YOUTH RISK BEHAVIOR SURVEY: PINELLAS COUNTY 5TH, 6TH, 8TH, 10TH, AND 12TH-GRADE STUDENTS IN 2008

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EXECUTIVE SUMMARY

This evaluation examined results from a survey of student health and safety issues administered to 5th, 6th, 8th, 10th, and 12th-grade students across Pinellas County in the Fall of 2008. Student reports concerning the prevalence of their substance use across a range of substances are examined. Student reports concerning the frequency with which they experience teasing and bullying behaviors as well as other factors associated with student safety on school grounds are also examined. Results are compared with those from an administration of this same survey in 2006. Several additional questions are examined in relation to student reports of their own substance use. Additional questions also provided information concerning student health related behaviors independent of substance use. These included student reports of the frequency with which they eat breakfast, exercise, receive medical care and practice seatbelt and helmet safety. Results are examined within a broader social and developmental context informed by students' survey responses.

Increases in Reported Alcohol, Marijuana, Tobacco and Non-Prescription Drug Use from 2006 to 2008

Students in Pinellas reported significantly higher prevalence rates of both recent and lifetime alcohol and marijuana use at the high school level in 2008 relative to 2006. Lifetime alcohol prevalence was also significantly higher at the middle school level in 2008 relative to 2006. Both recent and lifetime prevalence of tobacco and non-prescription drug use were also higher among 12th-grade students in 2008 relative to 2006. Among 12th-grade students, approximately 29% reported recently (in the past 30 days) using tobacco and marijuana, 46% reported drinking alcohol, and 6% reported using non-prescription drugs.

Physical Violence, Teasing, and Bullying are not Uncommon

While the reported prevalence of being hit, kicked, pushed, or shoved and engaging in a physical fight decline with increasing grade level, they are not uncommon across grades. Twenty-five percent of 5th-grade and middle school students, 20% of 10th-grade students, and 15% of 12th-grade students report being hit, kicked, pushed, or shoved three or more times in the past thirty days. Engagement in a physical fight on school grounds is reported by 20% of middle school students, 15% of 10th-grade students, and 10% of 12th-grade students. More than 7% of students at each grade level report having been threatened or injured with a weapon on school property in the past 12 months. More than 7% of students at the 12th-grade level report having brought a weapon to school in the past 30 days prior to the survey. Approximately 10% of students at each grade level report being teased 20 or more times in the 30 days prior to the survey. Taken together, these data suggest that physical violence, teasing, and bullying are not uncommon in Pinellas schools.

Students' Shifting Perceptions Associated with Substance Use

Several questions examined students' attitudes associated with substance use. Results indicated that students are much more likely to state that they approve of people who use tobacco, alcohol, and marijuana as they become older. Among 12th-grade students, approval rates are 26% for tobacco, 39% for alcohol, and 34% for marijuana. Approval rates have risen from 2006 to 2008 among high school students regarding alcohol and marijuana. Approval has also risen among middle school students regarding alcohol, and 12th-grade students regarding cigarettes. These rates are directly parallel to increases from 2006 to 2008 in reported use of these substances.

Student attitudes were also clearly associated with student reports of substance use. Students who had indicated that they had used a substance were much more likely to state that they approve of people who use the substance. This relationship was stronger for students who reported that they had recently used the substance compared to

those reporting lifetime use. This relationship also became stronger with increasing grade level. For example, by 12th-grade, 76.6% of those who had recently used marijuana approved of people who do so, 3.9% disapproved of people who do so, and 19.5% stated that they didn't know.

Students Appear to be Aware of the Dangers of Substance Use

Across grade levels and across substances less than 10% of students report that there is 'no risk' associated with their use. Students appear to be aware of the dangers of substance use from 5th-grade onward. The only reports that change somewhat are those for marijuana where 17% of 12th-grade students report that there is no risk associated with marijuana use. Perceptions of risk do differ somewhat depending upon whether a student reports having used a substance. As they become older, students who consume alcohol are actually *less* likely to state that alcohol poses no risk. This may be due to their awareness of the dangers associated with drinking and driving as students become older. Reports among those who use all other substances remain similar with increasing age except for those who use marijuana, who are more likely to indicate that marijuana poses no risk as they become older. This is yet another indication of increasing support for marijuana use among students with increasing age, especially among those who use the substance.

Data also indicate a change over time where students at the lower grade levels were more likely to indicate that substance use represents a great risk in 2008 relative to 2006. These data may suggest positive effects of efforts to educate younger students regarding the dangers of substance use. The difficulty with these data is that substance use increases despite what appears to be students' awareness of the potential dangers involved.

Developmental Shift toward Peer Social Orientation

Data gathered in conjunction with this survey appeared to point toward the influence of peer socialization upon students' substance use. Data supported established developmental trends in which students' attention shifts strongly to peer socialization from middle school onward and that these contexts may be strongly linked to increases in substance use. Data indicated that while alcohol use was most frequently reported to occur at home in middle school, the context shifted toward consumption of alcohol at a friend's home being the most common location in high school. Perhaps the strongest indication of students' strong shift toward peer involvement was indicated in their reports of time spent on the phone. The percentage of students who report using the phone for more than two hours a day shifts from 15% of students in 5th-grade to over 60% of students in high school.

Peer Contexts Associated with Substance Use

In addition to reports of increased alcohol use at a friend's home in high school, several other findings suggested the importance of peer contexts associated with substance use. The percent of students reporting use of alcohol in a car shift from less than 4% in 8th-grade to more than 10% in 10th-grade to more than 17% in 12th-grade. The percentage of students who report peer pressure to use alcohol and marijuana increases steadily with grade level as peer contexts apply more perceived pressure to engage in substance use.

A key finding that reflects the differential between awareness and socialization involves changes in student reports of peer pressure to use alcohol and marijuana from 2006 to 2008. At the lower grade levels, peer pressure is reported to have declined from 2006 to 2008. Here it appears that the message that substances can be dangerous may be associated with less pressure felt from peer contexts to use substances. However, among older students there has been an increase from 2006 to 2008 in the percent of students reporting that they feel peer pressure to use alcohol and marijuana. These results suggest that the socialization process surrounding substance use can override awareness of potential dangers as students become older.

Broad Availability and School as a Context for Drug Sale and Distribution

More than 90% of high school students who use tobacco, alcohol, and marijuana state that they are easy to obtain. Rates in the 66% range for the lower prevalence substances suggest that they are also not particularly difficult to obtain by those who use them. Between 20-25% of high school students indicate that they have been offered, sold, or given an illegal drug on school property. Analyses in which approximately 50% or more students who report using each illegal drug in the survey indicate that they have been offered, sold, or given an illegal drug on school property suggest that illegal drugs are being bought and sold on school property. For example, among 12th-graders who report having used heroin in their lifetime, 66.7% report having been offered, sold, or given an illegal drug on school property. While the wording of these separate questions does not allow us to determine relative rates at which each illegal drug might be exchanging hands on school property, they do suggest that a sizable percentage of students who use illegal drugs may be acquiring them on school property.

Persistent Influence of Adult Supervision

Despite the strong shift that occurs toward peer orientation as students advance through late middle school and high school, results suggest that a persistent relationship exists between factors associated with adult supervision and reports of substance use. Students who report having an adult always present in the home after school report lower rates of alcohol use across contexts at each grade level. Similarly, students who report that their parents believe it would be very wrong to use drugs or alcohol, and those who report that their families have clear rules regarding substance use are less likely to use substances across grade levels. Students may be adjusting their perceptions to align with their substance use histories. However, while the directionality of this relationship remains uncertain from these data, there is clearly a relationship between students' reports of their perceptions of parental attitudes and their reports of substance use that may have a protective effect through high school.

Combined Risk

Protective factors such as strong adult supervision and students' internalization of positive adult attitudes toward substance use are particularly important given the consistent finding that risk factors are very likely to co-occur. A series of analyses indicated that students who report having skipped school, received an in-school-suspension, or out-of-school suspension since the start of the school year were much more likely to report engaging in substance use relative students who did not report these behavioral difficulties. Similarly, students who reported having recently brought a weapon to school or having had a physical fight on school property in the past 12 months were much more likely to report engagement in substance use. Separate analyses indicated that students who report having driven while under the influence of alcohol were much less likely to report wearing a seatbelt. While there isn't 100% overlap, these risk factors co-occur at high rates. This can place students at increased risk for a range of negative developmental outcomes.

Student Achievement

The anonymous nature of the present survey precludes analysis of the relationship between the factors we have examined and student academic achievement. However, it is not unreasonable to suggest that students who present with multiple risk factors including behavioral difficulties and substance use may be less likely to achieve at their fullest potential. Data from this study as well as the Florida Youth Substance Abuse Survey indicates that rates of having used substances prior to age 14 are consistently lower among 12th-grade students relative to 10th-grade students. A potential reason for this finding, which has been consistent for a decade in the FYSAS, is that students who engage in substance use prior to age 14 are less likely to remain in school through 12th-grade. Authors of the Monitoring the Future substance use study have also suggested that differential rates of substance use reports by ethnicity, also found in our data, in which African-American students consistently report much lower levels of substance use in high school relative to Caucasian students, may also be due to the effects of dropout where African-American students who remain in high school have lower rates of substance use relative to those who do not complete high school.

Developmental and Ecological Context

Both student achievement and substance use occur in a broader developmental and ecological context. Results from this study suggest that students may be well aware of the dangers of substance use. However, developmental patterns of increased participation in peer networks that promote substance use can override the protective effects of knowing these potential dangers. Reports of easy access to cigarettes, alcohol, and marijuana among high school students combined with data suggesting that the sale of illegal substances may not be uncommon on high school campuses in particular, as well as middle school campuses to a lesser degree, suggest that the availability of illegal substances may also compete with the protective effects of preventive efforts to curtail their use. While the anonymous nature of the present survey prevents direct analysis of the relationship among the variables examined in this report and student achievement, the strong overlap between multiple problem behaviors would strongly suggest that these factors influence academic achievement and student dropout or school non-completion rates.

Comprehensive Prevention

Considering all of these factors, a comprehensive, community wide approach to prevention is needed. Prevention efforts that connect students to positive organizations in their community are likely to provide a protective effect against multiple problematic outcomes. Efforts that involve parents and form partnerships that provide resources to parents can also have a strong protective effect. Recommendations are offered concerning ways to strengthen partnerships among communities, families, and students in ways that can reduce risk and promote positive developmental outcomes.

YOUTH RISK BEHAVIOR SURVEY: PINELLAS COUNTY 5TH, 6TH, 8TH, 10TH, AND 12TH-GRADE STUDENTS IN 2008

The Youth Risk Behavior Survey (YRBS) has been administered since the 1998-1999 school year when the Pre-K-12 Health Education Office of Pinellas County Schools gained district approval to pilot the survey in eight high schools across the district. The Pinellas version of the YRBS is based upon the national Youth Risk Behavior Surveillance System (YRBSS), which was established by the Department of Health and Human Services Centers for Disease Control and Prevention (CDC) in 1990 to monitor the major health-risk behaviors that contribute to the leading causes of death, disability, and social problems among youth and adults in the United States[1]. Development of a survey specific to Pinellas County has provided flexibility in terms of the issues that are addressed in each administration as well the ability to use the wealth of information derived from these data to inform decisions regarding intervention strategies among multiple agencies and stakeholders in Pinellas County.

PREVENTION AND INTERVENTION ACTIVITIES IN PINELLAS COUNTY

A number of programs are offered in Pinellas County Schools and in the community to prevent substance use and reduce its prevalence by providing prevention education and intervention programs. Partnerships are crucial in these efforts that focus on universal prevention strategies as well as direct and environmental strategies.

Pinellas County has an active Substance Abuse Prevention Coalition. The Live Free! Substance Abuse Prevention Coalition of Pinellas County is comprised of schools, families and communities aligned collectively to reduce the problem of underage drinking and other drug use in Pinellas County. LiveFree! works in partnership with parents, youth, young adults, Pinellas County law enforcement, schools, faith-based organizations, civic and social organizations, health and human services, businesses, government agencies, etc. to keep our communities safe, healthy and protected from the harmful effects of alcohol, prescription drugs, marijuana, tobacco and other drugs. LiveFree! high school clubs and community club, are comprised of student leaders participating in environmental strategies and advocacy. The high school clubs are coordinated in partnership with Pinellas County Schools, Safe and Drug Free Schools federal Grant to Reduce Alcohol Abuse. Events include an annual televised town hall meeting in partnership with WEDU, Operation Medicine Cabinet, Red Ribbon, Recovery Month and distribution of the Keep Kids Drug Free Foundation mini-grant awards to applicants for coordinating alcohol and other drug free Grad Night events.

In 2008, the LiveFree! **Substance Abuse Prevention Coalition of Pinellas County** served over 1,588 adults (653 parents) and 3,638 youth. The Pinellas County Health Department, Tobacco-Free Coalition of Pinellas County is on the Board of Directors of LiveFree! along with Pinellas County Schools, Pinellas County Sheriff's Office, Drug Free America Foundation, Gibbs High School student, WEDU, Central Florida Behavioral Health Network, City of St. Petersburg Weed and Seed, Green Chapel AME Church, Family Resources, Suncoast Safety Council, Operation PAR, Inc., St. Petersburg College, Department of Alcohol Beverage and Tobacco and the Pinellas Park Police Department. Pinellas County Council of Parent Teacher Associations (PCCPTA) are active coalition members and invite LiveFree! to be at its annual in-serve workshop and training.

Representatives from health, education, state and local government, law enforcement, substance abuse/mental health service providers, parents, and students make up the membership of the **Tobacco-Free Coalition of**

[1] Centers for Disease Control and Prevention. Youth Risk Behavior Surveillance- United States 2007. Surveillance Summaries, June 6, 2008, MMWR 2008; 57(No. SS-4).

Pinellas County. The mission of this initiative is to implement a comprehensive, countywide tobacco control program that focuses on young people and develops them as advocates and agents of change. Events are intended to increase the awareness of the harmful effects of tobacco use and include the Students Working Against Tobacco (SWAT) program, presentations to students, and support of the Great American Smoke Out, World No Tobacco Day, and Kick Butts Day events.

The **Pinellas County School Health Advisory Committee** (SHAC) is made up of a broad cross-section of school, health, business and community leaders, and parent and student groups. Together, the SHAC serves as problem-solvers and advisors to school districts on health related issues. SHAC works to:

- Build trust between representatives from the community, health and education sectors
- Use the collective SHAC member knowledge, passion and leadership to have a positive impact on the health and academic success of students.
- Support the Coordinated School Health Model

In public schools, substance abuse and violence prevention lessons are taught through developmental guidance, science, and health education classes. In addition, the **Safe and Drug Free Schools Office of the Pinellas County School District** provides curriculum and coordinates a variety of prevention education initiatives. Pinellas County Schools is also the recipient of the federal **Grant to Reduce Alcohol Abuse** which funds the Student Alcohol Reduction (StAR) project. The grant supports LiveFree! student chapters, social marketing, direct service to students and families, and student assistance counselors in four high schools.

Red Ribbon Week, celebrated every year the last week in October, is a campaign in which family, school, and community come together to support a healthy, drug-free lifestyle. This is supported by Safe and Drug Free Schools throughout the school year with resources and information related to the substance abuse prevention topic of the month. Operation PAR, Pinellas County Schools, and Pinellas County Sheriff's Office participate in the Red Ribbon Fun Rally held annually at North Straub Park in St. Petersburg. The event is coordinated by Operation PAR and its SunCoast Keep Kids Drug Free Prevention Center.

Too Good for Drugs and **Bee Wize** are prevention education programs designed to provide elementary and middle school students with the knowledge, skills and attitudes needed to remain drug-free. Programs focusing on marijuana prevention, binge drinking prevention, and prescription drug abuse are provided at the middle and high school levels. **Students Teach Students** is a tobacco-prevention program for 4th-grade students done in collaboration with the American Lung Association. Trained high school students present the harmful effects of tobacco products and teach refusal skills to the younger students. At the high school level, the Office of Safe and Drug Free Schools coordinates with school resource officers to provide the **Prom Promise** and **Mock DUI programs**, and to support clubs such as **Students Against Destructive Decisions** (SADD). Additionally, universal prevention is provided at all grade levels through **character education, conflict resolution, peer mediation** and **bullying prevention and intervention**. The Safe and Drug Free Schools' Office also provides **crisis response** to schools.

Another important component of Pinellas County Schools' substance abuse and violence prevention program is education and support for parents and families. The Safe and Drug Free Schools Office provides ongoing education for parents regarding drug and violence prevention issues through workshops, newsletters and website. The Safe and Drug Free Schools Office also works with the Pinellas County Council of Parent Teacher Associations (PCCPTA) to provide resources and information to parents and families.

A number of intervention initiatives are also in place in Pinellas County Schools. **A Tobacco Intervention Program** is provided for students as an alternative to suspension for tobacco violations on campus. **Face It** is an educational substance abuse prevention and early intervention program that helps youth and their families learn life skills that support the teen in becoming and staying drug-free. The program is available as an alternative to reassignment for first time offenders of the zero tolerance policy regarding drug use on campus. Safe and Drug Free Schools' Prevention Specialists also counsel with individual students as needed. Pinellas County Schools,

Operation PAR and LiveFree! are partners in the Pinellas Parents And Children Together (Pinellas PACT) new prevention programs that will provide Project Northland and FACT It to the parents of students of North County and South County, based on need identified by the data.

The Pinellas County Sheriff's Office is committed to the development and perpetuation of programs designed to assist the needs of children and families in our community and to prevent and control juvenile delinquency. Listed below are some of the Juvenile Programs sustained through the Pinellas County Sheriff's Office:

School Resource Deputy (SRD) Program -The function of the School Resource Deputy (SRD) Program is to promote an effective law enforcement/school and community relations program directed at preventing juvenile delinquency at the middle and high school levels. The program was established to provide a forum through which students, parents, faculty, and deputies can become acquainted and develop working relationships. The primary responsibilities of School Resource Deputies assigned to the School Resource Deputy Unit are as follows:

- 1. Acting as a resource with respect to delinquency prevention.
  2. Providing guidance to students on ethical issues in a classroom setting.
  3. Providing individual counseling to students
  4. Explaining the law enforcement role in society

Other juvenile programs supported through the Sheriff's Office include:

- **Juvenile Diversion Unit**- Community based disciplinary alternatives available to first time juvenile offenders who have been charged with or referred on a Misdemeanor crime. The program is designed to modify delinquent behavior through means other than those available through the traditional Juvenile Justice System while at the same time diverting the child from acquiring a permanent criminal record.
- **Missing Person/Runaway Unit** – A program that specializes in tracking missing and runaway children. The program also assists families by diverting children from delinquency and the Criminal Justice System. Deputies will work with troubled children and their families and provide to them counseling and additional resources/services.
- **Explorer Program** - Law Enforcement Exploring provides young adults who may be interested in a career in law enforcement with a comprehensive program of training, competition, service and practical experiences. Character development, leadership, physical fitness, good citizenship and patriotism are integral components of the overall program. Through their involvement in the program, Explorers develop an awareness of the purpose, mission and objectives of Sheriff's Office. The explorers are between the ages of 14 to 21 years and are chartered through the Boy Scouts of America.
- **PAL – Police Athletic League** (Mentoring and Sports) - The mission of the Pinellas Sheriff's Police Athletic League (PAL) is to offer the youth of Pinellas County alternatives to violence, gang involvement, and substance abuse. Our education, recreation, community service and sports programs serve as the foundation for the development of leadership skills, good citizenship and good sportsmanship. They also introduce opportunity, motivation and direction for the children.
- **On-Track** - The mission of the On Track Program is to provide at-risk children and their parents the opportunity to make a positive change in their family life so they can be successful as students, parents and citizens in our community. The On Track program is an important intervention alternative designed to help keep troubled youth from becoming another criminal statistic and to give parents the skills they need to guide their children in a positive direction.
- **Re-Start/Right Track** - Has a goal of reaching and teaching young people to have confidence, composure and respect. This character building program focuses on increasing the young person's self-esteem while polishing their manners and social skills. The program is taught by Lead instructor Kim Goddard of Proper Protocol and deputies from the Community Services Section.
- **STEP UP -** The mission of the STEP UP Program is to provide at-risk children and their parents the opportunity to make a positive change in their family life so they can be successful as students, parents and citizens in our community. The STEP UP program is an important intervention alternative designed to help keep troubled youth from becoming another criminal statistic and to give parents the skills they need to

guide their children in a positive direction. The purpose is to better equip young people with the necessary life skills and decision making tools to do the right thing and to make decisions which generate a positive outcome. To accomplish this goal, STEP UP is a year-long program and is comprised of several interconnected components targeting children from ages seven through seventeen.

- **Smart Choices** - In this component, the Step Up youth discuss the consequences of crime, and resisting negative peer pressure. Group sessions concentrate on these serious issues of substance abuse, parenting and conflict resolution. The Smart Choices class is also an opportunity for participation from parents or caregivers. Those who successfully complete the Smart Choices component will participate in a graduation ceremony.
- **Graffiti Abatement Program** **New* - The program will focus on the eradication of graffiti in Pinellas County by planning and completing paint-over projects utilizing youth in the Juvenile Diversion program. Also, eradication is accomplished through the networking with private and governmental entities that own property where graffiti is present and are seeking resolution of removal.
- **Live Safe For Teens** – A six-time award winning program – positively impacting the lives of children throughout Pinellas County. Topics include: *Online Predators, Bullying, Personal safety regarding known and unknown predators, Identifying and reacting to suspicious behaviors and General safety practices while at home, out and about, at school and at play.*
- **Crime Stoppers** - Crime Stoppers is a community-based program involving citizens, children/students, the media and law enforcement in the fight against crime. Crime Stoppers operates on the principle that someone other than the criminal has information that can solve a crime. You can remain anonymous and you may be eligible for a reward of up to $1000 if your tip leads to an arrest.
- **Teen Driving Challenge** - The Florida Sheriffs Association's Teen Driver Challenge is a unique "behind-the-wheel" training program for teen drivers ages 16-19. The program was designed around the specific needs of teen drivers, and based on proven exercises and safe driving techniques used by sheriff's deputies from Florida's 67 counties. The program includes four hours of classroom activities and eight hours of "hands-on" instruction by certified and highly trained instructors from your sheriff's office. Take the "Challenge." Register to participate in this well executed and dynamic training that could make a difference in saving a life.

The LiveFree! Substance Abuse Prevention Coalition of Pinellas County addresses underage and binge drinking and other drug use among middle and high school students and young adults in Pinellas County. Highlights include **AlcoholEDU**—a web-based curriculum giving youths the facts about alcohol use and abuse, a Speaker's Bureau, community events, alcohol and drug prevention educational sessions, compliance checks, parent workshops and media campaigns/public service announcements, including a partnership with WEDU-TV, the Public Broadcast Station serving Tampa Bay. LiveFree! is also implementing the State social marketing campaign: "Be the Wall" in Pinellas County, targeting parents, encouraging giving clear, firm and consistent messages to their youth to not use alcohol. The LiveFree! coalition benefits youth, parents, teachers, law enforcement officers, professional human service providers, civic groups and other community members throughout Pinellas County by advocating for environmental change and reformed state, local and federal policies, providing alcohol, prescription drug misuse, marijuana and other drug prevention information and knowledge of evidence-based prevention practices and programs. LiveFree! resources are distributed at community events and alcohol and drug educational sessions are provided to youth, concerned adults and parents. Additionally, funding is provided for a Pinellas County Schools' Parent and Community Coordinator position, which is shared with the Pinellas PACT program. Responsibilities of this position include providing parent/community workshops, facilitating communication with families, working with LiveFree! Youth Clubs and Sponsors, and assisting schools with family outreach and communication related to substance abuse prevention.

Other prevention and intervention programs under the direction Operation PAR, Inc and aligned with the LiveFree! coalition include:

- **The SunCoast Keep Kids Drug Free Prevention Center** offers technical assistance with Keep Kids Drug Free mini-grant applications to strengthen Florida's Prevention Strategic Plan, technical assistance in

coalition building, training on evidence-based prevention strategies and resource sharing in communities within the SunCoast Region. The SunCoast Keep Kids Drug Free Prevention Center also offers outreach and prevention education services to low income families. These services include screening, referring and linking eligible individuals and families in need of services to substance abuse, mental health, domestic violence and/or other services as needed. The Keep Kids Drug Free Foundation and the Florida Department of Children and Families SunCoast Region/Central Florida Behavioral Health Network fund these prevention services.

- **ALPHA** - located in Blanton Elementary School, offers targeted prevention services for at-risk elementary school students. The ALPHA program draws from nine feeder schools throughout Pinellas County: Cross Bayou Elementary; Skyview Elementary; Blanton Elementary; Lealman Avenue Elementary; Seventy Fourth Street Elementary; Pinellas Park Elementary; Rawlings Elementary; Fairmont Park Elementary and Sexton Elementary. Students participating in the program are typically performing below grade level and may be disruptive in class or socially withdrawn. These behaviors are considered early-risk indicators for future substance abuse. Research shows that in addition to being at-risk for substance abuse, they are also at-risk for delinquency, poor academic achievement and dropping out of school. The JWB Children's Services Council of Pinellas County, the Florida Department of Children and Families SunCoast Region/Central Florida Behavioral Health Network, and the Pinellas County School Board fund the program.
- **Creating Outstanding Blossoming & Responsible Adolescents (COBRA)** - offers Too Good For Violence (TGFV), Too Good For Drugs (TGFD) and Plan For Success evidence-based curricula to elementary and middle school age students. TGFV teaches skills on how to solve conflicts peacefully; make positive and effective choices; keep anger from escalating into violence; develop pro-social relations with peers and relate empathically to others. TGFD is designed to help students develop more appropriate attitudes toward alcohol, tobacco and illegal and prescription drugs; improve decision making, goal setting and peer resistance; and increase friendships with peers less likely to use alcohol, tobacco and illegal drugs. COBRA staff are also available to provide information on prevention strategies for parents and school personnel.
- **Project Northland** - is an evidence-based prevention program designed to delay the age at which adolescents decide to begin drinking, to reduce alcohol use among those already drinking and to limit the number of alcohol-related problems among young drinkers. Project Northland is provided in-school to middle school students deemed to be at-risk of using alcohol who attend North Pinellas Secondary School and Clearwater Intermediate School. The program addresses both individual behavioral change and environmental change through student participation and experiential learning at home and in peer-lead classroom activities. Parents are also provided parent education and community action components about youth alcohol use and ideas for keeping youth alcohol-free along with a home activity book to encourage parent participation and provide on-going Project Northland program information.
- **Peacemakers** started in December 1998 when the PAR Village Developmental Center joined the Peacemakers project. Creating a New Generation of Peacemakers is a collaborative effort between the Center Against Spouse Abuse (CASA), The Haven of RCS, Community Pride Child Care, Inc. and Operation PAR. Operation PAR has a full-time employee to implement Peacemakers. This has been made possible through a contract with CASA, which is funded by the JWB Children's Services Council of Pinellas County. The goal of Peacemakers is to develop a generation of peacemakers by instructing preschool children in holistic peace education and violence intervention at strategic times during their childhood. The curriculum teaches lessons about self-respect and respecting others and learning how to protect themselves in violent situations.
- Family Safety implements the **Parenting Wisely** curriculum. Parenting Wisely is a SAMHSA and CSAP Exemplary Model program that has been used successfully throughout the nation and lends itself to the CAIC process and environment. Parenting Wisely is an interactive CD-ROM program designed for parents of adolescents and pre-adolescents (ages 8-18). Parenting Wisely has been the subject of many research studies and strong empirical evidence exists that indicates using Parenting Wisely reduces child behavior problems, delinquency and substance abuse among adolescents, improves parenting knowledge and skills, and strengthens the relationship between adolescent and parents.

- **Strengthening Families**- provides 14 sessions of science- based parenting skills, children's life skills, and family life skills training programs specifically designed for high risk families. Parents and their children participate in SFP, both separately and together. SFP uses family systems and cognitive-behavioral approaches to increase resilience and reduce risk factors for behavioral, emotional, academic and social problems. The SFP builds on protective factors by: 1) improving family relationships, 2) improving parenting skills and 3) increasing the youth's social and life skills.
- **1-888 PAR-NEXT** - fields more than 77,000 calls a year and assist Pinellas County families with information and referral and access into substance abuse services, which connects them to a variety of assessment, intervention, treatment, reentry and recovery services.

Family Resources, in partnership with Operation PAR provides a comprehensive family prevention program.

- **Family Connect –**an In-home Intervention for substance involved and HIV/AIDS Involved parents and their children. The project provides in-home intervention services to substance abuse and HIV/AIDS involved parents who are at-risk of abandoning their infants and children. Families with substance abuse or HIV/AIDS issues are often multi-problem families, who perpetually find themselves in crises and usually lack the skills, social supports, emotional stability and financial resources to maintain a stable home and meet the complex needs of their children. To address such concerns, the Family Connect Program utilizes a replication of the *Family Connection Model* developed by the University of Maryland and will serve children who are risk of out of home placement due to parent's substance abuse or HIV/AIDS status, with emergency assistance/concrete services; home-based family intervention (e.g., family assessment, outcome-driven service plans, individual and family counseling); service coordination with referrals targeted toward risk (e.g., substance abuse treatment or HIV/AIDS) and protective factors and multi-family supportive recreational activities to aid in family cohesion. The program will work with Pinellas County families in their homes and in the context of their neighborhoods.

THE PINELLAS COUNTY SCHOOLS' YOUTH RISK BEHAVIOR SURVEY

The PCS YRBS has served as a useful tool to monitor engagement in drug use and health risk behaviors as well as associated attitudinal and environmental factors. For example, results have been used by the Pre-K-12 Health Education Office to validate the scope of existing health curricula and encourage health teachers to focus instruction on areas where students' behaviors posed the greatest risks to their health. The PCS YRBS data results are used in grant applications for both the school district and community organizations. They provide the Food Services Department with a measure of how well students are eating when not in school. They inform physical education teachers on the type and amount of physical activity students engage in when not in school. The Safe and Drug Free Schools office compares these data collected with other survey information to inform the leaders of the programs it provides. Collectively, these sets of data have assisted a variety of Pinellas County government and community health-related organizations to set goals and develop action plans that target students' risky behaviors and promote student health.

The PCS YRBS survey is comparable to the national YRBSS, upon which it was initially based, as well as with the Florida Substance Abuse Survey[2] and the national Monitoring the Future survey[3]. The conceptual foundations underpinning these studies as well as results derived from them inform our efforts here in Pinellas. The YRBSS surveys have been conducted biennially since 1991. YRBSS data collection efforts are grounded conceptually in the belief that "priority health-risk behaviors, which are behaviors that contribute to the leading causes of morbidity and mortality among youth and adults, often are established during childhood and adolescence, extend into

[2] 2008 Florida Substance Abuse Survey- www.dcf.state.fl.us/mentalhealth/publications/fysas.

[3] Johnston, L. D., O'Malley, P. M., Bachman, J. G., & Schulenberg, J. E. (2008). *Monitoring the Future national survey results on drug use, 1975–2007: Volume I, Secondary school students* (NIH Publication No. 08-6418A). Bethesda, MD: National Institute on Drug Abuse.

adulthood, are interrelated, and are preventable"[4]. Results derived from YRBSS to date can be characterized in terms of cautious optimism. Authors of this study have concluded that, "since 1991, the prevalence of many health-risk behaviors among high school students nationwide has decreased. However, many high school students continue to engage in behaviors that place them at risk for the leading causes of mortality and morbidity"[5].

Similar conclusions have been drawn from the Monitoring the Future (MTF) study. This study has examined substance use rates and attitudes toward substance use annually among 12th-grade students since 1975. The study was expanded to include 8th and 10th-grade students beginning in 1991. Results have suggested overall declines in cigarette and illicit drug use since peak levels were reached in the 1990s. Downward trends have also been noted for alcohol and marijuana use. However, alcohol use remains prevalent among teenagers and recent data suggest that the downward trend in marijuana use may be leveling off or beginning to rise once again. Increased attention in recent years has been focused upon use of prescription drugs for recreational use. The history of drug use in America cited by the MTF authors indicates that usage patterns diverge across substances and are linked to attitudes concerning the perceived benefits and risks associated with each drug[6]. Cigarette use declined following aggressive national ad campaigns concerning the dangers of smoking in the late 1990s. Similarly, the emergence of ecstasy and club drugs in the 1990s were met with swift, well-organized prevention efforts that were followed by faster changes in adolescents' perceived benefit/risk ratio than had been seen with the rise of PCP in the 1970s or cocaine in the 1980s. The MTF data supports the need for quick, well-organized prevention efforts to stem the tide of newly emerging drug use patterns such as that currently underway with regard to abuse of prescription drugs.

The Florida Substance Abuse Survey (FYSAS) also examines both substance use rates as well as factors associated with students' initiation and maintenance of substance use and other antisocial behaviors. The FYSAS is based on the Communities That Care Youth Survey developed by the nationally recognized work of Drs. Hawkins and Catalano[7]. These authors state that:

> *Research during the past 30 years supports the view that delinquency; alcohol, tobacco and other drug use; school achievement; and other important outcomes in adolescence are associated with specific risk and protective factors in the student's community, school and family environments, as well as with characteristics of the individual[8].*

The FYSAS has been administered annually to students in 6th- through 12th-grade since 1999 based upon the recommendation of the Florida Legislature's 1999 Drug Control Summit. FYSAS results are consistent with those of the national YRBSS and MTF surveys in that students' reports of substance use have declined from 2000 to 2008 for 18 of the 20 substances surveyed. Results of the FYSAS also are consistent with the YRBSS and MTF studies in that alcohol use remains prevalent.

The 2008 FYSAS also identified contexts that might increase the likelihood of student involvement in substance use and other antisocial behavior. Across several contexts, Florida students reported lower levels of protective factors relative to students in other states. For example, only 39% of high school students reported an elevated level of protection for *Community Opportunities for Prosocial Involvement*, only 45% of middle school students reported an elevated level of protection for *School Rewards for Prosocial Involvement* and only 47% of middle

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[4] Centers for Disease Control and Prevention. Youth Risk Behavior Surveillance- United States 2007. Surveillance Summaries, June 6, 2008, MMWR 2008; 57(No. SS-4), pp. 1.

[5] Centers for Disease Control and Prevention. Youth Risk Behavior Surveillance- United States 2007. Surveillance Summaries, June 6, 2008, MMWR 2008; 57(No. SS-4), pp. 1.

[6] Johnston, L. D., O'Malley, P. M., Bachman, J. G., & Schulenberg, J. E. (2008). *Monitoring the Future national survey results on drug use, 1975–2007: Volume I, Secondary school students* (NIH Publication No. 08-6418A). Bethesda, MD: National Institute on Drug Abuse, pp. 6.

[7] Hawkins, J. D., Catalano, R. F. & Associates. (1992). *Communities that care: Action for drug abuse prevention* (1st ed.). San Francisco: Jossey-Bass.

[8] Hawkins, J.D., Catalano, R.F., & Miller, J.Y. (1992) Risk and protective factors for alcohol and other drug problems in adolescence and early adulthood: Implications for substance abuse prevention. *Psychological Bulletin*, *112*, 64-105.

school students reported an elevated level of protection for *School Opportunities for Prosocial Involvement*. Florida students also reported higher rates of risk for several factors. For example, 63% of middle school and high school students reported an elevated level of risk for *Transitions and Mobility*, 50% reported an elevated level of risk for *Lack of Commitment to School* and 48% reported an elevated level of risk for *Community Disorganization*.

Similar to the MTF study, results of the 2008 FYSAS also highlight the importance of attitudinal factors associated with substance use among students. Results indicate that the percentages of students who say that it would be either "wrong" or "very wrong" for someone their age to use alcohol, cigarettes or marijuana drop substantially in the higher grade levels. Disapproval of alcohol use declines 45.8 percentage points between 6th and 12th grade, disapproval of cigarette use declines 34.3 percentage points and disapproval of marijuana use declines 31.1 percentage points. In addition, while three quarters of 6th-graders believe there is a "great risk" associated with regular marijuana use, by the time students reach 12th grade, only 45.5% indicate that regular marijuana use poses a "great risk" of harm.

Taken together, both the content and the results of these three studies; the YRBSS, MTF, and FYSAS, provide insights that have informed the development of Pinellas' Youth Risk Behavior survey. Results of these comparison studies have suggested that while positive trends have been observed in terms of decreases in substance use rates, student use of higher prevalence substances including alcohol remains elevated. Examination of student attitudinal factors has indicated that student perceptions of the relative cost/benefit ratio for each specific substance may be strongly related to use. FYSAS results indicated that students' perceptions of the risk associated with alcohol, cigarette, and marijuana use decrease with age. FYSAS findings also suggest that protective contexts that provide opportunities for prosocial involvement in school and community contexts may be less prevalent among students in Florida relative to those elsewhere. Similar to these studies, the Pinellas survey focuses on both behavior and context. The first goal of this report is to examine rates of engagement in health risk behaviors including substance use among students in Pinellas. The second goal is examine attitudinal and contextual factors associated with student engagement in health risk behaviors to inform initiatives intended to promote student health and decrease the likelihood of student engagement in health risk behaviors.

METHOD

PARTICIPANTS[9]

Pinellas County students were surveyed in the Fall of 2006 and 2008. The final samples included 21,894 students in 2006 and 10,413 students in 2008. In 2006, an attempt was made to survey all students in grades 5, 6, 8, 10, and 12. In 2008, a smaller stratified sample representative of district demographics was employed. During both years, the sample included higher numbers of students in earlier grades than later in high school. Lower numbers of students are surveyed in high school as a proportion of students may dropout during their high school years. Prevalence estimates are representative of those students who remain in high school.

[9] Students were excluded from analysis if they did not provide their gender or ethnicity, or identified their ethnicity as 'other' in 2006. Students were excluded if their data showed a clear pattern of exaggeration by reporting maximum usage levels for all substances for recent or lifetime prevalence. Fifth-grade students were excluded if they had missing data on any of the five substances surveyed. Middle and high school students were excluded if they had missing data for 3 or more of the 13 substances for either lifetime or recent prevalence.

Table 1: Grade Distribution				
	2006		2008	
Grade	N	%[10]	N	%
5	5078	23.2%	2187	21.0%
6	4731	21.6%	2418	23.2%
8	4699	21.5%	2345	22.5%
10	4122	18.8%	1744	16.7%
12	3264	14.9%	1719	16.5%
Total	21894		10413	

The relative percentages of students by gender and ethnicity presented in Tables 2 and 3 are somewhat different from these percentages in the district as a whole during these years. Notably, the number of students identifying themselves as multiracial was elevated in both years. Students may be more likely to identify themselves as multiracial than are their parents. This may account in part for the lower representation of African-American students in the samples relative to their representation in the district. An anomaly also occurred in which more students identified themselves as "American Indian" than were present in the district for both years according to official estimates. There was also a slight over–representation of girls relative to boys.

Overall, the demographics of the samples provided a good approximation of the demographics of the district. While African-American students and boys may be slightly under-represented, these differences don't appear to be large enough to grossly affect results obtained from samples of this size.

Table 2								
	Year							
	2006				2008			
	Sample		District		Sample		District	
	N	%	N	%	N	%	N	%
Boys	10480	47.9%	20890	50.6%	4947	47.5%	20383	50.9%
Girls	11414	52.1%	20396	49.4%	5466	52.5%	19634	49.1%
Total	21894		41286		10413		40017	

Table 3								
	2006				2008			
	Sample		District		Sample		District	
	N	%	N	%	N	%	N	%
Caucasian	14338	65.50%	27408	66.32%	6532	62.70%	25743	64.33%
African-American	3250	14.80%	7723	18.68%	1394	13.40%	7438	18.58%
Hispanic	2006	9.20%	3191	7.72%	1087	10.40%	3440	8.60%
Asian	953	4.40%	1499	3.62%	402	3.90%	1519	3.80%
Native American	246	1.10%	144	0.35%	133	1.30%	105	0.26%
Multiracial	1101	5.00%	1358	3.29%	865	8.30%	1772	4.42%
TOTAL	21894		41323[11]		10413		40017	

[10] This is the percent of the total sample, not the response rate for each grade. For example, 23.2% of the sample of 21,894 students in 2006 were 5th-grade students.

[11] District data for Gender and Ethnicity in 2006 were obtained from two different sources so the sample size varies slightly.

SURVEYS

SUBSTANCE USE PREVALENCE

Questions concerning prevalence of substance use were incorporated into larger surveys of health and safety issues.[12] Students were surveyed in the Fall of 2006 and 2008. Students were asked to report the frequency of both their recent usage of substances "in the past 30 days" as well as lifetime usage. Students in grades 6, 8, 10, and 12 were asked to report usage of 14 separate substances in 2006, 13 of which were retained in 2008. Fifth-grade students were asked to report usage of all 14 substances in 2006. However, in 2008, 5th-grade students were only asked to report on a subset of five substances noted in Table 4, the remainder were replaced with an 'other drugs' item.

Items not presented in both years are not included in the analysis. This results in a set of 5 items for fifth grade students and 13 items for students in grades 6, 8, 10, and 12.

Table 4

	2006		2008	
	Grade 5	Grades 6,8,10,12	Grade 5	Grades 6,8,10,12
tobacco products (cigarettes, chewing tobacco, snuff)	x	x	x	x
alcoholic beverages without your parents' permission	x	x	x	x
Marijuana (pot)	x	x	x	x
inhalants such as glue, markers, or gasses to get high	x	x	x	x
other drugs			x	
LSD (acid) or other psychedelics	x	x		x
cocaine in any form including "crack"	x	x		x
amphetamine without a doctor telling you to take them (uppers)	x	x		changed wording
barbiturates without a doctor telling you to take them (downers)	x	x		changed wording
tranquilizers without a doctor telling you to take them (Valium, Xanax, "Roofies")	x	x		changed wording
club drugs (GHB, Ecstasy, Special K)	x	x		x
heroin	x	x		x
prescription medication without a doctor telling you to take it	x	x		
steroids without a doctor telling you to take them	x	x		x
non-prescription medications (such as sinus medication, cough syrup, "Triple C") to get high	x	x	x	x

[12] See Attachments A, B, C, and D

Importantly, the wording of items concerning amphetamines, barbiturates, and tranquilizers changed in the 2008 administration, as indicated in Table 5. In the 2006 administration, amphetamines, barbiturates, and tranquilizers were listed without the "prescription drugs without a doctor prescribing them, such as:" prompt. The addition of this prompt may have made students less likely to endorse using these substances if they did not associate them with a doctor's prescription.

This set of questions also contained a formatting error in which a set of response choices aligned with the "prescription drugs without a doctor prescribing them such as:" prompt, as well as with the three target substances. These changes likely impacted the results to be presented.

Table 5
prescription drugs without a doctor prescribing them, such as:
amphetamines
barbiturates
tranquilizers (Valium, Xanax, "Roofies")

GENDER, ETHNICITY, AGE OF FIRST USE, AND LOCATION OF ALCOHOL USE

Analysis of overall prevalence rates is followed by analysis of gender and ethnic differences in reports of both recent and lifetime prevalence for each substance at each grade level. This is followed by an examination of student reports of the age at which they first used cigarettes, alcohol, marijuana, and inhalants (if at all). Student reports of the location at which they have consumed alcohol in the past 30 days (if at all) are also examined.

PERCEPTIONS AND ATTITUDES ASSOCIATED WITH SUBSTANCE USE

A series of survey questions addressed students' perceptions and attitudes associated with several or all of the substances included in the survey[13]. These questions included[14]:

- How easy do you think it would be for you to get the following types of drugs, if you wanted some…
- How do you feel about people who use...
- How much do you think people risk harming themselves (physically or in other ways) if they use...
- How much pressure do you feel from your friends and schoolmates to…
- How difficult would it be to say no if your best friend offered you…
- What is your level of agreement with the following statements?
    - My community believes that it is alright for adults to drink alcohol
    - My community believes that it is alright for people my age to drink alcohol
    - My community believes that it is alright to sell alcohol illegally

For each of these questions, students' answers were also examined based upon whether or not they indicated that they had used each substance. For example, reports of how students feel about people who use tobacco were compared between students who reported having used tobacco and those who reported not having done so.

