0.7	2.1	0.8	1.3	1.0	2.1
Been Arrested	3.8	2.5	2.1	3.2	2.0	2.8	1.5	3.9	2.0	1.9	1.7	4.1	2.7	2.4	1.8	3.7
Attacked Someone with the Idea of Seriously Hurting Them	9.8	8.2	7.4	9.4	5.5	7.2	5.4	8.1	6.3	4.2	3.6	6.5	7.4	6.6	5.6	8.0
Carried a Handgun	4.3	4.9	3.6	6.8	4.5	4.5	3.2	6.9	4.0	4.6	4.5	7.2	4.3	4.7	3.8	7.0
Carried a Handgun to School	0.2	0.1	0.2	0.9	0.2	0.7	0.6	1.2	0.7	0.8	0.9	1.6	0.3	0.5	0.5	1.2

**Table 10. Percentage of Students Gambling in the Past Year**

How many times in the past year (12 months) have you: ('A few times' or more)	Grade 8				Grade 10				Grade 12				Total			
	2015	2017	2019	BH Norm	2015	2017	2019	BH Norm	2015	2017	2019	BH Norm	2015	2017	2019	BH Norm
Gambled in the Past Year	25.5	22.3	23.1	40.9	22.9	24.6	21.4	42.7	23.3	24.4	21.2	40.3	24.0	23.8	21.9	41.3
Bet on Cards	7.3	4.6	5.5	19.3	7.7	8.0	7.3	20.6	7.8	8.3	7.9	20.3	7.6	7.0	6.9	20.0
Gambled on the Internet	1.7	0.7	1.2	2.9	2.5	2.6	1.8	3.1	2.8	2.7	2.3	3.2	2.3	2.0	1.8	3.0
Bet on Sports	11.5	9.2	8.5	20.3	9.0	12.6	7.5	21.2	7.0	10.4	8.4	19.1	9.4	10.8	8.1	20.3
Played the Lottery	13.3	11.4	12.1	15.7	12.5	11.0	10.9	17.2	15.8	13.1	11.2	17.8	13.6	11.8	11.4	16.8
Bet on Games of Skill	6.4	6.6	5.9	16.9	6.4	6.9	3.7	18.1	5.7	6.0	5.1	17.0	6.2	6.5	4.9	17.3
Bet on Video Poker	2.0	1.5	1.2	3.7	1.7	2.0	1.3	2.0	2.8	2.4	2.2	2.9	2.1	2.0	1.5	3.0
Bet on Dice	3.7	2.9	2.4	11.9	3.2	3.4	1.9	13.1	3.8	3.9	2.3	12.0	3.5	3.4	2.2	12.3
Played Bingo for money	4.8	3.1	2.6	12.4	4.9	3.0	2.5	10.3	4.0	3.5	1.7	8.2	4.6	3.2	2.3	10.4
Bet on Horses	3.0	3.0	1.9	3.7	3.0	3.6	1.3	4.0	2.7	1.8	1.7	4.3	2.9	2.8	1.6	4.0
Gambled at a Casino	1.7	0.7	0.1	0.9	0.9	1.5	0.5	1.3	2.1	2.3	1.2	2.8	1.5	1.5	0.6	1.6



### Access to Alcohol

Questions about how and where ATODs were obtained help suggest new approaches for preventing substance use.

Sources of alcohol include individuals such as a parent, brother or sister, relative, or friend, and other methods such as from a party, work, or the internet. Places of using alcohol include at your or a friend's home (with or without parent permission), open areas such as parks or back roads, and at school, both during the day and at after-school events, such as a dance or sports game.

40.3% of students chose "I got it at a party." as their most frequent source/method of obtaining the alcohol they used. The next most frequently reported source of alcohol was "I got it from home with my parents' permission." with 35.7% of students indicating this method.

46.4% of students chose "At my home with my parent's permission." as their most frequent place of using alcohol. The next most frequently reported place was "At my home or someone else's home without any parent permission." with 42.0% of students indicating this method.