[13] Tables in the results/discussion will indicate whether some or all of the substances included in the survey were related to each particular question

[14] Answer options are included in the related tables in the results/discussion section

BULLYING

A series of questions concerning students' exposure to teasing and bullying are then examined. Developmental differences across grade levels as well as changes from 2006 to 2008 are discussed. These questions include:

- During the past 30 days, while you were on school property:
  - has someone called you (or your family) mean names, made fun of you or teased you in a hurtful way?
  - have you been left out on purpose by others when it was time to do an activity, or excluded you from their group of friends?
  - has someone tried to keep others from liking you by saying mean things about you?
  - has someone hit, kicked, pushed, or shoved you?
  - has someone stolen or deliberately damaged your property such as clothing or books?
- During the past 30 days how many times have you experienced cyberbullying?
  - How often do you discuss your online activities with your parents?

SCHOOL SAFETY

A set of school safety issues are then examined in which students provided reports on the frequency of their involvement in activities associated with threats of harm and access to drugs on school property. These included:

- During the past 30 days, on how many days did you:
  - carry a weapon such as a gun, knife, or club on school property?
  - not go to school because you felt you would be unsafe at school or on your way to or from school?
- During the past 12 months, how many times:
  - has someone threatened or injured you with a weapon such as a gun, knife, or club on school property?
  - were you in a physical fight on school property?
- During the past 12 months:
  - has anyone offered, sold or given you an illegal drug on school property?

STUDENTS AT RISK

Student reports of the frequency with which they have skipped school without permission, received and in-school suspension, and received an out-of-school suspension are then examined. Student reports of lifetime substance use prevalence for each substance are then examined based upon their reports of:

- Having skipped school without permission since the beginning of the school year
- Having an In-School Suspension since the start of the School Year
- Having an Out-of-School Suspension since the start of the School Year
- Having a Fight at School in the last 12 months
- Having carried a weapon on school property in the last 30 days

For example, differences in reported lifetime prevalence of drinking alcohol are compared between students who have and those who have not received an out-of-school suspension since the beginning of the school year.

STUDENT DUI REPORTS

Student reports of having been both a passenger and the driver in a car in which the driver was under the influence of both alcohol and 'other drugs' are examined separately for students across grade levels for the time periods indicated below

- Passenger in a car when with driver DUI
  - Passenger with DUI Alcohol, last 30 days
  - Passenger with DUI Other Drugs, last 30 days
- Self-report of DUI
  - Self DUI Alcohol, last 30 days
  - Self DUI Alcohol, last 12 months
  - Self DUI Other Drugs, last 30 days

SEATBELT AND HELMET SAFETY

Student reports of the frequency with which they wear a seatbelt or a helmet for safety in the contexts listed below are then examined.

- Frequency of wearing a car seat belt
- Frequency of wearing a helmet when riding a bicycle, motorcycle, or moped (for those who report riding one)
- Frequency of wearing a helmet when rollerblading or skateboarding (for those who indicate that they rollerblade or skate)

ADULT SUPERVISION

A series of questions associated with issues of adult supervision are then examined both in terms of frequency and in relation to student reports of substance use. Students provided information concerning the number of days an adult is present in the home after school, their frequency of going to a teacher with a problem or concern, whether their family has clear rules about the use of tobacco, alcohol, marijuana, and other drugs, and their report of how wrong their parents believe it would be for them to use tobacco, alcohol, marijuana, and other drugs. Student reports of using alcohol at home are then examined based upon their reports of the frequency with which an adult is present in the home after school. Reported use of tobacco, alcohol, and marijuana are examined based upon student reports of their family having clear rules about the use of each and student reports of how wrong their parents believe it would be for them to use each.

- Adult presence at home after school
  - Reported use of alcohol at home by reported adult presence at home after school
- Frequency of going to a teacher for a problem or concern in the last 30 days
- My family has clear rules about the use of:
  - Tobacco
    - Tobacco use prevalence by report of family having clear rules
  - Alcohol
    - Alcohol use prevalence by report of family having clear rules
  - Marijuana
    - Marijuana use prevalence by report of family having clear rules
  - Other Drugs
- How wrong do your parents feel it would be for you to
  - Use Tobacco

        - Tobacco use by report of parental attitude toward use
    - Use Alcohol
        - Alcohol use by report of parental attitude toward use
    - Use Marijuana
        - Marijuana use by report of parental attitude toward use
    - Use Other Drugs

HEALTHCARE

Issues associated with students' access to healthcare are then examined. These include student reports concerning the frequency of:

- Seeing a doctor or dentist for a check-up in the last 12 months
- Place visited when sick in last 12 months

Student reports of the place visited when sick in the last 12 months are then compared based upon whether or not the student received a checkup as a means of estimating the percent of students who haven't seen a doctor at all in the last 12 months.

BREAKFAST AND EXERCISE

The number of days that students report eating breakfast and engaging in exercise in an average week are then examined along with the location of student exercise and physical activities. Student exercise is defined as participating in a physical activity for at least 20 minutes that makes the student sweat and breathe hard, with examples provided of basketball, soccer, running, swimming laps, rollerblading, fast bicycling, fast dancing, or similar aerobic activities. The options for exercise location included 'don't exercise', 'at school', 'at home', 'at a friend's home', and 'at another location'.

AFTER SCHOOL ACTIVITIES

In the final section, students' responses concerning the number of hours spent engaging in activities outside of school are examined. These included:

- Number of hours spent in an average day outside of school
    - TV, Computer, Homework, Phone, Reading/Writing, Drawing/Creative, Chores, Babysitting
- Number of hours spent in an average week outside of school
    - Team Sports, School Clubs, Community Clubs, Volunteering, Religious Groups, Eating with Family

STATISTICAL AND CLINICAL SIGNIFICANCE

All results presented in this paper were analyzed for statistical significance using the statistical test for the difference between two proportions, which is based on a standard z-test where z = p1-p2/s. Tests were performed with statistical post-hoc correction for multiple comparisons via the SPSS statistical package.

Results can be cross-checked individually using an online calculator such as the one at:
http://www.polarismr.com/education/tools_stat_diff_prop.html

Importantly, statistical significance is secondary in importance to clinical significance in any applied study. The objective of an applied survey is to derive themes that are supported by multiple data points. The statistical significance of any one finding can be influenced by sample size or the way the question is asked or any number of

extraneous factors. The goal in this report is to understand the "story" present in the data as a whole that can be used to form recommendations that may be beneficial to those working in applied contexts.

RESULTS/DISCUSSION

PREVALENCE OF SUBSTANCE USE

Results concerning the reported prevalence of recent substance use are presented in Tables 7 and 8. These are followed by results concerning lifetime prevalence, which are presented in Tables 9 and 10. Prevalence rates were compared between 2006 and 2008 for each substance at each grade level to determine if reported usage of each substance increased or decreased during this timeframe. Statistical tests of the difference between two percentages were performed for each comparison. Significant results are presented in **bold** type.[15] Overall, the results did not appear to be influenced heavily by method bias associated with sampling or with decision rules concerning inclusion/exclusion criteria during the data cleaning process.

RECENT PREVALENCE OF SUBSTANCE USE

Results presented in Table 7 indicate very low prevalence in recent use of all substances among 5th-grade students. The highest rates of recent use were found for inhalants. Statistically significant increases were found in the recent use of alcohol and non-prescription drugs. However, large sample size contributed strongly to the statistical significance of these results. The take-home message here is that about 1% of students surveyed reported having used tobacco, alcohol, marijuana, inhalants, and non-prescription drugs in the 30 days prior to being surveyed. These results appear to be consistent from 2006 to 2008.

Table 7: Recent Prevalence- Grade 5

		2006		2008	
		Yes	No	Yes	No
Tobacco	N	32	5046	18	2169
	%	0.6%		0.8%	
Alcohol	N	**40**	**5038**	**34**	**2153**
	%	**0.8%**		**1.6%**	
Marijuana	N	4	5074	6	2181
	%	0.1%		0.3%	
Inhalants	N	76	5002	39	2148
	%	1.5%		1.8%	
NP Drugs	N	**23**	**5055**	**26**	**2161**
	%	**0.5%**		**1.2%**	

Results presented in Table 8 indicate increases in the recent use of all substances from grade 6 to grade 8. In Grade 6 the reader still sees the same low prevalence rates that were found in grade 5. However, by grade 8 one can

[15] Color copies of this document highlight all significant results in red type.

clearly see that a shift has taken place. By grade 8 we see that hundreds of students report having used tobacco, alcohol, and marijuana in the last 30 days. Inhalant use appears to climb steadily from grade 5 to its peak at grade 8. From grade 6 to grade 8 the use of lower prevalence drugs is also reported to climb from only a handful of students in grade 6 to more sizable numbers from 50 to 100 students or so in grade 8.

There is a statistically significant increase in 6th-grade student reports of recent use of alcohol from 2006 to 2008. Confidence in the validity of this result is enhanced when combined with a similar increase in the reported lifetime use of alcohol by 6th-grade students from 2006 to 2008 to be presented later in this report.

Results concerning high school students' reports of increasing tobacco, alcohol, and marijuana use from 2006 to 2008 appear to be indicative of a genuine effect. Tenth-grade students' reports of recent alcohol and marijuana use and 12th-grade students' reports of recent tobacco and marijuana use all increased significantly from 2006 to 2008. Although not statistically significant, the data show a trend toward increased tobacco use among 10th-grade students and increased alcohol use among 12th-grade students. Taken together, these results suggest that a modest increase in the recent use of tobacco, alcohol, and marijuana may have taken place from 2006 to 2008 among Pinellas County students.

In terms of overall prevalence of recent substance use, the data also indicate rates of substance use generally climb from 8th to 10th-grade. These rates appear to level off somewhat by 12th-grade. However, those most likely to be engaged in heavy substance use may have dropped out of school by 12th-grade.

Results also included significant decreases in reports of recent use of amphetamines and barbiturates among high school students. However, these effects may be due to the change in wording of these items from 2006 to 2008. The 2008 item listed in Table 5 indicated "prescription drugs without a doctor prescribing them". Students who use amphetamines or barbiturates may not associate the street forms of these drugs with doctor prescriptions.

A significant increase in the reported recent use of non-prescription drugs from 2006 to 2008 among 12th-grade students is consistent with nationwide trends indicating a rise in the use of non-prescription drugs among students.

Table 8: Recent Prevalence- Grades 6, 8, 10, and 12																	
		6				8				10				12			
		2006		2008		2006		2008		2006		2008		2006		2008	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
Tobacco	N	64	4663	45	2372	403	4292	244	2097	720	3398	337	1406	**855**	**2405**	**511**	**1208**
	%	1.4%		1.9%		8.6%		10.4%		17.5%		19.3%		**26.2%**		**29.7%**	
Alcohol	N	**103**	**4622**	**100**	**2312**	738	3955	402	1940	**1231**	**2880**	**588**	**1153**	1396	1864	797	921
	%	**2.2%**		**4.1%**		15.7%		17.2%		**29.9%**		**33.8%**		42.8%		46.4%	
Marijuana	N	43	4650	28	2383	366	4310	216	2120	**727**	**3378**	**382**	**1354**	**754**	**2502**	**496**	**1216**
	%	0.9%		1.2%		7.8%		9.2%		**17.7%**		**22.0%**		**23.2%**		**29.0%**	
Inhalants	N	186	4501	120	2275	324	4328	169	2149	126	3955	52	1678	60	3175	38	1671
	%	4.0%		5.0%		7.0%		7.3%		3.1%		3.0%		1.9%		2.2%	
LSD	N	6	4718	8	2387	45	4648	42	2293	109	4008	50	1686	113	3149	78	1636
	%	0.1%		0.3%		1.0%		1.8%		2.6%		2.9%		3.5%		4.6%	
Cocaine	N	13	4706	7	2391	66	4626	42	2286	113	4001	41	1695	137	3125	77	1635
	%	0.3%		0.3%		1.4%		1.8%		2.7%		2.4%		4.2%		4.5%	
Amphetamines	N	10	4705	4	2408	108	4573	33	2301	**197**	**3907**	**50**	**1685**	177	3076	70	1642
	%	0.2%		0.2%		2.3%		1.4%		**4.8%**		**2.9%**		5.4%		4.1%	
Barbiturates	N	10	4714	4	2392	70	4621	19	2295	**150**	**3963**	**29**	**1698**	**154**	**3102**	**44**	**1650**
	%	0.2%		0.2%		1.5%		0.8%		**3.6%**		**1.7%**		**4.7%**		**2.6%**	
Tranquilizers	N	8	4712	4	2394	98	4595	61	2267	233	3880	105	1634	213	3045	132	1575
	%	0.2%		0.2%		2.1%		2.6%		5.7%		6.0%		6.5%		7.7%	
Club Drugs	N	6	4721	10	2397	93	4599	58	2279	146	3972	50	1682	145	3117	71	1646
	%	0.1%		0.4%		2.0%		2.5%		3.5%		2.9%		4.4%		4.1%	
Heroin	N	7	4696	6	2400	52	4614	32	2302	64	4038	22	1715	54	3183	40	1675
	%	0.1%		0.2%		1.1%		1.4%		1.6%		1.3%		1.7%		2.3%	
Steroids	N	8	4714	8	2390	41	4645	34	2295	59	4057	23	1711	51	3213	28	1684
	%	0.2%		0.3%		0.9%		1.5%		1.4%		1.3%		1.6%		1.6%	
NP Drugs	N	44	4679	26	2383	191	4492	105	2229	198	3915	98	1641	**111**	**3145**	**99**	**1614**
	%	0.9%		1.1%		4.1%		4.5%		4.8%		5.6%		**3.4%**		**5.8%**	

LIFETIME PREVALENCE OF SUBSTANCE USE

Results concerning lifetime usage are strongly consistent with those found for reports of recent substance use. The overall reported prevalence of lifetime substance use among 5th-grade students remained low. While recent use was generally in the 1% range, lifetime usage of tobacco and alcohol were in the 2% to 4% range. Lifetime usage of

marijuana was reported by only a small percentage of students. There is a statistically significant increase in the use of non-prescription drugs among 5th-grade students. This may be indicative of a genuine effect given national trends toward increased use of non-prescription drugs. However, this should be interpreted cautiously given the low prevalence rates at this age.

Table 9: Lifetime Prevalence- Grade 5

		2006		2008	
		Yes	No	Yes	No
Tobacco	N	120	4958	46	2141
	%	2.4%		2.1%	
Alcohol	N	151	4927	90	2097
	%	3.0%		4.1%	
Marijuana	N	18	5060	9	2178
	%	0.4%		0.4%	
Inhalants	N	144	4934	76	2111
	%	2.8%		3.5%	
NP Drugs	N	**46**	**5032**	**45**	**2142**
	%	**0.9%**		**2.1%**	

Results presented in Table 10 showed the same strong increase from 6th to 8th-grade in reports of lifetime substance use as were found for reports of recent substance use. The magnitude of lifetime usage is higher than that of recent use, which is expected. This increased magnitude highlights middle school as a time when students' involvement in problem behaviors begins to rise sharply.

Results also indicate a significant increase in the reported lifetime use of tobacco and alcohol among 6th-grade students from 2006 to 2008. Results presented in Table 8 had also indicated a significant increase in the reported recent prevalence of alcohol use. Taken together, these results suggest that usage of tobacco and alcohol may have increased from 2006 to 2008 among students who have recently transitioned to middle school. The reported lifetime prevalence of 6.4% for tobacco and 9.1% for alcohol among 6th-grade students in the 2008 sample are large enough to suspect that these effects may not be statistical artifacts.

Also adding validity to these effects is the finding that rates of reported lifetime alcohol use increased significantly for each age group from 2006 to 2008. The overall matrix of data presented in Table 10 does not suggest that these effects are strongly influenced by a method bias. Significant increases in reported lifetime marijuana and tobacco usage among high school students from 2006 to 2008 are also consistent with findings for recent usage presented earlier.

Statistically significant decreases in reported lifetime prevalence of amphetamine and barbiturate use are very likely due to the same method bias discussed previously in relation to similar effects for recent usage of these substances.

The significant increase in reported lifetime use of non-prescription drugs is consistent with the same effect reported for recent usage. These results among Pinellas County students are consistent with increases in use of non-prescription drugs reported nationally.

Table 10: Lifetime Prevalence- Grades 6, 8, 10, 12

		6				8				10				12			
		2006		2008		2006		2008		2006		2008		2006		2008	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
Tobacco	N	**214**	**4512**	**155**	**2258**	885	3812	489	1853	1364	2750	599	1141	**1461**	**1800**	**852**	**867**
	%	**4.5%**		**6.4%**		18.8%		20.9%		33.2%		34.4%		**44.8%**		**49.6%**	
Alcohol	N	**318**	**4408**	**219**	**2191**	**1454**	**3236**	**804**	**1534**	**2175**	**1939**	**1003**	**740**	**2147**	**1111**	**1198**	**520**
	%	**6.7%**		**9.1%**		**31.0%**		**34.4%**		**52.9%**		**57.5%**		**65.9%**		**69.7%**	
Marijuana	N	95	4621	57	2357	640	4038	349	1986	**1269**	**2834**	**619**	**1125**	**1462**	**1790**	**861**	**856**
	%	2.0%		2.4%		13.7%		14.9%		**30.9%**		**35.5%**		**45.0%**		**50.1%**	
Inhalants	N	300	4392	182	2215	641	4021	351	1972	401	3680	143	1589	222	3019	141	1564
	%	6.4%		7.6%		13.7%		15.1%		9.8%		8.3%		6.8%		8.3%	
LSD	N	12	4705	11	2398	87	4609	66	2271	200	3914	91	1652	229	3024	143	1575
	%	0.3%		0.5%		1.9%		2.8%		4.9%		5.2%		7.0%		8.3%	
Cocaine	N	30	4691	13	2385	115	4569	71	2255	220	3892	77	1656	305	2952	160	1549
	%	0.6%		0.5%		2.5%		3.1%		5.4%		4.4%		9.4%		9.4%	
Amphetamines	N	20	4699	7	2403	155	4525	52	2283	**294**	**3803**	**69**	**1668**	**337**	**2921**	**131**	**1574**
	%	0.4%		0.3%		3.3%		2.2%		**7.2%**		**4.0%**		**10.3%**		**7.7%**	
Barbiturates	N	21	4698	9	2395	110	4583	32	2301	**245**	**3870**	**42**	**1695**	**287**	**2971**	**94**	**1612**
	%	0.4%		0.4%		2.3%		1.4%		**6.0%**		**2.4%**		**8.8%**		**5.5%**	
Tranquilizers	N	19	4700	8	2399	147	4538	81	2258	367	3743	160	1581	421	2839	253	1462
	%	0.4%		0.3%		3.1%		3.5%		8.9%		9.2%		12.9%		14.8%	
Club Drugs	N	20	4701	18	2395	147	4545	83	2256	264	3848	89	1651	329	2932	163	1555
	%	0.4%		0.7%		3.1%		3.5%		6.4%		5.1%		10.1%		9.5%	
Heroin	N	13	4696	11	2401	76	4589	46	2291	92	3999	33	1707	83	3157	60	1657
	%	0.3%		0.5%		1.6%		2.0%		2.2%		1.9%		2.6%		3.5%	
Steroids	N	16	4702	15	2396	65	4620	44	2292	94	4012	40	1699	80	3177	45	1670
	%	0.3%		0.6%		1.4%		1.9%		2.3%		2.3%		2.5%		2.6%	
NP Drugs	N	78	4629	42	2367	285	4398	167	2173	392	3708	176	1564	**322**	**2933**	**230**	**1486**
	%	1.7%		1.7%		6.1%		7.1%		9.6%		10.1%		**9.9%**		**13.4%**	

GENDER AND ETHNICITY

This section examines student reports of both recent and lifetime substance use prevalence based upon Gender and Ethnicity[16]. Pinellas County results were compared with those found through three related sources; the national Youth Risk Behavior Survey, the Florida Youth Substance Abuse Survey, and the Monitoring the Future national survey[17]. Comparisons with these sources provided support for the validity of the Pinellas results and are discussed below.

RECENT SUBSTANCE USE BY GENDER

Results presented in Tables 11A-11D compare boys' and girls' reports of recent substance use across grade levels. Most of the significant differences are found at the 12th-grade level where boys' reported substance use is higher than that of girls for several substances. Twelfth-grade boys report higher levels of recent usage of tobacco, marijuana, inhalants, hallucinogens, cocaine, heroin, and steroids. There is also a significant effect where boys report higher levels of recent usage of marijuana in 10th-grade. These results are consistent with the national YRBS data where recent cigarette usage was 27.4% for boys and 25.5% for girls, recent marijuana use was 27.8% for boys and 22.6% for girls, and recent cocaine use was 6.0% for boys and 2.8% for girls among 12th-grade students. Recent usage data was not available for inhalants, hallucinogens, heroin, and steroids in the national YRBS dataset. However, the reported lifetime usage among 12th-grade students was higher for boys relative to girls for each of these substances. Although different methods are used in the FYSAS and the Monitoring the Future datasets, these gender differences are also supported by the data available from these sources. One exception occurred in that recent inhalant use prevalence was 4.1% for girls and 2.8% for boys in the FLSAS data. However the FLSAS collapsed their gender results across grade level such that 6th-12th-grade girls were compared to 6th-12th-grade boys, precluding a comparison between 12th-grade students.

Table 11A: Recent Substance Use Prevalence by Gender

		Tobacco-R				Alcohol-R				Marijuana-R			
		Yes		No		Yes		No		Yes		No	
Grade	Gender	N	%	N	%	N	%	N	%	N	%	N	%
5	Boys	8	0.8%	974	99.2%	16	1.6%	966	98.4%	4	0.4%	978	99.6%
	Girls	7	0.6%	1,095	99.4%	13	1.2%	1,089	98.8%	0	0.0%	1,102	100%
6	Boys	18	1.8%	960	98.2%	45	4.6%	931	95.4%	13	1.3%	965	98.7%
	Girls	22	1.9%	1,118	98.1%	38	3.3%	1,100	96.7%	13	1.1%	1,122	98.9%
8	Boys	115	11.6%	879	88.4%	160	16.1%	834	83.9%	**105**	**10.6%**	**884**	**89.4%**
	Girls	108	9.3%	1,048	90.7%	204	17.6%	952	82.4%	**85**	**7.4%**	**1,071**	**92.6%**
10	Boys	155	21.1%	581	78.9%	232	31.5%	504	68.5%	174	23.7%	559	76.3%
	Girls	143	17.0%	700	83.0%	299	35.5%	543	64.5%	165	19.6%	675	80.4%
12	Boys	**263**	**35.6%**	**476**	**64.4%**	353	47.8%	385	52.2%	**246**	**33.5%**	**488**	**66.5%**
	Girls	**224**	**26.0%**	**636**	**74.0%**	399	46.4%	461	53.6%	**220**	**25.6%**	**639**	**74.4%**

[16] Several additional analyses were conducted in addition to those presented here. Analysis of Gender and Ethnicity effects for other survey items involving bullying etc. either did not yield any significant effects or those effects that were significant did not add anything new to our understanding of these issues (e.g. boys report engaging in more physical fights). These analyses are excluded for the sake of parsimony.

[17] Precise comparisons between the Pinellas data and data obtained through these comparative sources were often not possible due to the use of different survey methods as well as different methods of presenting the results, so analysis focused upon comparing themes present in the datasets rather than precise comparisons.

Table 11B: Recent Substance Use Prevalence by Gender									
		Inhalants-R				Non-Rx Drugs-R			
		Yes		No		Yes		No	
Grade	Gender	N	%	N	%	N	%	N	%
5	Boys	20	2.0%	962	98.0%	13	1.3%	969	98.7%
	Girls	14	1.3%	1,088	98.7%	11	1.0%	1,091	99.0%
6	Boys	56	5.8%	916	94.2%	8	0.8%	964	99.2%
	Girls	50	4.4%	1,077	95.6%	13	1.1%	1,126	98.9%
8	Boys	63	6.4%	919	93.6%	37	3.7%	954	96.3%
	Girls	94	8.2%	1,056	91.8%	60	5.2%	1,091	94.8%
10	Boys	17	2.3%	712	97.7%	34	4.6%	701	95.4%
	Girls	24	2.9%	814	97.1%	49	5.8%	792	94.2%
12	Boys	**24**	**3.3%**	**710**	**96.7%**	44	6.0%	695	94.0%
	Girls	**8**	**0.9%**	**847**	**99.1%**	43	5.0%	813	95.0%

Table 11C: Recent Substance Use Prevalence by Gender																	
		LSD-R				Cocaine-R				Club Drugs-R				Heroin-R			
		Yes		No		Yes		No		Yes		No		Yes		No	
Grade	Gender	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	Boys	2	0.2%	967	99.8%	2	0.2%	967	99.8%	2	0.2%	972	99.8%	3	0.3%	970	99.7%
	Girls	4	0.4%	1,125	99.6%	2	0.2%	1,132	99.8%	5	0.4%	1,132	99.6%	1	0.1%	1,134	99.9%
8	Boys	20	2.0%	969	98.0%	17	1.7%	968	98.3%	18	1.8%	977	98.2%	13	1.3%	980	98.7%
	Girls	15	1.3%	1,138	98.7%	16	1.4%	1,136	98.6%	30	2.6%	1,119	97.4%	11	1.0%	1,137	99.0%
10	Boys	22	3.0%	711	97.0%	13	1.8%	720	98.2%	23	3.1%	709	96.9%	6	0.8%	729	99.2%
	Girls	18	2.1%	821	97.9%	16	1.9%	823	98.1%	15	1.8%	823	98.2%	6	0.7%	833	99.3%
12	Boys	**45**	**6.1%**	**692**	**93.9%**	**39**	**5.3%**	**694**	**94.7%**	35	4.7%	703	95.3%	**23**	**3.1%**	**714**	**96.9%**
	Girls	**21**	**2.5%**	**836**	**97.5%**	**23**	**2.7%**	**836**	**97.3%**	23	2.7%	836	97.3%	**9**	**1.0%**	**849**	**99.0%**

Table 11D: Recent Substance Use Prevalence by Gender																	
		Amphetamines-R				Barbiturates-R				Tranquilizers-R				Steroids-R			
		Yes		No		Yes		No		Yes		No		Yes		No	
Grade	Gender	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	Boys	0	0.0%	979	100%	1	0.1%	968	99.9%	1	0.1%	971	99.9%	5	0.5%	969	99.5%
	Girls	3	0.3%	1,131	99.7%	1	0.1%	1,129	99.9%	3	0.3%	1,127	99.7%	0	0.0%	1,131	100%
8	Boys	14	1.4%	979	98.6%	7	0.7%	976	99.3%	24	2.4%	966	97.6%	15	1.5%	975	98.5%
	Girls	15	1.3%	1,134	98.7%	7	0.6%	1,133	99.4%	30	2.6%	1,116	97.4%	11	1.0%	1,136	99.0%
10	Boys	16	2.2%	716	97.8%	8	1.1%	723	98.9%	36	4.9%	700	95.1%	7	1.0%	728	99.0%
	Girls	25	3.0%	815	97.0%	12	1.4%	822	98.6%	53	6.3%	787	93.7%	7	0.8%	830	99.2%
12	Boys	33	4.5%	705	95.5%	19	2.6%	714	97.4%	58	7.9%	677	92.1%	**19**	**2.6%**	**716**	**97.4%**
	Girls	26	3.0%	831	97.0%	16	1.9%	829	98.1%	59	6.9%	793	93.1%	**5**	**0.6%**	**852**	**99.4%**

LIFETIME SUBSTANCE USE BY GENDER

Results presented in Tables 12A-D compare boys' and girls' reports of lifetime substance use across grade levels. Significant results indicate higher levels of reported alcohol use among girls relative to boys in 10th and 12th-grades, as well as higher levels of reported non-prescription drug use among girls relative to boys in 8th-grade. Boys reported higher levels of lifetime inhalant prevalence in 5th-grade and lifetime steroid prevalence in 12th-grade relative to girls' reports. Girls' higher reported levels of lifetime alcohol prevalence are consistent with the national YRBS data for 12th-grade students where girls' prevalence was 85.2% compared to boys' prevalence of 80.2%. However, a significant gender difference was not found in reported lifetime alcohol prevalence among 10th-grade students in the national YRBS dataset where the prevalence for girls was 74.6% and the prevalence for boys was 74.9%. Collapsing across 6th-through-12th-grades, the FLSAS reported a lifetime prevalence of 54.9% for girls and 51.5% for boys. Monitoring the Future results focused upon comparisons in daily alcohol use, where 12th-grade boys were more likely to engage in daily use than were girls. Despite these results, the more closely parallel YRBS and FLSAS data provide some support for the Pinellas findings.

The Pinellas gender difference in lifetime steroid use at the 12th-grade level is supported by the national YRBS findings, where the lifetime prevalence of reported steroid use among 12th-grade students was 5.9% for boys and 1.9% for girls. The higher reported lifetime inhalant use among 5th-grade boys and non-prescription drug use among 8th-grade girls could not be directly compared to any of the comparison datasets, as the national YRBS included high school students only, and the methods used by the FLSAS and the MTF study were too dissimilar in these instances to draw a comparison.

12A: Lifetime Substance Use Prevalence by Gender

		Tobacco-L				Alcohol-L				Marijuana-L			
		Yes		No		Yes		No		Yes		No	
Grade	Gender	N	%	N	%	N	%	N	%	N	%	N	%
5	Boys	24	2.4%	956	97.6%	42	4.3%	940	95.7%	5	0.5%	977	99.5%
	Girls	15	1.4%	1,086	98.6%	40	3.6%	1,060	96.4%	2	0.2%	1,100	99.8%
6	Boys	59	6.1%	907	93.9%	90	9.3%	880	90.7%	19	2.0%	954	98.0%
	Girls	61	5.4%	1,073	94.6%	89	7.8%	1,048	92.2%	26	2.3%	1,111	97.7%
8	Boys	165	17.6%	775	82.4%	291	30.7%	658	69.3%	113	12.0%	825	88.0%
	Girls	189	16.9%	928	83.1%	363	32.5%	754	67.5%	109	9.7%	1,012	90.3%
10	Boys	160	24.5%	492	75.5%	**308**	**46.5%**	**354**	**53.5%**	151	24.1%	476	75.9%
	Girls	210	27.7%	549	72.3%	**455**	**59.8%**	**306**	**40.2%**	206	27.0%	558	73.0%
12	Boys	216	38.8%	340	61.2%	**302**	**57.7%**	**221**	**42.3%**	193	35.6%	349	64.4%
	Girls	251	35.8%	451	64.2%	**448**	**65.1%**	**240**	**34.9%**	279	39.1%	434	60.9%

12B: Lifetime Substance Use Prevalence by Gender

		Inhalants-L				Non-Rx Drugs-L			
		Yes		No		Yes		No	
Grade	Gender	N	%	N	%	N	%	N	%
5	Boys	**42**	**4.3%**	**939**	**95.7%**	18	1.8%	962	98.2%
	Girls	**22**	**2.0%**	**1,076**	**98.0%**	18	1.6%	1,080	98.4%
6	Boys	72	7.5%	888	92.5%	7	0.7%	965	99.3%
	Girls	69	6.1%	1,058	93.9%	20	1.8%	1,114	98.2%
8	Boys	123	12.7%	846	87.3%	**43**	**4.4%**	**934**	**95.6%**
	Girls	173	15.2%	964	84.8%	**85**	**7.4%**	**1,059**	**92.6%**
10	Boys	41	5.6%	687	94.4%	48	6.6%	680	93.4%
	Girls	68	8.2%	762	91.8%	84	10.1%	746	89.9%
12	Boys	57	7.9%	667	92.1%	71	9.9%	644	90.1%
	Girls	60	7.1%	790	92.9%	103	12.2%	738	87.8%

12C: Lifetime Substance Use Prevalence by Gender																
		LSD-L				Cocaine-L				Club Drugs-L				Heroin-L			
		Yes		No		Yes		No		Yes		No		Yes		No	
Grade	Gender	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	Boys	2	0.2%	975	99.8%	4	0.4%	970	99.6%	2	0.2%	974	99.8%	3	0.3%	972	99.7%
	Girls	5	0.4%	1,128	99.6%	5	0.4%	1,124	99.6%	10	0.9%	1,125	99.1%	3	0.3%	1,133	99.7%
8	Boys	27	2.7%	955	97.3%	23	2.3%	958	97.7%	19	1.9%	967	98.1%	12	1.2%	973	98.8%
	Girls	22	1.9%	1,133	98.1%	27	2.4%	1,115	97.6%	41	3.6%	1,109	96.4%	17	1.5%	1,134	98.5%
10	Boys	35	4.8%	698	95.2%	26	3.6%	705	96.4%	30	4.1%	700	95.9%	9	1.2%	724	98.8%
	Girls	31	3.7%	805	96.3%	28	3.4%	804	96.6%	34	4.1%	804	95.9%	7	0.8%	830	99.2%
12	Boys	60	8.3%	662	91.7%	55	7.7%	662	92.3%	54	7.4%	671	92.6%	16	2.2%	709	97.8%
	Girls	47	5.5%	809	94.5%	56	6.7%	786	93.3%	73	8.5%	782	91.5%	15	1.8%	841	98.2%

12D: Lifetime Substance Use Prevalence by Gender																	
		Amphetamines-L				Barbiturates-L				Tranquilizers-L				Steroids-L			
		Yes		No		Yes		No		Yes		No		Yes		No	
Grade	Gender	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	Boys	1	0.1%	976	99.9%	2	0.2%	969	99.8%	1	0.1%	972	99.9%	6	0.6%	969	99.4%
	Girls	4	0.4%	1,131	99.6%	4	0.4%	1,130	99.6%	6	0.5%	1,130	99.5%	3	0.3%	1,134	99.7%
8	Boys	18	1.8%	970	98.2%	7	0.7%	978	99.3%	27	2.7%	961	97.3%	13	1.3%	969	98.7%
	Girls	23	2.0%	1,127	98.0%	13	1.1%	1,136	98.9%	37	3.2%	1,111	96.8%	12	1.0%	1,140	99.0%
10	Boys	18	2.5%	712	97.5%	10	1.4%	719	98.6%	46	6.3%	682	93.7%	12	1.6%	723	98.4%
	Girls	28	3.4%	803	96.6%	13	1.6%	822	98.4%	76	9.1%	756	90.9%	11	1.3%	825	98.7%
12	Boys	40	5.6%	679	94.4%	29	4.0%	698	96.0%	84	11.7%	632	88.3%	**19**	**2.6%**	**707**	**97.4%**
	Girls	51	6.1%	790	93.9%	36	4.3%	807	95.7%	112	13.3%	728	86.7%	**7**	**0.8%**	**850**	**99.2%**

RECENT SUBSTANCE USE BY ETHNICITY

Results presented in Tables 13A-13D examine differences in reported recent prevalence of substance use across ethnic groups. In several cases, particularly at the high school level, the reported recent prevalence of substance use is significantly lower among African-American students relative to other ethnic groups. In 10th-grade, African-American students report significantly lower recent use of tobacco, alcohol, and marijuana. In 12th-grade, African-American students report significantly lower use of tobacco, alcohol, marijuana, hallucinogens, and cocaine. In two instances, African-American students report significantly lower levels of recent use at earlier grade levels. In 8th-grade, African-American students report significantly lower levels of recent use of tobacco, while in 6th-grade, African-American students report significantly lower levels of recent use of inhalants.

These effects are consistent with those found in the three comparison datasets. In the 2007 national YRBS survey, the reported rate of recent cigarette use was 23.8% for Caucasian students and 11.6% for African-American students. The reported rate of recent alcohol use was 47.3% for Caucasian students and 34.5% for African-American students. The reported rate of recent cocaine use was 3.0% for Caucasian students and 1.1% for African-American students. Recent marijuana use, though, was not significantly different in the national YRBS data with a rate of 19.9% for Caucasian students and 21.5% for African-American students. Recent use of hallucinogens or LSD was not examined through this dataset. However, differences in reported lifetime use of hallucinogens existed with a rate of 9.0% for Caucasian students and 2.4% for African-American students. For ethnicity comparisons, the

national YRBS data were not presented in a manner that was parallel to the Pinellas data in that the national YRBS rates were collapsed across all four high school grade levels, where the Pinellas data is presented separately by grade level. This may account for differences found in marijuana use. However, despite these different methods of analysis, the results are generally supportive of the finding that reported recent use of certain substances in significantly lower among African-American students at the high school level. While detailed results are not presented here for the sake of parsimony, the findings of the FLSAS and MTF studies have also supported the finding of lower rates of reported use among African-American students at the high school level.

Other significant effects noted in Tables 13A-13D include lower reported recent use of alcohol among Caucasian students in 6th-grade, and lower reported use of alcohol and marijuana among Asian students in 12th-grade. Both of these effects could have been influenced by sample size. A small difference was significant for Caucasian students in Alcohol use in 6th-grade due to a large sample size. This is also an isolated effect that is not associated with any other effect in Tables 13A-13D, so a conservative approach dictates caution with respect to over-interpretation of this finding. The effects for Asian students in 12th-grade are based on a relatively limited sample size and are not comparable to findings from the comparison studies, as they do not report data separately for Asian students. As a consequence, caution is also advised with respect to interpretation of these effects.