## Sources and Places of Alcohol Use Tables

**Table 11. Sources and Places of Student Alcohol Use**

If you drank alcohol (not just a sip or taste) in the past year (12 months), how did you get it?	Grade 8			Grade 10			Grade 12			Total		
	2015	2017	2019	2015	2017	2019	2015	2017	2019	2015	2017	2019
<b>Sample size *</b>	<b>153</b>	<b>131</b>	<b>188</b>	<b>298</b>	<b>310</b>	<b>335</b>	<b>314</b>	<b>398</b>	<b>381</b>	<b>765</b>	<b>839</b>	<b>904</b>
I bought it myself from a store.	2.0	3.1	3.2	2.3	3.5	2.1	3.2	6.0	5.0	2.6	4.6	3.5
I got it at a party.	49.0	38.9	20.7	59.7	53.2	36.7	77.1	70.4	53.0	64.7	59.1	40.3
I gave someone else money to buy it for me.	17.0	17.6	11.7	28.2	25.2	12.5	52.5	47.0	34.6	35.9	34.3	21.7
I got it from someone I know age 21 or older.	42.5	47.3	21.8	52.3	54.2	32.2	69.1	59.8	45.4	57.3	55.8	35.6
I got it from someone I know under age 21.	29.4	23.7	9.0	32.6	35.2	19.7	39.2	41.5	23.1	34.6	36.4	18.9
I got it from a family member or relative other than my parents.	39.9	35.9	18.6	32.9	41.9	25.1	39.5	38.4	26.8	37.0	39.3	24.4
I got it from home with my parents' permission.	34.0	46.6	26.1	37.9	50.6	34.3	40.8	48.5	41.7	38.3	49.0	35.7
I got it from home without my parents' permission.	35.9	37.4	28.2	39.9	42.9	27.5	38.5	28.4	22.8	38.6	35.2	25.7
I got it at work.	2.0	2.3	2.1	2.7	7.1	1.5	3.8	3.8	2.4	3.0	4.8	2.0
I bought it over the internet.	2.6	3.1	2.1	0.7	3.2	1.5	2.2	1.3	1.3	1.7	2.3	1.5
I got it in another way.	11.8	11.5	38.3	11.1	10.0	16.1	8.9	6.8	11.8	10.3	8.7	18.9

During the past year (12 months) did you drink alcohol at any of the following places?	Grade 8			Grade 10			Grade 12			Total		
	2015	2017	2019	2015	2017	2019	2015	2017	2019	2015	2017	2019
<b>Sample size *</b>	<b>160</b>	<b>143</b>	<b>191</b>	<b>303</b>	<b>325</b>	<b>336</b>	<b>319</b>	<b>391</b>	<b>370</b>	<b>782</b>	<b>859</b>	<b>897</b>
At my home or someone else's home without any parent permission.	51.3	45.5	29.3	54.8	56.9	45.8	63.6	50.9	45.1	57.7	52.3	42.0
At my home with my parent's permission.	44.4	60.1	39.3	47.9	54.5	45.2	52.7	58.6	51.1	49.1	57.3	46.4
At someone else's home with their parent's permission.	20.6	19.6	12.6	30.4	30.2	21.4	49.8	45.8	39.7	36.3	35.5	27.1
At an open area like a park, beach, or back road.	19.4	18.2	7.3	22.4	23.7	13.4	32.6	27.6	19.2	26.0	24.6	14.5
At public events such as a sporting event, festival, or concert.	10.6	11.9	7.9	13.2	13.2	9.2	22.9	19.7	18.4	16.6	15.9	12.7
At a restaurant, bar, or a nightclub.	6.3	8.4	3.1	5.6	6.8	4.5	12.2	10.5	7.3	8.4	8.7	5.4
In a car.	15.0	14.7	0.0	15.2	19.1	0.3	23.5	21.5	0.0	18.5	19.4	0.1
At a school dance, a game, or other event.	6.9	8.4	6.8	5.9	4.9	4.5	7.2	5.9	4.1	6.6	5.9	4.8
At school during the day.	5.6	5.6	2.1	4.0	6.2	3.0	5.0	2.6	5.1	4.7	4.4	3.7
Near school.	8.8	7.7	3.7	4.0	8.0	3.6	6.0	2.8	6.2	5.8	5.6	4.7
In another place.	21.9	23.1	33.0	19.5	22.2	17.6	22.6	22.8	13.0	21.2	22.6	19.0

\* Sample size represents the number of youth who answered the question, not including students reporting no use in the past year. In the case of smaller sample sizes, caution should be exercised before generalizing results and yearly trends to the entire community.