Table 13A: Recent Substance Use by Ethnicity

		Tobacco-R				Alcohol-R				Marijuana-R			
		Yes		No		Yes		No		Yes		No	
Grade	Ethnicity	N	%	N	%	N	%	N	%	N	%	N	%
5	Caucasian	7	0.5%	1,285	99.5%	13	1.0%	1,279	99.0%	2	0.2%	1,290	99.8%
	African-American	1	0.4%	255	99.6%	4	1.6%	252	98.4%	0	0.0%	256	100%
	Hispanic	3	1.2%	240	98.8%	6	2.5%	237	97.5%	1	0.4%	242	99.6%
	Asian	0	0.0%	85	100%	0	0.0%	85	100%	0	0.0%	85	100%
	Native American	2	5.4%	35	94.6%	2	5.4%	35	94.6%	1	2.7%	36	97.3%
	Multiracial	2	1.2%	169	98.8%	4	2.3%	167	97.7%	0	0.0%	171	100%
6	Caucasian	22	1.7%	1,237	98.3%	**36**	**2.9%**	**1,219**	**97.1%**	14	1.1%	1,240	98.9%
	African-American	3	1.1%	282	98.9%	10	3.5%	274	96.5%	2	0.7%	282	99.3%
	Hispanic	6	2.7%	217	97.3%	15	6.7%	208	93.3%	1	0.4%	222	99.6%
	Asian	3	3.0%	97	97.0%	5	5.0%	95	95.0%	3	3.0%	97	97.0%
	Native American	3	8.3%	33	91.7%	2	5.6%	34	94.4%	1	2.8%	35	97.2%
	Multiracial	3	1.4%	212	98.6%	15	6.9%	201	93.1%	5	2.3%	211	97.7%
8	Caucasian	149	10.6%	1,256	89.4%	233	16.6%	1,172	83.4%	116	8.3%	1,287	91.7%
	African-American	**13**	**5.5%**	**222**	**94.5%**	37	15.7%	198	84.3%	20	8.5%	214	91.5%
	Hispanic	29	13.5%	186	86.5%	43	20.1%	171	79.9%	26	12.1%	188	87.9%
	Asian	4	5.4%	70	94.6%	9	12.0%	66	88.0%	4	5.3%	71	94.7%
	Native American	3	13.6%	19	86.4%	1	4.5%	21	95.5%	3	13.6%	19	86.4%
	Multiracial	25	12.6%	174	87.4%	41	20.6%	158	79.4%	21	10.7%	176	89.3%
10	Caucasian	221	20.9%	834	79.1%	376	35.7%	678	64.3%	237	22.6%	813	77.4%
	African-American	**13**	**6.3%**	**192**	**93.7%**	**37**	**18.0%**	**168**	**82.0%**	**30**	**14.6%**	**175**	**85.4%**
	Hispanic	31	20.4%	121	79.6%	56	36.8%	96	63.2%	35	23.0%	117	77.0%
	Asian	5	10.6%	42	89.4%	14	29.8%	33	70.2%	7	14.9%	40	85.1%
	Native American	4	36.4%	7	63.6%	4	36.4%	7	63.6%	3	27.3%	8	72.7%
	Multiracial	24	22.0%	85	78.0%	44	40.4%	65	59.6%	27	25.0%	81	75.0%
12	Caucasian	381	35.0%	709	65.0%	570	52.3%	520	47.7%	350	32.2%	737	67.8%
	African-American	**17**	**8.5%**	**184**	**91.5%**	**50**	**25.0%**	**150**	**75.0%**	**31**	**15.6%**	**168**	**84.4%**
	Hispanic	46	33.3%	92	66.7%	65	47.1%	73	52.9%	43	31.2%	95	68.8%
	Asian	17	25.0%	51	75.0%	**21**	**30.9%**	**47**	**69.1%**	**10**	**14.9%**	**57**	**85.1%**
	Native American	3	25.0%	9	75.0%	7	58.3%	5	41.7%	5	41.7%	7	58.3%
	Multiracial	23	25.6%	67	74.4%	39	43.3%	51	56.7%	27	30.0%	63	70.0%

Table 13B: Recent Substance Use by Ethnicity									
		Inhalants-R				Non-Rx Drugs-R			
		Yes		No		Yes		No	
Grade	Ethnicity	N	%	N	%	N	%	N	%
5	Caucasian	16	1.2%	1,276	98.8%	13	1.0%	1,279	99.0%
	African-American	6	2.3%	250	97.7%	3	1.2%	253	98.8%
	Hispanic	5	2.1%	238	97.9%	3	1.2%	240	98.8%
	Asian	1	1.2%	84	98.8%	2	2.4%	83	97.6%
	Native American	2	5.4%	35	94.6%	1	2.7%	36	97.3%
	Multiracial	4	2.3%	167	97.7%	2	1.2%	169	98.8%
6	Caucasian	65	5.2%	1,188	94.8%	10	0.8%	1,244	99.2%
	African-American	4	1.4%	276	98.6%	1	0.4%	282	99.6%
	Hispanic	12	5.5%	207	94.5%	1	0.4%	222	99.6%
	Asian	8	8.1%	91	91.9%	4	4.0%	95	96.0%
	Native American	3	8.3%	33	91.7%	1	2.8%	35	97.2%
	Multiracial	14	6.6%	198	93.4%	4	1.9%	212	98.1%
8	Caucasian	99	7.1%	1,297	92.9%	61	4.4%	1,341	95.6%
	African-American	12	5.2%	220	94.8%	9	3.9%	224	96.1%
	Hispanic	17	7.9%	197	92.1%	9	4.2%	204	95.8%
	Asian	8	11.0%	65	89.0%	6	8.0%	69	92.0%
	Native American	2	9.5%	19	90.5%	0	0.0%	22	100%
	Multiracial	19	9.7%	177	90.3%	12	6.1%	185	93.9%
10	Caucasian	29	2.8%	1,018	97.2%	58	5.5%	996	94.5%
	African-American	3	1.5%	201	98.5%	8	3.9%	197	96.1%
	Hispanic	4	2.7%	146	97.3%	4	2.7%	146	97.3%
	Asian	2	4.3%	45	95.7%	5	10.6%	42	89.4%
	Native American	2	18.2%	9	81.8%	2	18.2%	9	81.8%
	Multiracial	1	0.9%	107	99.1%	6	5.5%	103	94.5%
12	Caucasian	22	2.0%	1,062	98.0%	59	5.4%	1,027	94.6%
	African-American	1	0.5%	197	99.5%	3	1.5%	198	98.5%
	Hispanic	3	2.2%	134	97.8%	11	8.0%	127	92.0%
	Asian	2	2.9%	66	97.1%	6	8.8%	62	91.2%
	Native American	1	8.3%	11	92%	2	16.7%	10	83.3%
	Multiracial	3	3.3%	87	96.7%	6	6.7%	84	93.3%

Table 13C: Recent Substance Use by Ethnicity																
		LSD-R				Cocaine-R				Club Drugs-R				Heroin-R			
		Yes		No		Yes		No		Yes		No		Yes		No	
Gr	Ethnicity	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	Caucasian	2	0.2%	1,246	99.8%	0	0.0%	1,253	100%	3	0.2%	1,252	99.8%	2	0.2%	1,250	99.8%
	African-American	0	0.0%	281	100%	0	0.0%	281	100%	1	0.4%	284	100%	1	0.4%	282	100%
	Hispanic	0	0.0%	220	100%	0	0.0%	220	100%	0	0.0%	221	100%	0	0.0%	222	100%
	Asian	3	3.0%	96	97.0%	2	2.0%	96	98.0%	3	3.0%	97	97.0%	1	1.0%	99	99.0%
	Native American	0	0.0%	36	100%	0	0.0%	36	100%	0	0.0%	36	100%	0	0.0%	36	100%
	Multiracial	1	0.5%	213	99.5%	2	0.9%	213	99.1%	0	0.0%	214	100%	0	0.0%	215	100%
8	Caucasian	19	1.4%	1,380	98.6%	21	1.5%	1,376	98.5%	24	1.7%	1,378	98.3%	12	0.9%	1,385	99.1%
	African-American	5	2.1%	229	97.9%	4	1.7%	229	98.3%	7	3.0%	228	97.0%	6	2.6%	229	97.4%
	Hispanic	4	1.9%	210	98.1%	6	2.8%	208	97.2%	5	2.3%	209	97.7%	4	1.9%	211	98.1%
	Asian	1	1.3%	74	98.7%	1	1.3%	74	98.7%	3	4.0%	72	96.0%	0	0.0%	74	100%
	Native American	1	4.5%	21	95.5%	1	4.5%	21	95.5%	1	4.5%	21	95%	1	4.5%	21	95.5%
	Multiracial	5	2.5%	193	97.5%	0	0.0%	196	100%	8	4.1%	188	95.9%	1	0.5%	197	99.5%
10	Caucasian	29	2.8%	1,022	97.2%	19	1.8%	1,034	98.2%	28	2.7%	1,024	97.3%	6	0.6%	1,047	99.4%
	African-American	3	1.5%	202	98.5%	3	1.5%	200	98.5%	3	1.5%	200	98.5%	3	1.5%	201	98.5%
	Hispanic	2	1.3%	149	98.7%	3	2.0%	147	98.0%	2	1.3%	147	98.7%	0	0.0%	151	100%
	Asian	1	2.2%	45	97.8%	1	2.2%	45	97.8%	1	2.2%	45	97.8%	1	2.1%	46	98%
	Native American	2	18.2%	9	81.8%	2	18.2%	9	81.8%	1	9.1%	10	90.9%	1	9.1%	10	91%
	Multiracial	3	2.8%	105	97.2%	1	0.9%	108	99.1%	3	2.8%	106	97.2%	1	0.9%	107	99.1%
12	Caucasian	48	4.4%	1,038	95.6%	44	4.0%	1,043	96.0%	40	3.7%	1,048	96.3%	17	1.6%	1,071	98.4%
	African-American	**1**	**0.5%**	**199**	**99.5%**	**2**	**1.0%**	**198**	**99.0%**	1	0.5%	200	99.5%	1	0.5%	199	99.5%
	Hispanic	7	5.1%	131	94.9%	8	5.8%	129	94.2%	9	6.5%	129	93.5%	5	3.6%	132	96.4%
	Asian	5	7.4%	63	92.6%	3	4.4%	65	95.6%	3	4.4%	65	95.6%	4	5.9%	64	94.1%
	Native American	1	8.3%	11	91.7%	2	16.7%	10	83.3%	2	16.7%	10	83.3%	1	8.3%	11	91.7%
	Multiracial	4	4.4%	86	95.6%	3	3.4%	85	96.6%	3	3.3%	87	96.7%	4	4.4%	86	95.6%

Table 13D: Recent Substance Use by Ethnicity																
		Amphetamines-R				Barbiturates-R				Tranquilizers-R				Steroids-R			
		Yes		No		Yes		No		Yes		No		Yes		No	
Gr	Ethnicity	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	Caucasian	2	0.2%	1,252	99.8%	2	0.2%	1,241	99.8%	0	0.0%	1,252	100%	1	0.1%	1,248	99.9%
	African-American	0	0.0%	285	100%	0	0.0%	283	100%	0	0.0%	279	100%	0	0.0%	284	100%
	Hispanic	0	0.0%	223	100%	0	0.0%	223	100%	0	0.0%	222	100%	2	0.9%	220	99.1%
	Asian	1	1.0%	99	99.0%	0	0.0%	99	100%	2	2.0%	97	98.0%	1	1.0%	99	99.0%
	Native American	0	0.0%	36	100%	0	0.0%	36	100%	0	0.0%	36	100%	0	0.0%	36	100%
	Multiracial	0	0.0%	215	100%	0	0.0%	215	100%	2	0.9%	212	99.1%	1	0.5%	213	99.5%
8	Caucasian	18	1.3%	1,385	98.7%	7	0.5%	1,385	99.5%	34	2.4%	1,363	97.6%	13	0.9%	1,386	99.1%
	African-American	5	2.1%	228	97.9%	3	1.3%	226	98.7%	6	2.6%	226	97.4%	7	3.0%	224	97.0%
	Hispanic	0	0.0%	212	100%	2	0.9%	213	99.1%	7	3.3%	208	96.7%	1	0.5%	214	99.5%
	Asian	0	0.0%	74	100%	0	0.0%	73	100%	3	4.0%	72	96.0%	1	1.3%	74	98.7%
	Native American	1	4.5%	21	95.5%	1	4.5%	21	95.5%	1	4.5%	21	95%	1	4.5%	21	95.5%
	Multiracial	5	2.5%	193	97.5%	1	0.5%	191	99.5%	3	1.5%	192	98.5%	3	1.5%	192	98.5%
10	Caucasian	30	2.9%	1,021	97.1%	13	1.2%	1,033	98.8%	67	6.4%	986	93.6%	8	0.8%	1,042	99.2%
	African-American	3	1.5%	199	98.5%	2	1.0%	200	99.0%	5	2.4%	200	97.6%	4	2.0%	201	98.0%
	Hispanic	2	1.3%	150	98.7%	1	0.7%	150	99.3%	8	5.3%	144	94.7%	0	0.0%	151	100%
	Asian	2	4.3%	45	95.7%	1	2.1%	46	97.9%	2	4.3%	45	95.7%	0	0.0%	47	100%
	Native American	2	18.2%	9	81.8%	1	9.1%	10	90.9%	1	9.1%	10	90.9%	1	10.0%	9	90.0%
	Multiracial	2	1.8%	107	98.2%	2	1.9%	106	98.1%	6	5.6%	102	94.4%	1	0.9%	108	99.1%
12	Caucasian	38	3.5%	1,049	96.5%	22	2.0%	1,056	98.0%	88	8.1%	996	91.9%	14	1.3%	1,072	98.7%
	African-American	2	1.0%	198	99.0%	1	0.5%	195	99.5%	**4**	**2.0%**	**193**	**98.0%**	1	0.5%	199	100%
	Hispanic	7	5.1%	131	94.9%	3	2.2%	132	97.8%	12	8.8%	124	91.2%	3	2.2%	134	97.8%
	Asian	4	5.9%	64	94.1%	4	6.0%	63	94.0%	5	7.4%	63	92.6%	4	5.9%	64	94.1%
	Native American	3	25.0%	9	75%	2	16.7%	10	83%	2	16.7%	10	83%	0	0.0%	11	100%
	Multiracial	5	5.6%	85	94.4%	3	3.3%	87	96.7%	6	6.7%	84	93.3%	2	2.2%	88	97.8%

LIFETIME SUBSTANCE USE BY ETHNICITY

Results presented in Tables 14A-14D in which reported lifetime substance use is examined based upon ethnicity are consistent with findings associated with reported recent substance use. In several instances, particularly at the high school level, African-American students report significantly lower levels of lifetime prevalence of substance use relative to other students. In 10th-grade, African-American students report significantly lower lifetime prevalence in use of tobacco, alcohol, inhalants, and hallucinogens. In 12th-grade, African-American students report significantly lower levels of lifetime prevalence in use of tobacco, alcohol, marijuana, inhalants, non-prescription drugs, hallucinogens, club drugs, and tranquilizers. Some differences were also found at lower grade levels. In 6th-grade, African-American students report lower rates of lifetime prevalence in use of inhalants, while lower prevalence rates are reported by African-American students in use of tobacco and non-prescription drugs in 8th-grade.

These results are also generally consistent with those reported in the national YRBS data, as well as the FLSAS, and MTF datasets. Notable differences do exist, though. For example, the national YRBS data reported lifetime prevalence rates of 50.0% for Caucasian students and 50.3% for African-American students in cigarette use, as well as rates of 38% for Caucasian students and 39.6% for African-American students in marijuana use. However, differences in analysis where rates were collapsed across grades in high school for ethnicity analyses of the national YRBS dataset may have had an effect on the reported rates.

Additional significant effects included higher reported lifetime prevalence of alcohol use among Hispanic students in 8th-grade, higher reported use of marijuana among Multiracial students in 6th-grade, and Hispanic students in 8th-grade, as well as the finding of lower reported rates of alcohol and marijuana use among Asian students in 12th-grade. These latter effects among Asian students parallel findings discussed above with respect to reported recent prevalence of alcohol and marijuana use. These findings are considered preliminary due to a small sample size and a lack of supporting data from comparative datasets. Effects involving higher reported rates of alcohol and marijuana use at the lower grade levels among Hispanic students are consistent with the findings of comparative datasets. Analysis of the MTF dataset place these findings in a developmental context that may provide some insight regarding the ethnic differences found in both the MTF and the Pinellas datasets. In their discussion, they state:

> *While the trends for Whites and Hispanics have generally been fairly parallel to each other, their relative positions have been different at the different grade levels. In 8th grade, Hispanics have consistently shown the highest rate of use, while Whites and African Americans have been similar at considerably lower rates. By 10th grade, Whites have shown rates of use similar to Hispanics, whereas African Americans have had the lowest rates. By 12th grade, with few exceptions, Whites have had the highest rates, Hispanics slightly lower ones, and African Americans the lowest. We believe that differential dropout rates may account for much or all of these shifts in relative position across the three grade levels (Hispanics have the highest rate of dropping out, and African Americans the next highest). (p. 190-191)*

Differences in reported substance use across ethnicity may be associated in part with differential dropout rates, as the MTF authors suggest. Other potential causes may also be associated with these findings and causes may vary across substances. For example, the authors of the national YRBS data analysis suggest that socioeconomic differences may be associated in part with differences in substance use across ethnic groups. While we cannot be certain at this point whether differential effects of dropout are associated with ethnic differences in reports of substance use at the high school level, it is necessary to continue to examine this hypothesis. To the degree to which we understand the manner through which substance use and other risk factors influence school non-completion across ethnicities we are in a much better position to initiate steps to prevent this outcome.

14A: Lifetime Substance Use by Ethnicity													
		Tobacco-L				Alcohol-L				Marijuana-L			
		Yes		No		Yes		No		Yes		No	
Grade	Ethnicity	N	%	N	%	N	%	N	%	N	%	N	%
5	Caucasian	19	1.5%	1,271	98.5%	50	3.9%	1,242	96.1%	3	0.2%	1,289	99.8%
	African-American	3	1.2%	253	98.8%	8	3.1%	248	96.9%	0	0.0%	256	100%
	Hispanic	5	2.1%	237	97.9%	13	5.4%	228	94.6%	1	0.4%	242	99.6%
	Asian	1	1.2%	84	98.8%	1	1.2%	84	98.8%	0	0.0%	85	100%
	Native American	3	8.1%	34	91.9%	3	8.1%	34	91.9%	1	2.7%	36	97.3%
	Multiracial	8	4.7%	163	95.3%	7	4.1%	164	95.9%	2	1.2%	169	98.8%
6	Caucasian	74	5.9%	1,175	94.1%	101	8.1%	1,153	91.9%	24	1.9%	1,232	98.1%
	African-American	15	5.4%	265	94.6%	18	6.4%	264	93.6%	2	0.7%	281	99.3%
	Hispanic	10	4.5%	212	95.5%	**30**	**13.5%**	**192**	**86.5%**	2	0.9%	220	99.1%
	Asian	4	4.0%	95	96.0%	7	7.0%	93	93.0%	4	4.0%	95	96.0%
	Native American	4	11.4%	31	88.6%	2	5.7%	33	94.3%	1	2.9%	33	97.1%
	Multiracial	13	6.0%	202	94.0%	21	9.8%	193	90.2%	**12**	**5.6%**	**204**	**94.4%**
8	Caucasian	230	17.2%	1,107	82.8%	421	31.2%	928	68.8%	128	9.5%	1,217	90.5%
	African-American	**23**	**10.0%**	**206**	**90.0%**	63	27.6%	165	72.4%	22	9.9%	201	90.1%
	Hispanic	46	22.3%	160	77.7%	80	38.1%	130	61.9%	**34**	**16.4%**	**173**	**83.6%**
	Asian	13	17.8%	60	82.2%	24	33.8%	47	66.2%	8	11.0%	65	89.0%
	Native American	4	19.0%	17	81.0%	4	19.0%	17	81.0%	4	19.0%	17	81.0%
	Multiracial	38	19.9%	153	80.1%	62	33.2%	125	66.8%	26	13.7%	164	86.3%
10	Caucasian	257	27.7%	671	72.3%	530	55.7%	421	44.3%	235	25.4%	690	74.6%
	African-American	**29**	**14.6%**	**170**	**85.4%**	**82**	**41.8%**	**114**	**58.2%**	44	23.0%	147	77.0%
	Hispanic	47	34.1%	91	65.9%	79	58.1%	57	41.9%	42	31.3%	92	68.7%
	Asian	5	11.4%	39	88.6%	17	40.5%	25	59.5%	6	14.0%	37	86.0%
	Native American	3	33.3%	6	66.7%	3	33.3%	6	66.7%	2	20.0%	8	80.0%
	Multiracial	29	31.2%	64	68.8%	52	58.4%	37	41.6%	28	31.8%	60	68.2%
12	Caucasian	349	42.5%	472	57.5%	517	66.5%	260	33.5%	336	40.9%	485	59.1%
	African-American	**34**	**17.7%**	**158**	**82.3%**	**83**	**44.9%**	**102**	**55.1%**	**48**	**26.7%**	**132**	**73.3%**
	Hispanic	38	36.2%	67	63.8%	74	67.3%	36	32.7%	33	30.8%	74	69.2%
	Asian	15	26.3%	42	73.7%	**23**	**40.4%**	**34**	**59.6%**	**14**	**22.2%**	**49**	**77.8%**
	Native American	2	20.0%	8	80.0%	6	66.7%	3	33.3%	7	63.6%	4	36.4%
	Multiracial	29	39.7%	44	60.3%	47	64.4%	26	35.6%	34	46.6%	39	53.4%

14B: Lifetime Substance Use by Ethnicity									
		Inhalants-L				Non-Rx Drugs-L			
		Yes		No		Yes		No	
Grade	Ethnicity	N	%	N	%	N	%	N	%
5	Caucasian	38	2.9%	1,252	97.1%	22	1.7%	1,267	98.3%
	African-American	6	2.4%	249	97.6%	3	1.2%	252	98.8%
	Hispanic	8	3.3%	234	96.7%	4	1.7%	238	98.3%
	Asian	2	2.4%	83	97.6%	4	4.7%	81	95.3%
	Native American	4	10.8%	33	89.2%	1	2.7%	36	97.3%
	Multiracial	6	3.5%	164	96.5%	2	1.2%	168	98.8%
6	Caucasian	88	7.1%	1,152	92.9%	14	1.1%	1,238	98.9%
	African-American	**6**	**2.1%**	**275**	**97.9%**	2	0.7%	281	99.3%
	Hispanic	17	7.6%	206	92.4%	2	0.9%	220	99.1%
	Asian	8	8.3%	88	91.7%	4	4.0%	96	96.0%
	Native American	2	5.7%	33	94.3%	1	2.9%	34	97.1%
	Multiracial	20	9.4%	192	90.6%	4	1.9%	210	98.1%
8	Caucasian	195	14.2%	1,181	85.8%	82	5.9%	1,305	94.1%
	African-American	21	9.1%	210	90.9%	**5**	**2.2%**	**223**	**97.8%**
	Hispanic	29	13.7%	183	86.3%	19	8.9%	195	91.1%
	Asian	12	16.4%	61	83.6%	5	6.9%	67	93.1%
	Native American	3	14.3%	18	85.7%	1	4.5%	21	95.5%
	Multiracial	36	18.7%	157	81.3%	16	8.1%	182	91.9%
10	Caucasian	83	8.0%	960	92.0%	103	9.9%	940	90.1%
	African-American	**4**	**2.0%**	**196**	**98.0%**	**7**	**3.5%**	**193**	**96.5%**
	Hispanic	7	4.7%	141	95.3%	10	6.6%	141	93.4%
	Asian	7	14.9%	40	85.1%	5	10.6%	42	89.4%
	Native American	3	27.3%	8	72.7%	1	11.1%	8	88.9%
	Multiracial	5	4.6%	104	95.4%	6	5.6%	102	94.4%
12	Caucasian	92	8.6%	979	91.4%	131	12.3%	933	87.7%
	African-American	**4**	**2.0%**	**197**	**98.0%**	**3**	**1.5%**	**196**	**98.5%**
	Hispanic	12	8.8%	124	91.2%	20	15.2%	112	84.8%
	Asian	5	7.4%	63	92.6%	7	11.1%	56	88.9%
	Native American	0	0.0%	11	100%	3	27.3%	8	72.7%
	Multiracial	4	4.6%	83	95.4%	10	11.5%	77	88.5%

14C: Lifetime Substance Use by Ethnicity																
		LSD-L				Cocaine-L				Club Drugs-L				Heroin-L			
		Yes		No		Yes		No		Yes		No		Yes		No	
Gr	Ethnicity	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	Caucasian	3	0.2%	1,249	99.8%	3	0.2%	1,249	99.8%	7	0.6%	1,250	99.4%	4	0.3%	1,249	99.7%
	African-American	0	0.0%	285	100%	0	0.0%	280	100%	0	0.0%	282	100%	0	0.0%	284	100%
	Hispanic	0	0.0%	222	100%	1	0.5%	221	99.5%	2	0.9%	219	99.1%	0	0.0%	222	100%
	Asian	3	3.0%	97	97.0%	2	2.0%	96	98.0%	2	2.0%	97	98.0%	2	2.0%	98	98.0%
	Native American	0	0.0%	36	100%	0	0.0%	36	100%	0	0.0%	36	100%	0	0.0%	36	100%
	Multiracial	1	0.5%	214	99.5%	3	1.4%	212	98.6%	1	0.5%	215	99.5%	0	0.0%	216	100%
8	Caucasian	31	2.2%	1,366	97.8%	30	2.2%	1,355	97.8%	33	2.4%	1,363	97.6%	14	1.0%	1,384	99.0%
	African-American	5	2.2%	227	97.8%	2	0.9%	228	99.1%	7	3.0%	227	97.0%	5	2.2%	226	97.8%
	Hispanic	5	2.3%	210	97.7%	10	4.7%	204	95.3%	8	3.7%	207	96.3%	8	3.8%	205	96.2%
	Asian	1	1.3%	74	98.7%	4	5.3%	71	94.7%	2	2.7%	71	97.3%	0	0.0%	75	100%
	Native American	1	4.5%	21	95.5%	2	9.1%	20	90.9%	0	0.0%	21	100%	1	4.5%	21	95.5%
	Multiracial	6	3.1%	190	96.9%	2	1.0%	195	99.0%	10	5.1%	187	94.9%	1	0.5%	196	99.5%
10	Caucasian	48	4.6%	1,000	95.4%	41	3.9%	1,007	96.1%	48	4.6%	998	95.4%	9	0.9%	1,041	99.1%
	African-American	**1**	**0.5%**	**202**	**99.5%**	1	0.5%	198	99.5%	4	2.0%	201	98.0%	2	1.0%	202	99.0%
	Hispanic	6	4.0%	145	96.0%	4	2.7%	146	97.3%	4	2.7%	146	97.3%	2	1.3%	150	98.7%
	Asian	3	6.4%	44	93.6%	2	4.3%	45	95.7%	1	2.1%	46	97.9%	0	0.0%	46	100%
	Native American	2	18.2%	9	81.8%	2	18.2%	9	81.8%	1	9.1%	10	90.9%	0	0.0%	10	100%
	Multiracial	6	5.5%	103	94.5%	4	3.7%	104	96.3%	6	5.5%	103	94.5%	3	2.8%	105	97.2%
12	Caucasian	82	7.6%	996	92.4%	90	8.4%	977	91.6%	95	8.8%	985	91.2%	18	1.7%	1,061	98.3%
	African-American	**4**	**2.0%**	**196**	**98.0%**	2	1.0%	195	99.0%	**3**	**1.5%**	**197**	**98.5%**	2	1.0%	199	99.0%
	Hispanic	12	8.9%	123	91.1%	12	9.1%	120	90.9%	18	13.4%	116	86.6%	6	4.4%	130	95.6%
	Asian	4	6.1%	62	93.9%	2	3.0%	64	97.0%	5	7.6%	61	92.4%	2	3.0%	64	97.0%
	Native American	2	16.7%	10	83.3%	1	9.1%	10	90.9%	2	16.7%	10	83.3%	1	8.3%	11	91.7%
	Multiracial	3	3.4%	84	96.6%	4	4.7%	82	95.3%	4	4.5%	84	95.5%	2	2.3%	85	97.7%

14D: Lifetime Substance Use by Ethnicity																	
		Amphetamines-L				Barbiturates-L				Tranquilizers-L				Steroids-L			
		Yes		No		Yes		No		Yes		No		Yes		No	
Gr	Ethnicity	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	Caucasian	3	0.2%	1,252	99.8%	4	0.3%	1,246	99.7%	2	0.2%	1,249	99.8%	5	0.4%	1,252	99.6%
	African-American	0	0.0%	283	100%	0	0.0%	283	100%	0	0.0%	285	100%	0	0.0%	285	100%
	Hispanic	0	0.0%	222	100%	0	0.0%	222	100%	0	0.0%	221	100%	2	0.9%	220	99.1%
	Asian	2	2.0%	98	98.0%	2	2.0%	98	98.0%	3	3.0%	97	97.0%	1	1.0%	98	99.0%
	Native American	0	0.0%	36	100%	0	0.0%	36	100%	0	0.0%	36	100%	0	0.0%	36	100%
	Multiracial	0	0.0%	216	100%	0	0.0%	214	100%	2	0.9%	214	99.1%	1	0.5%	212	99.5%
8	Caucasian	27	1.9%	1,368	98.1%	10	0.7%	1,382	99.3%	40	2.9%	1,355	97.1%	13	0.9%	1,383	99.1%
	African-American	6	2.6%	229	97.4%	3	1.3%	230	98.7%	7	3.0%	226	97.0%	3	1.3%	226	98.7%
	Hispanic	3	1.4%	212	98.6%	3	1.4%	212	98.6%	9	4.2%	205	95.8%	3	1.4%	210	98.6%
	Asian	0	0.0%	74	100%	0	0.0%	74	100%	3	4.0%	72	96.0%	1	1.3%	74	98.7%
	Native American	1	4.5%	21	95.5%	1	4.5%	21	95.5%	0	0.0%	21	100%	1	4.5%	21	95.5%
	Multiracial	4	2.0%	193	98.0%	3	1.5%	195	98.5%	5	2.5%	193	97.5%	4	2.0%	195	98.0%
10	Caucasian	34	3.3%	1,008	96.7%	16	1.5%	1,029	98.5%	92	8.8%	950	91.2%	15	1.4%	1,036	98.6%
	African-American	1	0.5%	201	99.5%	1	0.5%	202	99.5%	3	1.5%	199	98.5%	2	1.0%	200	99.0%
	Hispanic	3	2.0%	147	98.0%	1	0.7%	149	99.3%	11	7.4%	138	92.6%	1	0.7%	151	99.3%
	Asian	4	8.5%	43	91.5%	2	4.3%	45	95.7%	3	6.4%	44	93.6%	1	2.1%	46	97.9%
	Native American	2	18.2%	9	81.8%	1	9.1%	10	90.9%	2	18.2%	9	81.8%	1	9.1%	10	90.9%
	Multiracial	2	1.8%	107	98.2%	2	1.9%	106	98.1%	11	10.1%	98	89.9%	3	2.8%	105	97.2%
12	Caucasian	68	6.4%	995	93.6%	53	5.0%	1,017	95.0%	153	14.4%	907	85.6%	19	1.8%	1,063	98.2%
	African-American	4	2.0%	196	98.0%	2	1.0%	198	99.0%	**6**	**3.0%**	**193**	**97.0%**	0	0.0%	200	100%
	Hispanic	9	6.8%	124	93.2%	4	3.0%	131	97.0%	19	14.3%	114	85.7%	4	3.0%	131	97.0%
	Asian	2	3.0%	64	97.0%	2	3.0%	64	97.0%	7	10.6%	59	89.4%	2	3.0%	64	97.0%
	Native American	0	0.0%	9	100%	0	0.0%	10	100%	0	0.0%	10	100%	0	0.0%	11	100%
	Multiracial	8	9.0%	81	91.0%	4	4.5%	85	95.5%	11	12.5%	77	87.5%	1	1.1%	88	98.9%

AGE OF FIRST SUBSTANCE USE

Results presented in Table 15 examine students' report of the age at which they first used cigarettes, alcohol, marijuana, and inhalants. These results are then compared in Table 16 with reports by students throughout the state of Florida in the FYSAS survey.

Results presented in Table 15 are consistent with the pattern indicated by data throughout this report in which substance use begins to rise steadily in middle school and then increases markedly during high school. Alcohol is reported to be used more among younger students than are cigarettes, marijuana, and inhalants. Increases in prevalence of first use among students 14 or older are strongest for alcohol and smallest for inhalants, which have shown a peak in use at the 8th-grade level throughout the data contained in this report.

Table15: Age when first:									
		smoked a whole cigarette		had alcohol other than a few sips		tried marijuana		tried inhalants	
Grade		N	%	N	%	N	%	N	%
5	Never	1988	98.1%	1728	86.9%	2052	99.0%	1973	95.4%
	8 y/o or younger	11	0.5%	133	6.7%	8	0.4%	52	2.5%
	9 y/o	13	0.6%	64	3.2%	3	0.1%	15	0.7%
	10 y/o	12	0.6%	47	2.4%	6	0.3%	21	1.0%
	11 y/o	0	0.0%	14	0.7%	3	0.1%	7	0.3%
	12 y/o	2	0.1%	2	0.1%	1	0.0%	1	0.0%
	13 y/o	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	14 y/o or older	0	0.0%	0	0.0%	0	0.0%	0	0.0%
6	Never	1883	93.1%	1627	81.4%	2040	97.1%	1928	91.9%
	8 y/o or younger	39	1.9%	135	6.8%	11	0.5%	50	2.4%
	9 y/o	29	1.4%	48	2.4%	11	0.5%	24	1.1%
	10 y/o	28	1.4%	84	4.2%	15	0.7%	39	1.9%
	11 y/o	31	1.5%	74	3.7%	16	0.8%	40	1.9%
	12 y/o	6	0.3%	26	1.3%	5	0.2%	14	0.7%
	13 y/o	4	0.2%	4	0.2%	1	0.0%	3	0.1%
	14 y/o or older	3	0.1%	2	0.1%	3	0.1%	1	0.0%
8	Never	1670	80.1%	1223	58.1%	1799	84.1%	1827	85.5%
	8 y/o or younger	69	3.3%	169	8.0%	31	1.4%	68	3.2%
	9 y/o	31	1.5%	73	3.5%	17	0.8%	29	1.4%
	10 y/o	48	2.3%	107	5.1%	25	1.2%	32	1.5%
	11 y/o	55	2.6%	100	4.8%	46	2.2%	53	2.5%
	12 y/o	108	5.2%	193	9.2%	83	3.9%	74	3.5%
	13 y/o	86	4.1%	192	9.1%	116	5.4%	49	2.3%
	14 y/o or older	19	0.9%	48	2.3%	22	1.0%	5	0.2%
10	Never	1065	68.2%	548	34.9%	1005	63.9%	1439	91.5%
	8 y/o or younger	45	2.9%	103	6.6%	17	1.1%	16	1.0%
	9 y/o	18	1.2%	20	1.3%	10	0.6%	7	0.4%
	10 y/o	31	2.0%	72	4.6%	20	1.3%	15	1.0%
	11 y/o	35	2.2%	61	3.9%	34	2.2%	6	0.4%
	12 y/o	62	4.0%	128	8.2%	59	3.8%	21	1.3%
	13 y/o	92	5.9%	211	13.5%	123	7.8%	29	1.8%
	14 y/o or older	213	13.6%	425	27.1%	305	19.4%	40	2.5%
12	Never	904	57.3%	351	22.2%	742	46.7%	1459	91.5%
	8 y/o or younger	43	2.7%	93	5.9%	26	1.6%	17	1.1%
	9 y/o	18	1.1%	29	1.8%	10	0.6%	7	0.4%
	10 y/o	28	1.8%	53	3.4%	16	1.0%	8	0.5%
	11 y/o	31	2.0%	40	2.5%	33	2.1%	8	0.5%
	12 y/o	65	4.1%	103	6.5%	67	4.2%	10	0.6%
	13 y/o	78	4.9%	165	10.5%	125	7.9%	26	1.6%
	14 y/o or older	412	26.1%	744	47.1%	569	35.8%	59	3.7%

The FYSAS report defines early initiation of substance use among students who first use a substance at age 13 or younger. In Table 16, Pinellas data concerning reports of first use are compared the 2008 FYSAS data. Two notable trends are present in Table 16. First, early use of alcohol and marijuana are reported at a higher rate among Pinellas students relative to students in Florida as a whole. Additionally, there is a sharp decline in both datasets in the percentage of students reporting having used alcohol prior to age 14 among 12th-grade students relative to 10th-grade students. This is yet another indirect indication in these data that substance use and dropout are related. We can't be certain through these cross-sectional data, yet it appears that students who report early use of alcohol are less likely to be present in school through 12th-grade. These are likely not cohort effects as this pattern has been present in the FYSAS data every year since 2000 that students have been surveyed.

Table16: Reported 1st use of substance prior to age 14

Grade		Pinellas	FYSAS
10	Cigarettes	18.1%	19.8%
	Alcohol	37.9%	32.7%
	Marijuana	16.7%	10.9%
	Inhalants	6.0%	NA
12	Cigarettes	16.7%	18.2%
	Alcohol	30.6%	26.0%
	Marijuana	17.4%	9.7%
	Inhalants	4.8%	NA

LOCATION OF ALCOHOL USE

Results presented in Tables 17A and 17B indicate student reports of frequency with which they had used alcohol in different locations during the 30 days prior to the survey. Consistent with reports of overall alcohol use, students report increased use in each location as grade level increases. Also consistent with overall reports of alcohol use, students' responses indicate an increase in use at each location from 2006 to 2008. With the exception of use at school in 5th and 6th-grade, and at a friend's home in 5th-grade, the frequency with which students report using alcohol "0 times" decreased for each location at each grade level with increases for some or all of the remaining frequencies from "1-2 times" to "6+ times".

Of the locations given, alcohol use at home is the most common location reported by middle school students, while use at a friend's home becomes the most common location reported among high school students. These results appear to support a trend in which the consumption of alcohol becomes a more common context for socialization as students advance through high school.

Reports of alcohol consumption in a car is perhaps particularly troubling considering the potential immediate safety risks involved with this behavior. Among the 2008 sample, approximately 15% of 10th-grade students and 20% of 12th-grade students report having consumed alcohol in a car in the 30 days prior to administration of the survey. These percentages include hundreds of students in this sample alone, which excludes students who were not present to take the survey for any reason. The reported frequency of this behavior may suggest a particular need for efforts aimed at reducing the practice of alcohol consumption in a car among high school students in particular.

Reported rates of drinking alcohol at school are the lowest among the locations given. However, a reported 30-day rate of use by approximately 5% of high school students suggests that this behavior may not be entirely uncommon.

An "other" location option was added in 2008. This is a frequently endorsed option, with rates close to that of use at home among middle school students and use at a friend's home among high school students. This appears valid given the entire range of possible locations.

Table 17A: During the last 30 days how often (if ever) have you used alcohol in each of the following places?

		Home				Friend				School			
		2006		2008		2006		2008		2006		2008	
Grade		N	%	N	%	N	%	N	%	N	%	N	%
5	0 times	**4869**	**96.4%**	**2020**	**94.5%**	4944	99.3%	2104	98.7%	4970	99.9%	2115	99.9%
	1-2 times	**159**	**3.1%**	**98**	**4.6%**	29	0.6%	22	1.0%	4	0.1%	3	0.1%
	3-5 Times	16	0.3%	12	0.6%	5	0.1%	3	0.1%	1	0.0%	0	0.0%
	6+ times	5	0.1%	7	0.3%	3	0.1%	2	0.1%	0	0.0%	0	0.0%
6	0 times	**4488**	**95.5%**	**2115**	**90.8%**	**4542**	**98.4%**	**2226**	**96.0%**	4594	99.8%	2304	99.4%
	1-2 times	**178**	**3.8%**	**164**	**7.0%**	**61**	**1.3%**	**62**	**2.7%**	7	0.2%	9	0.4%
	3-5 Times	**22**	**0.5%**	**32**	**1.4%**	**6**	**0.1%**	**17**	**0.7%**	1	0.0%	1	0.0%
	6+ times	**13**	**0.3%**	**18**	**0.8%**	**7**	**0.2%**	**14**	**0.6%**	2	0.0%	3	0.1%
8	0 times	**3998**	**86.2%**	**1802**	**78.4%**	**4066**	**89.3%**	**1880**	**82.1%**	**4475**	**99.0%**	**2221**	**97.3%**
	1-2 times	**502**	**10.8%**	**348**	**15.1%**	**351**	**7.7%**	**271**	**11.8%**	**25**	**0.6%**	**35**	**1.5%**
	3-5 Times	96	2.1%	84	3.7%	92	2.0%	63	2.7%	4	0.1%	10	0.4%
	6+ times	43	0.9%	64	2.8%	42	0.9%	77	3.4%	15	0.3%	17	0.7%
10	0 times	**3213**	**79.6%**	**1181**	**69.3%**	**2922**	**72.7%**	**1109**	**64.9%**	**3792**	**95.9%**	**1600**	**94.3%**
	1-2 times	**545**	**13.5%**	**361**	**21.2%**	664	16.5%	329	19.3%	**95**	**2.4%**	**65**	**3.8%**
	3-5 Times	**154**	**3.8%**	**98**	**5.7%**	**231**	**5.8%**	**153**	**9.0%**	23	0.6%	17	1.0%
	6+ times	126	3.1%	65	3.8%	**200**	**5.0%**	**118**	**6.9%**	44	1.1%	15	0.9%
12	0 times	**2384**	**75.0%**	**1087**	**64.5%**	**1884**	**59.5%**	**847**	**50.4%**	**2974**	**96.0%**	**1575**	**94.1%**
	1-2 times	**513**	**16.1%**	**380**	**22.5%**	682	21.5%	377	22.4%	**71**	**2.3%**	**60**	**3.6%**
	3-5 Times	**150**	**4.7%**	**115**	**6.8%**	343	10.8%	212	12.6%	17	0.5%	18	1.1%
	6+ times	**131**	**4.1%**	**104**	**6.2%**	**260**	**8.2%**	**245**	**14.6%**	35	1.1%	21	1.3%

Table 17B: During the last 30 days how often (if ever) have you used alcohol in each of the following places?									
		Car				Other			
		2006		2008		2006		2008	
Grade		N	%	N	%	N	%	N	%
5	0 times	**4963**	**99.9%**	**2102**	**99.5%**			2030	95.9%
	1-2 times	7	0.1%	9	0.4%			67	3.2%
	3-5 Times	0	0.0%	1	0.0%			12	0.6%
	6+ times	0	0.0%	0	0.0%			7	0.3%
6	0 times	**4589**	**99.7%**	**2278**	**98.5%**			2164	93.8%
	1-2 times	**12**	**0.3%**	**24**	**1.0%**			99	4.3%
	3-5 Times	4	0.1%	2	0.1%			18	0.8%
	6+ times	0	0.0%	8	0.3%			26	1.1%
8	0 times	**4350**	**96.4%**	**2136**	**93.7%**			1869	81.7%
	1-2 times	**112**	**2.5%**	**82**	**3.6%**			242	10.6%
	3-5 Times	26	0.6%	24	1.1%			81	3.5%
	6+ times	24	0.5%	37	1.6%			96	4.2%
10	0 times	**3540**	**89.4%**	**1456**	**85.5%**			1183	69.4%
	1-2 times	**261**	**6.6%**	**155**	**9.1%**			275	16.1%
	3-5 Times	90	2.3%	47	2.8%			110	6.5%
	6+ times	70	1.8%	44	2.6%			137	8.0%
12	0 times	**2580**	**82.8%**	**1307**	**78.1%**			1013	60.4%
	1-2 times	**318**	**10.2%**	**213**	**12.7%**			301	17.9%
	3-5 Times	125	4.0%	78	4.7%			169	10.1%
	6+ times	**93**	**3.0%**	**76**	**4.5%**			195	11.6%

PERCEPTIONS AND ATTITUDES ASSOCIATED WITH SUBSTANCE USE

A series of questions contained in this section focused upon students' perceptions and attitudes associated with substance use. Students were asked how easy they thought it would be for them to obtain alcohol, tobacco, marijuana, inhalants, LSD, and cocaine. Students were asked how they feel about people who use each of the substances contained in the survey. Students were asked how much they believe people risk harming themselves by using each substance. Students were asked how much pressure they feel from friends and schoolmates to use cigarettes, alcohol and marijuana. They were also asked how difficult it would be say no if offered each of these three substances by their best friend. Finally, students were asked whether they agree that their community believes it is ok for adults to drink alcohol, for people their own age to drink alcohol, and to sell alcohol illegally. Each of these questions was asked in an identical manner in 2006 and 2008. Comparisons are made between the 2006 and 2008 data at each grade level surveyed.

HOW EASY DO YOU THINK IT WOULD BE FOR YOU TO GET THE FOLLOWING TYPES OF DRUGS, IF YOU WANTED SOME…

Results presented in Tables 18A and 18B concern students' perceptions of how easy they believe it would be for them to obtain alcohol, tobacco, marijuana, inhalants, LSD, and cocaine. Students report increasing ease of obtaining each substance as grade level increases with the exception of inhalants, where reported ease of obtaining

inhalants peaks in 8th-grade and then remains constant at about 66% through high school. This pattern parallels student reports of inhalant usage, which also peaks at 8th-grade and then levels off in high school.

Inhalants are also reported to be the easiest to attain among 5th-grade students. Twenty-seven percent of 5th-grade students in 2008 report that inhalants are easy to obtain. Inhalants are followed by alcohol (17.9%) and tobacco (14.6%) in reported ease to obtain among 5th-grade students. Only 3.1% of 5th-grade students report that marijuana is easy to obtain. This is consistent with the limited number of 5th-grade students who report using marijuana.

LSD and cocaine are reported to be the most difficult to obtain at each grade level surveyed. These reports parallel the lower prevalence of the use of these substances relative to alcohol, tobacco, marijuana, and inhalants. The reported ease of obtaining alcohol, tobacco, marijuana, and inhalants each rise sharply from 6th- to 8th-grade. This sharp rise parallels the sharp increases in reported prevalence of use of each of these substances from 6th- to 8th-grade. The reported ease of obtaining marijuana again rises sharply from 8th (31.8%) to 10th-grade (60.6%). This 28.8% increase from 8th to 10th-grade in students reporting that marijuana is easy to obtain is the largest increase seen in tables 29A and 29B.

Changes in reported ease of obtaining substances from 2006 to 2008 varies by grade level. Alcohol, tobacco, and inhalants are each reported to be harder to obtain by 5th-grade students in 2008 relative to 5th-grade students in 2006. Similarly, 6th-grade students report that LSD is harder to obtain in 2008 relative to 6th-grade students in 2006. Conversely, where significant changes exist, students at the higher grade levels report that substances are easier to obtain. In 2008, 8th-grade students report that alcohol, tobacco, marijuana, inhalants, and LSD are all easier to obtain relative to 8th-grade students in 2006. Similarly, 10th and 12th-grade students in 2008 also report that marijuana is easier to obtain than did high school students in 2006.

Taken as a whole, the trends reported with respect to Tables 18A and 18B parallel student reports of substance use. Inhalants and alcohol are reported to be easier to obtain relative to other substances at the early grade levels and they are also reported to be the most commonly used substances at the early grade levels. Reported ease of obtaining all substances rises with grade level along with substance use. Sharp increases in ease of obtaining substances from 6th to 8th-grades parallel sharp increases in reported use of substances during this period. Lower levels of reported ease in obtaining LSD and cocaine parallel reported lower levels of use of these substances. Increases in the reported ease of obtaining alcohol and marijuana from 2006 to 2008 parallel reported increases in their use at the high school level during this time period. From these data it is not clear whether increased use may be associated with an increased perception of ease of obtaining substances or whether a true increase in the ease of obtaining substances is associated with an increase in their use. While the directionality of this relationship is unclear, the agreement between reported usage and reported ease of obtaining substances supports the validity of both sets of reports.

Table 18A: How easy do you think it would be for you to get the following types of drugs, if you wanted some…													
		Alcohol				Tobacco				Marijuana			
		2006		2008		2006		2008		2006		2008	
Grade		N	%	N	%	N	%	N	%	N	%	N	%
5	Easy	**1095**	**21.9%**	**384**	**17.9%**	**881**	**17.6%**	**312**	**14.6%**	163	3.3%	66	3.1%
	Hard	**1440**	**28.8%**	**691**	**32.3%**	**1761**	**35.3%**	**824**	**38.7%**	2086	41.7%	930	43.7%
	Don't Know	2472	49.4%	1067	49.8%	2350	47.1%	994	46.7%	2753	55.0%	1134	53.2%
6	Easy	1402	30.2%	748	32.0%	1089	23.6%	594	25.3%	304	6.6%	187	8.0%
	Hard	1236	26.6%	610	26.1%	1600	34.6%	835	35.6%	2046	44.2%	1034	44.2%
	Don't Know	2006	43.2%	978	41.9%	1933	41.8%	918	39.1%	2284	49.3%	1121	47.9%
8	Easy	**2779**	**59.8%**	**1524**	**65.6%**	**2120**	**45.7%**	**1141**	**49.3%**	**1258**	**27.1%**	**737**	**31.8%**
	Hard	601	12.9%	269	11.6%	1174	25.3%	585	25.3%	1622	35.0%	798	34.4%
	Don't Know	**1268**	**27.3%**	**529**	**22.8%**	**1347**	**29.0%**	**589**	**25.4%**	**1755**	**37.9%**	**785**	**33.8%**
10	Easy	3095	75.6%	1311	75.7%	2637	64.5%	1138	66.0%	**2295**	**56.2%**	**1044**	**60.6%**
	Hard	247	6.0%	100	5.8%	512	12.5%	206	11.9%	649	15.9%	232	13.5%
	Don't Know	753	18.4%	320	18.5%	941	23.0%	380	22.0%	1142	27.9%	446	25.9%
12	Easy	2732	84.1%	1463	85.6%	2629	81.0%	1425	83.2%	**2309**	**71.2%**	**1297**	**76.0%**
	Hard	112	3.4%	71	4.2%	156	4.8%	87	5.1%	238	7.3%	119	7.0%
	Don't Know	403	12.4%	175	10.2%	462	14.2%	200	11.7%	**696**	**21.5%**	**291**	**17.0%**

Table 18B: How easy do you think it would be for you to get the following types of drugs, if you wanted some…													
		Inhalants				LSD				Cocaine/Crack			
		2006		2008		2006		2008		2006		2008	
Grade		N	%	N	%	N	%	N	%	N	%	N	%
5	Easy	**1563**	**31.3%**	**585**	**27.4%**								
	Hard	**1064**	**21.3%**	**537**	**25.2%**								
	Don't Know	2364	47.4%	1010	47.4%								
6	Easy	1958	42.3%	1064	45.4%	128	2.8%	85	3.6%	194	4.2%	129	5.5%
	Hard	816	17.6%	423	18.0%	**1653**	**35.7%**	**927**	**39.6%**	2013	43.5%	1014	43.4%
	Don't Know	**1856**	**40.1%**	**858**	**36.6%**	**2845**	**61.5%**	**1327**	**56.7%**	2417	52.3%	1192	51.0%
8	Easy	**2802**	**60.4%**	**1536**	**66.2%**	**346**	**7.5%**	**217**	**9.4%**	542	11.7%	317	13.7%
	Hard	521	11.2%	224	9.7%	1774	38.2%	880	37.9%	1916	41.3%	952	41.2%
	Don't Know	**1314**	**28.3%**	**560**	**24.1%**	2522	54.3%	1223	52.7%	2176	47.0%	1044	45.1%
10	Easy	2694	66.0%	1098	63.6%	627	15.3%	285	16.5%	921	22.5%	390	22.6%
	Hard	296	7.3%	140	8.1%	1195	29.2%	466	27.0%	1152	28.2%	486	28.1%
	Don't Know	1092	26.8%	488	28.3%	2268	55.5%	974	56.5%	2017	49.3%	851	49.3%
12	Easy	2258	69.7%	1151	67.1%	623	19.2%	326	19.1%	1018	31.4%	524	30.7%
	Hard	157	4.8%	107	6.2%	769	23.7%	449	26.3%	644	19.9%	375	22.0%
	Don't Know	823	25.4%	457	26.6%	1850	57.1%	931	54.6%	1576	48.7%	808	47.3%

REPORTED SUBSTANCE USE PREVALENCE BY REPORTED EASE IN OBTAINING SUBSTANCES

Results presented in Tables 19A-19F examine students' reports of ease in obtaining each substance based upon reports of having used each substance either recently or in their lifetime. Each of these tables includes sizable differences in reported ease of obtaining substances based upon use. Students who report having used a substance are much more likely to report that the substance is easy to obtain. These data may suggest that ease of availability is associated with higher levels of substance use. Students who obtain various substances may also be affiliated with peer networks that heighten the availability of substances relative to students who are active in peer networks that do not include as much substance use. Or, these data may reflect an effect where students who have actively sought to obtain a substance believe that the substance is easier to obtain relative to students who have not obtained the substance and are less sure how easy or difficult it might be if they tried. This last hypothesis appears to have the strongest support in that a much higher percentage of students who have not used a substance report that they 'don't know' how easy it would be to obtain relative to students who report having used the substance.

Results presented in Tables 19A-19F are also notable in that reports of ease of access increase for all students and for all substances with increasing age. Students who use each substance are more likely to report a greater ease of access. However, the percentage of students who don't know whether it is easy or hard to obtain a substance declines with age for students who have not used the highest prevalence substances- tobacco, alcohol, and marijuana. In other words, as students become older they may not use these substances but they are more likely to know where to get them if they want them. In contrast, the percentages of students who do not use inhalants, LSD, and cocaine and do not know how easy it is to obtain them remain similar with increasing grade level.

A third major finding in Tables 19A-19F is that, among those who use cigarettes, alcohol, marijuana, and inhalants in high school, over 90% at both the 10th- and 12th-grade levels report that each of these substances is easy to obtain. Percentages are somewhat lower for LSD and Cocaine, in which between 63.6% and 86.7% of those who have used the substances report that they are easy to obtain. However, the exceptionally high percentages for cigarettes, alcohol, marijuana, and inhalants leave little room for doubt concerning their widespread availability among high school students who use these substances.

Table 19A: Reported Ease in Obtaining Cigarettes based upon Use								
			Ease in Obtaining Cigarettes					
			Easy		Hard		Don't Know	
Grade		Use	N	%	N	%	N	%
5	Tobacco-R	No	288	14.3%	792	39.3%	934	46.4%
		Yes	12	80.0%	2	13.3%	1	6.7%
	Tobacco-L	No	269	13.5%	789	39.7%	929	46.8%
		Yes	30	76.9%	3	7.7%	6	15.4%
6	Tobacco-R	No	476	23.6%	743	36.8%	799	39.6%
		Yes	35	87.5%	5	12.5%	0	0.0%
	Tobacco-L	No	419	21.8%	722	37.6%	780	40.6%
		Yes	80	66.7%	24	20.0%	16	13.3%
8	Tobacco-R	No	835	43.8%	542	28.4%	529	27.8%
		Yes	210	94.6%	7	3.2%	5	2.3%
	Tobacco-L	No	649	38.5%	522	31.0%	513	30.5%
		Yes	305	86.9%	27	7.7%	19	5.4%
10	Tobacco-R	No	760	59.7%	182	14.3%	331	26.0%
		Yes	277	93.3%	9	3.0%	11	3.7%
	Tobacco-L	No	543	52.6%	176	17.0%	314	30.4%
		Yes	333	90.0%	13	3.5%	24	6.5%
12	Tobacco-R	No	864	78.0%	71	6.4%	172	15.5%
		Yes	481	98.8%	3	0.6%	3	0.6%
	Tobacco-L	No	565	71.9%	63	8.0%	158	20.1%
		Yes	444	95.1%	7	1.5%	16	3.4%

Table 19B: Reported Ease in Obtaining Alcohol based upon Use								
			Ease in Obtaining Alcohol					
			Easy		Hard		Don't Know	
Grade		Use	N	%	N	%	N	%
5	Alcohol-R	No	351	17.5%	661	32.9%	998	49.7%
		Yes	19	65.5%	4	13.8%	6	20.7%
	Alcohol-L	No	322	16.5%	650	33.2%	984	50.3%
		Yes	47	58.0%	14	17.3%	20	24.7%
6	Alcohol-R	No	573	29.2%	544	27.8%	842	43.0%
		Yes	68	84.0%	6	7.4%	7	8.6%
	Alcohol-L	No	497	26.8%	533	28.7%	827	44.5%
		Yes	138	78.4%	14	8.0%	24	13.6%
8	Alcohol-R	No	1052	59.4%	245	13.8%	473	26.7%
		Yes	347	95.9%	6	1.7%	9	2.5%
	Alcohol-L	No	736	52.7%	224	16.0%	437	31.3%
		Yes	585	89.9%	26	4.0%	40	6.1%
10	Alcohol-R	No	706	67.8%	79	7.6%	256	24.6%
		Yes	496	93.4%	14	2.6%	21	4.0%
	Alcohol-L	No	363	55.5%	65	9.9%	226	34.6%
		Yes	690	90.4%	25	3.3%	48	6.3%
12	Alcohol-R	No	655	77.9%	46	5.5%	140	16.6%
		Yes	720	96.0%	18	2.4%	12	1.6%
	Alcohol-L	No	310	67.8%	34	7.4%	113	24.7%
		Yes	689	92.0%	24	3.2%	36	4.8%

Table 19C: Reported Ease in Obtaining Marijuana based upon Use								
			Ease in Obtaining Marijuana					
			Easy		Hard		Don't Know	
Grade		Use	N	%	N	%	N	%
5	Marijuana-R	No	62	3.1%	900	44.5%	1062	52.5%
		Yes	3	75.0%	1	25.0%	0	0.0%
	Marijuana-L	No	62	3.1%	899	44.5%	1060	52.4%
		Yes	3	42.9%	2	28.6%	2	28.6%
6	Marijuana-R	No	141	7.0%	907	44.9%	971	48.1%
		Yes	20	76.9%	5	19.2%	1	3.8%
	Marijuana-L	No	126	6.3%	905	45.3%	967	48.4%
		Yes	30	68.2%	8	18.2%	6	13.6%
8	Marijuana-R	No	482	24.9%	737	38.0%	719	37.1%
		Yes	169	89.9%	12	6.4%	7	3.7%
	Marijuana-L	No	391	21.5%	722	39.6%	708	38.9%
		Yes	180	81.8%	25	11.4%	15	6.8%
10	Marijuana-R	No	622	50.7%	209	17.0%	396	32.3%
		Yes	322	96.1%	7	2.1%	6	1.8%
	Marijuana-L	No	440	42.8%	204	19.9%	383	37.3%
		Yes	324	91.3%	12	3.4%	19	5.4%
12	Marijuana-R	No	756	67.7%	103	9.2%	258	23.1%
		Yes	458	98.5%	4	0.9%	3	0.6%
	Marijuana-L	No	438	56.5%	95	12.3%	242	31.2%
		Yes	446	94.7%	6	1.3%	19	4.0%

Table 19D: Reported Ease in Obtaining Inhalants based upon Use								
			Ease in Obtaining Inhalants					
			Easy		Hard		Don't Know	
Grade		Use	N	%	N	%	N	%
5	Inhalants-R	No	538	27.0%	514	25.8%	943	47.3%
		Yes	25	73.5%	3	8.8%	6	17.6%
	Inhalants-L	No	517	26.4%	510	26.0%	933	47.6%
		Yes	43	67.2%	7	10.9%	14	21.9%
6	Inhalants-R	No	835	43.2%	363	18.8%	733	38.0%
		Yes	88	84.6%	5	4.8%	11	10.6%
	Inhalants-L	No	797	42.3%	361	19.2%	726	38.5%
		Yes	115	83.9%	8	5.8%	14	10.2%
8	Inhalants-R	No	1264	64.5%	201	10.3%	495	25.3%
		Yes	145	92.4%	5	3.2%	7	4.5%
	Inhalants-L	No	1107	61.7%	200	11.1%	488	27.2%
		Yes	274	92.6%	6	2.0%	16	5.4%
10	Inhalants-R	No	961	63.3%	127	8.4%	431	28.4%
		Yes	38	92.7%	2	4.9%	1	2.4%
	Inhalants-L	No	896	62.1%	125	8.7%	421	29.2%
		Yes	97	89.0%	4	3.7%	8	7.3%
12	Inhalants-R	No	1045	67.3%	90	5.8%	418	26.9%
		Yes	31	96.9%	1	3.1%	0	0.0%
	Inhalants-L	No	952	65.5%	88	6.1%	413	28.4%
		Yes	112	95.7%	3	2.6%	2	1.7%

Table 19E: Reported Ease in Obtaining LSD based upon Use								
			Degree of ease in obtaining LSD					
			Easy		Hard		Don't Know	
Grade		Use	N	%	N	%	N	%
6	LSD-R	No	68	3.4%	817	40.3%	1143	56.4%
		Yes	3	60.0%	2	40.0%	0	0.0%
	LSD-L	No	68	3.3%	820	40.3%	1148	56.4%
		Yes	3	50.0%	2	33.3%	1	16.7%
8	LSD-R	No	**171**	**8.2%**	815	39.0%	**1104**	**52.8%**
		Yes	**13**	**37.1%**	15	42.9%	**7**	**20.0%**
	LSD-L	No	**163**	**7.9%**	807	39.0%	**1101**	**53.2%**
		Yes	**22**	**44.9%**	19	38.8%	**8**	**16.3%**
10	LSD-R	No	**210**	**13.8%**	426	28.0%	**888**	**58.3%**
		Yes	**30**	**75.0%**	9	22.5%	**1**	**2.5%**
	LSD-L	No	**193**	**12.9%**	417	27.9%	**885**	**59.2%**
		Yes	**42**	**63.6%**	18	27.3%	**6**	**9.1%**
12	LSD-R	No	**244**	**16.1%**	401	26.4%	**873**	**57.5%**
		Yes	**44**	**67.7%**	18	27.7%	**3**	**4.6%**
	LSD-L	No	**212**	**14.5%**	382	26.2%	**866**	**59.3%**
		Yes	**62**	**58.5%**	33	31.1%	**11**	**10.4%**

Table 19F: Reported Ease in Obtaining Cocaine based upon Use								
			Degree of ease in obtaining cocaine					
			Easy		Hard		Don't Know	
Grade		Use	N	%	N	%	N	%
6	Cocaine-R	No	99	4.9%	897	44.3%	1030	50.8%
		Yes	1	25.0%	2	50.0%	1	25.0%
	Cocaine-L	No	98	4.8%	898	44.4%	1025	50.7%
		Yes	4	44.4%	2	22.2%	3	33.3%
8	Cocaine-R	No	**256**	**12.3%**	878	42.3%	**944**	**45.4%**
		Yes	**19**	**57.6%**	13	39.4%	**1**	**3.0%**
	Cocaine-L	No	**238**	**11.6%**	872	42.6%	**938**	**45.8%**
		Yes	**28**	**56.0%**	16	32.0%	**6**	**12.0%**
10	Cocaine-R	No	**315**	**20.5%**	441	28.7%	**781**	**50.8%**
		Yes	**22**	**75.9%**	6	20.7%	**1**	**3.4%**
	Cocaine-L	No	**287**	**19.1%**	439	29.2%	**777**	**51.7%**
		Yes	**41**	**75.9%**	9	16.7%	**4**	**7.4%**
12	Cocaine-R	No	**417**	**27.4%**	344	22.6%	**759**	**49.9%**
		Yes	**52**	**86.7%**	7	11.7%	**1**	**1.7%**
	Cocaine-L	No	**365**	**25.4%**	331	23.0%	**742**	**51.6%**
		Yes	**80**	**73.4%**	15	13.8%	**14**	**12.8%**

HOW DO YOU FEEL ABOUT PEOPLE WHO USE...

Results presented in Tables 20A- 20D concern student reports of how they feel about people who use each of the substances in the survey. Results indicate that students report increasing levels of approval as grade level increases for the more prevalent substances including tobacco, alcohol, and marijuana. While there is a small increase in approval for the remaining substances with increasing grade level, approval does not exceed 10% for any of the lower prevalence substances at any grade level.

Results also indicate that approval ratings have shifted somewhat toward decreases in disapproval at the higher grade levels from 2006 to 2008. Twelfth-grade students in 2008 are significantly less likely than their 2006 counterparts to indicate that they disapprove of people who use most of the substances surveyed, and were more likely to indicate that they 'don't know'. A similar pattern was found at the 10th-grade level for alcohol, marijuana, inhalants, and LSD. Small increases in student reports that they approve of people who use substances were found among 6th and 8th-grade students in their reports concerning alcohol usage. While these increases in approval ratings are relatively small, they do raise concern given reports of increased usage of alcohol at the middle school level. Similarly, an increase in 12th-grade students' approval of people who use marijuana is consistent with reports of increased usage of marijuana at the high school level. In contrast, 10th-grade students' approval of people who use barbiturates and amphetamines has significantly decreased from 2006 to 2008. This is consistent with reports of decreased usage of these substances. However, differences in wording from 2006 to 2008 in accord with these substances may have influenced these results.

Table 20A: How do you feel about people who use...

		Tobacco				Alcohol				Marijuana			
		2006		2008		2006		2008		2006		2008	
Grade		N	%	N	%	N	%	N	%	N	%	N	%
5	Approve	164	3.3%	55	2.6%	100	2.0%	43	2.0%	69	1.4%	25	1.2%
	Disapprove	4004	80.1%	1778	82.5%	4204	84.2%	1797	83.5%	4307	86.6%	1882	87.7%
	Don't Know	833	16.7%	322	14.9%	686	13.7%	311	14.5%	598	12.0%	240	11.2%
6	Approve	258	5.6%	149	6.3%	**196**	**4.2%**	**147**	**6.2%**	143	3.1%	85	3.6%
	Disapprove	3482	74.9%	1736	73.1%	**3662**	**78.9%**	**1762**	**74.4%**	3854	83.4%	1956	82.5%
	Don't Know	908	19.5%	490	20.6%	**783**	**16.9%**	**460**	**19.4%**	626	13.5%	330	13.9%
8	Approve	632	13.6%	346	14.9%	**796**	**17.2%**	**474**	**20.4%**	601	13.0%	344	14.8%
	Disapprove	2705	58.4%	1348	58.0%	**2423**	**52.4%**	**1112**	**47.9%**	2990	64.8%	1464	63.2%
	Don't Know	1298	28.0%	631	27.1%	1409	30.4%	735	31.7%	1024	22.2%	510	22.0%
10	Approve	788	19.3%	340	19.7%	1270	31.2%	528	30.8%	980	24.2%	454	26.5%
	Disapprove	2074	50.9%	837	48.6%	**1366**	**33.6%**	**487**	**28.4%**	**1987**	**49.0%**	**741**	**43.2%**
	Don't Know	1211	29.7%	546	31.7%	**1434**	**35.2%**	**702**	**40.9%**	**1088**	**26.8%**	**519**	**30.3%**
12	Approve	822	25.6%	452	26.7%	1283	40.0%	670	39.5%	**967**	**30.1%**	**579**	**34.3%**
	Disapprove	**1479**	**46.0%**	**702**	**41.4%**	**804**	**25.0%**	**367**	**21.6%**	**1397**	**43.5%**	**607**	**35.9%**
	Don't Know	**913**	**28.4%**	**542**	**32.0%**	**1124**	**35.0%**	**659**	**38.9%**	**846**	**26.4%**	**504**	**29.8%**

Table 20B: How do you feel about people who use...											
		Inhalants				Non-Prescription Drugs				Other Drugs	
		2006		2008		2006		2008		2008	
Grade		N	%	N	%	N	%	N	%	N	%
5	Approve	100	2.0%	37	1.7%	65	1.3%	32	1.5%	27	1.3%
	Disapprove	3917	79.5%	1740	81.5%	4146	83.6%	1791	83.5%	1818	85.1%
	Don't Know	908	18.4%	357	16.7%	750	15.1%	321	15.0%	291	13.6%
6	Approve	210	4.6%	105	4.4%	129	2.8%	74	3.1%		
	Disapprove	3473	75.7%	1776	75.2%	3726	80.6%	1893	80.1%		
	Don't Know	907	19.8%	481	20.4%	765	16.6%	395	16.7%		
8	Approve	405	8.8%	216	9.4%	347	7.5%	189	8.2%		
	Disapprove	2965	64.6%	1469	63.6%	3255	70.4%	1619	70.0%		
	Don't Know	1218	26.5%	623	27.0%	1021	22.1%	505	21.8%		
10	Approve	263	6.5%	115	6.7%	374	9.2%	152	8.8%		
	Disapprove	**2803**	**69.4%**	**1115**	**65.1%**	2758	67.8%	1120	65.2%		
	Don't Know	**971**	**24.1%**	**484**	**28.2%**	933	23.0%	447	26.0%		
12	Approve	156	4.9%	96	5.7%	246	7.7%	138	8.2%		
	Disapprove	**2441**	**76.4%**	**1189**	**70.4%**	**2370**	**73.8%**	**1155**	**68.4%**		
	Don't Know	**600**	**18.8%**	**403**	**23.9%**	**596**	**18.6%**	**396**	**23.4%**		

Table 20C: How do you feel about people who use...																	
		LSD				Cocaine/Crack				Amphetamines				Barbiturates			
		2006		2008		2006		2008		2006		2008		2006		2008	
Gr		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	Approve	94	2.0%	42	1.8%	102	2.2%	46	2.0%	106	2.3%	47	2.0%	100	2.2%	48	2.0%
	Disapprove	3744	80.7%	1943	82.2%	3913	84.6%	1990	85.0%	3723	80.7%	1898	80.2%	3698	79.9%	1879	79.8%
	Don't Know	800	17.2%	379	16.0%	611	13.2%	306	13.1%	786	17.0%	422	17.8%	831	18.0%	427	18.1%
8	Approve	239	5.2%	132	5.7%	255	5.5%	121	5.3%	256	5.5%	129	5.6%	237	5.1%	118	5.1%
	Disapprove	3391	73.2%	1671	72.2%	3538	76.6%	1748	76.0%	3329	72.1%	1663	71.6%	3353	72.5%	1648	71.4%
	Don't Know	1001	21.6%	512	22.1%	823	17.8%	430	18.7%	1029	22.3%	530	22.8%	1036	22.4%	542	23.5%
10	Approve	318	7.8%	121	7.1%	256	6.3%	88	5.2%	**332**	**8.2%**	**89**	**5.2%**	**312**	**7.7%**	**85**	**5.0%**
	Disapprove	**2891**	**71.0%**	**1157**	**67.5%**	3066	75.4%	1264	74.1%	2792	68.7%	1168	67.7%	2811	69.1%	1168	68.0%
	Don't Know	**860**	**21.1%**	**436**	**25.4%**	746	18.3%	354	20.8%	**938**	**23.1%**	**467**	**27.1%**	**947**	**23.3%**	**464**	**27.0%**
12	Approve	253	7.9%	156	9.2%	215	6.7%	106	6.3%	254	7.9%	111	6.6%	243	7.5%	114	6.7%
	Disapprove	**2386**	**74.2%**	**1153**	**68.1%**	2481	77.3%	1248	74.2%	2330	72.5%	1182	69.9%	2335	72.5%	1183	69.8%
	Don't Know	**578**	**18.0%**	**385**	**22.7%**	515	16.0%	328	19.5%	**628**	**19.6%**	**397**	**23.5%**	**642**	**19.9%**	**397**	**23.4%**

Table 20D: How do you feel about people who use…																
		Tranquilizers				Club Drugs				Heroin				Steroids			
		2006		2008		2006		2008		2006		2008		2006		2008	
Gr		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	Approve	92	2.0%	54	2.3%	98	2.1%	53	2.2%	96	2.1%	45	1.9%	129	2.8%	71	3.0%
	Disapprove	3738	80.9%	1876	79.7%	3776	81.5%	1914	81.1%	3801	82.5%	1963	83.6%	3756	81.3%	1910	81.3%
	Don't Know	790	17.1%	423	18.0%	757	16.3%	393	16.7%	709	15.4%	340	14.5%	734	15.9%	369	15.7%
8	Approve	260	5.6%	144	6.3%	293	6.3%	151	6.5%	239	5.2%	116	5.0%	267	5.8%	140	6.1%
	Disapprove	3375	72.9%	1628	70.8%	3362	72.6%	1652	71.6%	3512	76.4%	1752	76.2%	3343	72.4%	1668	72.5%
	Don't Know	992	21.4%	529	23.0%	973	21.0%	503	21.8%	846	18.4%	432	18.8%	1010	21.9%	492	21.4%
10	Approve	375	9.2%	137	8.0%	357	8.8%	121	7.0%	228	5.6%	70	4.1%	282	6.9%	95	5.5%
	Disapprove	2791	68.5%	1129	65.9%	2840	69.8%	1169	68.0%	3095	76.6%	1290	75.4%	2871	70.6%	1181	68.9%
	Don't Know	**906**	**22.2%**	**448**	**26.1%**	**871**	**21.4%**	**430**	**25.0%**	715	17.7%	350	20.5%	911	22.4%	437	25.5%
12	Approve	300	9.3%	144	8.5%	292	9.1%	145	8.6%	142	4.4%	81	4.8%	201	6.2%	109	6.5%
	Disapprove	2288	71.1%	1150	68.1%	**2332**	**72.6%**	**1168**	**69.0%**	**2615**	**81.6%**	**1303**	**77.6%**	**2414**	**75.0%**	**1203**	**71.5%**
	Don't Know	**630**	**19.6%**	**395**	**23.4%**	**586**	**18.3%**	**379**	**22.4%**	**449**	**14.0%**	**296**	**17.6%**	**603**	**18.7%**	**371**	**22.0%**

REPORTED SUBSTANCE USE PREVALENCE BY STUDENTS' APPROVAL OF THOSE WHO USE SUBSTANCES

Analyses presented in Tables 21A and 21B examine differences in approval ratings based upon student reports of having used each substance[18]. Similar to findings presented earlier with regard to ease of access, students report vastly different approval ratings based upon whether or not they had reported using each substance. Students who report never having used a substance in their lifetime are much less likely to approve of people who use the substance. Approval ratings for these students are almost always below 10% across all grades for all substances with the exception of 12% approval by 12th-grade students with regard to those who use alcohol.

Patterns of approval also vary among those who report having used a substance in the past 30 days compared to those who report having used a substance in their lifetime. These analyses are intriguing in that students who report having used a substance had to essentially disapprove of themselves. Those whose use was at some point in their lifetime were more likely to do so than those who reported having recently used the substance. It can be the case that some students had experimented with a substance at some point yet have not done so recently and do not identify with people who use the substance, which increases the likelihood that they will disapprove of people who use the substance.

We also see a development shift among those who report having used each substance recently. With increasing age, students who have recently used a substance are less likely to disapprove of those who do so. Among students who report having recently used alcohol or marijuana, disapproval ratings drop below 5% from 8th-grade onward, whereas they had been above 20% for this group in 5th and 6th-grades. Similarly, disapproval of those who use tobacco drops below 10% from 8th-grade onward among those who report have recently used tobacco. It is possible that older students, who have had more experience with substance use, begin to identify more with people who use substances and are therefore less likely to disapprove of themselves.

Without longitudinal data there is no way to tell the degree to which perceptions influence future substance use. However, these data do clearly indicate that reported perceptions vary considerably based upon whether or not a

[18] Patterns of results were highly similar across all substances. The highest prevalence substances are included in Tables 21A and 21B. For the sake of parsimony, tables for the remaining substances were excluded.

student reports having used a substance, and that perceptions become increasingly uniform among older students who report having recently used a substance.

Table 21A: Students' approval ratings based upon whether they reported having used the substance

Grade		Tobacco-Lifetime				Tobacco-Recent				Alcohol-Lifetime				Alcohol-Recent			
		Yes		No		Yes		No		Yes		No		Yes		No	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
5	Approve	8	20.5%	44	2.2%	5	33.3%	47	2.3%	16	19.8%	24	1.2%	11	37.9%	30	1.5%
	Disapprove	19	48.7%	1,687	83.6%	4	26.7%	1,703	83.2%	49	60.5%	1,678	85.0%	13	44.8%	1,715	84.6%
	Don't know	12	30.8%	288	14.3%	6	40.0%	296	14.5%	16	19.8%	272	13.8%	5	17.2%	283	14.0%
6	Approve	35	29.2%	84	4.3%	15	37.5%	110	5.3%	60	33.7%	62	3.3%	38	46.3%	88	4.4%
	Disapprove	44	36.7%	1,499	76.5%	8	20.0%	1,540	74.8%	58	32.6%	1,512	79.3%	17	20.7%	1,552	77.3%
	Don't know	41	34.2%	377	19.2%	17	42.5%	408	19.8%	60	33.7%	332	17.4%	27	32.9%	369	18.4%
8	Approve	123	34.9%	130	7.7%	132	59.5%	188	9.8%	270	41.7%	95	6.8%	233	64.7%	197	11.1%
	Disapprove	88	25.0%	1,171	69.0%	22	9.9%	1,246	64.9%	100	15.4%	941	66.9%	18	5.0%	1,028	57.8%
	Don't know	141	40.1%	397	23.4%	68	30.6%	486	25.3%	278	42.9%	370	26.3%	109	30.3%	553	31.1%
10	Approve	124	33.5%	66	6.4%	172	58.3%	128	10.0%	323	42.6%	51	7.8%	314	59.8%	160	15.4%
	Disapprove	95	25.7%	676	65.2%	24	8.1%	762	59.7%	95	12.5%	356	54.5%	22	4.2%	433	41.7%
	Don't know	151	40.8%	295	28.4%	99	33.6%	387	30.3%	341	44.9%	246	37.7%	189	36.0%	446	42.9%
12	Approve	128	27.5%	70	8.9%	292	60.3%	135	12.2%	294	39.4%	55	12.0%	467	62.4%	168	20.0%
	Disapprove	151	32.5%	489	62.1%	35	7.2%	629	56.8%	99	13.3%	235	51.2%	34	4.5%	310	36.8%
	Don't know	186	40.0%	228	29.0%	157	32.4%	343	31.0%	354	47.4%	169	36.8%	247	33.0%	364	43.2%

Table 21B: Students' approval ratings based upon whether they reported having used the substance

Grade		Inhalants-Lifetime				Inhalants-Recent				Marijuana-Lifetime				Marijuana-Recent			
		Yes		No		Yes		No		Yes		No		Yes		No	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
5	Approve	12	19.7%	18	0.9%	11	34.4%	23	1.1%	2	28.6%	23	1.1%	0	0.0%	25	1.2%
	Disapprove	24	39.3%	1,651	83.6%	10	31.3%	1,666	82.9%	4	57.1%	1,804	88.1%	3	75.0%	1,805	88.0%
	Don't know	25	41.0%	306	15.5%	11	34.4%	320	15.9%	1	14.3%	220	10.7%	1	25.0%	220	10.7%
6	Approve	44	31.4%	36	1.9%	42	40.4%	46	2.3%	22	48.9%	47	2.3%	15	57.7%	58	2.8%
	Disapprove	47	33.6%	1,525	79.6%	29	27.9%	1,544	78.6%	12	26.7%	1,730	84.7%	5	19.2%	1,735	84.1%
	Don't know	49	35.0%	356	18.6%	33	31.7%	374	19.0%	11	24.4%	265	13.0%	6	23.1%	271	13.1%
8	Approve	99	33.9%	78	4.3%	74	48.7%	119	6.1%	115	52.0%	132	7.2%	134	70.9%	176	9.1%
	Disapprove	60	20.5%	1,306	72.8%	14	9.2%	1,352	69.1%	23	10.4%	1,348	73.9%	8	4.2%	1,368	70.5%
	Don't know	133	45.5%	410	22.9%	64	42.1%	487	24.9%	83	37.6%	344	18.9%	47	24.9%	396	20.4%
10	Approve	28	26.2%	60	4.2%	15	38.5%	81	5.3%	166	47.3%	84	8.2%	235	70.1%	164	13.4%
	Disapprove	36	33.6%	1,002	69.6%	8	20.5%	1,032	68.1%	39	11.1%	653	63.6%	9	2.7%	688	56.3%
	Don't know	43	40.2%	377	26.2%	16	41.0%	402	26.5%	146	41.6%	289	28.2%	91	27.2%	370	30.3%
12	Approve	25	21.6%	50	3.5%	19	63.3%	63	4.1%	197	42.2%	75	9.6%	353	76.6%	195	17.4%
	Disapprove	54	46.6%	1,079	74.6%	5	16.7%	1,134	73.3%	89	19.1%	468	60.2%	18	3.9%	553	49.5%
	Don't know	37	31.9%	318	22.0%	6	20.0%	350	22.6%	181	38.8%	235	30.2%	90	19.5%	370	33.1%

HOW MUCH DO YOU THINK PEOPLE RISK HARMING THEMSELVES (PHYSICALLY OR IN OTHER WAYS) IF THEY USE...

Results presented in Tables 22A-22D examine students' reports of the degree to which they believe people risk harming themselves by using each substance. Results indicate a shift from 2006 to 2008 in the degree to which students at lower grade levels believe that people risk harming themselves through use of several substances. Students in grades 5, 6, and 8 are more likely in 2008 to report that tobacco is a 'great risk' and are less likely to report that tobacco is 'no risk' or 'some risk' compared to students at these grade levels in 2006. Similar patterns are found across almost all substances through 8th-grade with the exception of marijuana. Differences from 2006 to 2008 in 8th-grade students' report of risk associated with marijuana were not significant. At the 12th-grade level, students were more likely to report that marijuana poses 'no risk' and less likely to report that marijuana poses a 'great risk' in 2008 relative to their counterparts in 2006. In addition, 10th-grade students were more likely in 2008 to report that cocaine poses a 'great risk'. Otherwise, perceptions of risk have remained the same at the high school level from 2006 to 2008.

These results suggest that district efforts to educate students at the lower grade levels concerning potential dangers associated with substance use may have altered students' perceptions. While a more focused program evaluation would be a much better way of assessing any possible program effects, these results for students at the lower grade levels are promising. In contrast, 12th-grade student reports of increases in the perception that marijuana poses 'no risk' represents a less promising finding, particularly in light of data from this survey suggesting that marijuana use may be increasing and is reported to be easy to obtain among high school students using marijuana who are enrolled in Pinellas schools.

22A: How much do you think people risk harming themselves (physically or in other ways) if they use...

		Tobacco				Alcohol				Marijuana			
		2006		2008		2006		2008		2006		2008	
Grade		N	%	N	%	N	%	N	%	N	%	N	%
5	No Risk	**398**	**8.0%**	**115**	**5.4%**	**428**	**8.6%**	**140**	**6.6%**	**402**	**8.1%**	**103**	**4.9%**
	Some Risk	**1387**	**27.8%**	**364**	**17.1%**	**1354**	**27.2%**	**493**	**23.2%**	489	9.9%	173	8.2%
	Great Risk	**3205**	**64.2%**	**1651**	**77.5%**	**3198**	**64.2%**	**1491**	**70.2%**	**4069**	**82.0%**	**1844**	**87.0%**
6	No Risk	**319**	**7.0%**	**91**	**3.9%**	**340**	**7.5%**	**125**	**5.4%**	**302**	**6.6%**	**106**	**4.6%**
	Some Risk	**1267**	**27.8%**	**549**	**23.7%**	1266	27.8%	647	28.1%	**510**	**11.2%**	**205**	**8.9%**
	Great Risk	**2975**	**65.2%**	**1672**	**72.3%**	2941	64.7%	1529	66.4%	**3747**	**82.2%**	**1992**	**86.5%**
8	No Risk	**353**	**7.7%**	**100**	**4.4%**	**450**	**9.9%**	**177**	**7.7%**	463	10.2%	201	8.8%
	Some Risk	**1710**	**37.5%**	**728**	**31.8%**	2022	44.3%	978	42.8%	1126	24.7%	524	23.0%
	Great Risk	**2502**	**54.8%**	**1460**	**63.8%**	**2091**	**45.8%**	**1130**	**49.5%**	2964	65.1%	1549	68.1%
10	No Risk	349	8.7%	132	7.8%	402	10.0%	172	10.1%	670	16.7%	328	19.3%
	Some Risk	1607	39.8%	646	38.0%	2138	53.0%	849	49.9%	1457	36.2%	599	35.3%
	Great Risk	2078	51.5%	923	54.3%	1491	37.0%	679	39.9%	1893	47.1%	769	45.3%
12	No Risk	276	8.6%	139	8.3%	261	8.2%	153	9.2%	**569**	**17.9%**	**390**	**23.4%**
	Some Risk	1282	40.2%	697	41.7%	1820	57.0%	910	54.5%	1402	44.0%	709	42.5%
	Great Risk	1633	51.2%	837	50.0%	1110	34.8%	608	36.4%	**1214**	**38.1%**	**569**	**34.1%**

22B: How much do you think people risk harming themselves (physically or in other ways) if they use...											
		Inhalants				Non-Prescription Drugs				Other Drugs	
		2006		2008		2006		2008		2008	
Grade		N	%	N	%	N	%	N	%	N	%
5	No Risk	**490**	**10.0%**	**155**	**7.4%**	**450**	**9.1%**	**140**	**6.7%**	114	5.4%
	Some Risk	**1336**	**27.3%**	**446**	**21.3%**	943	19.1%	354	16.8%	260	12.3%
	Great Risk	**3064**	**62.7%**	**1491**	**71.3%**	**3537**	**71.7%**	**1610**	**76.5%**	1740	82.3%
6	No Risk	436	9.6%	177	7.8%	**349**	**7.8%**	**114**	**5.1%**		
	Some Risk	**1299**	**28.6%**	**580**	**25.5%**	**878**	**19.5%**	**370**	**16.4%**		
	Great Risk	**2806**	**61.8%**	**1515**	**66.7%**	**3274**	**72.7%**	**1772**	**78.5%**		
8	No Risk	**480**	**10.5%**	**178**	**7.9%**	376	8.3%	159	7.0%		
	Some Risk	1520	33.4%	700	31.1%	1232	27.2%	557	24.6%		
	Great Risk	**2551**	**56.1%**	**1375**	**61.0%**	**2919**	**64.5%**	**1551**	**68.4%**		
10	No Risk	323	8.0%	129	7.7%	300	7.5%	126	7.5%		
	Some Risk	1300	32.3%	490	29.2%	1171	29.2%	466	27.9%		
	Great Risk	2396	59.6%	1057	63.1%	2533	63.3%	1080	64.6%		
12	No Risk	193	6.1%	88	5.3%	198	6.2%	104	6.3%		
	Some Risk	870	27.3%	429	26.0%	831	26.1%	391	23.7%		
	Great Risk	2118	66.6%	1132	68.6%	2149	67.6%	1155	70.0%		

22C: How much do you think people risk harming themselves (physically or in other ways) if they use…																
		LSD				Cocaine/Crack				Amphetamines				Barbiturates		
		2006		2008		2006		2008		2006		2008		2006		2008	
Gr		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	No Risk	**291**	**6.4%**	**85**	**3.7%**	**282**	**6.2%**	**71**	**3.2%**	**290**	**6.4%**	**86**	**3.8%**	**295**	**6.5%**	**83**	**3.7%**
	Some Risk	**616**	**13.6%**	**246**	**10.8%**	416	9.2%	178	7.9%	**738**	**16.3%**	**303**	**13.4%**	**718**	**15.8%**	**292**	**13.1%**
	Great Risk	**3623**	**80.0%**	**1948**	**85.5%**	**3835**	**84.6%**	**1999**	**88.9%**	**3504**	**77.3%**	**1871**	**82.8%**	**3528**	**77.7%**	**1862**	**83.2%**
8	No Risk	**253**	**5.6%**	**69**	**3.0%**	**245**	**5.4%**	**62**	**2.8%**	**265**	**5.8%**	**75**	**3.3%**	**269**	**5.9%**	**71**	**3.2%**
	Some Risk	765	16.8%	362	16.0%	**637**	**14.0%**	**261**	**11.7%**	**979**	**21.5%**	**413**	**18.3%**	**984**	**21.6%**	**419**	**18.7%**
	Great Risk	**3530**	**77.6%**	**1837**	**81.0%**	**3675**	**80.6%**	**1912**	**85.5%**	**3301**	**72.6%**	**1771**	**78.4%**	**3305**	**72.5%**	**1756**	**78.2%**
10	No Risk	230	5.7%	71	4.2%	201	5.0%	64	3.8%	238	5.9%	74	4.4%	**247**	**6.1%**	**72**	**4.3%**
	Some Risk	653	16.3%	280	16.6%	563	14.0%	201	12.1%	933	23.2%	378	22.5%	956	23.7%	375	22.4%
	Great Risk	3135	78.0%	1334	79.2%	**3256**	**81.0%**	**1401**	**84.1%**	2851	70.9%	1228	73.1%	2825	70.1%	1228	73.3%
12	No Risk	137	4.3%	81	4.9%	132	4.1%	65	3.9%	153	4.8%	78	4.7%	155	4.9%	74	4.5%
	Some Risk	488	15.3%	261	15.7%	390	12.3%	183	11.1%	647	20.3%	312	18.8%	686	21.5%	310	18.8%
	Great Risk	2557	80.4%	1321	79.4%	2659	83.6%	1400	85.0%	2384	74.9%	1268	76.5%	2348	73.6%	1267	76.7%

22D: How much do you think people risk harming themselves (physically or in other ways) if they use…																
		Tranquilizers				Club Drugs				Heroin				Steroids			
		2006		2008		2006		2008		2006		2008		2006		2008	
Gr		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	No Risk	**299**	**6.6%**	**86**	**3.8%**	**299**	**6.6%**	**84**	**3.7%**	**290**	**6.4%**	**74**	**3.3%**	**315**	**7.0%**	**92**	**4.1%**
	Some Risk	644	14.2%	283	12.5%	**644**	**14.2%**	**259**	**11.4%**	**497**	**11.0%**	**196**	**8.7%**	751	16.6%	336	14.8%
	Great Risk	**3594**	**79.2%**	**1887**	**83.6%**	**3595**	**79.2%**	**1920**	**84.8%**	**3712**	**82.5%**	**1988**	**88.0%**	**3449**	**76.4%**	**1837**	**81.1%**
8	No Risk	**267**	**5.9%**	**81**	**3.6%**	**263**	**5.8%**	**80**	**3.6%**	**244**	**5.4%**	**66**	**2.9%**	**290**	**6.4%**	**79**	**3.5%**
	Some Risk	893	19.6%	393	17.4%	811	17.8%	367	16.3%	617	13.6%	280	12.5%	**1095**	**24.1%**	**447**	**19.9%**
	Great Risk	**3400**	**74.6%**	**1780**	**79.0%**	**3489**	**76.5%**	**1806**	**80.2%**	**3667**	**81.0%**	**1902**	**84.6%**	**3157**	**69.5%**	**1723**	**76.6%**
10	No Risk	256	6.4%	84	5.0%	224	5.6%	82	4.9%	189	4.7%	65	3.9%	246	6.1%	81	4.8%
	Some Risk	882	21.9%	346	20.6%	704	17.5%	278	16.6%	524	13.1%	203	12.1%	1054	26.3%	412	24.6%
	Great Risk	2889	71.7%	1249	74.4%	3101	77.0%	1319	78.6%	3289	82.2%	1411	84.0%	2714	67.6%	1182	70.6%
12	No Risk	157	4.9%	75	4.5%	126	4.0%	75	4.5%	118	3.7%	60	3.6%	137	4.3%	75	4.5%
	Some Risk	647	20.3%	316	19.1%	469	14.7%	231	14.0%	339	10.7%	163	9.9%	741	23.3%	383	23.1%
	Great Risk	2383	74.8%	1264	76.4%	2590	81.3%	1344	81.5%	2720	85.6%	1426	86.5%	2302	72.4%	1197	72.3%

REPORTED SUBSTANCE USE PREVALENCE BASED UPON STUDENTS' ASSESSMENT OF RISK

Results presented in Tables 23A-23M examine student reports of the risk associated with use of each substance based upon whether they reported having used the substance. Those who report having used a substance are much more likely to report that there is no risk or some risk associated with use. Students who report having not used each substance are much more likely to report that there is a great risk in doing so. These findings are similar to those reported earlier in which students who used each substance were more likely to report that the substance is easy to obtain and approve of those who use the substance. Findings in Tables 23A-23M are also similar to prior analyses in that those who have recently used each substance are more likely to report that there is no risk associated with use of the substance relative to those who report lifetime use.

These data differ from those reported with respect to ease and approval of drug use in that perceptions do not uniformly become more positive toward drug use among those who use them as grade level increases. Earlier analyses had indicated that availability and approval rose uniformly with grade level across substances. With respect to risk in Tables 23A-23M there is variability in the manner that reports change across grade levels. Perceptions of the dangers of cigarette use remain fairly constant across grade levels. Only 13.2% of 6th-grade students who have recently used tobacco report that there is *no risk* in doing so. This percentage is about the same at 11% among 12th-grade students. In contrast, perceptions of risks associated with alcohol steadily *increase* with grade level. Among 6th-grade students who had recently used alcohol, 20.8% had reported that there is *no risk*. This percentage drops to 11.2% among students who have recently used alcohol in 12th-grade.

A possible reason for this effect concerns differences in prevalence of alcohol use with increasing age. By 12th-grade, alcohol use has become more prevalent, whereas students drinking alcohol at the sixth-grade level are more likely to have broader behavioral difficulties. The more normative 12th-grade group is likely to have clearer perceptions of reality than the more behaviorally challenged 6th-grade group. Experience with drinking and driving among older students can also enhance perceptions of the risks associated with alcohol use.

Perceptions concerning risks associated with marijuana follow an opposite pattern. By 12th-grade, 48% of those who had recently used marijuana report *no risk* in doing so, and only 7.9% report that there is a *great risk* in doing

so. Among 6th-grade students who had recently used marijuana, only 23.1% report that there is *no risk*, and 46.2% had reported that there is a *great risk* in doing so.