# Drug Free Communities and Youth Perception Tables

These factors have been chosen as a common set of measures to fulfill the reporting requirements of several national drug prevention grants. Because all grantees collect these same core measures, evaluators use them to assess the compliance and effectiveness of the programs.

## Systemic Factors

Systemic factors are measures of the attitudes and perceptions students hold about substances. They measure the perceived risks of use for individual substances and how acceptable these substances are perceived to be from both a peer standpoint and parental standpoint.

The systemic factors covered here are student's perception of risk, that is, how much the student thinks people risk harming themselves if they regularly use the substance in question; perception of disapproval (parental and peer), that is, the student's perception of how wrong his or her parents/friends would feel it was if the student regularly used the substance; and attitudes toward peer use, that is, a measure of the student's level of approval or disapproval if someone their age regularly used the substance.

## Perception of risk

Perception of risk is an important determinant in the decision-making process young people go through when deciding whether or not to use alcohol, tobacco, or other drugs.

Data analysis shows a consistent negative correlation between perception of risk and the level of reported ATOD use. That is, generally when the perceived risk of harm is high, reported frequency of use is low.

Evidence also suggests that perceptions of the risks and benefits associated with drug use sometimes serve as a leading indicator of future drug use patterns in a community. These are presented as prevalence rates for surveyed youth assigning "moderate risk" or "great risk" of harm to six drug use behaviors.

## Perception of Parent Disapproval

Parents influence the attitudes and behavior of their children, including their perceptions on drug and alcohol use.

For example, parental approval of moderate drinking, even under parental supervision, substantially increases the likelihood of the young person using alcohol. Further, in families where parents involve children in their own drug or alcohol behavior, there is an increased likelihood that their children will use drugs in adolescence.

Parental attitudes were measured by asking surveyed youth "how wrong do your parents feel it would be for you to" use various substances. The rates are the percentages of surveyed youth who reported that their parents feel it would be "wrong" or "very wrong" to use the substance.

## Perception of Peer Disapproval

Parent influences tend to be more salient for younger students, whereas peer influences are more predominant for eighth graders. The older the student is, the more influence a student's peers exert on the student's behavior.

Researchers have identified a positive correlation between the amount of peer disapproval of alcohol and other drug use and the level of alcohol and other drug use among students. Thus, the greater the peer disapproval, the less likely students are to use alcohol and other drugs. The rates are the percentages of surveyed youth who reported that their friends feel it would be "wrong" or "very wrong" for them to use the substance.