Among those reporting recent use, marijuana stands apart from all other substances in the low percentage of students who report that using it represents a great risk. The 7.9% of students who have recently used marijuana and report that it represents a great risk stands in contrast to rates that are generally 30% or more for all other substances. In effect, one third or more of the students who have recently used any substance except marijuana are doing so despite the belief that the substance represents a potentially great risk to their health.

23A: Assessment of Risk based upon Reports of Substance Use								
			Tobacco Risk					
			No risk		Some risk		Great risk	
Grade		Use	N	%	N	%	N	%
5	Tobacco-R	No	101	5.0%	346	17.0%	1583	78.0%
		Yes	3	20.0%	7	46.7%	5	33.3%
	Tobacco-L	No	99	4.9%	340	17.0%	1564	78.1%
		Yes	4	10.3%	13	33.3%	22	56.4%
6	Tobacco-R	No	68	3.4%	451	22.4%	1492	74.2%
		Yes	5	13.2%	18	47.4%	15	39.5%
	Tobacco-L	No	60	3.1%	415	21.6%	1443	75.2%
		Yes	9	7.8%	52	45.2%	54	47.0%
8	Tobacco-R	No	50	2.6%	545	28.7%	1302	68.6%
		Yes	35	16.0%	124	56.6%	60	27.4%
	Tobacco-L	No	35	2.1%	436	26.0%	1206	71.9%
		Yes	29	8.3%	183	52.6%	136	39.1%
10	Tobacco-R	No	61	4.8%	423	33.6%	776	61.6%
		Yes	42	14.2%	166	56.3%	87	29.5%
	Tobacco-L	No	40	3.9%	320	31.2%	665	64.9%
		Yes	36	9.9%	187	51.5%	140	38.6%
12	Tobacco-R	No	67	6.1%	377	34.4%	652	59.5%
		Yes	53	11.0%	285	59.4%	142	29.6%
	Tobacco-L	No	46	5.9%	232	29.8%	501	64.3%
		Yes	32	7.0%	240	52.2%	188	40.9%

23B: Assessment of Risk based upon Reports of Substance Use								
			Alcohol Risk					
			No risk		Some risk		Great risk	
Grade		Use	N	%	N	%	N	%
5	Alcohol-R	No	115	5.7%	465	23.1%	1430	71.1%
		Yes	11	37.9%	10	34.5%	8	27.6%
	Alcohol-L	No	111	5.7%	441	22.6%	1403	71.8%
		Yes	14	17.1%	34	41.5%	34	41.5%
6	Alcohol-R	No	84	4.3%	528	27.0%	1347	68.8%
		Yes	16	20.8%	38	49.4%	23	29.9%
	Alcohol-L	No	74	4.0%	483	26.0%	1303	70.1%
		Yes	24	14.3%	77	45.8%	67	39.9%
8	Alcohol-R	No	89	5.1%	687	39.2%	978	55.8%
		Yes	67	18.7%	222	61.8%	70	19.5%
	Alcohol-L	No	53	3.8%	479	34.6%	854	61.6%
		Yes	79	12.2%	389	60.3%	177	27.4%
10	Alcohol-R	No	61	5.9%	454	43.9%	518	50.1%
		Yes	81	15.5%	334	64.1%	106	20.3%
	Alcohol-L	No	37	5.7%	234	35.9%	380	58.4%
		Yes	78	10.4%	458	61.0%	215	28.6%
12	Alcohol-R	No	50	6.0%	380	45.5%	405	48.5%
		Yes	83	11.2%	491	66.5%	164	22.2%
	Alcohol-L	No	31	6.8%	168	36.9%	256	56.3%
		Yes	43	5.8%	456	61.7%	240	32.5%

23C: Assessment of Risk based upon Reports of Substance Use								
			Marijuana Risk					
			No risk		Some risk		Great risk	
Grade		Use	N	%	N	%	N	%
5	Marijuana-R	No	94	4.6%	165	8.1%	1771	87.2%
		Yes	1	25.0%	0	0.0%	3	75.0%
	Marijuana-L	No	94	4.6%	163	8.0%	1770	87.3%
		Yes	1	14.3%	2	28.6%	4	57.1%
6	Marijuana-R	No	81	4.0%	167	8.3%	1766	87.7%
		Yes	6	23.1%	8	30.8%	12	46.2%
	Marijuana-L	No	73	3.7%	163	8.2%	1757	88.2%
		Yes	12	27.3%	12	27.3%	20	45.5%
8	Marijuana-R	No	101	5.3%	397	20.8%	1413	73.9%
		Yes	73	39.2%	83	44.6%	30	16.1%
	Marijuana-L	No	79	4.4%	340	18.9%	1376	76.7%
		Yes	50	22.8%	109	49.8%	60	27.4%
10	Marijuana-R	No	126	10.4%	416	34.3%	672	55.4%
		Yes	151	45.2%	143	42.8%	40	12.0%
	Marijuana-L	No	75	7.4%	323	31.7%	620	60.9%
		Yes	98	27.9%	176	50.1%	77	21.9%
12	Marijuana-R	No	142	12.8%	473	42.7%	494	44.5%
		Yes	222	48.7%	198	43.4%	36	7.9%
	Marijuana-L	No	69	8.9%	282	36.6%	420	54.5%
		Yes	115	24.9%	259	56.1%	88	19.0%

23D: Assessment of Risk based upon Reports of Substance Use								
			Inhalant Risk					
			No risk		Some risk		Great risk	
Grade		Use	N	%	N	%	N	%
5	Inhalants-R	No	132	6.7%	423	21.4%	1422	71.9%
		Yes	11	34.4%	12	37.5%	9	28.1%
	Inhalants-L	No	127	6.5%	405	20.9%	1410	72.6%
		Yes	12	19.4%	30	48.4%	20	32.3%
6	Inhalants-R	No	108	5.7%	476	25.1%	1311	69.2%
		Yes	34	33.3%	32	31.4%	36	35.3%
	Inhalants-L	No	94	5.1%	452	24.4%	1305	70.5%
		Yes	42	31.3%	51	38.1%	41	30.6%
8	Inhalants-R	No	127	6.6%	557	29.1%	1227	64.2%
		Yes	34	22.4%	84	55.3%	34	22.4%
	Inhalants-L	No	97	5.5%	488	27.8%	1169	66.6%
		Yes	58	20.2%	144	50.2%	85	29.6%
10	Inhalants-R	No	91	6.1%	428	28.9%	963	65.0%
		Yes	11	27.5%	18	45.0%	11	27.5%
	Inhalants-L	No	72	5.1%	397	28.2%	937	66.6%
		Yes	25	23.4%	48	44.9%	34	31.8%
12	Inhalants-R	No	65	4.3%	388	25.6%	1064	70.1%
		Yes	8	27.6%	17	58.6%	4	13.8%
	Inhalants-L	No	61	4.3%	349	24.6%	1009	71.1%
		Yes	6	5.3%	54	47.4%	54	47.4%

23E: Assessment of Risk based upon Reports of Substance Use								
			Non-Rx Drug Risk					
			No risk		Some risk		Great risk	
Grade		Use	N	%	N	%	N	%
5	Non-Rx Drugs-R	No	119	6.0%	340	17.0%	1537	77.0%
		Yes	9	39.1%	8	34.8%	6	26.1%
	Non-Rx Drugs-L	No	112	5.7%	332	16.8%	1534	77.6%
		Yes	12	34.3%	16	45.7%	7	20.0%
6	Non-Rx Drugs-R	No	83	4.2%	311	15.7%	1583	80.1%
		Yes	8	42.1%	5	26.3%	6	31.6%
	Non-Rx Drugs-L	No	80	4.1%	310	15.8%	1576	80.2%
		Yes	9	37.5%	5	20.8%	10	41.7%
8	Non-Rx Drugs-R	No	102	5.1%	470	23.6%	1420	71.3%
		Yes	39	40.2%	36	37.1%	22	22.7%
	Non-Rx Drugs-L	No	88	4.5%	447	23.0%	1408	72.5%
		Yes	39	30.7%	55	43.3%	33	26.0%
10	Non-Rx Drugs-R	No	70	4.8%	396	27.3%	985	67.9%
		Yes	25	30.1%	38	45.8%	20	24.1%
	Non-Rx Drugs-L	No	65	4.7%	364	26.2%	958	69.1%
		Yes	25	19.2%	63	48.5%	42	32.3%
12	Non-Rx Drugs-R	No	66	4.5%	330	22.4%	1077	73.1%
		Yes	23	28.0%	34	41.5%	25	30.5%
	Non-Rx Drugs-L	No	56	4.1%	284	21.0%	1012	74.9%
		Yes	20	11.9%	70	41.7%	78	46.4%

23F: Assessment of Risk based upon Reports of Substance Use								
			LSD Risk					
			No risk		Some risk		Great risk	
Grade		Use	N	%	N	%	N	%
6	LSD-R	No	59	2.9%	207	10.3%	1738	86.7%
		Yes	2	33.3%	2	33.3%	2	33.3%
	LSD-L	No	60	3.0%	207	10.3%	1747	86.7%
		Yes	2	28.6%	2	28.6%	3	42.9%
8	LSD-R	No	52	2.5%	300	14.6%	1703	82.9%
		Yes	2	5.7%	24	68.6%	9	25.7%
	LSD-L	No	50	2.5%	288	14.1%	1698	83.4%
		Yes	5	10.2%	32	65.3%	12	24.5%
10	LSD-R	No	37	2.5%	234	15.7%	1224	81.9%
		Yes	12	30.0%	16	40.0%	12	30.0%
	LSD-L	No	31	2.1%	221	15.1%	1213	82.8%
		Yes	15	22.7%	26	39.4%	25	37.9%
12	LSD-R	No	46	3.1%	212	14.1%	1245	82.8%
		Yes	18	29.5%	26	42.6%	17	27.9%
	LSD-L	No	38	2.6%	188	13.0%	1222	84.4%
		Yes	19	18.6%	44	43.1%	39	38.2%

23G: Assessment of Risk based upon Reports of Substance Use								
			Cocaine Risk					
			No risk		Some risk		Great risk	
Grade		Use	N	%	N	%	N	%
6	Cocaine-R	No	50	2.5%	147	7.4%	1777	90.0%
		Yes	2	50.0%	2	50.0%	0	0.0%
	Cocaine-L	No	51	2.6%	146	7.4%	1773	90.0%
		Yes	2	25.0%	3	37.5%	3	37.5%
8	Cocaine-R	No	41	2.0%	210	10.4%	1768	87.6%
		Yes	8	24.2%	12	36.4%	13	39.4%
	Cocaine-L	No	36	1.8%	203	10.2%	1752	88.0%
		Yes	8	16.3%	13	26.5%	28	57.1%
10	Cocaine-R	No	35	2.3%	167	11.2%	1291	86.5%
		Yes	5	17.9%	13	46.4%	10	35.7%
	Cocaine-L	No	31	2.1%	158	10.8%	1269	87.0%
		Yes	7	13.2%	17	32.1%	29	54.7%
12	Cocaine-R	No	37	2.5%	147	9.9%	1307	87.7%
		Yes	12	21.1%	16	28.1%	29	50.9%
	Cocaine-L	No	31	2.2%	131	9.3%	1253	88.6%
		Yes	10	9.5%	27	25.7%	68	64.8%

23H: Assessment of Risk based upon Reports of Substance Use								
			Amphetamine Risk					
			No risk		Some risk		Great risk	
Grade		Use	N	%	N	%	N	%
6	Amphetamines-R	No	64	3.2%	265	13.2%	1675	83.6%
		Yes	0	0.0%	1	33.3%	2	66.7%
	Amphetamines-L	No	64	3.2%	264	13.2%	1674	83.6%
		Yes	0	0.0%	2	40.0%	3	60.0%
8	Amphetamines-R	No	58	2.8%	**360**	**17.5%**	**1637**	**79.7%**
		Yes	3	10.3%	**11**	**37.9%**	**15**	**51.7%**
	Amphetamines-L	No	**56**	**2.7%**	**353**	**17.3%**	**1631**	**80.0%**
		Yes	**6**	**14.6%**	**17**	**41.5%**	**18**	**43.9%**
10	Amphetamines-R	No	**42**	**2.8%**	**320**	**21.5%**	**1128**	**75.7%**
		Yes	**9**	**22.5%**	**21**	**52.5%**	**10**	**25.0%**
	Amphetamines-L	No	**41**	**2.8%**	**309**	**21.0%**	**1123**	**76.2%**
		Yes	**6**	**13.0%**	**24**	**52.2%**	**16**	**34.8%**
12	Amphetamines-R	No	**46**	**3.1%**	**268**	**17.8%**	**1194**	**79.2%**
		Yes	**15**	**28.3%**	**21**	**39.6%**	**17**	**32.1%**
	Amphetamines-L	No	**44**	**3.1%**	**243**	**16.9%**	**1155**	**80.1%**
		Yes	**8**	**9.2%**	**34**	**39.1%**	**45**	**51.7%**

23I: Assessment of Risk based upon Reports of Substance Use								
			Barbiturates Risk					
			No risk		Some risk		Great risk	
Grade		Use	N	%	N	%	N	%
6	Barbiturates-R	No	61	3.1%	253	12.8%	1659	84.1%
		Yes	0	0.0%	1	50.0%	1	50.0%
	Barbiturates-L	No	61	3.1%	249	12.6%	1662	84.3%
		Yes	1	16.7%	2	33.3%	3	50.0%
8	Barbiturates-R	No	**52**	**2.6%**	366	17.9%	**1621**	**79.5%**
		Yes	**4**	**28.6%**	4	28.6%	**6**	**42.9%**
	Barbiturates-L	No	**52**	**2.5%**	**366**	**17.9%**	**1623**	**79.5%**
		Yes	**3**	**15.0%**	**9**	**45.0%**	**8**	**40.0%**
10	Barbiturates-R	No	**41**	**2.7%**	328	21.8%	**1136**	**75.5%**
		Yes	**6**	**30.0%**	9	45.0%	**5**	**25.0%**
	Barbiturates-L	No	**42**	**2.8%**	**321**	**21.4%**	**1135**	**75.8%**
		Yes	**3**	**13.0%**	**13**	**56.5%**	**7**	**30.4%**
12	Barbiturates-R	No	**47**	**3.1%**	**270**	**17.9%**	**1190**	**79.0%**
		Yes	**11**	**32.4%**	**16**	**47.1%**	**7**	**20.6%**
	Barbiturates-L	No	**45**	**3.1%**	**249**	**17.0%**	**1172**	**79.9%**
		Yes	**6**	**9.5%**	**28**	**44.4%**	**29**	**46.0%**

23J: Assessment of Risk based upon Reports of Substance Use								
			Tranquilizers Risk					
			No risk		Some risk		Great risk	
Grade		Use	N	%	N	%	N	%
6	Tranquilizers-R	No	64	3.2%	241	12.1%	1681	84.6%
		Yes	3	75.0%	0	0.0%	1	25.0%
	Tranquilizers-L	No	65	3.3%	239	12.0%	1688	84.7%
		Yes	3	42.9%	2	28.6%	2	28.6%
8	Tranquilizers-R	No	59	2.9%	329	16.3%	1631	80.8%
		Yes	10	19.2%	19	36.5%	23	44.2%
	Tranquilizers-L	No	57	2.8%	319	15.9%	1634	81.3%
		Yes	10	16.4%	29	47.5%	22	36.1%
10	Tranquilizers-R	No	39	2.7%	275	19.0%	1135	78.3%
		Yes	22	25.6%	37	43.0%	27	31.4%
	Tranquilizers-L	No	36	2.6%	253	18.1%	1111	79.4%
		Yes	19	15.8%	53	44.2%	48	40.0%
12	Tranquilizers-R	No	45	3.1%	239	16.6%	1157	80.3%
		Yes	14	13.0%	56	51.9%	38	35.2%
	Tranquilizers-L	No	39	2.9%	197	14.8%	1096	82.3%
		Yes	11	5.9%	79	42.0%	98	52.1%

23K: Assessment of Risk based upon Reports of Substance Use								
			Club Drugs Risk					
			No risk		Some risk		Great risk	
Grade		Use	N	%	N	%	N	%
6	Club Drugs-R	No	63	3.2%	218	10.9%	1717	85.9%
		Yes	1	14.3%	3	42.9%	3	42.9%
	Club Drugs-L	No	63	3.2%	216	10.8%	1713	86.0%
		Yes	0	0.0%	5	41.7%	7	58.3%
8	Club Drugs-R	No	54	2.7%	302	14.9%	1676	82.5%
		Yes	14	29.2%	19	39.6%	15	31.3%
	Club Drugs-L	No	51	2.5%	294	14.6%	1667	82.9%
		Yes	12	20.3%	24	40.7%	23	39.0%
10	Club Drugs-R	No	48	3.2%	230	15.4%	1216	81.4%
		Yes	11	30.6%	12	33.3%	13	36.1%
	Club Drugs-L	No	42	2.9%	219	14.9%	1205	82.2%
		Yes	14	22.6%	20	32.3%	28	45.2%
12	Club Drugs-R	No	43	2.9%	186	12.4%	1271	84.7%
		Yes	14	25.5%	27	49.1%	14	25.5%
	Club Drugs-L	No	37	2.6%	165	11.6%	1216	85.8%
		Yes	14	11.5%	42	34.4%	66	54.1%

23L: Assessment of Risk based upon Reports of Substance Use								
			Heroin Risk					
			No risk		Some risk		Great risk	
Grade		Use	N	%	N	%	N	%
6	Heroin-R	No	56	2.8%	163	8.2%	1775	89.0%
		Yes	1	25.0%	1	25.0%	2	50.0%
	Heroin-L	No	56	2.8%	162	8.1%	1775	89.1%
		Yes	1	16.7%	1	16.7%	4	66.7%
8	Heroin-R	No	46	2.2%	228	11.1%	1771	86.6%
		Yes	7	29.2%	10	41.7%	7	29.2%
	Heroin-L	No	44	2.2%	225	11.1%	1766	86.8%
		Yes	7	24.1%	12	41.4%	10	34.5%
10	Heroin-R	No	36	2.4%	171	11.3%	1313	86.4%
		Yes	5	41.7%	5	41.7%	2	16.7%
	Heroin-L	No	35	2.3%	169	11.1%	1312	86.5%
		Yes	4	26.7%	5	33.3%	6	40.0%
12	Heroin-R	No	36	2.4%	133	8.7%	1356	88.9%
		Yes	10	34.5%	10	34.5%	9	31.0%
	Heroin-L	No	34	2.2%	130	8.6%	1348	89.2%
		Yes	5	17.2%	11	37.9%	13	44.8%

23M: Assessment of Risk based upon Reports of Substance Use								
			Steroid Risk					
			No risk		Some risk		Great risk	
Grade		Use	N	%	N	%	N	%
6	Steroids-R	No	72	3.6%	292	14.6%	1630	81.7%
		Yes	1	20.0%	2	40.0%	2	40.0%
	Steroids-L	No	71	3.6%	290	14.5%	1635	81.9%
		Yes	1	11.1%	3	33.3%	5	55.6%
8	Steroids-R	No	60	2.9%	387	19.0%	1595	78.1%
		Yes	4	16.7%	13	54.2%	7	29.2%
	Steroids-L	No	60	2.9%	385	18.9%	1595	78.2%
		Yes	1	4.0%	14	56.0%	10	40.0%
10	Steroids-R	No	54	3.6%	365	24.1%	1094	72.3%
		Yes	5	35.7%	5	35.7%	4	28.6%
	Steroids-L	No	50	3.3%	361	24.0%	1092	72.7%
		Yes	9	39.1%	7	30.4%	7	30.4%
12	Steroids-R	No	55	3.6%	339	22.1%	1138	74.3%
		Yes	7	31.8%	12	54.5%	3	13.6%
	Steroids-L	No	51	3.4%	338	22.2%	1132	74.4%
		Yes	7	26.9%	12	46.2%	7	26.9%

HOW MUCH PRESSURE DO YOU FEEL FROM YOUR FRIENDS AND SCHOOLMATES TO…

Similar to findings in Tables 22A-22D with regard to perceived risks associated with substance use, results presented in Table 24 are more promising among students at the lower grade levels and less promising among high school students. Student reports of peer pressure to use cigarettes, alcohol, marijuana, and 'other drugs' have declined from 2006 to 2008 among students in 5th, 6th, and 8th-grades with the exception of peer pressure to use marijuana in 8th-grade, which is unchanged. When paired with perceptions of risk described above, these results are promising in that they suggest that changes may be taking place at the lower grade levels in terms of both self and perceived peer attitudes associated with substance use.

In contrast, results suggest an increase in perceived peer pressure to use alcohol and marijuana at the high school level. These data are consistent with findings throughout this survey suggesting that use of alcohol and marijuana, as well as attitudes favorable toward their use, have increased at the high school level from 2006 to 2008.

Table 24: How much pressure do you feel from your friends and schoolmates to…

		Smoke Cigarettes				Use Alcohol				Use Marijuana				Use Other Drugs			
		2006		2008		2006		2008		2006		2008		2006		2008	
Gr		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
5	None	3423	69.7%	1824	85.8%	3419	69.7%	1818	85.8%	3464	70.8%	1850	87.1%	3450	70.6%	1834	86.4%
	Some	403	8.2%	86	4.0%	473	9.6%	82	3.9%	196	4.0%	44	2.1%	272	5.6%	60	2.8%
	A Lot	1083	22.1%	217	10.2%	1013	20.7%	219	10.3%	1234	25.2%	230	10.8%	1166	23.9%	229	10.8%
6	None	3474	77.3%	2044	86.7%	3452	76.9%	2031	86.4%	3520	78.4%	2087	88.8%	3484	77.8%	2060	87.6%
	Some	390	8.7%	154	6.5%	424	9.4%	150	6.4%	211	4.7%	91	3.9%	268	6.0%	108	4.6%
	A Lot	633	14.1%	160	6.8%	614	13.7%	170	7.2%	757	16.9%	173	7.4%	729	16.3%	184	7.8%
8	None	3817	84.7%	2034	87.8%	3547	78.8%	1889	81.6%	3734	83.0%	1962	84.7%	3880	86.3%	2090	90.4%
	Some	463	10.3%	223	9.6%	684	15.2%	299	12.9%	428	9.5%	253	10.9%	322	7.2%	149	6.4%
	A Lot	227	5.0%	60	2.6%	271	6.0%	127	5.5%	339	7.5%	101	4.4%	295	6.6%	72	3.1%
10	None	3503	87.6%	1517	87.6%	2828	71.0%	1199	69.3%	3145	79.0%	1319	76.3%	3503	88.2%	1530	88.6%
	Some	359	9.0%	168	9.7%	874	21.9%	372	21.5%	586	14.7%	297	17.2%	302	7.6%	136	7.9%
	A Lot	135	3.4%	46	2.7%	281	7.1%	158	9.1%	252	6.3%	113	6.5%	166	4.2%	61	3.5%
12	None	2901	91.4%	1535	90.0%	2164	68.2%	1189	69.7%	2538	80.1%	1297	76.1%	2875	90.9%	1520	89.2%
	Some	212	6.7%	133	7.8%	777	24.5%	335	19.6%	470	14.8%	308	18.1%	211	6.7%	133	7.8%
	A Lot	61	1.9%	38	2.2%	230	7.3%	181	10.6%	161	5.1%	100	5.9%	78	2.5%	51	3.0%

REPORTED SUBSTANCE USE PREVALENCE BY REPORTED PEER PRESSURE

Results presented in Tables 25A-25C indicate that students' perceptions of peer pressure are associated with their reports of substance use. Students who report having used cigarettes, alcohol, or marijuana are more likely to report experiencing some or a lot of peer pressure to do so than are those who have not used these substances.

Notably, differences between students regarding recent and lifetime use are either small or do not exist and reports remain fairly constant across grade levels for all groups. These data suggest that some students may be more likely to participate in social networks in which cigarettes, alcohol, and marijuana are used while other students may be less likely to be associated with similar peer networks. Across grade-levels, approximately one-third of the students who use alcohol and marijuana report some peer pressure in favor of doing so. While causality is difficult to determine, these data do indicate that a relationship exists between reports of peer pressure and substance use.

Table 25A: Association between Reported Substance Use and Peer Pressure								
			Pressure to Smoke Cigarettes					
			None		Some		A lot	
Grade		Use	N	%	N	%	N	%
5	Tobacco-R	No	1735	86.1%	77	3.8%	202	10.0%
		Yes	10	66.7%	4	26.7%	1	6.7%
	Tobacco-L	No	1715	86.3%	72	3.6%	200	10.1%
		Yes	27	69.2%	9	23.1%	3	7.7%
6	Tobacco-R	No	1782	87.6%	124	6.1%	129	6.3%
		Yes	27	67.5%	8	20.0%	5	12.5%
	Tobacco-L	No	1707	88.1%	106	5.5%	125	6.4%
		Yes	87	73.1%	26	21.8%	6	5.0%
8	Tobacco-R	No	1715	90.0%	157	8.2%	34	1.8%
		Yes	166	74.4%	45	20.2%	12	5.4%
	Tobacco-L	No	1556	92.5%	102	6.1%	25	1.5%
		Yes	248	70.3%	87	24.6%	18	5.1%
10	Tobacco-R	No	1156	90.5%	104	8.1%	18	1.4%
		Yes	237	79.8%	43	14.5%	17	5.7%
	Tobacco-L	No	947	91.2%	77	7.4%	14	1.3%
		Yes	308	83.2%	52	14.1%	10	2.7%
12	Tobacco-R	No	1031	93.3%	61	5.5%	13	1.2%
		Yes	408	84.1%	60	12.4%	17	3.5%
	Tobacco-L	No	741	94.4%	35	4.5%	9	1.1%
		Yes	410	88.4%	47	10.1%	7	1.5%

Table 25B: Association between Reported Substance Use and Peer Pressure								
			Pressure to Use Alcohol					
			None		Some		A lot	
Grade		Use	N	%	N	%	N	%
5	Alcohol-R	No	1723	86.4%	73	3.7%	199	10.0%
		Yes	16	55.2%	7	24.1%	6	20.7%
	Alcohol-L	No	1680	86.6%	62	3.2%	198	10.2%
		Yes	57	69.5%	18	22.0%	7	8.5%
6	Alcohol-R	No	1745	88.1%	103	5.2%	132	6.7%
		Yes	44	53.0%	27	32.5%	12	14.5%
	Alcohol-L	No	1672	88.9%	85	4.5%	123	6.5%
		Yes	114	64.8%	42	23.9%	20	11.4%
8	Alcohol-R	No	1518	85.9%	191	10.8%	58	3.3%
		Yes	233	64.5%	80	22.2%	48	13.3%
	Alcohol-L	No	1252	89.9%	104	7.5%	37	2.7%
		Yes	439	67.4%	158	24.3%	54	8.3%
10	Alcohol-R	No	768	73.6%	218	20.9%	57	5.5%
		Yes	325	61.3%	128	24.2%	77	14.5%
	Alcohol-L	No	534	81.4%	99	15.1%	23	3.5%
		Yes	462	60.6%	221	29.0%	79	10.4%
12	Alcohol-R	No	639	76.2%	144	17.2%	56	6.7%
		Yes	468	62.5%	168	22.4%	113	15.1%
	Alcohol-L	No	361	79.0%	67	14.7%	29	6.3%
		Yes	486	65.1%	174	23.3%	86	11.5%

Table 25C: Association between Reported Substance Use and Peer Pressure								
			Pressure to Use Marijuana					
			None		Some		A lot	
Grade		Use	N	%	N	%	N	%
5	Marijuana-R	No	1768	87.4%	40	2.0%	215	10.6%
		Yes	1	25.0%	3	75.0%	0	0.0%
	Marijuana-L	No	1766	87.4%	40	2.0%	214	10.6%
		Yes	3	42.9%	3	42.9%	1	14.3%
6	Marijuana-R	No	1821	89.4%	72	3.5%	144	7.1%
		Yes	16	61.5%	6	23.1%	4	15.4%
	Marijuana-L	No	1811	89.8%	65	3.2%	140	6.9%
		Yes	28	63.6%	11	25.0%	5	11.4%
8	Marijuana-R	No	1694	87.5%	180	9.3%	63	3.3%
		Yes	127	67.6%	43	22.9%	18	9.6%
	Marijuana-L	No	1624	89.3%	139	7.6%	55	3.0%
		Yes	133	59.9%	71	32.0%	18	8.1%
10	Marijuana-R	No	971	78.9%	203	16.5%	56	4.6%
		Yes	229	67.8%	68	20.1%	41	12.1%
	Marijuana-L	No	839	81.4%	150	14.5%	42	4.1%
		Yes	237	66.6%	92	25.8%	27	7.6%
12	Marijuana-R	No	879	78.5%	192	17.1%	49	4.4%
		Yes	328	71.0%	94	20.3%	40	8.7%
	Marijuana-L	No	630	81.1%	114	14.7%	33	4.2%
		Yes	321	68.4%	118	25.2%	30	6.4%

Results presented in Table 26 are supportive of the same differential trends noted in Tables 22A-22D and Table 24 where attitudes favorable to prevention are reported to have increased from 2006 to 2008 at the lower grade levels while attitudes that may be associated with higher levels of substance use have increased at the high school level. Students in 5th and 6th-grades are more likely in 2008 to report that it is 'not difficult' to say no if their best friend offered them cigarettes, alcohol, or marijuana. Eighth-grade students are more likely in 2008 to report that it is 'not difficult' to say no when offered cigarettes, while differences for alcohol and marijuana are not significant among 8th-grade students. In contrast, 12th-grade students are less likely in 2008 to report that is 'not difficult' to say no when offered alcohol or marijuana. These trends once again favor increased use of alcohol and marijuana from 2006 to 2008 based upon pressure within students' social contexts.

Overall, the percentage of students who report that it would be 'very difficult' to say no if offered cigarettes, alcohol, or marijuana by their best friend is in the 5% range across substances and grade levels. This suggests that peer pressure from a best friend is not considered a sure means of promoting substance use. However, the number of students indicating that it would be 'somewhat difficult' suggests that some level of peer pressure can be present. The effect of peer pressure can also be difficult to measure in that the pressure may not come from a 'best friend' and may in fact be easier to resist from someone with whom the student has a more established friendship.

Table 26: How difficult would it be to say no if your best friend offered you…													
		Cigarettes				Alcohol				Marijuana			
		2006		2008		2006		2008		2006		2008	
Grade		N	%	N	%	N	%	N	%	N	%	N	%
5	Not Difficult	**3868**	**77.5%**	**1876**	**86.8%**	**3916**	**78.4%**	**1862**	**86.4%**	**4150**	**83.2%**	**1935**	**89.7%**
	Somewhat	**671**	**13.4%**	**159**	**7.4%**	**630**	**12.6%**	**163**	**7.6%**	**340**	**6.8%**	**97**	**4.5%**
	Very Difficult	**454**	**9.1%**	**127**	**5.9%**	**447**	**9.0%**	**130**	**6.0%**	**496**	**9.9%**	**125**	**5.8%**
6	Not Difficult	**3676**	**81.7%**	**2060**	**86.2%**	**3621**	**80.6%**	**2020**	**84.6%**	**3877**	**86.3%**	**2129**	**89.2%**
	Somewhat	**525**	**11.7%**	**223**	**9.3%**	**563**	**12.5%**	**245**	**10.3%**	286	6.4%	135	5.7%
	Very Difficult	**301**	**6.7%**	**108**	**4.5%**	**311**	**6.9%**	**123**	**5.2%**	**332**	**7.4%**	**122**	**5.1%**
8	Not Difficult	**3883**	**86.3%**	**2062**	**88.6%**	3598	80.0%	1888	81.1%	3900	86.7%	2048	88.0%
	Somewhat	433	9.6%	185	7.9%	650	14.5%	315	13.5%	357	7.9%	156	6.7%
	Very Difficult	181	4.0%	81	3.5%	249	5.5%	125	5.4%	241	5.4%	123	5.3%
10	Not Difficult	3681	92.4%	1596	92.3%	3272	82.2%	1442	83.5%	3530	88.8%	1512	87.4%
	Somewhat	190	4.8%	87	5.0%	500	12.6%	200	11.6%	260	6.5%	128	7.4%
	Very Difficult	113	2.8%	47	2.7%	207	5.2%	85	4.9%	185	4.7%	90	5.2%
12	Not Difficult	3018	95.4%	1603	94.2%	**2731**	**86.4%**	**1414**	**83.2%**	**2905**	**92.1%**	**1498**	**88.1%**
	Somewhat	97	3.1%	56	3.3%	324	10.2%	185	10.9%	161	5.1%	115	6.8%
	Very Difficult	48	1.5%	43	2.5%	**106**	**3.4%**	**101**	**5.9%**	**89**	**2.8%**	**87**	**5.1%**

Results presented in Tables 27A-27C indicate that students who use alcohol and marijuana are more likely to report that it is very difficult to say no when offered these substances by their best friend relative to those who do not use these substances. Data indicate that among students who report using cigarettes the relationship between being offered cigarettes by their best friend and smoking cigarettes becomes weaker in high school. Data throughout these tables have suggested that perceptions and attitudes differ with regard to cigarettes relative to alcohol and marijuana. Results suggest that pressure to use alcohol and marijuana are higher than that associated with cigarettes. Prevention efforts may have influenced students' perceptions of cigarettes as well as pressures associated with smoking cigarettes in peer contexts.

Table 27A: Saying No When Offered Cigarettes compared to Reported Use								
			Difficulty Saying No to Cigarettes					
			Not difficult		Somewhat difficult		Very difficult	
Grade		Use	N	%	N	%	N	%
5	Tobacco-R	No	1782	87.0%	149	7.3%	118	5.8%
		Yes	8	53.3%	1	6.7%	6	40.0%
	Tobacco-L	No	1767	87.3%	142	7.0%	114	5.6%
		Yes	22	57.9%	8	21.1%	8	21.1%
6	Tobacco-R	No	1796	87.0%	185	9.0%	83	4.0%
		Yes	20	50.0%	11	27.5%	9	22.5%
	Tobacco-L	No	1732	88.1%	157	8.0%	77	3.9%
		Yes	73	60.8%	36	30.0%	11	9.2%
8	Tobacco-R	No	1739	90.5%	142	7.4%	41	2.1%
		Yes	167	75.6%	24	10.9%	30	13.6%
	Tobacco-L	No	1562	91.9%	104	6.1%	33	1.9%
		Yes	276	78.2%	56	15.9%	21	5.9%
10	Tobacco-R	No	1210	94.5%	53	4.1%	17	1.3%
		Yes	255	85.9%	24	8.1%	18	6.1%
	Tobacco-L	No	988	95.0%	38	3.7%	14	1.3%
		Yes	334	90.3%	30	8.1%	6	1.6%
12	Tobacco-R	No	1079	97.1%	16	1.4%	16	1.4%
		Yes	433	89.5%	31	6.4%	20	4.1%
	Tobacco-L	No	772	97.7%	7	0.9%	11	1.4%
		Yes	444	95.3%	18	3.9%	4	0.9%

Table 27B: Saying No When Offered Alcohol compared to Reported Use								
			Difficulty Saying No to Alcohol					
			Not difficult		Somewhat difficult		Very difficult	
Grade		Use	N	%	N	%	N	%
5	Alcohol-R	No	1761	86.8%	150	7.4%	118	5.8%
		Yes	18	64.3%	3	10.7%	7	25.0%
	Alcohol-L	No	1725	87.4%	138	7.0%	111	5.6%
		Yes	52	64.2%	15	18.5%	14	17.3%
6	Alcohol-R	No	1742	86.3%	186	9.2%	90	4.5%
		Yes	42	51.9%	27	33.3%	12	14.8%
	Alcohol-L	No	1677	87.6%	159	8.3%	79	4.1%
		Yes	103	58.2%	52	29.4%	22	12.4%
8	Alcohol-R	No	1503	84.4%	232	13.0%	46	2.6%
		Yes	247	68.2%	56	15.5%	59	16.3%
	Alcohol-L	No	1230	87.3%	152	10.8%	27	1.9%
		Yes	469	72.2%	128	19.7%	53	8.2%
10	Alcohol-R	No	913	87.5%	107	10.2%	24	2.3%
		Yes	406	76.7%	71	13.4%	52	9.8%
	Alcohol-L	No	597	90.7%	54	8.2%	7	1.1%
		Yes	612	80.3%	104	13.6%	46	6.0%
12	Alcohol-R	No	756	89.6%	66	7.8%	22	2.6%
		Yes	573	76.6%	107	14.3%	68	9.1%
	Alcohol-L	No	425	92.4%	25	5.4%	10	2.2%
		Yes	615	82.1%	99	13.2%	35	4.7%

Table 27C: Saying No When Offered Marijuana compared to Reported Use								
			Difficulty Saying No to Marijuana					
			Not difficult		Somewhat difficult		Very difficult	
Grade		Use	N	%	N	%	N	%
5	Marijuana-R	No	1846	89.8%	90	4.4%	120	5.8%
		Yes	1	25.0%	1	25.0%	2	50.0%
	Marijuana-L	No	1844	89.8%	90	4.4%	119	5.8%
		Yes	3	42.9%	1	14.3%	3	42.9%
6	Marijuana-R	No	1859	89.8%	111	5.4%	101	4.9%
		Yes	15	57.7%	4	15.4%	7	26.9%
	Marijuana-L	No	1844	90.0%	108	5.3%	97	4.7%
		Yes	30	66.7%	6	13.3%	9	20.0%
8	Marijuana-R	No	1778	91.3%	108	5.5%	61	3.1%
		Yes	115	60.5%	29	15.3%	46	24.2%
	Marijuana-L	No	1690	92.3%	92	5.0%	49	2.7%
		Yes	146	66.1%	39	17.6%	36	16.3%
10	Marijuana-R	No	1140	92.5%	68	5.5%	24	1.9%
		Yes	251	74.3%	42	12.4%	45	13.3%
	Marijuana-L	No	964	93.4%	49	4.7%	19	1.8%
		Yes	297	83.2%	42	11.8%	18	5.0%
12	Marijuana-R	No	1055	93.8%	49	4.4%	21	1.9%
		Yes	351	75.8%	53	11.4%	59	12.7%
	Marijuana-L	No	746	95.4%	22	2.8%	14	1.8%
		Yes	406	86.2%	50	10.6%	15	3.2%

STUDENT REPORTS CONCERNING COMMUNITY ATTITUDES

Results presented in Table 28 examine student reports concerning their beliefs regarding community values associated with drinking. Students were asked whether their community believes it is alright for adults to drink alcohol, for students their own age to drink alcohol, and to sell alcohol illegally. Results indicate that reports of community beliefs favorable to adults drinking, students drinking, and selling alcohol illegally each increase as students become older. At the 5th and 6th-grade levels, over 90% of students disagree that their community supports drinking among students their age and selling alcohol illegally. However, by 12th-grade, these percentages decline considerably. Similar declines are seen with regard to community attitudes toward adults drinking. However, disagreement with this behavior may not be as strong because it is legal for adults to drink alcohol.

Results indicate an increase from 6th-grade onward in students' disagreement that their community believes it is alright to sell alcohol illegally. These results suggest that attitudes have shifted somewhat toward views favorable to prevention efforts. That this finding is present in the upper grade levels represents a positive finding in light of results reported earlier in which attitudes favorable to prevention efforts were only reported by students at the lower grade levels.

In contrast, results indicate that less students disagree and more students agree with the statement that their community believes it is alright for adults to drink alcohol. This does not appear to be a positive trend. However, the meaning of this trend is difficult to determine as the question does not indicate whether adults are drinking alcohol excessively or engaging in the legal consumption of moderate amounts of alcohol.

Table 28: What is your level of agreement with the following statements?													
		My community believes that it is alright for adults to drink alcohol				My community believes that it is alright for people my age to drink alcohol				My community believes that it is alright to sell alcohol illegally			
		2006		2008		2006		2008		2006		2008	
Grade		N	%	N	%	N	%	N	%	N	%	N	%
5	Disagree	**2244**	**45.2%**	**860**	**40.7%**	4657	93.9%	2003	93.9%	4550	91.7%	1952	92.5%
	Somewhat Disagree	550	11.1%	272	12.9%	95	1.9%	47	2.2%	113	2.3%	51	2.4%
	Neither Ag/Dis	760	15.3%	354	16.7%	94	1.9%	48	2.3%	146	2.9%	61	2.9%
	Somewhat Agree	669	13.5%	309	14.6%	50	1.0%	21	1.0%	41	0.8%	16	0.8%
	Agree	739	14.9%	320	15.1%	63	1.3%	13	0.6%	110	2.2%	31	1.5%
6	Disagree	**1881**	**42.9%**	**674**	**29.9%**	3814	87.1%	2012	89.1%	**3786**	**86.8%**	**2017**	**90.2%**
	Somewhat Disagree	527	12.0%	310	13.8%	170	3.9%	79	3.5%	149	3.4%	57	2.5%
	Neither Ag/Dis	755	17.2%	420	18.7%	209	4.8%	99	4.4%	244	5.6%	101	4.5%
	Somewhat Agree	**543**	**12.4%**	**377**	**16.7%**	80	1.8%	30	1.3%	54	1.2%	19	0.8%
	Agree	**675**	**15.4%**	**471**	**20.9%**	105	2.4%	37	1.6%	**130**	**3.0%**	**42**	**1.9%**
8	Disagree	**1231**	**27.8%**	**361**	**15.9%**	3078	69.6%	1552	68.5%	**3242**	**73.6%**	**1744**	**77.5%**
	Somewhat Disagree	449	10.1%	226	10.0%	401	9.1%	229	10.1%	270	6.1%	115	5.1%
	Neither Ag/Dis	844	19.1%	445	19.6%	522	11.8%	259	11.4%	**538**	**12.2%**	**223**	**9.9%**
	Somewhat Agree	**653**	**14.8%**	**403**	**17.8%**	188	4.3%	118	5.2%	99	2.2%	57	2.5%
	Agree	**1247**	**28.2%**	**832**	**36.7%**	231	5.2%	108	4.8%	257	5.8%	110	4.9%
10	Disagree	**781**	**19.9%**	**217**	**12.8%**	1946	49.6%	870	51.5%	**2349**	**59.9%**	**1116**	**66.3%**
	Somewhat Disagree	**329**	**8.4%**	**99**	**5.9%**	610	15.5%	266	15.7%	387	9.9%	145	8.6%
	Neither Ag/Dis	711	18.1%	287	17.0%	811	20.7%	300	17.8%	731	18.6%	279	16.6%
	Somewhat Agree	610	15.5%	271	16.0%	**290**	**7.4%**	**165**	**9.8%**	172	4.4%	53	3.2%
	Agree	**1500**	**38.2%**	**818**	**48.3%**	270	6.9%	89	5.3%	**284**	**7.2%**	**89**	**5.3%**
12	Disagree	**440**	**14.1%**	**156**	**9.3%**	1276	40.8%	713	42.6%	**1765**	**56.5%**	**1019**	**61.7%**
	Somewhat Disagree	169	5.4%	79	4.7%	529	16.9%	281	16.8%	397	12.7%	184	11.1%
	Neither Ag/Dis	508	16.2%	234	14.0%	732	23.4%	380	22.7%	627	20.1%	286	17.3%
	Somewhat Agree	481	15.4%	242	14.4%	409	13.1%	197	11.8%	166	5.3%	76	4.6%
	Agree	**1530**	**48.9%**	**966**	**57.6%**	180	5.8%	103	6.2%	169	5.4%	86	5.2%

REPORTED ALCOHOL USE PREVALENCE BY STUDENT REPORTS REGARDING COMMUNITY ATTITUDES

Results presented in Tables 29A and 29B examine these questions based upon students' reports of substance use. Results clearly indicate that students who report having consumed alcohol were less likely to disagree and more likely to agree that those in their community approve of adults drinking alcohol, students their age drinking alcohol, and selling alcohol illegally. Beliefs in favor of these statements are also stronger for students who report having used alcohol recently relative to students who report having consumed alcohol at some point in their lifetime.

Table 29A: Reports regarding community attitudes based upon whether the student reported having used alcohol																	
		Community approves of similarly aged youths drinking alcohol								Community approves of adults drinking alcohol							
		Alcohol-Lifetime				Alcohol-Recent				Alcohol-Lifetime				Alcohol-Recent			
		Yes		No		Yes		No		Yes		No		Yes		No	
Gr		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
5	Disagree	**61**	**74.4%**	**1,871**	**94.8%**	**19**	**65.5%**	**1,914**	**94.4%**	**17**	**20.7%**	**811**	**41.5%**	8	27.6%	821	40.9%
	Somewhat Dis	**9**	**11.0%**	**37**	**1.9%**	**5**	**17.2%**	**42**	**2.1%**	14	17.1%	249	12.7%	6	20.7%	257	12.8%
	Neither Ag/Dis	4	4.9%	42	2.1%	1	3.4%	45	2.2%	16	19.5%	321	16.4%	4	13.8%	333	16.6%
	Somewhat Ag	**6**	**7.3%**	**13**	**0.7%**	**3**	**10.3%**	**16**	**0.8%**	8	9.8%	293	15.0%	1	3.4%	300	14.9%
	Agree	2	2.4%	10	0.5%	1	3.4%	11	0.5%	**27**	**32.9%**	**279**	**14.3%**	**10**	**34.5%**	**297**	**14.8%**
6	Disagree	**113**	**64.9%**	**1,735**	**91.9%**	**46**	**57.5%**	**1,802**	**90.6%**	**24**	**13.9%**	**587**	**31.3%**	**7**	**8.6%**	**604**	**30.6%**
	Somewhat Dis	**20**	**11.5%**	**53**	**2.8%**	**9**	**11.3%**	**65**	**3.3%**	19	11.0%	269	14.3%	11	13.6%	278	14.1%
	Neither Ag/Dis	**22**	**12.6%**	**65**	**3.4%**	**16**	**20.0%**	**74**	**3.7%**	35	20.2%	356	19.0%	17	21.0%	375	19.0%
	Somewhat Ag	**12**	**6.9%**	**16**	**0.8%**	3	3.8%	25	1.3%	35	20.2%	320	17.0%	14	17.3%	342	17.3%
	Agree	**7**	**4.0%**	**19**	**1.0%**	**6**	**7.5%**	**22**	**1.1%**	**60**	**34.7%**	**345**	**18.4%**	**32**	**39.5%**	**376**	**19.0%**
8	Disagree	**333**	**51.3%**	**1,111**	**79.4%**	**127**	**35.2%**	**1,343**	**75.9%**	**48**	**7.4%**	**270**	**19.3%**	**21**	**5.8%**	**301**	**17.0%**
	Somewhat Dis	**104**	**16.0%**	**111**	**7.9%**	**59**	**16.3%**	**163**	**9.2%**	53	8.2%	159	11.4%	**19**	**5.3%**	**197**	**11.1%**
	Neither Ag/Dis	**105**	**16.2%**	**114**	**8.1%**	**68**	**18.8%**	**164**	**9.3%**	118	18.2%	295	21.1%	58	16.1%	362	20.5%
	Somewhat Ag	**69**	**10.6%**	**24**	**1.7%**	**58**	**16.1%**	**51**	**2.9%**	122	18.8%	252	18.0%	59	16.3%	328	18.5%
	Agree	**38**	**5.9%**	**39**	**2.8%**	**49**	**13.6%**	**49**	**2.8%**	**308**	**47.5%**	**422**	**30.2%**	**204**	**56.5%**	**581**	**32.8%**
10	Disagree	**331**	**43.5%**	**428**	**65.6%**	**184**	**35.0%**	**621**	**59.8%**	**53**	**7.0%**	**128**	**19.7%**	**30**	**5.7%**	**156**	**15.1%**
	Somewhat Dis	**153**	**20.1%**	**71**	**10.9%**	100	19.0%	152	14.6%	43	5.6%	37	5.7%	26	4.9%	62	6.0%
	Neither Ag/Dis	151	19.8%	96	14.7%	**118**	**22.4%**	**163**	**15.7%**	121	15.9%	132	20.3%	73	13.8%	196	18.9%
	Somewhat Ag	**87**	**11.4%**	**39**	**6.0%**	**83**	**15.8%**	**67**	**6.4%**	127	16.7%	106	16.3%	88	16.6%	169	16.3%
	Agree	39	5.1%	18	2.8%	**41**	**7.8%**	**36**	**3.5%**	**418**	**54.9%**	**246**	**37.9%**	**312**	**59.0%**	**452**	**43.7%**
12	Disagree	**298**	**40.1%**	**251**	**54.7%**	**254**	**34.1%**	**417**	**49.6%**	**41**	**5.5%**	**67**	**14.6%**	**36**	**4.8%**	**94**	**11.2%**
	Somewhat Dis	**140**	**18.8%**	**59**	**12.9%**	146	19.6%	125	14.9%	**28**	**3.8%**	**38**	**8.3%**	**22**	**2.9%**	**52**	**6.2%**
	Neither Ag/Dis	183	24.6%	87	19.0%	192	25.8%	173	20.6%	102	13.7%	83	18.1%	95	12.7%	124	14.7%
	Somewhat Ag	89	12.0%	42	9.2%	102	13.7%	85	10.1%	123	16.5%	74	16.1%	95	12.7%	142	16.9%
	Agree	33	4.4%	20	4.4%	50	6.7%	41	4.9%	**451**	**60.5%**	**197**	**42.9%**	**499**	**66.8%**	**429**	**51.0%**

Table 29B: Reports regarding community attitudes based upon whether the student reported having used alcohol									
		Community approves of the illegal sale of alcohol							
		Alcohol-L				Alcohol-R			
		Yes		No		Yes		No	
Gr		N	%	N	%	N	%	N	%
5	Disagree	67	82.7%	1,822	93.1%	24	82.8%	1,866	92.8%
	Somewhat Dis	3	3.7%	44	2.2%	0	0.0%	47	2.3%
	Neither Ag/Dis	3	3.7%	55	2.8%	1	3.4%	57	2.8%
	Somewhat Ag	4	4.9%	11	0.6%	1	3.4%	14	0.7%
	Agree	4	4.9%	24	1.2%	3	10.3%	26	1.3%
6	Disagree	136	79.1%	1,724	92.0%	57	72.2%	1,805	91.5%
	Somewhat Dis	10	5.8%	43	2.3%	7	8.9%	46	2.3%
	Neither Ag/Dis	19	11.0%	66	3.5%	12	15.2%	76	3.9%
	Somewhat Ag	5	2.9%	12	0.6%	0	0.0%	17	0.9%
	Agree	2	1.2%	28	1.5%	3	3.8%	29	1.5%
8	Disagree	441	68.2%	1,184	85.4%	203	56.4%	1,458	83.0%
	Somewhat Dis	53	8.2%	46	3.3%	28	7.8%	77	4.4%
	Neither Ag/Dis	85	13.1%	103	7.4%	62	17.2%	140	8.0%
	Somewhat Ag	32	4.9%	12	0.9%	29	8.1%	25	1.4%
	Agree	36	5.6%	42	3.0%	38	10.6%	57	3.2%
10	Disagree	485	64.2%	491	75.5%	273	51.9%	772	74.7%
	Somewhat Dis	73	9.7%	46	7.1%	66	12.5%	68	6.6%
	Neither Ag/Dis	135	17.9%	90	13.8%	115	21.9%	143	13.8%
	Somewhat Ag	29	3.8%	5	0.8%	32	6.1%	16	1.5%
	Agree	34	4.5%	18	2.8%	40	7.6%	34	3.3%
12	Disagree	457	62.0%	318	70.4%	404	55.1%	566	68.1%
	Somewhat Dis	80	10.9%	35	7.7%	93	12.7%	81	9.7%
	Neither Ag/Dis	139	18.9%	68	15.0%	145	19.8%	128	15.4%
	Somewhat Ag	32	4.3%	15	3.3%	43	5.9%	30	3.6%
	Agree	29	3.9%	16	3.5%	48	6.5%	26	3.1%

SECTION SUMMARY

Results presented throughout this section have indicated that student perceptions and attitudes are clearly related to their substance use behavior. Students who have used substances are more likely to report that substances are easy to obtain. They are more likely to report approval of those who use substances. They are more likely to report lower perceptions of risk associated with substance use. They are more likely to report peer pressure and difficulty saying no when offered substances. Finally they are more likely to report attitudes conducive to the consumption of alcohol in their community.

In addition to these global effects, several specific effects provided unique insights. Results indicated that over 90% of high school students in 10th and 12th-grade who report using alcohol and marijuana also report that that both are easy to obtain. Students' approval of those who use substances increases with age among those who use them,

which may suggest increased identification with those who use substances as students get older. Students' perceptions of risk vary across grade levels depending on the substance. Higher perceptions of risk are consistently reported for tobacco use across time, whereas perceptions of alcohol risk increase with age and perceptions of marijuana risk decrease with age among those who use these substances. Approximately one-third of the students who use each substance do so despite indicating their perception that the substance represents a 'great risk' to the health of people who use it. Those who smoke cigarettes appear to be particularly aware of the health risks associated with doing so. Only 11% of 12th-grade students who smoke report that smoking poses 'no risk'. A positive effect suggests that students' perceptions of the risks associated with substance use have increased and perceptions of peer pressure associated with substance use have decreased from 2006 to 2008 at the lower grade levels. However, these effects are reversed at the high school level where decreases in the perceived risks associated with marijuana use and increases in perceived peer pressure associated with alcohol and marijuana use are reported from 2006 to 2008.

Based upon these reports, students appear to have an understanding of the risks associated with substance use, particularly with regard to cigarettes. They also appear to have increased in their understanding of the risks associated with substance use at the lower grade levels, which appears to have had some protective effect against peer pressure to use substances. However, students are also aware of the pressures associated with substance use. Social groups in which substances are used likely enhance the likelihood that students will do so. Alcohol, Cigarettes, Marijuana, and Inhalants appear to be widely available at the high school level which necessarily eliminates barriers to use based upon access. Through time, use of substances appears to be associated with increased identification and decreased disapproval of people who use substances. Greatly decreased perceptions of risk associated with marijuana appear strongly related to its use. Twelfth-grade students who use marijuana are not convinced that it is a great danger to their health.

From a prevention perspective, these data suggest that efforts to educate students have likely been successful to a degree. However, social contexts conducive to substance use and widespread availability of cigarettes, alcohol, marijuana, and inhalants at the high school level appear to be central obstacles to prevention efforts. Involvement of students in peer groups that do not promote substance use and reduction of the availability of substances appear to be central issues.

TEASING AND BULLYING

This section examines student reports on five items concerning the frequency of teasing and bullying behaviors in the school context.

Results presented in Tables 30A and 30B indicate that the percentage of students reporting not having experienced each behavior declined from 2006 to 2008 at each grade level. Uniform results of this nature raise a red flag in terms of the possible presence of some form of bias influencing the results apart from an increase in the actual behaviors listed. The questions were asked in exactly the same way in both years so a method bias in the actual survey is not likely. The samples are identical to those yielding the prevalence results presented above, which had yielded results that appeared less influenced by a bias, so a sample bias is not very likely.

Bullying has been a topic that has received considerable attention both in terms of efforts to educate students as well as media coverage of these issues. It may be that increased levels of attention to issues of bullying from 2006 to 2008 have heightened awareness of these issues and created an environment in which students are more likely to disclose having been the target of bullying behaviors. There remains the likelihood that bullying behaviors have in fact increased in prevalence from 2006 to 2008. However, these self-report data alone are not sufficient to support this claim.

While conclusions regarding changes over time are tenuous, these data strongly suggest that bullying behaviors persist at high rates of prevalence. While reports of bullying are higher among younger students, these behaviors remain problematic across grade levels. While overall prevalence is reported to decline somewhat as students transition from middle to high school, these behaviors remain prevalent across years. Of particular concern is the consistent presence of approximately 10% of students who report being repeatedly teased at each grade level. While these data are cross-sectional, longitudinal data may suggest that the same students report being frequently teased from 5th- to 12th-grade. The effects of being persistently teased across eight years of schooling are troubling. Data for the next two items concerning exclusion-focused teasing present the same pattern as those for the first teasing item. The rates are lower, yet still prevalent, at each grade level as these behaviors are subsets of the more global set of teasing behaviors referenced in the first item. While lower in reported prevalence they carry the extra weight of serving to exclude students from peer networks at a time when inclusion in peer networks is a central developmental task.

Similar to teasing items, students report being hit, kicked, pushed, or shoved at high rates of prevalence across years. Students with underdeveloped physical boundaries may account for occasional pushing and shoving in 5th-grade and in densely populated hallways in middle school. This makes it difficult to interpret the meaning of those reporting "1-2 times" over a 30 day period. However, the 25% of students in 5th-grade and middle school reporting having been hit, kicked, pushed, or shoved three or more times provide a more conservative estimate of the prevalence of physical violence. This percentage decreases somewhat to 20% in 10th-grade and 15% in 12th-grade. Data reported later will indicate that 20% of middle school students, 15% of 10th-grade students and 10% of 12th-grade students report engaging in a physical fight on school property in the last 12-months. Taken together, these data suggest that physical violence is prevalent across years in Pinellas schools. Data concerning the reported prevalence of having one's property deliberately stolen or damaged follow the same trends with approximately 30% prevalence in elementary and middle school, 20% in 10th-grade, and 15% in 12th-grade.

Table 30A: During the past 30 days, while you were on school property:													
		has someone called you (or your family) mean names, made fun of you or teased you in a hurtful way?				have you been left out on purpose by others when it was time to do an activity, or excluded you from their group of friends?				has someone tried to keep others from liking you by saying mean things about you?			
		2006		2008		2006		2008		2006		2008	
Grade		N	%	N	%	N	%	N	%	N	%	N	%
5	0 TIMES	**2333**	**46.4%**	**789**	**36.4%**	**2986**	**59.4%**	**1159**	**53.5%**	**2869**	**57.2%**	**1125**	**52.1%**
	1-2 TIMES	1117	22.2%	536	24.7%	1205	24.0%	553	25.5%	1098	21.9%	500	23.1%
	3-5 TIMES	620	12.3%	303	14.0%	422	8.4%	232	10.7%	482	9.6%	245	11.3%
	6-9 TIMES	293	5.8%	192	8.9%	177	3.5%	104	4.8%	199	4.0%	124	5.7%
	10-19 TIMES	192	3.8%	137	6.3%	91	1.8%	62	2.9%	114	2.3%	63	2.9%
	20+ TIMES	476	9.5%	212	9.8%	144	2.9%	55	2.5%	255	5.1%	104	4.8%
6	0 TIMES	**2300**	**49.4%**	**873**	**36.4%**	**3142**	**67.5%**	**1411**	**58.8%**	**2861**	**61.5%**	**1322**	**55.3%**
	1-2 TIMES	1059	22.8%	602	25.1%	908	19.5%	556	23.2%	951	20.4%	537	22.5%
	3-5 TIMES	530	11.4%	296	12.3%	293	6.3%	209	8.7%	341	7.3%	215	9.0%
	6-9 TIMES	222	4.8%	182	7.6%	128	2.7%	107	4.5%	150	3.2%	123	5.1%
	10-19 TIMES	155	3.3%	134	5.6%	56	1.2%	56	2.3%	110	2.4%	80	3.3%
	20+ TIMES	388	8.3%	311	13.0%	128	2.7%	60	2.5%	239	5.1%	114	4.8%
8	0 TIMES	**2328**	**50.2%**	**935**	**40.0%**	**3166**	**68.3%**	**1474**	**63.1%**	**2818**	**60.9%**	**1233**	**53.1%**
	1-2 TIMES	1099	23.7%	578	24.7%	893	19.3%	501	21.4%	983	21.2%	577	24.8%
	3-5 TIMES	417	9.0%	256	11.0%	288	6.2%	167	7.1%	322	7.0%	212	9.1%
	6-9 TIMES	195	4.2%	144	6.2%	85	1.8%	73	3.1%	158	3.4%	97	4.2%
	10-19 TIMES	151	3.3%	135	5.8%	65	1.4%	46	2.0%	78	1.7%	70	3.0%
	20+ TIMES	447	9.6%	289	12.4%	136	2.9%	75	3.2%	267	5.8%	135	5.8%
10	0 TIMES	**2523**	**61.6%**	**887**	**50.9%**	**3068**	**74.9%**	**1161**	**66.7%**	**2768**	**67.7%**	**987**	**56.8%**
	1-2 TIMES	786	19.2%	366	21.0%	639	15.6%	385	22.1%	729	17.8%	433	24.9%
	3-5 TIMES	308	7.5%	181	10.4%	172	4.2%	92	5.3%	226	5.5%	127	7.3%
	6-9 TIMES	123	3.0%	92	5.3%	73	1.8%	37	2.1%	105	2.6%	71	4.1%
	10-19 TIMES	83	2.0%	64	3.7%	42	1.0%	29	1.7%	65	1.6%	47	2.7%
	20+ TIMES	272	6.6%	151	8.7%	100	2.4%	37	2.1%	194	4.7%	73	4.2%
12	0 TIMES	**2241**	**69.1%**	**1013**	**59.2%**	**2505**	**77.2%**	**1228**	**71.7%**	**2268**	**70.1%**	**1077**	**62.9%**
	1-2 TIMES	507	15.6%	309	18.0%	484	14.9%	287	16.8%	557	17.2%	342	20.0%
	3-5 TIMES	206	6.4%	118	6.9%	133	4.1%	99	5.8%	188	5.8%	125	7.3%
	6-9 TIMES	79	2.4%	64	3.7%	44	1.4%	32	1.9%	75	2.3%	57	3.3%
	10-19 TIMES	62	1.9%	62	3.6%	19	0.6%	17	1.0%	41	1.3%	34	2.0%
	20+ TIMES	149	4.6%	146	8.5%	58	1.8%	49	2.9%	108	3.3%	76	4.4%

Table 30B: During the past 30 days, while you were on school property:									
		Has someone hit, kicked, pushed, or shoved you?				Has someone stolen or deliberately damaged your property such as clothing or books?			
		2006		2008		2006		2008	
Grade		N	%	N	%	N	%	N	%
5	0 TIMES	**2493**	**49.7%**	**989**	**45.8%**	**3878**	**77.2%**	**1502**	**69.4%**
	1-2 TIMES	1234	24.6%	527	24.4%	714	14.2%	424	19.6%
	3-5 TIMES	538	10.7%	271	12.5%	197	3.9%	140	6.5%
	6-9 TIMES	224	4.5%	149	6.9%	89	1.8%	51	2.4%
	10-19 TIMES	170	3.4%	82	3.8%	42	0.8%	21	1.0%
	20+ TIMES	357	7.1%	142	6.6%	102	2.0%	26	1.2%
6	0 TIMES	**2428**	**52.1%**	**939**	**39.1%**	**3624**	**78.0%**	**1645**	**68.7%**
	1-2 TIMES	1108	23.8%	708	29.5%	656	14.1%	502	21.0%
	3-5 TIMES	467	10.0%	316	13.2%	168	3.6%	114	4.8%
	6-9 TIMES	217	4.7%	172	7.2%	73	1.6%	65	2.7%
	10-19 TIMES	134	2.9%	104	4.3%	33	0.7%	30	1.3%
	20+ TIMES	305	6.5%	160	6.7%	92	2.0%	38	1.6%
8	0 TIMES	**2608**	**56.4%**	**1109**	**47.5%**	**3713**	**80.3%**	**1705**	**73.1%**
	1-2 TIMES	1064	23.0%	558	23.9%	577	12.5%	417	17.9%
	3-5 TIMES	371	8.0%	248	10.6%	136	2.9%	100	4.3%
	6-9 TIMES	156	3.4%	127	5.4%	57	1.2%	49	2.1%
	10-19 TIMES	103	2.2%	89	3.8%	40	0.9%	29	1.2%
	20+ TIMES	322	7.0%	204	8.7%	103	2.2%	34	1.5%
10	0 TIMES	**2867**	**70.1%**	**1057**	**60.9%**	**3522**	**86.2%**	**1395**	**80.4%**
	1-2 TIMES	681	16.7%	337	19.4%	375	9.2%	231	13.3%
	3-5 TIMES	209	5.1%	114	6.6%	79	1.9%	53	3.1%
	6-9 TIMES	83	2.0%	84	4.8%	37	0.9%	21	1.2%
	10-19 TIMES	36	0.9%	38	2.2%	13	0.3%	9	0.5%
	20+ TIMES	211	5.2%	107	6.2%	60	1.5%	27	1.6%
12	0 TIMES	**2553**	**78.8%**	**1182**	**69.1%**	**2839**	**87.8%**	**1445**	**84.4%**
	1-2 TIMES	385	11.9%	258	15.1%	277	8.6%	185	10.8%
	3-5 TIMES	116	3.6%	95	5.6%	52	1.6%	27	1.6%
	6-9 TIMES	44	1.4%	42	2.5%	16	0.5%	22	1.3%
	10-19 TIMES	28	0.9%	24	1.4%	8	0.2%	12	0.7%
	20+ TIMES	112	3.5%	109	6.4%	42	1.3%	21	1.2%

A new item concerning "Cyberbullying" was added in 2008. Results presented in Table 31[19] indicate a reported prevalence of approximately 15% in 5th-grade and middle school and 10% in high school. The percentage reporting being cyberbullied three or more times was approximately 5% across years. To cyberbully someone requires both the perpetrator and the victim to be online and for the perpetrator to be aware of the victim's location on a social networking service. This requires considerably more effort than teasing or pushing a nearby student in a hallway, so the rates will necessarily be lower. As a new area of inquiry, qualitative data in which students are asked to provide accounts of cyberbullying would provide a clearer view of the prevalence and form of this behavior.

Table 31: During the past 30 days how many times have you experienced:

2008 Grade		Cyberbullying	
		N	%
5	0 TIMES	1741	85.1%
	1-2 TIMES	164	8.0%
	3-5 TIMES	65	3.2%
	6-9 TIMES	32	1.6%
	10-19 TIMES	15	0.7%
	20 OR MORE	30	1.5%
6	0 TIMES	1803	85.9%
	1-2 TIMES	162	7.7%
	3-5 TIMES	59	2.8%
	6-9 TIMES	38	1.8%
	10-19 TIMES	13	0.6%
	20 OR MORE	24	1.1%
8	0 TIMES	1868	87.5%
	1-2 TIMES	157	7.4%
	3-5 TIMES	50	2.3%
	6-9 TIMES	19	0.9%
	10-19 TIMES	13	0.6%
	20 OR MORE	27	1.3%
10	0 TIMES	1405	89.1%
	1-2 TIMES	90	5.7%
	3-5 TIMES	35	2.2%
	6-9 TIMES	14	0.9%
	10-19 TIMES	6	0.4%
	20 OR MORE	27	1.7%
12	0 TIMES	1447	90.7%
	1-2 TIMES	78	4.9%
	3-5 TIMES	26	1.6%
	6-9 TIMES	4	0.3%
	10-19 TIMES	13	0.8%
	20 OR MORE	27	1.7%

[19] All results presented solely for students in 2008 are based upon samples in which students had reported that they were truthful in their answers "most" or "all of the time" in response to a new final question in the 2008 survey. This was done to provide a more conservative estimate of prevalence rates. This same procedure was not used for analyses comparing students in 2006 and 2008 as this question was not asked in 2006.

Results presented in Table 32 follow a typical developmental pattern in which parental supervision appears stronger among younger children, with increasing independence among older students. These data represent a good starting point toward understanding issues of parental monitoring of online activity. More focused questions concerning parental rules for students concerning membership on social networking sites and parental efforts to ensure that students are not accessing inappropriate material would yield further insights.

Table 32: How often do you:

2008 Grade		discuss your online activities with your parents? N	%
5	Always	694	34.1%
	Frequently	457	22.4%
	Occasionally	507	24.9%
	Never	380	18.6%
6	Always	448	21.5%
	Frequently	424	20.4%
	Occasionally	674	32.4%
	Never	537	25.8%
8	Always	164	7.7%
	Frequently	285	13.3%
	Occasionally	831	38.9%
	Never	856	40.1%
10	Always	84	5.3%
	Frequently	174	11.0%
	Occasionally	608	38.6%
	Never	710	45.1%
12	Always	94	5.9%
	Frequently	143	9.0%
	Occasionally	560	35.1%
	Never	797	50.0%

SECTION SUMMARY

Results presented in this section highlight the prevalence of teasing and bullying behaviors in Pinellas schools. While reports of teasing and bullying decline with increasing grade level, they remain prevalent across years. A sizable minority of approximately 10% of students report being teased 20 or more times in the 30 days prior to the survey at each grade level. While these results are cross-sectional, the same students may report being teased at each grade level if longitudinal data were available. The potential effects on students' emotional well-being in this scenario would be troubling.

Reported increases from 2006 to 2008 in student reports of each bullying behavior at each grade level may reflect a greater awareness of these issues and willingness to disclose this information. If this hypothesis is true, then increased reports of teasing and bullying from 2006 to 2008 would represent a positive finding suggesting that efforts to educate students regarding issues associated with teasing and bullying have been effective to a degree in

raising awareness. The alternative explanation that bullying and teasing has in fact increased in Pinellas schools would clearly be more problematic. However, we currently lack additional data to support this claim. Further study would be necessary be evaluate the relative merit of these two hypotheses.

SCHOOL SAFETY

Results presented in Tables 33 and 34 examine additional issues associated with threats to students' safety in the school environment. Student reports of bringing a weapon to school, being threatened with a weapon, not coming to school due to safety concerns, and engaging in a physical fight at school are examined.

Results presented in Table 33 appear to be valid based upon their consistency across years and lack of any strong signs of bias. Results indicate that the percentage of students reporting having carried a weapon to school increases as students become older. Approximately 1% of 5th- and 6th-grade students report having done so in the 30 days prior to survey administration, while this number increases to 7.3% of students in the 12th-grade sample. This is a behavior in which any prevalence above zero is unacceptable. Clearly, efforts must be focused upon reducing these rates at all grade levels. Reports that 7.3% of 12th-grade students have brought a weapon to school at least once while 3.7% report having done so 6 or more times in the 30 days prior to survey administration are particularly problematic and suggest that this practice is not uncommon, especially in high school.

Results also suggest that nearly 10% of 5th- and 6th-grade students report not having gone to school because they felt they would be unsafe. While this percentage declines somewhat with increasing age, these numbers also suggest that this practice is not uncommon in Pinellas schools. There are statistically significant increases in both behaviors presented in Table 14. These may be due to a combination of large sample size and some increased willingness to report these behaviors due to increased attention to these issues. However, the main points are that a significant percentage of students report bringing weapons to school and not coming to school because they feel they would not be safe, and that these reports are consistent from 2006 to 2008.

Table 33: During the past 30 days, on how many days did you:									
		carry a weapon such as a gun, knife, or club on school property				not go to school because you felt you would be unsafe at school or on your way to or from school			
		2006		2008		2006		2008	
Grade		N	%	N	%	N	%	N	%
5	0 DAYS	4984	98.9%	2164	99.3%	4624	92.4%	1988	91.4%
	1 DAY	42	0.8%	10	0.5%	238	4.8%	111	5.1%
	2-3 DAYS	5	0.1%	2	0.1%	87	1.7%	51	2.3%
	4-5 DAYS	0	0.0%	1	0.0%	18	0.4%	10	0.5%
	6 OR MORE	9	0.2%	2	0.1%	39	0.8%	14	0.6%
6	0 DAYS	4621	98.7%	2368	98.5%	**4315**	**92.5%**	**2167**	**90.7%**
	1 DAY	39	0.8%	26	1.1%	236	5.1%	134	5.6%
	2-3 DAYS	14	0.3%	4	0.2%	75	1.6%	50	2.1%
	4-5 DAYS	5	0.1%	1	0.0%	14	0.3%	9	0.4%
	6 OR MORE	4	0.1%	5	0.2%	25	0.5%	29	1.2%
8	0 DAYS	4470	96.2%	2232	95.6%	4332	93.3%	2169	93.1%
	1 DAY	74	1.6%	47	2.0%	174	3.7%	97	4.2%
	2-3 DAYS	49	1.1%	23	1.0%	74	1.6%	37	1.6%
	4-5 DAYS	8	0.2%	7	0.3%	18	0.4%	9	0.4%
	6 OR MORE	46	1.0%	25	1.1%	45	1.0%	17	0.7%
10	0 DAYS	3868	94.7%	1641	94.3%	3893	95.5%	1635	94.1%
	1 DAY	85	2.1%	32	1.8%	83	2.0%	54	3.1%
	2-3 DAYS	46	1.1%	18	1.0%	46	1.1%	27	1.6%
	4-5 DAYS	14	0.3%	13	0.7%	14	0.3%	7	0.4%
	6 OR MORE	73	1.8%	37	2.1%	41	1.0%	14	0.8%
12	0 DAYS	**3076**	**95.3%**	**1590**	**92.7%**	**3120**	**96.8%**	**1625**	**94.9%**
	1 DAY	44	1.4%	31	1.8%	32	1.0%	37	2.2%
	2-3 DAYS	17	0.5%	23	1.3%	39	1.2%	26	1.5%
	4-5 DAYS	16	0.5%	7	0.4%	14	0.4%	6	0.4%
	6 OR MORE	75	2.3%	64	3.7%	19	0.6%	18	1.1%

Results presented in Table 34 indicate that that more than 7% of students surveyed at each grade level report having been threatened or injured with a weapon on school property in the 12 months prior to completing the survey. The ratio of being threatened to being injured is not clear from this question. The type of weapon is also not clear. Regardless, the prevalence of 7% or more across grades, combined with the consistency in reports of these behaviors from 2006 to 2008, for a behavior as severe as being threatened or injured with a weapon represents considerable cause for concern. Here again, while there are statically significant changes in rates, with the 10th-grade change indicating a decrease in prevalence, the main point is that these rates are not uncommon and they have persisted across years.

The reported prevalence of having engaged in a physical fight on school property is consistent with students' reports of being hit, kicked, pushed, or shoved, as noted in the previous section. Nearly 20% of students report having engaged in a fight in 5th-grade and middle school. This percentage declines somewhat to approximately 15% in 10th-grade and 12% in 12th-grade. While further analysis could compare these numbers to discipline

referral rates associated with fighting, based upon these survey reports it does appear that engagement in physical violence on school property is not uncommon.

Table 34: During the past 12 months, how many times:

Grade		has someone threatened or injured you with a weapon such as a gun, knife, or club on school property?				were you in a physical fight on school property?			
		2006		2008		2006		2008	
		N	%	N	%	N	%	N	%
5	0 TIMES	4717	93.8%	2024	92.9%	4048	81.0%	1768	82.0%
	1 TIME	176	3.5%	95	4.4%	547	10.9%	233	10.8%
	2-3 TIMES	83	1.7%	33	1.5%	223	4.5%	86	4.0%
	4-5 TIMES	15	0.3%	10	0.5%	58	1.2%	32	1.5%
	6 OR MORE	36	0.7%	17	0.8%	121	2.4%	37	1.7%
6	0 TIMES	**4396**	**93.7%**	**2188**	**91.0%**	3884	83.1%	1928	81.1%
	1 TIME	172	3.7%	119	5.0%	462	9.9%	271	11.4%
	2-3 TIMES	74	1.6%	52	2.2%	182	3.9%	111	4.7%
	4-5 TIMES	20	0.4%	20	0.8%	60	1.3%	30	1.3%
	6 OR MORE	32	0.7%	25	1.0%	88	1.9%	38	1.6%
8	0 TIMES	4211	90.5%	2150	92.2%	3730	80.4%	1806	78.4%
	1 TIME	220	4.7%	93	4.0%	512	11.0%	280	12.2%
	2-3 TIMES	111	2.4%	46	2.0%	239	5.2%	142	6.2%
	4-5 TIMES	34	0.7%	10	0.4%	57	1.2%	24	1.0%
	6 OR MORE	79	1.7%	34	1.5%	101	2.2%	52	2.3%
10	0 TIMES	**3659**	**89.5%**	**1599**	**91.8%**	**3594**	**88.3%**	**1453**	**84.7%**
	1 TIME	206	5.0%	71	4.1%	258	6.3%	148	8.6%
	2-3 TIMES	121	3.0%	44	2.5%	147	3.6%	69	4.0%
	4-5 TIMES	32	0.8%	6	0.3%	23	0.6%	20	1.2%
	6 OR MORE TIMES	71	1.7%	21	1.2%	50	1.2%	25	1.5%
12	0 TIMES	2951	91.2%	1581	92.2%	**2960**	**91.7%**	**1477**	**87.9%**
	1 TIME	142	4.4%	53	3.1%	153	4.7%	106	6.3%
	2-3 TIMES	74	2.3%	39	2.3%	65	2.0%	52	3.1%
	4-5 TIMES	25	0.8%	13	0.8%	18	0.6%	19	1.1%
	6 OR MORE	45	1.4%	28	1.6%	33	1.0%	26	1.5%

SELLING DRUGS ON SCHOOL PROPERTY

Results presented in Table 35 indicate a sharp increase from 5th- through 12th-grade in the reported rate of being offered or sold an illegal drug on school property. The reported percentage increases from 1.8% among 5th-grade students toward rates above 20% among high school students. These numbers are sizable. While it is not clear what percentage of these responses represent reports of being offered an illegal drug versus being sold an illegal drug, these data strongly suggest that illegal drugs are being offered and sold on school grounds, especially at the high school level, and that this practice may not be uncommon.

Table 35: During the past 12 months:				
		has anyone offered, sold or given you an illegal drug on school property?		
		N	%	
Grade				
5	Yes	37	1.80%	
	No	2040	98.20%	
6	Yes	110	5.20%	
	No	1997	94.80%	
8	Yes	247	11.50%	
	No	1896	88.50%	
10	Yes	370	23.50%	
	No	1203	76.50%	
12	Yes	338	21.30%	
	No	1251	78.70%	

Results presented in Table 36 show a strong pattern in which students who report having used substances are much more likely to indicate that they have been offered, sold, or given a drug on school property. Among those who report *not* having used a substance the rates at which they are presumably reporting being offered a drug are highly consistent. Approximately 5% of 6th-graders who have not used a substance report being offered a substance on school property. This percentage increases to approximately 10% in 8th-grade and then moves up toward 15%-20% in high school.

Among those who report having used each substance, the percentage of students who report being offered, sold, or given a drug on school property also increases with grade level. There is also a notable difference in which the *lower* prevalence substances are more likely to be reported as having been offered, sold, or given at school relative to the higher prevalence substances of cigarettes, alcohol, and marijuana. It may be the case that the higher prevalence substances are obtained in multiple contexts, whereas school may be a more principal point of contact for substances that students have reported as being more difficult to obtain.

Table 36: Frequency of being offered, sold, or given a drug on school property by reported lifetime use						
			Drug on School Property			
			Yes		No	
Grade		Use	N	%	N	%
5	Tobacco-L	No	32	1.6%	2004	98.4%
		Yes	5	13.2%	33	86.8%
	Alcohol-L	No	31	1.6%	1963	98.4%
		Yes	6	7.4%	75	92.6%
	Marijuana-L	No	37	1.8%	2033	98.2%
		Yes	0	0.0%	7	100.0%
	Inhalants-L	No	32	1.6%	1976	98.4%
		Yes	5	7.8%	59	92.2%
	Non-Rx Drugs-L	No	35	1.7%	2000	98.3%
		Yes	2	5.6%	34	94.4%
6	Tobacco-L	No	86	4.4%	1882	95.6%
		Yes	19	15.8%	101	84.2%

	Alcohol-L	No	80	4.2%	1837	95.8%
		Yes	26	14.6%	152	85.4%
	Marijuana-L	No	97	4.7%	1957	95.3%
		Yes	10	22.7%	34	77.3%
	Inhalants-L	No	84	4.3%	1851	95.7%
		Yes	22	15.7%	118	84.3%
	Non-Rx Drugs-L	No	101	4.9%	1966	95.1%
		Yes	6	22.2%	21	77.8%
	LSD-L	No	107	5.1%	1985	94.9%
		Yes	3	42.9%	4	57.1%
	Cocaine-L	No	107	5.1%	1975	94.9%
		Yes	2	22.2%	7	77.8%
	Amphetamines-L	No	108	5.2%	1987	94.8%
		Yes	1	20.0%	4	80.0%
	Barbiturates-L	No	107	5.1%	1980	94.9%
		Yes	2	33.3%	4	66.7%
	Tranquilizers-L	No	108	5.2%	1982	94.8%
		Yes	2	28.6%	5	71.4%
	Club Drugs-L	No	106	5.1%	1981	94.9%
		Yes	2	16.7%	10	83.3%
	Heroin-L	No	106	5.1%	1987	94.9%
		Yes	2	33.3%	4	66.7%
	Steroids-L	No	105	5.0%	1986	95.0%
		Yes	3	33.3%	6	66.7%
8	Tobacco-L	No	125	7.4%	1570	92.6%
		Yes	85	24.1%	268	75.9%
	Alcohol-L	No	82	5.8%	1322	94.2%
		Yes	131	20.1%	522	79.9%
	Marijuana-L	No	141	7.7%	1687	92.3%
		Yes	64	28.8%	158	71.2%
	Inhalants-L	No	162	9.0%	1639	91.0%
		Yes	70	23.6%	226	76.4%
	Non-Rx Drugs-L	No	193	9.7%	1791	90.3%
		Yes	39	30.5%	89	69.5%
	LSD-L	No	216	10.4%	1863	89.6%
		Yes	22	44.9%	27	55.1%
	Cocaine-L	No	215	10.4%	1849	89.6%
		Yes	22	44.0%	28	56.0%
	Amphetamines-L	No	222	10.6%	1866	89.4%
		Yes	20	48.8%	21	51.2%
	Barbiturates-L	No	228	10.8%	1877	89.2%
		Yes	10	50.0%	10	50.0%
	Tranquilizers-L	No	210	10.2%	1853	89.8%
		Yes	28	43.8%	36	56.3%
	Club Drugs-L	No	212	10.3%	1855	89.7%
		Yes	26	43.3%	34	56.7%
	Heroin-L	No	225	10.7%	1873	89.3%
		Yes	15	51.7%	14	48.3%
	Steroids-L	No	229	10.9%	1871	89.1%
		Yes	11	44.0%	14	56.0%
10	Tobacco-L	No	175	16.9%	862	83.1%
		Yes	124	33.7%	244	66.3%
	Alcohol-L	No	85	13.0%	571	87.0%
		Yes	210	27.6%	551	72.4%
	Marijuana-L	No	161	15.6%	869	84.4%
		Yes	103	28.9%	253	71.1%
	Inhalants-L	No	307	21.3%	1136	78.7%
		Yes	52	47.7%	57	52.3%
	Non-Rx Drugs-L	No	284	20.0%	1136	80.0%
		Yes	72	55.0%	59	45.0%
	LSD-L	No	322	21.5%	1175	78.5%

		Yes	42	63.6%	24	36.4%
	Cocaine-L	No	333	22.2%	1170	77.8%
		Yes	30	55.6%	24	44.4%
	Amphetamines-L	No	328	21.7%	1181	78.3%
		Yes	29	63.0%	17	37.0%
	Barbiturates-L	No	345	22.5%	1190	77.5%
		Yes	14	60.9%	9	39.1%
	Tranquilizers-L	No	292	20.4%	1140	79.6%
		Yes	65	53.3%	57	46.7%
	Club Drugs-L	No	326	21.8%	1172	78.2%
		Yes	38	59.4%	26	40.6%
	Heroin-L	No	357	23.1%	1191	76.9%
		Yes	8	53.3%	7	46.7%
	Steroids-L	No	353	22.9%	1189	77.1%
		Yes	13	59.1%	9	40.9%
12	Tobacco-L	No	97	12.3%	689	87.7%
		Yes	110	23.7%	354	76.3%
	Alcohol-L	No	52	11.4%	404	88.6%
		Yes	140	18.8%	606	81.2%
	Marijuana-L	No	88	11.3%	689	88.7%
		Yes	107	22.8%	362	77.2%
	Inhalants-L	No	269	18.6%	1179	81.4%
		Yes	59	50.4%	58	49.6%
	Non-Rx Drugs-L	No	231	16.8%	1143	83.2%
		Yes	78	45.3%	94	54.7%
	LSD-L	No	263	18.0%	1199	82.0%
		Yes	57	53.8%	49	46.2%
	Cocaine-L	No	258	17.9%	1181	82.1%
		Yes	56	50.9%	54	49.1%
	Amphetamines-L	No	271	18.5%	1190	81.5%
		Yes	49	54.4%	41	45.6%
	Barbiturates-L	No	286	19.1%	1210	80.9%
		Yes	40	61.5%	25	38.5%
	Tranquilizers-L	No	228	16.9%	1123	83.1%
		Yes	85	43.4%	111	56.6%
	Club Drugs-L	No	263	18.2%	1181	81.8%
		Yes	60	47.6%	66	52.4%
	Heroin-L	No	306	19.9%	1235	80.1%
		Yes	20	66.7%	10	33.3%
	Steroids-L	No	317	20.5%	1231	79.5%
		Yes	12	46.2%	14	53.8%

Results in this section suggest that some or all of the substances in this report may be exchanging hands on school property. Approximately, 20% of students who do not use substances report being offered substances in the school setting. Among those who do report using substances, the school setting may be a particularly strong point of sale. Findings in which lower prevalence substances that had been reported earlier as more difficult to obtain are reported as having been offered, sold, or given to students at *higher* rates relative to higher prevalence substances, suggests that where points of sale are more restricted, the school setting may become a more central point of contact. Reduction in availability of these substances on school grounds may be associated with decreased levels of use. If this is true, then these data suggest that efforts aimed at reducing the availability of these substances on school grounds may be an effective means of prevention.

STUDENTS AT RISK

In the 2008 Survey, three additional questions were added concerning the frequency with which students skipped school, received an in-school suspension, and received an out-of-school suspension since the beginning of the 2008 school year, which would account for approximately a four month period from August through survey administration in November of 2008.

SKIPPING SCHOOL, IN-SCHOOL SUSPENSION, AND OUT-OF-SCHOOL SUSPENSION

Results presented in Table 37 indicate that older students report skipping school with increased frequency. There is a sharp increase in the reported frequency of skipping school in high school. The frequency of students who report receipt of both in-school suspensions (ISS) and out-of-school suspensions (OSS) increases with age through 10th-grade. However there is a decline in the frequency of students reporting having received an ISS or OSS from 10th to 12th-grade. It may be that students who remain in school through 12th-grade are less likely to have behavioral issues that warrant receipt of an ISS or OSS. Again, there are multiple signs in these data that students with more problematic behaviors are more likely to simply not be present in 12th-grade.

Table 37: Since school started, how many times have you…

Grade		Skipped School (without permission)				Received an In-School Suspension				Received an Out-of-school Suspension			
		Never	1 time	2 times	3+ times	Never	1 time	2 times	3+ times	Never	1 time	2 times	3+ times
5	N	1995	47	17	20	1979	66	8	12	2015	36	4	11
	%	96.0%	2.3%	0.8%	1.0%	95.8%	3.2%	0.4%	0.6%	97.5%	1.7%	0.2%	0.5%
6	N	1985	71	19	34	1940	100	30	35	2028	43	14	15
	%	94.1%	3.4%	0.9%	1.6%	92.2%	4.8%	1.4%	1.7%	96.6%	2.0%	0.7%	0.7%
8	N	1798	160	72	111	1848	157	48	86	1985	81	28	38
	%	84.0%	7.5%	3.4%	5.2%	86.4%	7.3%	2.2%	4.0%	93.1%	3.8%	1.3%	1.8%
10	N	1059	181	110	221	1295	144	55	78	1439	71	14	38
	%	67.4%	11.5%	7.0%	14.1%	82.4%	9.2%	3.5%	5.0%	92.1%	4.5%	0.9%	2.4%
12	N	752	199	155	486	1419	98	38	35	1510	44	9	25
	%	47.2%	12.5%	9.7%	30.5%	89.2%	6.2%	2.4%	2.2%	95.1%	2.8%	0.6%	1.6%

A potentially useful application of these data within the context of the present survey is to examine reported prevalence rates of substance use based upon whether or not a student skipped school or received an ISS or OSS. Use of actual discipline data would be preferable to self-report data. However, due to the anonymous nature of the survey, students' self-report is used as a proxy for the actual data.