# Drug Free Communities and Youth Perception Tables

**Table 12. Drug Free Communities Report \***

Outcomes	Definition	Grade 8		Grade 10		Grade 12		Total		Male		Female	
		Per.	Num.	Per.	Num.	Per.	Num.	Per.	Num.	Per.	Num.	Per.	Num.
<b>How do you feel about someone your age having one or two drinks of an alcoholic beverage nearly every day? †</b>	Neither Approve nor Disapprove	11.4	95	20.0	166	22.8	160	17.8	421	19.8	229	15.9	191
	Somewhat Disapprove	9.2	77	17.4	145	18.8	132	14.9	354	15.7	182	14.3	172
	Strongly Disapprove	66.0	552	50.1	417	46.9	329	54.8	1298	52.3	605	57.2	688
	Don't know or can't say	13.4	112	12.5	104	11.4	80	12.5	296	12.2	141	12.6	152
<b>How much do you think people risk harming themselves (physically or in other ways) if they: (Moderate risk or Great Risk)</b>	take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day?	68.4	558	66.8	547	65.4	441	67.0	1546	63.1	710	70.6	830
	have five or more drinks of an alcoholic beverage once or twice a week?	75.9	616	72.4	587	66.1	445	71.8	1648	68.1	762	75.2	879
	smoke 1 or more packs of cigarettes per day.	79.9	655	80.3	660	75.6	511	78.8	1826	79.9	900	77.9	921
	use electronic cigarettes, e-cigarettes, vape pens, or e-hookahs?	67.7	550	62.9	516	57.0	384	62.9	1450	58.5	659	67.0	793
	smoke marijuana once or twice a week?	61.9	504	43.6	358	35.4	239	47.6	1101	43.5	490	51.5	606
	use prescription drugs that are not prescribed to them?	84.5	685	84.6	695	82.7	561	84.0	1941	83.3	938	84.6	996
<b>How wrong do your parents feel it would be for YOU to: (Wrong or Very Wrong)</b>	have one or two drinks of an alcoholic beverage nearly every day?	98.7	772	97.0	766	94.7	621	96.9	2159	96.7	1033	97.1	1119
	smoke cigarettes	98.2	767	97.7	771	92.8	609	96.5	2147	96.7	1031	96.2	1109
	use electronic cigarettes, e-cigarettes, vape pens, or e-hookahs?	95.6	747	92.3	729	85.1	559	91.3	2035	91.6	976	91.2	1051
	smoke marijuana	95.6	746	87.9	692	79.4	519	88.1	1957	88.2	941	88.1	1010
	use prescription drugs that are not prescribed to them?	99.6	778	98.6	779	95.9	627	98.2	2184	98.5	1049	97.9	1129

† For this question only, the numbers and percentages represent the students' answers for all response options.

\* The "Num." column represents the sample size (the number of youth who answered the question). The "Per." column represents the percentage of youth in the sample answering the question as specified.

# Drug Free Communities and Youth Perception Tables

**Table 12. (Continued) Drug Free Communities Report \***

Outcomes	Definition	Grade 8		Grade 10		Grade 12		Total		Male		Female	
		Per.	Num.	Per.	Num.	Per.	Num.	Per.	Num.	Per.	Num.	Per.	Num.
<b>How wrong do your friends feel it would be for you to: (Wrong or Very Wrong)</b>	have one or two drinks of an alcoholic beverage nearly every day?	90.1	747	78.6	652	72.6	500	80.9	1899	79.3	910	82.4	982
	smoke cigarettes	93.2	771	85.6	709	74.2	509	85.0	1989	84.2	962	85.8	1021
	use electronic cigarettes, e-cigarettes, vape pens, or e-hookahs?	80.8	665	63.0	520	50.9	349	65.7	1534	66.1	755	65.4	779
	smoke marijuana	86.6	715	66.0	545	54.3	373	69.8	1633	70.2	800	69.5	828
	use prescription drugs that are not prescribed to them?	96.5	797	91.2	756	88.5	608	92.3	2161	91.7	1048	92.9	1107
<b>Past 30 day use of (at least one use in the Past 30 Days):</b>	Alcohol	9.9	79	24.1	196	32.3	216	21.5	490	20.6	228	22.5	262
	Cigarettes	2.3	18	5.7	46	7.8	52	5.1	116	5.0	55	5.3	61
	E-cigarettes	11.1	88	22.4	180	27.6	182	19.9	450	17.7	195	22.1	255
	Marijuana	5.9	47	15.8	128	19.2	128	13.3	303	12.4	137	14.2	165
	Any Prescription Drug	1.4	11	2.6	21	2.3	15	2.1	48	1.0	11	3.1	36
		<b>Age</b>	<b>Num.</b>	<b>Age</b>	<b>Num.</b>	<b>Age</b>	<b>Num.</b>	<b>Age</b>	<b>Num.</b>	<b>Age</b>	<b>Num.</b>	<b>Age</b>	<b>Num.</b>
<b>Average Age of Onset **</b>	Alcohol	11.6	196	13.3	369	14.5	405	13.4	970	13.3	452	13.5	516
	Cigarettes	11.5	91	12.9	157	13.4	182	12.8	430	12.9	199	12.8	230
	E-cigarettes	12.3	139	13.9	267	15.2	277	14.1	683	14.0	312	14.2	369
	Marijuana	12.2	66	13.4	194	14.8	249	13.9	509	13.9	232	13.9	276
	Prescription Pain Relievers	11.5	26	13.0	42	13.9	36	12.9	104	13.1	34	12.8	70

\* The "Num." column represents the sample size (the number of youth who answered the question). The "Per." column represents the percentage of youth in the sample answering the question as specified.