In the tables that follow, student reports of substance use are examined based upon these three factors as well as whether or not they reported having been in a physical fight on school property in the last year, or whether they reported having brought a weapon on school grounds in the last 30 days. Separate analyses are presented for each of these five total risk factors.

The results are almost uniformly significant. There are clear relationships between having engaged in each of these five risk factors and reports of both recent and lifetime substance use. For the sake of parsimony, only tables incorporating reported lifetime prevalence rates are presented below.

REPORTED SUBSTANCE USE PREVALENCE BY HAVING SKIPPED SCHOOL SINCE THE BEGINNING OF THE SCHOOL YEAR

Results presented in Tables 38A-38D indicate a uniform pattern where students who report having skipped school since the beginning of the school year are more likely to report having used each of the substances. The only exceptions occur where the sample size is too small to provide a valid analysis. Most of these exceptions occur at the 5th and 6th-grade levels.

Table 38A: Reported Lifetime (L) prevalence by having Skipped School since the beginning of the school year

		Tobacco-L				Alcohol-L				Marijuana-L			
		Yes		No		Yes		No		Yes		No	
Gr	Skip	N	%	N	%	N	%	N	%	N	%	N	%
5	No	32	1.6%	1,960	98.4%	66	3.3%	1,928	96.7%	6	0.3%	1,989	99.7%
	Yes	7	8.3%	77	91.7%	15	18.1%	68	81.9%	1	1.2%	83	98.8%
6	No	90	4.6%	1,882	95.4%	134	6.8%	1,842	93.2%	31	1.6%	1,949	98.4%
	Yes	30	25.4%	88	74.6%	44	36.4%	77	63.6%	14	11.7%	106	88.3%
8	No	228	13.0%	1,528	87.0%	466	26.5%	1,294	73.5%	131	7.4%	1,628	92.6%
	Yes	125	43.1%	165	56.9%	186	63.1%	109	36.9%	90	31.1%	199	68.9%
10	No	195	19.4%	808	80.6%	455	45.2%	551	54.8%	170	17.0%	829	83.0%
	Yes	172	42.8%	230	57.2%	305	74.2%	106	25.8%	184	47.7%	202	52.3%
12	No	200	29.8%	471	70.2%	330	50.5%	323	49.5%	182	27.1%	489	72.9%
	Yes	265	45.6%	316	54.4%	417	75.5%	135	24.5%	287	49.7%	290	50.3%

Table 38B: Reported Lifetime (L) prevalence by having Skipped School since the beginning of the school year

		Inhalants-L				Non-Rx Drugs-L			
		Yes		No		Yes		No	
Gr	Skip	N	%	N	%	N	%	N	%
5	No	52	2.6%	1,940	97.4%	32	1.6%	1,958	98.4%
	Yes	11	13.4%	71	86.6%	4	4.8%	79	95.2%
6	No	111	5.7%	1,850	94.3%	20	1.0%	1,956	99.0%
	Yes	30	25.9%	86	74.1%	7	5.8%	113	94.2%
8	No	191	10.8%	1,582	89.2%	65	3.6%	1,719	96.4%
	Yes	102	31.7%	220	68.3%	63	19.3%	264	80.7%
10	No	43	4.1%	1,008	95.9%	50	4.8%	1,002	95.2%
	Yes	65	13.0%	434	87.0%	81	16.3%	417	83.7%
12	No	32	4.3%	716	95.7%	50	6.7%	691	93.3%
	Yes	85	10.4%	735	89.6%	123	15.2%	685	84.8%

Table 38C: Reported Lifetime (L) prevalence by having Skipped School since the beginning of the school year																
		LSD-L				Cocaine-L				Club Drugs-L				Heroin-L			
		Yes		No		Yes		No		Yes		No		Yes		No	
Gr	Skip	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	No	3	0.2%	1,974	99.8%	5	0.3%	1,966	99.7%	10	0.5%	1,969	99.5%	2	0.1%	1,979	99.9%
	Yes	4	3.3%	119	96.7%	4	3.3%	118	96.7%	2	1.6%	120	98.4%	4	3.3%	116	96.7%
8	No	**18**	**1.0%**	**1,773**	**99.0%**	**24**	**1.3%**	**1,759**	**98.7%**	**28**	**1.6%**	**1,765**	**98.4%**	**12**	**0.7%**	**1,777**	**99.3%**
	Yes	**30**	**9.0%**	**305**	**91.0%**	**26**	**7.9%**	**304**	**92.1%**	**31**	**9.3%**	**301**	**90.7%**	**17**	**5.0%**	**320**	**95.0%**
10	No	**21**	**2.0%**	**1,036**	**98.0%**	**20**	**1.9%**	**1,034**	**98.1%**	**22**	**2.1%**	**1,035**	**97.9%**	4	0.4%	1,053	99.6%
	Yes	**44**	**8.7%**	**460**	**91.3%**	**34**	**6.8%**	**467**	**93.2%**	**42**	**8.3%**	**461**	**91.7%**	11	2.2%	493	97.8%
12	No	**20**	**2.7%**	**729**	**97.3%**	**25**	**3.4%**	**715**	**96.6%**	**29**	**3.9%**	**718**	**96.1%**	**6**	**0.8%**	**743**	**99.2%**
	Yes	**86**	**10.5%**	**736**	**89.5%**	**85**	**10.5%**	**727**	**89.5%**	**97**	**11.7%**	**729**	**88.3%**	**24**	**2.9%**	**801**	**97.1%**

Table 38D: Reported Lifetime (L) prevalence by having Skipped School since the beginning of the school year																	
		Amphetamines-L				Barbiturates-L				Tranquilizers-L				Steroids-L			
		Yes		No		Yes		No		Yes		No		Yes		No	
Gr	Skip	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	No	4	0.2%	1,975	99.8%	4	0.2%	1,969	99.8%	3	0.2%	1,973	99.8%	6	0.3%	1,972	99.7%
	Yes	1	0.8%	122	99.2%	2	1.6%	120	98.4%	4	3.3%	119	96.7%	3	2.4%	121	97.6%
8	No	**14**	**0.8%**	**1,777**	**99.2%**	**6**	**0.3%**	**1,786**	**99.7%**	**29**	**1.6%**	**1,761**	**98.4%**	**9**	**0.5%**	**1,778**	**99.5%**
	Yes	**26**	**7.7%**	**311**	**92.3%**	**13**	**3.9%**	**319**	**96.1%**	**33**	**9.9%**	**302**	**90.1%**	**16**	**4.7%**	**321**	**95.3%**
10	No	**9**	**0.9%**	**1,047**	**99.1%**	**3**	**0.3%**	**1,053**	**99.7%**	**42**	**4.0%**	**1,012**	**96.0%**	**7**	**0.7%**	**1,048**	**99.3%**
	Yes	**37**	**7.4%**	**460**	**92.6%**	**20**	**4.0%**	**480**	**96.0%**	**80**	**16.1%**	**418**	**83.9%**	**15**	**3.0%**	**492**	**97.0%**
12	No	**22**	**2.9%**	**724**	**97.1%**	**15**	**2.0%**	**732**	**98.0%**	**55**	**7.4%**	**688**	**92.6%**	4	0.5%	742	99.5%
	Yes	**69**	**8.5%**	**739**	**91.5%**	**50**	**6.1%**	**767**	**93.9%**	**141**	**17.5%**	**666**	**82.5%**	22	2.7%	808	97.3%

REPORTED SUBSTANCE USE PREVALENCE BY HAVING AN IN-SCHOOL SUSPENSION SINCE THE START OF THE SCHOOL YEAR

Results presented in Tables 39A-39D examine student reports of lifetime substance use prevalence based upon whether they report having had an In-School Suspension (ISS) since the start of the school year. A consistent pattern of results emerged in which a relationship between ISS and substance use appeared to be strong. There were again instances where valid analyses could not be conducted due to small sample size[20]. The results for Tobacco use in 12th-grade and Inhalant use in 10th-grade were not significantly different despite possessing adequate sample size to detect a difference. However, each of the remaining comparisons was in fact significant.

[20] For analyses in these tables, any analysis that contains a cell in which there are 5 or less students becomes too unstable to draw a valid conclusion.

Table 39A: Reported Lifetime (L) prevalence by Having an In-School Suspension since the start of the School Year

		Tobacco-L				Alcohol-L				Marijuana-L			
		Yes		No		Yes		No		Yes		No	
Grade	ISS	N	%	N	%	N	%	N	%	N	%	N	%
5	No	32	1.6%	1,944	98.4%	68	3.4%	1,909	96.6%	6	0.3%	1,973	99.7%
	Yes	7	8.1%	79	91.9%	13	15.1%	73	84.9%	1	1.2%	85	98.8%
6	No	92	4.8%	1,836	95.2%	146	7.6%	1,785	92.4%	25	1.3%	1,907	98.7%
	Yes	28	17.7%	130	82.3%	31	19.1%	131	80.9%	20	12.2%	144	87.8%
8	No	259	14.5%	1,532	85.5%	513	28.6%	1,278	71.4%	154	8.6%	1,642	91.4%
	Yes	92	36.4%	161	63.6%	137	52.3%	125	47.7%	67	26.8%	183	73.2%
10	No	280	23.5%	911	76.5%	618	51.7%	578	48.3%	260	22.0%	920	78.0%
	Yes	87	40.7%	127	59.3%	141	63.8%	80	36.2%	94	45.6%	112	54.4%
12	No	421	36.6%	730	63.4%	672	60.7%	435	39.3%	410	35.6%	741	64.4%
	Yes	43	42.6%	58	57.4%	72	75.0%	24	25.0%	59	62.1%	36	37.9%

Table 39B: Reported Lifetime (L) prevalence by Having an In-School Suspension since the start of the School Year

		Inhalants-L				Non-Rx Drugs-L			
		Yes		No		Yes		No	
Grade	ISS	N	%	N	%	N	%	N	%
5	No	55	2.8%	1,920	97.2%	35	1.8%	1,938	98.2%
	Yes	8	9.4%	77	90.6%	1	1.2%	85	98.8%
6	No	122	6.4%	1,794	93.6%	21	1.1%	1,907	98.9%
	Yes	19	12.1%	138	87.9%	6	3.7%	158	96.3%
8	No	231	12.7%	1,589	87.3%	98	5.3%	1,737	94.7%
	Yes	61	22.3%	212	77.7%	30	11.0%	243	89.0%
10	No	83	6.5%	1,200	93.5%	90	7.0%	1,194	93.0%
	Yes	25	9.4%	242	90.6%	42	15.8%	224	84.2%
12	No	91	6.5%	1,307	93.5%	141	10.2%	1,246	89.8%
	Yes	26	15.5%	142	84.5%	32	20.0%	128	80.0%

Table 39C: Reported Lifetime (L) prevalence by Having an In-School Suspension since the start of the School Year

		LSD-L				Cocaine-L				Club Drugs-L				Heroin-L			
		Yes		No		Yes		No		Yes		No		Yes		No	
Gr	ISS	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	No	4	0.2%	1,927	99.8%	4	0.2%	1,925	99.8%	11	0.6%	1,923	99.4%	3	0.2%	1,930	99.8%
	Yes	3	1.8%	162	98.2%	5	3.1%	156	96.9%	1	0.6%	162	99.4%	3	1.8%	161	98.2%
8	No	29	1.6%	1,812	98.4%	34	1.9%	1,795	98.1%	38	2.1%	1,804	97.9%	16	0.9%	1,824	99.1%
	Yes	20	7.1%	263	92.9%	16	5.7%	265	94.3%	22	7.8%	259	92.2%	13	4.6%	270	95.4%
10	No	40	3.1%	1,251	96.9%	37	2.9%	1,250	97.1%	42	3.3%	1,245	96.7%	12	0.9%	1,279	99.1%
	Yes	25	9.3%	245	90.7%	17	6.3%	251	93.7%	22	8.1%	251	91.9%	4	1.5%	267	98.5%
12	No	82	5.8%	1,323	94.2%	83	6.0%	1,307	94.0%	98	7.0%	1,310	93.0%	19	1.4%	1,387	98.6%
	Yes	24	14.6%	140	85.4%	27	16.9%	133	83.1%	28	17.2%	135	82.8%	11	6.6%	155	93.4%

Table 39D: Reported Lifetime (L) prevalence by Having an In-School Suspension since the start of the School Year																
		Amphetamines-L				Barbiturates-L				Tranquilizers-L				Steroids-L			
		Yes		No		Yes		No		Yes		No		Yes		No	
Gr	ISS	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	No	4	0.2%	1,930	99.8%	4	0.2%	1,925	99.8%	**4**	**0.2%**	**1,927**	**99.8%**	**6**	**0.3%**	**1,927**	**99.7%**
	Yes	1	0.6%	163	99.4%	2	1.2%	160	98.8%	**3**	**1.8%**	**161**	**98.2%**	**3**	**1.8%**	**162**	**98.2%**
8	No	**20**	**1.1%**	**1,818**	**98.9%**	**9**	**0.5%**	**1,829**	**99.5%**	**39**	**2.1%**	**1,799**	**97.9%**	**11**	**0.6%**	**1,828**	**99.4%**
	Yes	**21**	**7.3%**	**267**	**92.7%**	**11**	**3.9%**	**273**	**96.1%**	**24**	**8.4%**	**261**	**91.6%**	**14**	**5.0%**	**268**	**95.0%**
10	No	**26**	**2.0%**	**1,263**	**98.0%**	**14**	**1.1%**	**1,276**	**98.9%**	**77**	**6.0%**	**1,207**	**94.0%**	15	1.2%	1,274	98.8%
	Yes	**20**	**7.6%**	**244**	**92.4%**	**9**	**3.4%**	**257**	**96.6%**	**45**	**16.8%**	**223**	**83.2%**	8	2.9%	266	97.1%
12	No	**70**	**5.0%**	**1,320**	**95.0%**	**47**	**3.4%**	**1,351**	**96.6%**	**165**	**11.9%**	**1,225**	**88.1%**	**17**	**1.2%**	**1,391**	**98.8%**
	Yes	**21**	**13.0%**	**141**	**87.0%**	**18**	**11.0%**	**146**	**89.0%**	**31**	**19.6%**	**127**	**80.4%**	**9**	**5.4%**	**157**	**94.6%**

REPORTED SUBSTANCE USE PREVALENCE BY HAVING AN OUT-OF-SCHOOL SUSPENSION SINCE THE START OF THE SCHOOL YEAR

Results presented in Tables 40A-40D present a slightly different pattern of results than those seen for having skipped school and having received an ISS. Results for the higher prevalence substances of Tobacco, Alcohol, and Marijuana were not statistically different among high school students, with the exception of 10th-grade Marijuana prevalence, based upon whether they reported having received an OSS since the start of the school year. Here the trends in each case are toward higher usage among students who report having received an OSS, yet they did not reach the level necessary to be statistically different. Yet once again there are clear differences in reported usage for all of the lower prevalence substances with the exception of Inhalant usage in 10th-grade and cases where the sample size was too small to draw a valid conclusion.

Table 40A: Reported Lifetime (L) prevalence by Having an Out-of-School Suspension since the start of the School Year													
		Tobacco-L				Alcohol-L				Marijuana-L			
		Yes		No		Yes		No		Yes		No	
Grade	OSS	N	%	N	%	N	%	N	%	N	%	N	%
5	No	**34**	**1.7%**	**1,978**	**98.3%**	76	3.8%	1,937	96.2%	7	0.3%	2,008	99.7%
	Yes	**4**	**7.8%**	**47**	**92.2%**	5	9.8%	46	90.2%	0	0.0%	51	100.0%
6	No	**111**	**5.5%**	**1,902**	**94.5%**	**161**	**8.0%**	**1,857**	**92.0%**	**37**	**1.8%**	**1,984**	**98.2%**
	Yes	**9**	**13.2%**	**59**	**86.8%**	**15**	**21.4%**	**55**	**78.6%**	**8**	**11.4%**	**62**	**88.6%**
8	No	**300**	**15.7%**	**1,615**	**84.3%**	**578**	**30.1%**	**1,340**	**69.9%**	**183**	**9.5%**	**1,734**	**90.5%**
	Yes	**50**	**40.7%**	**73**	**59.3%**	**69**	**53.5%**	**60**	**46.5%**	**35**	**28.5%**	**88**	**71.5%**
10	No	340	25.9%	971	74.1%	706	53.6%	611	46.4%	**322**	**24.8%**	**974**	**75.2%**
	Yes	26	30.6%	59	69.4%	52	57.1%	39	42.9%	**31**	**37.8%**	**51**	**62.2%**
12	No	444	36.8%	763	63.2%	717	61.7%	445	38.3%	448	37.1%	759	62.9%
	Yes	20	45.5%	24	54.5%	26	65.0%	14	35.0%	21	55.3%	17	44.7%

Table 40B: Reported Lifetime (L) prevalence by Having an Out-of-School Suspension since the start of the School Year									
		Inhalants-L				Non-Rx Drugs-L			
		Yes		No		Yes		No	
Grade	OSS	N	%	N	%	N	%	N	%
5	No	61	3.0%	1,950	97.0%	35	1.7%	1,974	98.3%
	Yes	3	6.0%	47	94.0%	1	2.0%	50	98.0%
6	No	127	6.4%	1,873	93.7%	22	1.1%	1,997	98.9%
	Yes	12	17.4%	57	82.6%	5	7.2%	64	92.8%
8	No	255	13.1%	1,693	86.9%	107	5.4%	1,857	94.6%
	Yes	37	26.6%	102	73.4%	20	14.5%	118	85.5%
10	No	100	7.0%	1,329	93.0%	107	7.5%	1,319	92.5%
	Yes	8	7.1%	104	92.9%	24	21.1%	90	78.9%
12	No	102	6.8%	1,388	93.2%	158	10.7%	1,318	89.3%
	Yes	14	18.9%	60	81.1%	15	21.7%	54	78.3%

Table 40C: Reported Lifetime (L) prevalence by Having an Out-of-School Suspension since the start of the School Year																
		LSD-L				Cocaine-L				Club Drugs-L				Heroin-L			
		Yes		No		Yes		No		Yes		No		Yes		No	
Gr	OSS	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	No	4	0.2%	2,016	99.8%	4	0.2%	2,010	99.8%	11	0.5%	2,010	99.5%	4	0.2%	2,017	99.8%
	Yes	3	4.2%	68	95.8%	5	7.0%	66	93.0%	1	1.4%	70	98.6%	2	2.8%	70	97.2%
8	No	33	1.7%	1,941	98.3%	34	1.7%	1,928	98.3%	44	2.2%	1,932	97.8%	17	0.9%	1,958	99.1%
	Yes	16	11.2%	127	88.8%	15	10.6%	126	89.4%	16	11.3%	125	88.7%	12	8.5%	129	91.5%
10	No	49	3.4%	1,385	96.6%	43	3.0%	1,386	97.0%	48	3.4%	1,384	96.6%	13	0.9%	1,422	99.1%
	Yes	15	12.7%	103	87.3%	10	8.5%	107	91.5%	15	12.6%	104	87.4%	2	1.7%	115	98.3%
12	No	91	6.1%	1,405	93.9%	97	6.5%	1,384	93.5%	112	7.5%	1,388	92.5%	23	1.5%	1,475	98.5%
	Yes	14	19.7%	57	80.3%	12	17.9%	55	82.1%	13	18.8%	56	81.2%	7	9.7%	65	90.3%

Table 40D: Reported Lifetime (L) prevalence by Having an Out-of-School Suspension since the start of the School Year																
		Amphetamines-L				Barbiturates-L				Tranquilizers-L				Steroids-L			
		Yes		No		Yes		No		Yes		No		Yes		No	
Gr	OSS	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	No	4	0.2%	2,017	99.8%	4	0.2%	2,010	99.8%	4	0.2%	2,014	99.8%	7	0.3%	2,014	99.7%
	Yes	1	1.4%	71	98.6%	2	2.8%	70	97.2%	3	4.2%	69	95.8%	2	2.8%	70	97.2%
8	No	24	1.2%	1,948	98.8%	9	0.5%	1,962	99.5%	47	2.4%	1,923	97.6%	14	0.7%	1,959	99.3%
	Yes	17	11.6%	130	88.4%	11	7.6%	133	92.4%	15	10.3%	131	89.7%	10	7.1%	131	92.9%
10	No	34	2.4%	1,394	97.6%	16	1.1%	1,414	98.9%	101	7.1%	1,326	92.9%	16	1.1%	1,417	98.9%
	Yes	11	9.5%	105	90.5%	6	5.1%	111	94.9%	21	18.1%	95	81.9%	6	5.0%	114	95.0%
12	No	79	5.3%	1,400	94.7%	54	3.6%	1,433	96.4%	177	12.0%	1,301	88.0%	21	1.4%	1,479	98.6%
	Yes	11	15.5%	60	84.5%	11	15.1%	62	84.9%	18	26.5%	50	73.5%	5	6.9%	67	93.1%

REPORTED SUBSTANCE USE PREVALENCE BY HAVING A FIGHT AT SCHOOL IN THE LAST 12 MONTHS

Results presented in Tables 41A-41D present a similar pattern of results to those presented in the OSS tables. For the higher prevalence substances, the differences were not statistically different in some cases, yet the trends in each comparison point toward higher reported substance usage among students who report having a fight at school in the prior 12-month period. Significant differences are found for all of the lower prevalence substances where students who report having had a fight were more likely to report substance usage. The only exceptions occurred where the sample size was too small and for non-prescription drugs in 5th-grade, where the difference was not significant.

Table 41A: Reported Lifetime (L) prevalence by Having a Fight at School in the last 12 months

		Tobacco-L				Alcohol-L				Marijuana-L			
		Yes		No		Yes		No		Yes		No	
Grade	Fight	N	%	N	%	N	%	N	%	N	%	N	%
5	No	23	1.4%	1,662	98.6%	43	2.6%	1,643	97.4%	4	0.2%	1,683	99.8%
	Yes	16	4.4%	350	95.6%	37	10.1%	329	89.9%	3	0.8%	364	99.2%
6	No	61	3.6%	1,622	96.4%	101	6.0%	1,589	94.0%	19	1.1%	1,671	98.9%
	Yes	56	14.6%	328	85.4%	72	18.8%	311	81.2%	25	6.5%	361	93.5%
8	No	224	13.6%	1,418	86.4%	455	27.6%	1,195	72.4%	133	8.1%	1,516	91.9%
	Yes	125	32.6%	258	67.4%	191	49.6%	194	50.4%	85	22.5%	293	77.5%
10	No	301	24.6%	921	75.4%	646	52.5%	585	47.5%	297	24.5%	916	75.5%
	Yes	64	37.4%	107	62.6%	104	60.1%	69	39.9%	57	35.2%	105	64.8%
12	No	416	36.8%	715	63.2%	673	61.8%	416	38.2%	413	36.8%	709	63.2%
	Yes	42	42.0%	58	58.0%	63	66.3%	32	33.7%	50	47.2%	56	52.8%

Table 41B: Reported Lifetime (L) prevalence by Having a Fight at School in the last 12 months

		Inhalants-L				Non-Rx Drugs-L			
		Yes		No		Yes		No	
Grade	Fight	N	%	N	%	N	%	N	%
5	No	36	2.1%	1,649	97.9%	24	1.4%	1,658	98.6%
	Yes	28	7.7%	336	92.3%	12	3.3%	354	96.7%
6	No	87	5.2%	1,586	94.8%	16	0.9%	1,669	99.1%
	Yes	50	13.2%	330	86.8%	10	2.6%	377	97.4%
8	No	201	12.1%	1,461	87.9%	78	4.6%	1,601	95.4%
	Yes	90	22.0%	320	78.0%	49	12.0%	359	88.0%
10	No	81	6.1%	1,245	93.9%	99	7.4%	1,230	92.6%
	Yes	26	12.3%	185	87.7%	29	14.0%	178	86.0%
12	No	85	6.1%	1,299	93.9%	137	10.0%	1,238	90.0%
	Yes	31	19.7%	126	80.3%	37	25.2%	110	74.8%

Table 41C: Reported Lifetime (L) prevalence by Having a Fight at School in the last 12 months																
		LSD-L				Cocaine-L				Club Drugs-L				Heroin-L			
		Yes		No		Yes		No		Yes		No		Yes		No	
Gr	Fight	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	No	3	0.2%	1,686	99.8%	5	0.3%	1,681	99.7%	7	0.4%	1,682	99.6%	3	0.2%	1,689	99.8%
	Yes	4	1.0%	383	99.0%	4	1.0%	383	99.0%	5	1.3%	383	98.7%	3	0.8%	382	99.2%
8	No	23	1.4%	1,662	98.6%	23	1.4%	1,652	98.6%	31	1.8%	1,657	98.2%	11	0.7%	1,672	99.3%
	Yes	23	5.5%	395	94.5%	26	6.3%	389	93.7%	28	6.8%	385	93.2%	17	4.1%	402	95.9%
10	No	44	3.3%	1,293	96.7%	34	2.6%	1,296	97.4%	37	2.8%	1,297	97.2%	11	0.8%	1,327	99.2%
	Yes	21	10.0%	189	90.0%	17	8.1%	194	91.9%	26	12.3%	186	87.7%	4	1.9%	206	98.1%
12	No	78	5.6%	1,312	94.4%	83	6.0%	1,294	94.0%	96	6.9%	1,296	93.1%	14	1.0%	1,377	99.0%
	Yes	29	19.0%	124	81.0%	27	18.4%	120	81.6%	29	19.1%	123	80.9%	17	10.9%	139	89.1%

Table 41D: Reported Lifetime (L) prevalence by Having a Fight at School in the last 12 months																	
		Amphetamines-L				Barbiturates-L				Tranquilizers-L				Steroids-L			
		Yes		No		Yes		No		Yes		No		Yes		No	
Gr	Fight	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	No	2	0.1%	1,689	99.9%	5	0.3%	1,680	99.7%	3	0.2%	1,684	99.8%	4	0.2%	1,687	99.8%
	Yes	3	0.8%	384	99.2%	1	0.3%	385	99.7%	4	1.0%	384	99.0%	5	1.3%	382	98.7%
8	No	20	1.2%	1,663	98.8%	7	0.4%	1,676	99.6%	31	1.8%	1,652	98.2%	11	0.7%	1,669	99.3%
	Yes	20	4.8%	400	95.2%	12	2.9%	404	97.1%	31	7.4%	387	92.6%	14	3.3%	405	96.7%
10	No	30	2.3%	1,301	97.7%	12	0.9%	1,320	99.1%	84	6.3%	1,245	93.7%	10	0.7%	1,326	99.3%
	Yes	15	7.2%	193	92.8%	10	4.8%	200	95.2%	34	16.3%	175	83.7%	12	5.6%	201	94.4%
12	No	63	4.6%	1,308	95.4%	41	3.0%	1,335	97.0%	160	11.7%	1,212	88.3%	15	1.1%	1,376	98.9%
	Yes	28	18.3%	125	81.7%	23	14.6%	135	85.4%	33	22.3%	115	77.7%	11	7.1%	145	92.9%

REPORTED SUBSTANCE USE PREVALENCE BY HAVING CARRIED A WEAPON ON SCHOOL PROPERTY IN THE LAST 30 DAYS

Results presented in Tables 42A-42D indicate a strong relationship between reports of having carried a weapon on school property in the last 30 days and reports of lifetime substance use. These effects are particularly strong for the lower prevalence substances. While differences in reported lifetime tobacco and alcohol use are not statistically different at the 12th-grade level between those who do and those who do not report having brought a weapon to school, the trends are consistent with other substances in favor of higher use among students who report having brought a weapon to school. The percentages of students who report using LSD, cocaine, club drugs, heroin, amphetamines, barbiturates, tranquilizers, and steroids are considerably higher among students who report having brought a weapon to school than among those who report having not done so. These data agree with earlier findings indicating that school may be a particularly strong point of contact for the sale of lower prevalence substances that are harder to obtain. That students who report having been offered, sold, or given one of these substances on school grounds report bringing a weapon to school at much higher rates provides further support for the necessity of efforts aimed at reducing the sale of these substances on school grounds.

Table 42A: Reported Lifetime (L) prevalence by having carried a weapon on school property in the last 30 days													
		Tobacco-L				Alcohol-L				Marijuana-L			
		Yes		No		Yes		No		Yes		No	
Grade	Weapon	N	%	N	%	N	%	N	%	N	%	N	%
5	No	36	1.7%	2,022	98.3%	78	3.8%	1,981	96.2%	7	0.3%	2,054	99.7%
	Yes	2	13.3%	13	86.7%	3	20.0%	12	80.0%	0	0.0%	15	100%
6	No	109	5.3%	1,953	94.7%	170	8.2%	1,901	91.8%	41	2.0%	2,030	98.0%
	Yes	11	39.3%	17	60.7%	9	34.6%	17	65.4%	4	13.8%	25	86.2%
8	No	319	16.1%	1,663	83.9%	599	30.1%	1,390	69.9%	188	9.5%	1,797	90.5%
	Yes	34	50.7%	33	49.3%	52	75.4%	17	24.6%	33	50.0%	33	50.0%
10	No	350	25.7%	1,012	74.3%	727	52.9%	646	47.1%	338	25.1%	1,010	74.9%
	Yes	20	42.6%	27	57.4%	35	72.9%	13	27.1%	18	43.9%	23	56.1%
12	No	443	36.8%	762	63.2%	716	61.6%	447	38.4%	442	36.9%	756	63.1%
	Yes	24	47.1%	27	52.9%	34	73.9%	12	26.1%	30	54.5%	25	45.5%

Table 42B: Reported Lifetime (L) prevalence by having carried a weapon on school property in the last 30 days									
		Inhalants-L				Non-Rx Drugs-L			
		Yes		No		Yes		No	
Grade	Weapon	N	%	N	%	N	%	N	%
5	No	62	3.0%	1,994	97.0%	36	1.8%	2,019	98.2%
	Yes	2	13.3%	13	86.7%	0	0.0%	15	100%
6	No	135	6.6%	1,918	93.4%	25	1.2%	2,042	98.8%
	Yes	6	25.0%	18	75.0%	2	6.9%	27	93.1%
8	No	258	12.8%	1,760	87.2%	110	5.4%	1,927	94.6%
	Yes	36	45.6%	43	54.4%	18	24.0%	57	76.0%
10	No	97	6.5%	1,392	93.5%	113	7.6%	1,374	92.4%
	Yes	12	17.9%	55	82.1%	19	27.5%	50	72.5%
12	No	97	6.6%	1,379	93.4%	149	10.2%	1,316	89.8%
	Yes	20	20.8%	76	79.2%	25	28.1%	64	71.9%

Table 42C: Reported Lifetime (L) prevalence by having carried a weapon on school property in the last 30 days																	
		LSD-L				Cocaine-L				Club Drugs-L				Heroin-L			
		Yes		No		Yes		No		Yes		No		Yes		No	
Grade	Weapon	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	No	5	0.2%	2,065	99.8%	6	0.3%	2,058	99.7%	11	0.5%	2,060	99.5%	5	0.2%	2,067	99.8%
	Yes	2	6.7%	28	93.3%	3	10.0%	27	90.0%	1	3.3%	29	96.7%	1	3.4%	28	96.6%
8	No	34	1.7%	2,010	98.3%	37	1.8%	1,995	98.2%	46	2.2%	2,000	97.8%	22	1.1%	2,022	98.9%
	Yes	14	16.7%	70	83.3%	12	14.6%	70	85.4%	14	17.3%	67	82.7%	7	8.4%	76	91.6%
10	No	53	3.5%	1,448	96.5%	39	2.6%	1,454	97.4%	48	3.2%	1,446	96.8%	8	0.5%	1,490	99.5%
	Yes	13	19.7%	53	80.3%	15	22.1%	53	77.9%	16	22.2%	56	77.8%	8	11.4%	62	88.6%
12	No	87	5.9%	1,399	94.1%	91	6.2%	1,379	93.8%	107	7.2%	1,379	92.8%	21	1.4%	1,464	98.6%
	Yes	20	22.2%	70	77.8%	20	23.0%	67	77.0%	20	21.7%	72	78.3%	10	10.6%	84	89.4%

Table 42D: Reported Lifetime (L) prevalence by having carried a weapon on school property in the last 30 days																	
		Amphetamines-L				Barbiturates-L				Tranquilizers-L				Steroids-L			
		Yes		No		Yes		No		Yes		No		Yes		No	
Grade	Weapon	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
6	No	4	0.2%	2,068	99.8%	5	0.2%	2,060	99.8%	6	0.3%	2,063	99.7%	7	0.3%	2,065	99.7%
	Yes	1	3.3%	29	96.7%	1	3.3%	29	96.7%	1	3.3%	29	96.7%	2	6.7%	28	93.3%
8	No	28	1.4%	2,017	98.6%	10	0.5%	2,033	99.5%	46	2.3%	1,997	97.7%	13	0.6%	2,030	99.4%
	Yes	13	15.5%	71	84.5%	10	12.2%	72	87.8%	18	21.4%	66	78.6%	12	14.6%	70	85.4%
10	No	36	2.4%	1,456	97.6%	16	1.1%	1,478	98.9%	104	7.0%	1,387	93.0%	12	0.8%	1,487	99.2%
	Yes	10	14.9%	57	85.1%	7	10.3%	61	89.7%	18	26.9%	49	73.1%	11	15.7%	59	84.3%
12	No	68	4.6%	1,399	95.4%	46	3.1%	1,427	96.9%	166	11.3%	1,300	88.7%	16	1.1%	1,467	98.9%
	Yes	23	25.3%	68	74.7%	19	20.0%	76	80.0%	30	34.1%	58	65.9%	10	10.2%	88	89.8%

SECTION SUMMARY

Taken together, the results presented in this section suggest a strong relationship between students' reports of problem behavior in the school setting and their reports of substance use. Students who skip school, receive ISS and OSS, engage in physical fights, and carry a weapon to school appear to be considerably more likely to use substances than those who do not engage in these behaviors. These data underscore the vital importance of having safe and drug free schools. Behaviors that compromise safety, perpetuate drug usage, and compromise school performance through skipping school and receipt of suspensions are all related. We do not have direct achievement data and cannot perform an analysis of the relationship between these behaviors and student achievement due to the anonymous nature of the surveys. However, it is highly likely that scholastic achievement will be compromised to the degree that students are engaging in physical fights, carrying weapons to school, receiving suspensions, skipping school, using substances, and acquiring those substances on school property. We also do not have student dropout or school non-completion data due to the anonymous nature of the surveys and the lack of a longitudinal design. Yet, it is not unreasonable to suggest that these behaviors may be related to school non-completion, which is a particularly important measure of student achievement. This could be a particularly useful avenue for future investigation.

STUDENT DUI REPORTS

A series of questions were asked of students regarding whether they were in a car in which the driver was under the influence of either alcohol or other drugs. Questions were asked concerning whether they were a passenger or the driver in these instances. Results presented in Table 17B earlier had indicated that 6.3% of 8th-grade students, 14.5% of 10th-grade students, and 21.9% of 12th-grade students reported having used alcohol in a car in the past 30 days. Results presented below examine the degree to which students report being the driver in the car while under the influence of alcohol, as well as under the influence of drugs other than alcohol.

PASSENGER IN A CAR WHEN WITH DRIVER DUI

First, results presented in Table 43 examine student reports of being a passenger in a car in which the driver was under the influence of alcohol or other drugs in the past 30 days. Results indicate that the frequency with which students report being a passenger in a car in which the driver is under the influence of alcohol or other drugs

increases with age. At the high school level, 25% of students report being a passenger in a car in which the driver was under the influence of alcohol. Similar percentages are reported for the driver being under the influence of other drugs. The frequency of reports by students at all grade levels appears sizable given the severity and potential injury risk associated with these behaviors. Also troubling is the consistent finding across grade levels in which students in 2008 are more likely to report having been in a car in the past 30 days in which the driver was under the influence of alcohol or other drugs relative to their counterparts in 2006. The only exception occurred for alcohol among 12th-grade students which was not significantly different from 2006 to 2008.

Table 43: Passenger in a car when with driver DUI

Grade		Passenger with DUI Alcohol, last 30 days				Passenger with DUI Other Drugs, last 30 days			
		2006		2008		2006		2008	
		N	%	N	%	N	%	N	%
5	None	**4708**	**94.8%**	**1816**	**85.2%**	**4747**	**95.4%**	**1932**	**91.1%**
	Once or Twice	**142**	**2.9%**	**203**	**9.5%**	**87**	**1.7%**	**102**	**4.8%**
	3-5 Times	**56**	**1.1%**	**54**	**2.5%**	**41**	**0.8%**	**33**	**1.6%**
	6-9 Times	20	0.4%	18	0.8%	22	0.4%	11	0.5%
	> 9 Times	**42**	**0.8%**	**40**	**1.9%**	81	1.6%	42	2.0%
6	None	**4244**	**94.4%**	**1977**	**85.9%**	**4355**	**96.5%**	**2069**	**92.2%**
	Once or Twice	**171**	**3.8%**	**224**	**9.7%**	**77**	**1.7%**	**102**	**4.5%**
	3-5 Times	**31**	**0.7%**	**53**	**2.3%**	32	0.7%	28	1.2%
	6-9 Times	**11**	**0.2%**	**19**	**0.8%**	13	0.3%	15	0.7%
	> 9 Times	40	0.9%	28	1.2%	36	0.8%	31	1.4%
8	None	**3858**	**87.0%**	**1744**	**76.6%**	**4114**	**92.8%**	**1955**	**86.6%**
	Once or Twice	**368**	**8.3%**	**347**	**15.2%**	**162**	**3.7%**	**156**	**6.9%**
	3-5 Times	116	2.6%	80	3.5%	**59**	**1.3%**	**50**	**2.2%**
	6-9 Times	**33**	**0.7%**	**51**	**2.2%**	**30**	**0.7%**	**31**	**1.4%**
	> 9 Times	**57**	**1.3%**	**56**	**2.5%**	**70**	**1.6%**	**66**	**2.9%**
10	None	**3127**	**79.9%**	**1262**	**74.2%**	**3303**	**84.2%**	**1343**	**79.7%**
	Once or Twice	**465**	**11.9%**	**271**	**15.9%**	294	7.5%	159	9.4%
	3-5 Times	163	4.2%	84	4.9%	131	3.3%	79	4.7%
	6-9 Times	79	2.0%	36	2.1%	64	1.6%	41	2.4%
	> 9 Times	80	2.0%	48	2.8%	131	3.3%	63	3.7%
12	None	2378	77.2%	1242	74.0%	**2437**	**78.9%**	**1213**	**72.7%**
	Once or Twice	415	13.5%	263	15.7%	**275**	**8.9%**	**188**	**11.3%**
	3-5 Times	158	5.1%	93	5.5%	**137**	**4.4%**	**113**	**6.8%**
	6-9 Times	54	1.8%	39	2.3%	77	2.5%	48	2.9%
	> 9 Times	76	2.5%	42	2.5%	164	5.3%	106	6.4%

SELF-REPORT OF DUI

Results presented in Table 44 are somewhat difficult to interpret at the lower grade levels. A minority of students in the 2-5% range report driving under the influence of alcohol or other drugs when enrolled in 6th or 8th-grade. Either these students have managed to take a car for an illegal ride or they are not being truthful in their reports. Self DUI reports are slightly higher among students at the 10th-grade level where perhaps some of whom may have a legal driving license. However, a large shift occurs from 10th to 12th-grade, where 23.3% of students report having driven under the influence of alcohol at least once in the last 12 months, 13% report driving under the influence of

alcohol at least once in the last 30 days, and 18.4% of students report driving under the influence of other drugs in the last 30 days. Additionally, the frequency with which students report driving under the influence of other drugs in 12th-grade has significantly increased from 2006 to 2008. These reports by students who most likely have legal driving licenses are cause for concern especially in light of data presented earlier suggesting that alcohol and marijuana use may have increased at the high school level from 2006 to 2008.

Table 44: Self-report of DUI

		Self DUI Alcohol, last 30 days				Self DUI Alcohol, last 12 months				Self DUI Other Drugs, last 30 days			
		2006		2008		2006		2008		2006		2008	
Grade		N	%	N	%	N	%	N	%	N	%	N	%
6	None	**4466**	**99.5%**	**2187**	**98.3%**	**4451**	**99.0%**	**2255**	**97.8%**	**4496**	**99.7%**	**2217**	**98.2%**
	Once or Twice	17	0.4%	16	0.7%	31	0.7%	24	1.0%	**9**	**0.2%**	**23**	**1.0%**
	3-5 Times	**3**	**0.1%**	**12**	**0.5%**	**8**	**0.2%**	**15**	**0.7%**	**3**	**0.1%**	**12**	**0.5%**
	6-9 Times	1	0.0%	4	0.2%	3	0.1%	5	0.2%	1	0.0%	3	0.1%
	> 9 Times	2	0.0%	6	0.3%	4	0.1%	6	0.3%	2	0.0%	2	0.1%
8	None	**4336**	**98.0%**	**2173**	**96.9%**	4265	96.2%	2182	95.2%	**4366**	**98.0%**	**2156**	**95.1%**
	Once or Twice	62	1.4%	40	1.8%	108	2.4%	52	2.3%	**53**	**1.2%**	**58**	**2.6%**
	3-5 Times	12	0.3%	7	0.3%	29	0.7%	21	0.9%	19	0.4%	20	0.9%
	6-9 Times	3	0.1%	7	0.3%	12	0.3%	11	0.5%	8	0.2%	8	0.4%
	> 9 Times	**12**	**0.3%**	**16**	**0.7%**	**18**	**0.4%**	**25**	**1.1%**	**11**	**0.2%**	**25**	**1.1%**
10	None	3756	96.3%	1606	96.2%	3629	93.0%	1593	93.3%	**3727**	**94.9%**	**1554**	**91.7%**
	Once or Twice	90	2.3%	31	1.9%	167	4.3%	58	3.4%	110	2.8%	69	4.1%
	3-5 Times	30	0.8%	8	0.5%	52	1.3%	20	1.2%	**31**	**0.8%**	**32**	**1.9%**
	6-9 Times	8	0.2%	8	0.5%	24	0.6%	11	0.6%	20	0.5%	16	0.9%
	> 9 Times	**15**	**0.4%**	**16**	**1.0%**	**30**	**0.8%**	**26**	**1.5%**	38	1.0%	24	1.4%
12	None	2683	87.2%	1431	87.0%	2347	76.0%	1291	76.7%	**2682**	**86.7%**	**1370**	**81.6%**
	Once or Twice	253	8.2%	124	7.5%	432	14.0%	199	11.8%	178	5.8%	107	6.4%
	3-5 Times	81	2.6%	52	3.2%	128	4.1%	73	4.3%	**73**	**2.4%**	**67**	**4.0%**
	6-9 Times	35	1.1%	13	0.8%	62	2.0%	41	2.4%	46	1.5%	32	1.9%
	> 9 Times	25	0.8%	25	1.5%	120	3.9%	79	4.7%	**115**	**3.7%**	**102**	**6.1%**

SEATBELT AND HELMET SAFETY

New items concerning use of a car seat belt, as well as use of a helmet when riding a bicycle, motorcycle, or moped and when skateboarding or rollerblading were added in the 2008 survey. Results concerning these items are presented in Tables 45-49.

FREQUENCY OF WEARING A CAR SEAT BELT

Results presented in Table 45 indicate that 5th-grade students report the highest level of seatbelt use, with 66.6% indicating that they always wear a seatbelt. Reported seatbelt use is lower among older students. While approximately 80% of students report wearing a seatbelt 'most of the time' or 'always' at each grade level, these results clearly suggest a need for efforts focused upon increasing students' level of seatbelt use.