\*\* For Average Age of Onset, "Num." represents the number of youth who reported any age of first use for the specified substance other than "Never Used."

# Drug Free Communities and Youth Perception Tables

**Table 13. Youth Perceptions of Substance Use**

Now think about all the students in your grade at school. How many of them do you think:	Substance	Grade 8		Grade 10		Grade 12		Total	
		Number	Percent	Number	Percent	Number	Percent	Number	Percent
<b>a. smoke one or more cigarettes a day?</b>	None (0%)	350	40.1	213	24.9	130	18.0	693	28.3
	Few (1-10%)	275	31.5	240	28.0	221	30.6	736	30.0
	Some (11-30%)	149	17.1	197	23.0	165	22.8	511	20.8
	Half or less (31-50%)	58	6.6	118	13.8	105	14.5	281	11.5
	Half or more (51-70%)	29	3.3	61	7.1	66	9.1	156	6.4
	Most (71-90%)	9	1.0	21	2.5	23	3.2	53	2.2
	Almost All (91-100%)	3	0.3	7	0.8	13	1.8	23	0.9
<b>b. drank alcohol sometime in the past month?</b>	None (0%)	295	33.9	155	18.1	95	13.1	545	22.3
	Few (1-10%)	233	26.8	126	14.7	67	9.3	426	17.4
	Some (11-30%)	155	17.8	150	17.5	114	15.8	419	17.1
	Half or less (31-50%)	108	12.4	196	22.9	159	22.0	463	18.9
	Half or more (51-70%)	51	5.9	142	16.6	178	24.6	371	15.2
	Most (71-90%)	18	2.1	70	8.2	76	10.5	164	6.7
	Almost All (91-100%)	9	1.0	16	1.9	34	4.7	59	2.4
<b>c. used marijuana sometime in the past month?</b>	None (0%)	369	42.5	172	20.2	112	15.6	653	26.8
	Few (1-10%)	218	25.1	152	17.8	87	12.1	457	18.7
	Some (11-30%)	129	14.8	161	18.9	138	19.2	428	17.5
	Half or less (31-50%)	79	9.1	156	18.3	138	19.2	373	15.3
	Half or more (51-70%)	36	4.1	109	12.8	134	18.6	279	11.4
	Most (71-90%)	26	3.0	83	9.7	85	11.8	194	7.9
	Almost All (91-100%)	12	1.4	20	2.3	25	3.5	57	2.3
<b>d. used an illegal drug in the past month (not including marijuana)?</b>	None (0%)	455	52.9	260	30.6	197	27.5	912	37.6
	Few (1-10%)	230	26.7	280	33.0	292	40.7	802	33.1
	Some (11-30%)	102	11.9	168	19.8	109	15.2	379	15.6
	Half or less (31-50%)	37	4.3	73	8.6	65	9.1	175	7.2
	Half or more (51-70%)	16	1.9	44	5.2	29	4.0	89	3.7
	Most (71-90%)	15	1.7	19	2.2	19	2.7	53	2.2
	Almost All (91-100%)	5	0.6	5	0.6	6	0.8	16	0.7
<b>e. used electronic cigarettes, e-cigarettes, vape pens, or e-hookahs in the past month?</b>	None (0%)	222	25.7	126	14.7	90	12.5	438	17.9
	Few (1-10%)	119	13.8	66	7.7	36	5.0	221	9.0
	Some (11-30%)	152	17.6	104	12.1	73	10.1	329	13.5
	Half or less (31-50%)	135	15.6	138	16.1	96	13.3	369	15.1
	Half or more (51-70%)	100	11.6	165	19.3	153	21.2	418	17.1
	Most (71-90%)	86	9.9	170	19.8	145	20.1	401	16.4
	Almost All (91-100%)	51	5.9	88	10.3	128	17.8	267	10.9

# Additional Data Tables

**Table 14. Additional items**

Question	Response	Grade 8		Grade 10		Grade 12		Total	
		Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>For the following for questions, during the past 12 months, have you talked with at least one of your parents (by parents, we mean either your biological parents, adoptive parents, stepparents, foster parents, or other adult caregivers whether or not they live with you) about :</i>									
The dangers of underage drinking?	Yes	471	61.1	444	56.6	327	50.1	1242	56.2
	No	300	38.9	341	43.4	326	49.9	967	43.8
The dangers of tobacco use?	Yes	496	64.4	472	60.0	350	53.8	1318	59.7
	No	274	35.6	315	40.0	301	46.2	890	40.3
The dangers of drug abuse?	Yes	518	67.7	508	64.9	379	58.3	1405	63.9
	No	247	32.3	275	35.1	271	41.7	793	36.1
<i>For the following for questions, during the past 12 months, how many times has each of the following things happened?</i>									
You had problems at school or work because you had been drinking.	Never	770	99.0	779	98.4	636	97.0	2185	98.2
	Once	7	0.9	8	1.0	10	1.5	25	1.1
	Twice	1	0.1	4	0.5	2	0.3	7	0.3
	Three or four times	0	0.0	0	0.0	4	0.6	4	0.2
	Five or more times	0	0.0	1	0.1	4	0.6	5	0.2
You had problems with your friends because you had been drinking.	Never	769	98.7	765	97.2	621	94.8	2155	97.0
	Once	8	1.0	11	1.4	19	2.9	38	1.7
	Twice	2	0.3	7	0.9	5	0.8	14	0.6
	Three or four times	0	0.0	3	0.4	6	0.9	9	0.4
	Five or more times	0	0.0	1	0.1	4	0.6	5	0.2
You had problems with someone you were dating because you had been drinking.	Never	771	99.1	753	95.3	612	93.3	2136	96.0
	Once	6	0.8	20	2.5	22	3.4	48	2.2
	Twice	1	0.1	11	1.4	9	1.4	21	0.9
	Three or four times	0	0.0	3	0.4	7	1.1	10	0.5
	Five or more times	0	0.0	3	0.4	6	0.9	9	0.4
You were hung over.	Never	750	96.5	694	88.0	508	77.9	1952	88.0
	Once	13	1.7	39	4.9	55	8.4	107	4.8
	Twice	6	0.8	24	3.0	30	4.6	60	2.7
	Three or four times	4	0.5	15	1.9	24	3.7	43	1.9
	Five or more times	4	0.5	17	2.2	35	5.4	56	2.5

# Additional Data Tables

**Table 14. (Continued) Additional items**

Question	Response	Grade 8		Grade 10		Grade 12		Total	
		Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>For the following for questions, during the past 12 months, how many times has each of the following things happened?</i>									
You were sick to your stomach or threw up after drinking.	Never	761	97.7	732	93.1	550	83.7	2043	91.9
	Once	13	1.7	31	3.9	48	7.3	92	4.1
	Twice	1	0.1	10	1.3	23	3.5	34	1.5
	Three or four times	3	0.4	8	1.0	23	3.5	34	1.5
	Five or more times	1	0.1	5	0.6	13	2.0	19	0.9
You got into a sexual situation that you later regretted because you had been drinking.	Never	770	99.0	763	96.8	605	92.2	2138	96.2
	Once	6	0.8	19	2.4	32	4.9	57	2.6
	Twice	2	0.3	4	0.5	8	1.2	14	0.6
	Three or four times	0	0.0	2	0.3	7	1.1	9	0.4
	Five or more times	0	0.0	0	0.0	4	0.6	4	0.2
You got into a physical fight because you had been drinking.	Never	770	99.0	771	97.8	631	96.5	2172	97.8
	Once	6	0.8	8	1.0	11	1.7	25	1.1
	Twice	0	0.0	4	0.5	4	0.6	8	0.4
	Three or four times	1	0.1	4	0.5	5	0.8	10	0.5
	Five or more times	1	0.1	1	0.1	3	0.5	5	0.2
You were drunk at school or work.	Never	769	99.0	767	97.6	625	96.0	2161	97.6
	Once	6	0.8	12	1.5	13	2.0	31	1.4
	Twice	2	0.3	2	0.3	4	0.6	8	0.4
	Three or four times	0	0.0	3	0.4	3	0.5	6	0.3
	Five or more times	0	0.0	2	0.3	6	0.9	8	0.4
<i>If you used a vape product such as e-cigarettes, vape pens or mods in the past 12 months, what did you put in it?</i>									
I did not use a vape product in the past 12 months	Yes	238	66.5	269	55.1	253	53.3	760	57.5
	No	120	33.5	219	44.9	222	46.7	561	42.5
E-juice with zero nicotine	Yes	56	15.6	77	15.8	66	13.9	199	15.1
	No	302	84.4	411	84.2	409	86.1	1122	84.9
E-juice with nicotine	Yes	58	16.2	136	27.9	177	37.3	371	28.1
	No	300	83.8	352	72.1	298	62.7	950	71.9
Marijuana	Yes	18	5.0	53	10.9	62	13.1	133	10.1
	No	340	95.0	435	89.1	413	86.9	1188	89.9

# Additional Data Tables

**Table 14. (Continued) Additional items**

Question	Response	Grade 8		Grade 10		Grade 12		Total	
		Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>If you used a vape product such as e-cigarettes, vape pens or mods in the past 12 months, what did you put in it?</i>									
Other	Yes	13	3.6	15	3.1	15	3.2	43	3.3
	No	345	96.4	473	96.9	460	96.8	1278	96.7
Not sure	Yes	33	9.2	23	4.7	19	4.0	75	5.7
	No	325	90.8	465	95.3	456	96.0	1246	94.3
During the past 12 months, did you ever seriously consider attempting suicide?	No	698	85.2	676	82.3	552	81.5	1926	83.1
	Yes	121	14.8	145	17.7	125	18.5	391	16.9
During the past 12 months, did you make a plan about how you would attempt suicide?	No	711	87.3	701	85.5	586	86.4	1998	86.4
	Yes	103	12.7	119	14.5	92	13.6	314	13.6
During the past 12 months, how many times did you actually attempt suicide?	0 times	749	91.6	743	90.8	620	91.6	2112	91.3
	1 time	32	3.9	38	4.6	28	4.1	98	4.2
	2 to 3 times	26	3.2	26	3.2	21	3.1	73	3.2
	4 to 5 times	6	0.7	4	0.5	2	0.3	12	0.5
	6 or more times	5	0.6	7	0.9	6	0.9	18	0.8



### NATIONAL RESOURCES

United States Department of Health and Human Services (USDHHS)  
Substance Abuse and Mental Health Service Administration (SAMHSA)  
1 Choke Cherry Rd., Rm. 8-1054  
Rockville, Maryland 20857  
240-276-2000

[info@samhsa.hhs.org](mailto:info@samhsa.hhs.org)

[www.samhsa.gov](http://www.samhsa.gov)

(From this web-site, the programs and services provided by the Center for Substance Abuse Prevention, Center for Substance Abuse Treatment, and Center for Mental Health Services can be accessed)

Center for Substance Abuse Prevention (CSAP)

1 Choke Cherry Rd., Ste 4-1057  
Rockville, Maryland 20857  
240-276-2420

[info@samhsa.hhs.org](mailto:info@samhsa.hhs.org)

<http://prevention.samhsa.gov/>

CSAP's Centers for the Advancement of Prevention Technologies (all five CSAP Centers can be accessed through this web site)

<http://captus.samhsa.gov/home.cfm>

National Institutes of Health (NIH)  
6001 Executive Blvd., Rm. 5213  
Bethesda, Maryland 20892-9561  
301-443-1124

<http://www.nida.nih.gov/>

### STATE RESOURCES

New York State  
Office of Alcoholism and Substance Abuse Services (OASAS),  
Division of Prevention and Treatment  
[prevention@oasas.state.ny.us](mailto:prevention@oasas.state.ny.us)  
[www.oasas.state.ny.us](http://www.oasas.state.ny.us)

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