Table 45: Frequency of wearing a car seat belt						
Grade		Never	Rarely	Sometimes	Most of the time	Always
5	N	21	52	139	484	1387
	%	1.0%	2.5%	6.7%	23.2%	66.6%
6	N	37	99	237	556	1174
	%	1.8%	4.7%	11.3%	26.4%	55.8%
8	N	55	173	300	693	915
	%	2.6%	8.1%	14.0%	32.4%	42.8%
10	N	47	103	215	531	666
	%	3.0%	6.6%	13.8%	34.0%	42.6%
12	N	62	125	142	416	843
	%	3.9%	7.9%	8.9%	26.2%	53.1%

FREQUENCY OF WEARING A HELMET WHEN RIDING A BICYCLE, MOTORCYCLE, OR MOPED (FOR THOSE WHO REPORT RIDING ONE)

Results presented in Table 46 suggest that among those who do ride a bicycle, motorcycle, or moped, a majority report never wearing a helmet. Reported use of a helmet when riding a bicycle, motorcycle, or moped also declines with increasing age. Older students are less likely to use any of these than are younger students[21].

Table 46: Frequency of wearing a helmet when riding a bicycle, motorcycle, or moped (for those who report riding one)						
Grade		Never	Rarely	Sometimes	Most of the time	Always
5	N	295	198	260	391	727
	%	15.8%	10.6%	13.9%	20.9%	38.9%
6	N	462	297	302	357	450
	%	24.7%	15.9%	16.2%	19.1%	24.1%
8	N	656	379	296	232	223
	%	36.7%	21.2%	16.6%	13.0%	12.5%
10	N	584	219	129	91	104
	%	51.8%	19.4%	11.4%	8.1%	9.2%
12	N	450	136	96	77	108
	%	51.9%	15.7%	11.1%	8.9%	12.5%

[21] The percentage of students who report never riding a bicycle, motorcycle, or moped are as follows: Grade 5: 10%, Grade 6: 11%, Grade 8: 17%, Grade 10: 28%, Grade 12: 46%

FREQUENCY OF WEARING A HELMET WHEN ROLLERBLADING OR SKATEBOARDING (FOR THOSE WHO INDICATE THAT THEY ROLLERBLADE OR SKATE)

Results presented in Table 47 concerning helmet use associated with skateboarding or rollerblading are more pronounced than those reported in Table 40 concerning helmet use associated with riding a bicycle, motorcycle, or moped. From 8th-grade onward, a wide majority of those who report skateboarding or rollerblading indicate that they rarely or never use a helmet. Qualitative data may provide insights concerning reasons why students often do not wear a helmet when rollerblading or skateboarding.

Table 47: Frequency of wearing a helmet when rollerblading or skateboarding (for those who indicate that they rollerblade or skate)

Grade		Never	Rarely	Sometimes	Most of the time	Always
5	N	357	143	151	230	375
	%	28.4%	11.4%	12.0%	18.3%	29.9%
6	N	528	221	191	164	236
	%	39.4%	16.5%	14.3%	12.2%	17.6%
8	N	728	204	128	106	93
	%	57.8%	16.2%	10.2%	8.4%	7.4%
10	N	537	104	52	26	26
	%	72.1%	14.0%	7.0%	3.5%	3.5%
12	N	510	77	28	25	22
	%	77.0%	11.6%	4.2%	3.8%	3.3%

RELATIONSHIP BETWEEN SELF-REPORT OF DUI AND SEATBELT USE AMONG 12TH-GRADE STUDENTS

Results presented in Table 48 examine students' reports of seatbelt use based upon whether or not they had reported driving under the influence of alcohol or drugs. Results indicate a clear relationship in which students who report that they have driven under the influence of alcohol or other substances also report wearing a seatbelt with less frequency. Once again, we see a co-occurrence of risk factors. In this case, the combination of driving under the influence of alcohol or other substances while not wearing a seatbelt can be particularly harmful.

Table 48: Relationship between Self-Report of DUI and Seatbelt Use among 12th-grade Students

		Frequency of wearing car seat belt									
		Never		Rarely		Sometimes		Most of the time		Always	
		N	%	N	%	N	%	N	%	N	%
DUI Alcohol 12-months	No	**32**	**2.6%**	**74**	**6.1%**	100	8.3%	307	25.4%	**698**	**57.6%**
	Yes	**30**	**8.1%**	**50**	**13.6%**	41	11.1%	108	29.3%	**140**	**37.9%**
DUI-Alcohol 30 days	No	**36**	**2.7%**	**94**	**7.0%**	126	9.3%	344	25.5%	**750**	**55.6%**
	Yes	**24**	**12.1%**	**27**	**13.6%**	15	7.6%	62	31.3%	**70**	**35.4%**
DUI-Drugs-30 days	No	**33**	**2.5%**	**79**	**6.1%**	117	9.0%	326	25.2%	**741**	**57.2%**
	Yes	**29**	**10.2%**	**45**	**15.8%**	23	8.1%	89	31.3%	**98**	**34.5%**

RELATIONSHIP BETWEEN REPORTS OF DRINKING IN A CAR IN THE LAST 30 DAYS AND SEATBELT USE

Similarly, results presented in Table 49 indicate that students who report drinking alcohol when in a car also report wearing a seatbelt with less frequency in comparison to students who do not report drinking alcohol in a car.

Table 49: Relationship between reports of Drinking in a Car in the last 30 days and Seatbelt Use

		Frequency of wearing a seatbelt									
		Never		Rarely		Sometimes		Most of the time		Always	
Grade	Drinking	N	%	N	%	N	%	N	%	N	%
10	No	**30**	**2.3%**	**74**	**5.6%**	**169**	**12.7%**	437	33.0%	**616**	**46.5%**
	Yes	**16**	**7.3%**	**27**	**12.3%**	**43**	**19.5%**	88	40.0%	**46**	**20.9%**
12	No	**32**	**2.6%**	**78**	**6.3%**	99	8.0%	308	25.0%	**717**	**58.1%**
	Yes	**30**	**8.9%**	**46**	**13.6%**	40	11.8%	104	30.8%	**118**	**34.9%**

SECTION SUMMARY

Results presented in this section have indicated a need for improvement in the degree to which students practice safety precautions when engaged in activities in which they are susceptible to serious injury. Approximately half of high school students report that they always wear a seatbelt. Results presented earlier in Table 17B had indicated that approximately 15% of 10th-grade students and 20% of 12th-grade students report drinking alcohol while in a car in the 30 days prior to the survey. Data presented in the previous section had indicated that almost 25% of 12th-grade students reported that they had driven while under the influence of alcohol in the last 12 months. Results presented in this section indicate that students who either drink while in a car or drive under the influence of alcohol or other substances report that they less likely to wear a seatbelt compared to students who do not report engaging in these behaviors.

When we examined relationships between substance use and behavioral indices including skipping school, receiving an ISS, an OSS, fighting, or bringing a weapon to school we found a clear overlap among risk behaviors. In this section we once again found a clear overlap in risky behaviors that may be associated with poor outcomes up to and including premature death in a car crash. These data strongly suggest the need for further efforts to promote safety in these areas.

Results presented in this section also indicated very low rates of wearing a helmet when riding a bicycle, moped, or motorcycle, as well as skateboarding and rollerblading. These data are inexact with respect to the relative frequency with which students wear a helmet when riding a moped or motorcycle relative to riding a bicycle. One might expect a higher rate of helmet use when riding a moped or motorcycle, but we can't be sure based upon these data.

Findings regarding helmet use when skateboarding in particular must be viewed in light of the social context in which this behavior occurs. Wearing a helmet may be seen as "uncool" among students who gather in social groups centered on the activity of skateboarding. Any efforts to increase safety with regard to helmet use must account for the effects of this social context. Similarly, many students had reported in prior analyses that using substances contained in this study presented a "great risk" to their health. Yet, they used the substances anyway. In these cases, the social context of the activity is likely driving the behavior despite education and awareness concerning the potential consequences of the behavior.

ADULT SUPERVISION

One factor that may protect students from potential harm associated with substance use involves adult supervision. The 2008 survey included four new items focused upon adult supervision. Students were asked how often an adult was present in the home after school, how often they went to a teacher for a problem or concern in the last 30 days, whether their family has clear rules about the use tobacco, alcohol, marijuana, and 'other drugs', and how wrong their parents feel it would be for them to use tobacco, alcohol, marijuana, and other drugs. Developmental changes in student reports are examined. Student reports on these items are also compared to self reports of substance use.

ADULT PRESENCE AT HOME AFTER SCHOOL

Results presented in Table 50 indicate a pattern where student reports of an adult being present in the home after school decline with increasing grade level. This question is somewhat inexact in that students usually do not attend school 7 days per week yet the question has a range of seven days rather than five. Nonetheless, results appear to be valid from a developmental perspective where parental supervision is likely stronger when children are younger.

Table 50: Adult presence at home after school

Grade		Never	1 or 2 days per week	3 or 4 days per week	5 or 6 days per week	Every day
5	N	73	155	111	147	1589
	%	3.5%	7.5%	5.3%	7.1%	76.6%
6	N	108	171	150	222	1462
	%	5.1%	8.1%	7.1%	10.5%	69.2%
8	N	118	204	206	258	1358
	%	5.5%	9.5%	9.6%	12.0%	63.3%
10	N	241	239	178	135	784
	%	15.3%	15.2%	11.3%	8.6%	49.7%
12	N	300	256	181	151	708
	%	18.8%	16.0%	11.3%	9.5%	44.4%

REPORTED USE OF ALCOHOL ACROSS SETTINGS BASED UPON REPORTS OF ADULT BEING HOME AFTER SCHOOL

Results presented in Tables 51A and 51B examine student reports of using alcohol across settings by their reports of the frequency of an adult being present in the home after school[22]. Analyses had initially examined the relationship between using alcohol at home only with reported adult presence in the home. This analysis, which constitutes the first portion of Table 51A indicated a consistent effect from 6th- through 12th-grade in which students who reported always having an adult present in the home after school were less likely to indicate having used alcohol in the home in the last 30 days relative to students who report having an adult presence in the home less than 'always'. We were then not sure whether students may have shifted their use to a context outside the

[22] Adult presence in the home after school was collapsed into three categories, Never, 1-6 days/wk, and Always to compensate for unreliability due to having a 7 day range when there are 5 school days.

home in cases where an adult was always present in the home after school. To the contrary, results found across Tables 51A and 51B indicate lower prevalence of reported alcohol use across settings and grade levels among students who report having an adult always present in the home after school relative to students who report having an adult present in the home after school less than 'always'.

Also noteworthy is that the strongest relationship between adult supervision and reported alcohol use occurs in the home during 8th-grade where alcohol use in the home during the last 30 days ranges from 39.3% for students who report 'never' having an adult in the home after school, to 27% for students who report having an adult present from 1-6 days/wk, to 17.2% for students who report 'always' having an adult present in the home after school. Given that 8th-grade appears to be a significant turning point in which substance use increases substantially, having an adult present in the home after school may be a particularly effective means of curtailing substance use.

Table 51A: Reported use of Alcohol Across Settings based upon reports of Adult Being Home After School

		Home				School				Friend's Home			
		No		Yes		No		Yes		No		Yes	
Grade	Adult Present	N	%	N	%	N	%	N	%	N	%	N	%
5	Never	66	93.0%	5	7.0%	71	100%	0	0.0%	71	100%	0	0.0%
	1-6 days/wk	384	94.1%	24	5.9%	402	100%	0	0.0%	397	97.8%	9	2.2%
	Always	1489	95.1%	77	4.9%	1551	99.8%	3	0.2%	1546	98.9%	17	1.1%
6	Never	92	87.6%	13	12.4%	104	99.0%	1	1.0%	100	95.2%	5	4.8%
	1-6 days/wk	460	85.2%	80	14.8%	533	99.4%	3	0.6%	502	93.5%	35	6.5%
	Always	1356	93.3%	98	6.7%	1443	99.6%	6	0.4%	1410	97.2%	40	2.8%
8	Never	71	60.7%	46	39.3%	107	93.0%	8	7.0%	81	68.6%	37	31.4%
	1-6 days/wk	481	72.9%	179	27.1%	635	96.8%	21	3.2%	513	78.0%	145	22.0%
	Always	1119	82.8%	232	17.2%	1318	98.2%	24	1.8%	1151	85.5%	195	14.5%
10	Never	154	64.2%	86	35.8%	220	92.4%	18	7.6%	141	59.0%	98	41.0%
	1-6 days/wk	356	65.3%	189	34.7%	511	93.9%	33	6.1%	337	61.3%	213	38.7%
	Always	575	73.9%	203	26.1%	744	96.0%	31	4.0%	545	70.0%	234	30.0%
12	Never	175	58.7%	123	41.3%	271	90.9%	27	9.1%	142	47.8%	155	52.2%
	1-6 days/wk	364	62.2%	221	37.8%	552	94.8%	30	5.2%	261	44.7%	323	55.3%
	Always	487	69.2%	217	30.8%	670	95.7%	30	4.3%	392	55.5%	314	44.5%

Table 51B: Reported use of Alcohol Across Settings based upon reports of Adult Being Home After School									
		Car				Other			
		No		Yes		No		Yes	
Grade	Adult Present	N	%	N	%	N	%	N	%
5	Never	70	98.6%	1	1.4%	65	90.3%	7	9.7%
	1-6 days/wk	401	99.5%	2	0.5%	373	92.1%	32	7.9%
	Always	1541	99.5%	7	0.5%	1506	97.3%	42	2.7%
6	Never	103	98.1%	2	1.9%	98	92.5%	8	7.5%
	1-6 days/wk	526	98.0%	11	2.0%	487	90.7%	50	9.3%
	Always	1425	98.7%	19	1.3%	1378	95.5%	65	4.5%
8	Never	97	84.3%	18	15.7%	79	68.1%	37	31.9%
	1-6 days/wk	597	91.0%	59	9.0%	509	77.0%	152	23.0%
	Always	1288	96.0%	53	4.0%	1147	85.4%	196	14.6%
10	Never	191	79.9%	48	20.1%	157	65.7%	82	34.3%
	1-6 days/wk	455	83.2%	92	16.8%	357	65.3%	190	34.7%
	Always	693	89.4%	82	10.6%	582	74.8%	196	25.2%
12	Never	216	73.0%	80	27.0%	182	61.1%	116	38.9%
	1-6 days/wk	448	77.0%	134	23.0%	329	56.2%	256	43.8%
	Always	575	81.8%	128	18.2%	446	63.5%	256	36.5%

FREQUENCY OF GOING TO A TEACHER FOR A PROBLEM OR CONCERN IN THE LAST 30 DAYS

Results presented in Table 52 are difficult to interpret. The reasoning associated with this question is that students who seek adult help may be protected from engagement in risky behaviors. However, there are several interactions involved with this process that cannot be addressed with one question. For example, not going to a teacher with a problem or concern may be associated with having less problems or concerns in the school context rather than avoidance of adult interaction. It is also unclear which problem or concern the student may be thinking of when answering this question. Going to a teacher for a concern regarding math questions may not be associated with a student's ability to seek help with difficulties regarding substance use.

Results presented in Table 52 do support a developmental progression in which adults are consulted regarding students' problems with decreasing frequency as they advance through school. Several additional analyses were conducted examining reported substance use based upon reports of going to a teacher with a problem or concern. None yielded significant effects. Further refinement of this question is needed to enhance its validity and utility beyond the finding that students report seeking a teacher's help with a problem less at the higher grade levels.

Table 52: Frequency of going to a teacher for a problem or concern in the last 30 days					
Grade		0 times	1 time	2 times	3 or more times
5	N	988	475	281	324
	%	47.8%	23.0%	13.6%	15.7%
6	N	1164	430	260	253
	%	55.2%	20.4%	12.3%	12.0%
8	N	1462	368	151	161
	%	68.3%	17.2%	7.0%	7.5%
10	N	1082	247	121	124
	%	68.7%	15.7%	7.7%	7.9%
12	N	1082	256	132	124
	%	67.9%	16.1%	8.3%	7.8%

STUDENT REPORTS OF CLEAR FAMILY RULES CONCERNING SUBSTANCE USE

Results presented in Table 53 examine student reports of whether their family has clear rules concerning use of tobacco, alcohol, marijuana, and 'other' drugs. Reports are fairly consistent across substances and across grade levels. Approximately 80-90% of students at each grade level report that their family has clear rules regarding the use of tobacco, alcohol, marijuana, and other drugs. There is a decline in reports of clear rules regarding tobacco use in 12th-grade, when students are approaching or have reached the legal age of 18 to purchase tobacco. Reports of clear rules regarding alcohol use decline steadily from 6th-grade onward. It is not clear whether the actual rules change as students become older or whether they are justifying their increased use of alcohol with reports of less clarity regarding rules associated with alcohol. This latter effect may also account for the drop in perceptions of clear rules regarding the use of marijuana from 82.2% in 10th-grade to 76.1% in 12th-grade.

Table 53: My family has clear rules about

Grade		Tobacco use		Alcohol use		Marijuana use		Other Drug use	
		Yes	No	Yes	No	Yes	No	Yes	No
5	N	1699	332	1644	380	1721	311	1717	311
	%	83.7%	16.3%	81.2%	18.8%	84.7%	15.3%	84.7%	15.3%
6	N	1720	302	1652	358	1758	258	1752	258
	%	85.1%	14.9%	82.2%	17.8%	87.2%	12.8%	87.2%	12.8%
8	N	1702	396	1572	513	1747	336	1776	308
	%	81.1%	18.9%	75.4%	24.6%	83.9%	16.1%	85.2%	14.8%
10	N	1249	310	1145	405	1273	275	1352	192
	%	80.1%	19.9%	73.9%	26.1%	82.2%	17.8%	87.6%	12.4%
12	N	1086	483	1043	523	1190	373	1321	235
	%	69.2%	30.8%	66.6%	33.4%	76.1%	23.9%	84.9%	15.1%

REPORTED SUBSTANCE USE PREVALENCE BY STUDENT REPORTS OF FAMILY HAVING CLEAR RULES

Results presented in Tables 54A-54C examine students' reports of substance use prevalence based upon whether they report that there are clear family rules regarding each substance. Results strongly indicate that reports of clear family rules are associated with less substance use across substances (tobacco, alcohol, marijuana) and across grade levels, with the exception of non-significant effects at the 5th-grade level for tobacco and marijuana use. These results indicate that perceptions and behavior are clearly related. However, it is not clear whether students' perceptions of clear family rules are accurate, or whether students are adjusting their perceptions to match their substance use behavior. Longitudinal and cross-informant data are necessary to disentangle these possible effects.

Table 54A: Tobacco use prevalence by report of family having clear rules									
		Tobacco-Recent				Tobacco-Lifetime			
		Yes		No		Yes		No	
Grade	Rules	N	%	N	%	N	%	N	%
5	Yes	11	0.6%	1688	99.4%	26	1.5%	1671	98.5%
	No	4	1.2%	328	98.8%	12	3.6%	319	96.4%
6	Yes	25	1.5%	1694	98.5%	79	4.6%	1631	95.4%
	No	11	3.6%	291	96.4%	32	10.8%	263	89.2%
8	Yes	133	7.8%	1567	92.2%	233	14.2%	1410	85.8%
	No	84	21.2%	312	78.8%	114	31.4%	249	68.6%
10	Yes	189	15.1%	1059	84.9%	266	23.3%	874	76.7%
	No	105	33.9%	205	66.1%	99	39.4%	152	60.6%
12	Yes	252	23.2%	834	76.8%	284	31.1%	630	68.9%
	No	224	46.4%	259	53.6%	178	54.9%	146	45.1%

Table 54B: Alcohol use prevalence by report of family having clear rules									
		Alcohol-R				Alcohol-L			
		Yes		No		Yes		No	
Grade	Rules	N	%	N	%	N	%	N	%
5	Yes	14	0.9%	1630	99.1%	51	3.1%	1592	96.9%
	No	13	3.4%	367	96.6%	28	7.4%	351	92.6%
6	Yes	36	2.2%	1613	97.8%	103	6.3%	1544	93.7%
	No	39	10.9%	319	89.1%	59	16.8%	293	83.2%
8	Yes	191	12.2%	1380	87.8%	393	25.6%	1141	74.4%
	No	158	30.9%	354	69.1%	240	51.0%	231	49.0%
10	Yes	331	28.9%	813	71.1%	508	48.2%	547	51.8%
	No	190	47.0%	214	53.0%	243	71.3%	98	28.7%
12	Yes	440	42.2%	602	57.8%	462	56.1%	361	43.9%
	No	297	56.8%	226	43.2%	270	74.8%	91	25.2%

Table 54C: Marijuana use prevalence by report of family having clear rules									
		Marijuana-R				Marijuana-L			
		Yes		No		Yes		No	
Grade	Rules	N	%	N	%	N	%	N	%
5	Yes	3	0.2%	1718	99.8%	4	0.2%	1717	99.8%
	No	1	0.3%	310	99.7%	3	1.0%	308	99.0%
6	Yes	15	0.9%	1738	99.1%	28	1.6%	1726	98.4%
	No	9	3.5%	248	96.5%	15	5.9%	240	94.1%
8	Yes	114	6.5%	1627	93.5%	159	9.4%	1537	90.6%
	No	68	20.3%	267	79.7%	56	18.7%	243	81.3%
10	Yes	216	17.0%	1051	83.0%	275	23.5%	895	76.5%
	No	116	42.3%	158	57.7%	79	40.9%	114	59.1%
12	Yes	282	23.8%	903	76.2%	344	34.8%	645	65.2%
	No	172	46.1%	201	53.9%	118	49.2%	122	50.8%

PERCEPTIONS OF PARENTAL APPROVAL OF SUBSTANCE USE

Results presented in Tables 55A-55C indicate a sharp decline in the percentage of students who report that their parents believe it would be 'very wrong' to use tobacco, alcohol, and marijuana with increasing grade level. While the percentage of students who report that their parents believe it would be 'not wrong at all' increases with increasing grade level, this percentage does not rise above 12% for any substance at any grade level. Most students will state that their parents view substance use as wrong. However, they appear to soften the strength of this belief with increasing age. Results concerning the use of 'other drugs' are much more consistent across grade levels. The ambiguity of this item may have been associated with students' provision of a more socially desirable answer. In the abstract, students may be more likely to state that parents disapprove of substance use.

Table 55A: Perception of how wrong students' parents will feel if student uses Tobacco

	Tobacco							
	Very wrong		Wrong		A little bit wrong		Not at all wrong	
Grade	N	%	N	%	N	%	N	%
5	1981	96.1%	65	3.2%	11	0.5%	4	0.2%
6	1894	91.9%	126	6.1%	24	1.2%	17	0.8%
8	1749	82.7%	258	12.2%	80	3.8%	29	1.4%
10	1154	73.8%	282	18.0%	99	6.3%	29	1.9%
12	892	56.4%	365	23.1%	233	14.7%	92	5.8%

Table 55B: Perception of how wrong students' parents will feel if student uses Alcohol

	Alcohol							
	Very wrong		Wrong		A little bit wrong		Not at all wrong	
Grade	N	%	N	%	N	%	N	%
5	1819	88.6%	139	6.8%	78	3.8%	18	0.9%
6	1679	81.6%	226	11.0%	115	5.6%	37	1.8%
8	1328	62.9%	434	20.6%	257	12.2%	92	4.4%
10	773	49.4%	383	24.5%	328	21.0%	81	5.2%
12	557	35.3%	361	22.9%	471	29.8%	190	12.0%

Table 55C: Perception of how wrong students' parents will feel if student uses Marijuana

	Marijuana							
	Very wrong		Wrong		A little bit wrong		Not at all wrong	
Grade	N	%	N	%	N	%	N	%
5	2013	98.0%	34	1.7%	6	0.3%	2	0.1%
6	1964	95.8%	52	2.5%	18	0.9%	17	0.8%
8	1842	87.3%	162	7.7%	66	3.1%	40	1.9%
10	1199	76.8%	211	13.5%	109	7.0%	42	2.7%
12	1058	67.1%	258	16.4%	161	10.2%	100	6.3%

Table 55D: Perception of how wrong students' parents will feel if student uses Other Drugs								
	Other Drug(s)							
	Very wrong		Wrong		A little bit wrong		Not at all wrong	
	N	%	N	%	N	%	N	%
5	1985	96.7%	48	2.3%	15	0.7%	5	0.2%
6	1968	95.9%	59	2.9%	11	0.5%	15	0.7%
8	1942	91.8%	124	5.9%	25	1.2%	24	1.1%
10	1406	90.2%	121	7.8%	18	1.2%	13	0.8%
12	1379	87.4%	140	8.9%	35	2.2%	23	1.5%

REPORTED SUBSTANCE USE PREVALENCE BY PERCEPTIONS OF PARENTAL APPROVAL OF SUBSTANCE USE

Results presented in Tables 56A-56D indicate that students who report having used a substance are much less likely to report that their parents believe it is 'very wrong' to use the substance across grade levels relative to students who report not having used the substance. Those who report having recently used the substance are less likely to report that their parents believe it would be very wrong to use the substance relative to those who have used the substance in their lifetime. These patterns are consistent with results concerning students' reports of their family having clear rules concerning substance use.

Table 56A: Perception of how wrong students' parents will feel if student uses tobacco by Recent and Lifetime Use										
			Tobacco							
			Very wrong		Wrong		A little bit wrong		Not at all wrong	
Grade		Use	N	%	N	%	N	%	N	%
5	Tobacco-R	No	1970	96.3%	61	3.0%	11	0.5%	4	0.2%
		Yes	11	73.3%	4	26.7%	0	0.0%	0	0.0%
	Tobacco-L	No	1949	96.5%	57	2.8%	9	0.4%	4	0.2%
		Yes	30	76.9%	7	17.9%	2	5.1%	0	0.0%
6	Tobacco-R	No	1874	92.6%	119	5.9%	21	1.0%	10	0.5%
		Yes	19	52.8%	7	19.4%	3	8.3%	7	19.4%
	Tobacco-L	No	1804	93.4%	103	5.3%	14	0.7%	10	0.5%
		Yes	79	69.9%	21	18.6%	8	7.1%	5	4.4%
8	Tobacco-R	No	1641	86.6%	200	10.6%	46	2.4%	8	0.4%
		Yes	106	48.4%	58	26.5%	34	15.5%	21	9.6%
	Tobacco-L	No	1490	89.0%	147	8.8%	31	1.9%	6	0.4%
		Yes	221	63.0%	90	25.6%	32	9.1%	8	2.3%
10	Tobacco-R	No	1018	80.3%	202	15.9%	41	3.2%	7	0.6%
		Yes	135	45.8%	80	27.1%	58	19.7%	22	7.5%
	Tobacco-L	No	861	83.8%	143	13.9%	20	1.9%	4	0.4%
		Yes	220	59.9%	98	26.7%	37	10.1%	12	3.3%
12	Tobacco-R	No	737	67.0%	238	21.6%	86	7.8%	39	3.5%
		Yes	155	32.2%	127	26.3%	147	30.5%	53	11.0%
	Tobacco-L	No	588	75.2%	139	17.8%	38	4.9%	17	2.2%
		Yes	209	45.1%	138	29.8%	88	19.0%	28	6.0%

Table 56B: Perception of how wrong students' parents will feel if student uses alcohol by Recent and Lifetime Use

			Alcohol							
			Very wrong		Wrong		A little bit wrong		Not at all wrong	
Grade		Use	N	%	N	%	N	%	N	%
5	Alcohol-R	No	1804	89.0%	136	6.7%	73	3.6%	14	0.7%
		Yes	15	55.6%	3	11.1%	5	18.5%	4	14.8%
	Alcohol-L	No	1768	89.7%	126	6.4%	65	3.3%	13	0.7%
		Yes	50	62.5%	13	16.3%	13	16.3%	4	5.0%
6	Alcohol-R	No	1649	83.5%	201	10.2%	97	4.9%	28	1.4%
		Yes	25	32.5%	25	32.5%	18	23.4%	9	11.7%
	Alcohol-L	No	1596	85.0%	169	9.0%	87	4.6%	25	1.3%
		Yes	80	47.3%	52	30.8%	26	15.4%	11	6.5%
8	Alcohol-R	No	1207	68.8%	340	19.4%	164	9.4%	43	2.5%
		Yes	119	33.5%	94	26.5%	93	26.2%	49	13.8%
	Alcohol-L	No	1032	74.4%	242	17.4%	90	6.5%	23	1.7%
		Yes	270	42.1%	177	27.6%	147	22.9%	47	7.3%
10	Alcohol-R	No	605	58.4%	231	22.3%	168	16.2%	32	3.1%
		Yes	168	31.9%	152	28.8%	158	30.0%	49	9.3%
	Alcohol-L	No	444	68.2%	127	19.5%	65	10.0%	15	2.3%
		Yes	280	36.9%	223	29.4%	215	28.3%	41	5.4%
12	Alcohol-R	No	387	46.3%	177	21.2%	192	23.0%	80	9.6%
		Yes	169	22.8%	184	24.8%	279	37.6%	110	14.8%
	Alcohol-L	No	273	60.0%	89	19.6%	63	13.8%	30	6.6%
		Yes	210	28.3%	194	26.1%	256	34.5%	82	11.1%

Table 56C: Perception of how wrong students' parents will feel if student uses marijuana by Recent and Lifetime Use

			Marijuana							
			Very wrong		Wrong		A little bit wrong		Not at all wrong	
Grade		Use	N	%	N	%	N	%	N	%
5	Marijuana-R	No	2011	98.0%	32	1.6%	6	0.3%	2	0.1%
		Yes	2	50.0%	2	50.0%	0	0.0%	0	0.0%
	Marijuana-L	No	2008	98.0%	32	1.6%	6	0.3%	2	0.1%
		Yes	5	71.4%	2	28.6%	0	0.0%	0	0.0%
6	Marijuana-R	No	1943	96.1%	50	2.5%	13	0.6%	15	0.7%
		Yes	15	62.5%	2	8.3%	5	20.8%	2	8.3%
	Marijuana-L	No	1930	96.5%	47	2.4%	10	0.5%	13	0.7%
		Yes	28	65.1%	5	11.6%	6	14.0%	4	9.3%
8	Marijuana-R	No	1750	91.1%	118	6.1%	38	2.0%	14	0.7%
		Yes	86	46.7%	44	23.9%	28	15.2%	26	14.1%
	Marijuana-L	No	1667	92.3%	99	5.5%	30	1.7%	11	0.6%
		Yes	132	61.1%	52	24.1%	19	8.8%	13	6.0%
10	Marijuana-R	No	1022	83.8%	138	11.3%	48	3.9%	11	0.9%
		Yes	172	51.3%	71	21.2%	61	18.2%	31	9.3%
	Marijuana-L	No	899	88.1%	89	8.7%	25	2.5%	7	0.7%
		Yes	224	63.3%	75	21.2%	46	13.0%	9	2.5%
12	Marijuana-R	No	854	76.9%	167	15.0%	63	5.7%	27	2.4%
		Yes	198	43.0%	91	19.8%	98	21.3%	73	15.9%
	Marijuana-L	No	644	83.6%	83	10.8%	28	3.6%	15	1.9%
		Yes	290	61.8%	101	21.5%	60	12.8%	18	3.8%

SECTION SUMMARY

Results presented in this section do suggest that a protective effect involving adult supervision does exist relative to students' reports of substance use. Students who report always having an adult present in the home after school are less likely to report drinking alcohol in the last 30 days across contexts relative to students who report having an adult present in the home after school less than 'always'. Reports of having an adult present in the home after school may be a proxy for socioeconomic status and all the factors associated with it. However, this does not preclude the likelihood that adult presence in the home may have a significant protective effect in relation to students' substance use.

Reports of students' families having clear rules concerning substance use and student reports of parents' beliefs regarding how wrong it would be to use tobacco, alcohol, and marijuana are also strongly related to student reports of substance use. While the directionality of these relationships is unclear, the fact that positive associations exist among these reports is apparent. Further investigation must delineate whether parental rules and perceived parental attitudes have a protective effect or whether students are adjusting their perceptions to align with their substance use histories.

HEALTHCARE

Another factor that may protect students from negative health related outcomes involves receipt of yearly medical checkups as well as medical attention when a student is sick. Results presented in Tables 57-59 examine whether students report seeing a doctor or dentist for a checkup in the last 12 months and where they received healthcare when sick during the last 12 months.

SEEING A DOCTOR OR DENTIST FOR A CHECK-UP IN THE LAST 12 MONTHS

Results presented in Table 57 indicate that approximately 75% of students report seeing a doctor for a checkup in the last 12 months and that this rate is fairly consistent across grade levels. While the rate at which students report seeing a dentist for a checkup in the last 12 months declines somewhat with age, the rate remains between 66.2% and 74.8% across grade levels.

Table 57: Seeing doctor or dentist for a check-up

Grade		Seen a doctor in last 12 months		Seen a dentist in last 12 months	
		Yes	No	Yes	No
5	N	1466	580	1542	520
	%	71.7%	28.3%	74.8%	25.2%
6	N	1592	505	1418	676
	%	75.9%	24.1%	67.7%	32.3%
8	N	1592	550	1486	662
	%	74.3%	25.7%	69.2%	30.8%
10	N	1171	407	1044	532
	%	74.2%	25.8%	66.2%	33.8%
12	N	1142	452	1087	510
	%	71.6%	28.4%	68.1%	31.9%

PLACE VISITED WHEN SICK IN THE LAST 12 MONTHS

Results presented in Table 58 indicate that, among students who have received medical care when sick in the last 12 months[23], approximately 75% receive care from a family doctor, 15% from a walk-in clinic, and 10% from a hospital or emergency room across grade levels.

Table 58: Place visited when sick in last 12 months

Grade		Family doctor or pediatrician	Walk-in clinic	Hospital or emergency room
5	N	1260	249	174
	%	74.9%	14.8%	10.3%
6	N	1299	242	175
	%	75.7%	14.1%	10.2%
8	N	1398	227	171
	%	77.8%	12.6%	9.5%
10	N	1046	161	115
	%	79.1%	12.2%	8.7%
12	N	1053	210	101
	%	77.2%	15.4%	7.4%

COMBINED HEALTHCARE USAGE

Results presented in Table 59 indicate a vast difference between students who report having a checkup in the last 12 months and those who report not having a checkup in the frequency with which they report seeing a doctor when sick in the last 12 months. Among students who had reported seeing a doctor for a checkup in the last 12 months, less than 5% across years report not having seen a doctor when sick. In contrast, among students who report not having seen a doctor for a checkup, approximately 50% report not having seen a doctor when sick. This effect holds across grade levels with a slightly lower 41.1% of students reporting not having seen a doctor at all in 12th-grade. It is highly unlikely that there are vast differences in the rates in which students become sick between those who do and do not have a checkup. These results strongly suggest that approximately 25% of students may not have health insurance coverage and half of those do not see a doctor when they are sick. Future studies may examine effects that this lack of healthcare may have upon student attendance rates, as well as fitness and academic achievement levels.

[23] Approximately 15% of students across years report not having seen a doctor when sick in the last 12 months: Grade 5: 17%, Grade 6: 16%, Grade 8: 15%, Grade 10: 15%, Grade 12: 13%

Table 59: Place visited when needed doctor's help									
		No doctor visit when sick in last 12 months		Family doctor or pediatrician		Walk-in clinic		Hospital or Emergency Room	
Grade	Checkup	N	%	N	%	N	%	N	%
5	Yes	62	4.3%	1065	74.4%	187	13.1%	118	8.2%
	No	283	49.6%	179	31.3%	58	10.2%	51	8.9%
6	Yes	59	3.8%	1144	74.3%	200	13.0%	137	8.9%
	No	271	54.4%	148	29.7%	42	8.4%	37	7.4%
8	Yes	50	3.2%	1215	77.6%	172	11.0%	129	8.2%
	No	263	48.7%	180	33.3%	55	10.2%	42	7.8%
10	Yes	32	2.8%	907	79.0%	128	11.1%	81	7.1%
	No	198	49.1%	138	34.2%	33	8.2%	34	8.4%
12	Yes	16	1.4%	899	80.4%	140	12.5%	63	5.6%
	No	181	41.1%	153	34.8%	69	15.7%	37	8.4%

BREAKFAST AND EXERCISE

Also central to the promotion of student health are proper diet and exercise. Results presented in Table 60 examine student reports of the frequency with which they eat breakfast and exercise in an average week. Results presented in Table 61 concern the reported location of student exercise. Exercise was defined for students as participating in a physical activity for at least 20 minutes that makes them sweat and breathe hard, with examples provided of basketball, soccer, running, swimming laps, rollerblading, fast bicycling, fast dancing, or similar aerobic activities.

FREQUENCY OF EATING BREAKFAST AND EXERCISING

Results presented in Table 60 indicate a steady decrease with age in the frequency with which students report that they eat breakfast and exercise. While 73.5% of 5th-grade students report that they eat breakfast 6 or 7 days a week, only 27.5% of 12th-grade students report that they do so. At both 10th and 12th-grade, a majority of students report that they eat breakfast less than four times per week. By 12th-grade, a majority of students report that they exercise less than four times per week. While these data are consistent with developmental trends, they may also be related to the 7:05 high school start time and diminished physical education options at the high school level. Students may have less opportunity to eat breakfast given demands to start school at 7:05. Lack of a structured context such as physical education class may diminish the likelihood that students who are not involved in organized sports will consistently engage in physical exercise.

Table 60: Frequency of breakfast and exercise in an average week					
		Breakfast		Exercise	
Grade		N	%	N	%
5	Never	61	2.9%	66	3.2%
	1 day	44	2.1%	48	2.3%
	2 or 3 days	169	8.2%	231	11.1%
	4 or 5 days	273	13.2%	571	27.5%
	6 or 7 days	1521	73.5%	1158	55.8%
6	Never	114	5.4%	118	5.6%
	1 day	101	4.8%	78	3.7%
	2 or 3 days	285	13.5%	338	16.0%
	4 or 5 days	369	17.5%	571	27.1%
	6 or 7 days	1237	58.7%	1002	47.6%
8	Never	214	10.0%	166	7.7%
	1 day	152	7.1%	110	5.1%
	2 or 3 days	402	18.7%	423	19.7%
	4 or 5 days	390	18.2%	623	29.0%
	6 or 7 days	988	46.0%	825	38.4%
10	Never	277	17.6%	168	10.7%
	1 day	154	9.8%	110	7.0%
	2 or 3 days	360	22.9%	353	22.4%
	4 or 5 days	222	14.1%	428	27.2%
	6 or 7 days	558	35.5%	515	32.7%
12	Never	304	19.1%	217	13.6%
	1 day	190	11.9%	155	9.7%
	2 or 3 days	401	25.2%	377	23.7%
	4 or 5 days	258	16.2%	395	24.8%
	6 or 7 days	437	27.5%	448	28.1%

LOCATION OF EXERCISE

Results presented in Table 61 may be consistent with hypotheses concerning the role of structured contexts in the promotion of physical exercise. Students were asked where they "usually exercise or participate in physical activities". The percentage of students who identify school as the location where they usually exercise declines in middle school. This may be due to less physical education options in middle school relative to elementary school. This percentage then increases in high school, which may be due to students' participation in organized high school sports. The percentage of students who report usually exercising at home or at a friend's home remains consistent across years while those who report exercising "at another location" declines in high school. This decline may be due to increased involvement in organized high school sports relative to involvement elsewhere. This also may be associated with less community-based options to participate in organized physical activities at the high school level.

Data indicating the percentage of students who report that they do not exercise at all increases steadily with grade level. This is consistent with data in Table 60 indicating that the percentage of students who report never

exercising increases with grade level, as do reports of exercising only 1 day a week or 2-3 days a week. While further data is necessary to draw firmer conclusions concerning the underlying causes, these data strongly suggest that students are exercising less as they become older.

Table 61: Location of exercise or physical activities

	Don't exercise		At school		At home		At a friend's home		At another location	
Grade	N	%	N	%	N	%	N	%	N	%
5	37	1.9%	421	21.5%	400	20.5%	57	2.9%	1040	53.2%
6	89	4.6%	303	15.7%	425	22.0%	88	4.5%	1031	53.3%
8	121	6.4%	348	18.5%	386	20.5%	80	4.2%	950	50.4%
10	122	8.9%	424	30.9%	283	20.6%	51	3.7%	494	36.0%
12	159	11.4%	384	27.4%	297	21.2%	29	2.1%	531	37.9%

AFTER SCHOOL ACTIVITIES

Given the importance of social context in the promotion of substance use behaviors, engagement in constructive after school activities may have a strong protective effect. Results presented in Tables 62 and 63 examine student reports of their after school activities.

Results presented in Table 62 examine student reports of the number of hours they spend in an average day outside of school, while results presented in Table 63 examine student reports of the number of hours they spend in an average week outside of school in several of the most common activities. Trends in relative frequencies of reported engagement in each activity as well as developmental shifts in student reports are examined.

The most notable trend in Table 62 concerns student reports of phone use, which increase considerably with age. In contrast, data suggest that engagement in more solitary activities including homework, reading/writing and drawing/creative activities decline somewhat with age. By 10th-grade, phone use surpasses TV viewing and computer use as the highest frequency activity overall. These trends are consistent with a developmental increase in emphasis placed upon socialization in peer networks with increasing age.

Table 62: Number of hours spent in an average day outside of school																	
		TV		Computer		Homework		Phone		Reading/Writing		Draw/Creative		Chores		Baby-Sitting	
Gr		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
5	None	94	4.5%	344	16.7%	64	3.1%	999	48.8%	626	30.3%	675	33.0%	512	24.9%	1207	59.1%
	< 2 Hours	1015	49.0%	1137	55.2%	1590	77.2%	753	36.7%	989	47.9%	781	38.1%	1209	58.8%	457	22.4%
	2-4 Hours	688	33.2%	406	19.7%	311	15.1%	168	8.2%	334	16.2%	409	20.0%	257	12.5%	230	11.3%
	5+ Hours	276	13.3%	174	8.4%	94	4.6%	129	6.3%	115	5.6%	183	8.9%	78	3.8%	149	7.3%
6	None	90	4.3%	291	14.0%	102	4.9%	655	31.6%	895	43.0%	773	37.1%	527	25.4%	1108	53.5%
	< 2 Hours	872	41.6%	955	46.0%	1426	68.7%	819	39.5%	794	38.2%	754	36.2%	1208	58.2%	534	25.8%
	2-4 Hours	802	38.3%	510	24.6%	428	20.6%	296	14.3%	253	12.2%	375	18.0%	255	12.3%	262	12.6%
	5+ Hours	330	15.8%	321	15.5%	121	5.8%	302	14.6%	138	6.6%	181	8.7%	87	4.2%	168	8.1%
8	None	104	4.9%	202	9.5%	226	10.7%	398	18.8%	1063	50.0%	967	45.5%	543	25.6%	1133	53.4%
	< 2 Hours	836	39.1%	853	40.1%	1373	64.7%	675	31.9%	645	30.3%	668	31.4%	1286	60.6%	573	27.0%
	2-4 Hours	842	39.4%	654	30.8%	410	19.3%	391	18.5%	286	13.4%	324	15.2%	210	9.9%	248	11.7%
	5+ Hours	354	16.6%	416	19.6%	113	5.3%	655	30.9%	133	6.3%	166	7.8%	84	4.0%	167	7.9%
10	None	116	7.4%	125	8.0%	242	15.5%	191	12.3%	807	51.6%	815	52.1%	344	22.0%	861	55.2%
	< 2 Hours	643	41.0%	624	39.9%	905	58.1%	441	28.3%	479	30.6%	399	25.5%	971	62.2%	365	23.4%
	2-4 Hours	575	36.7%	507	32.4%	323	20.7%	299	19.2%	177	11.3%	205	13.1%	182	11.7%	193	12.4%
	5+ Hours	233	14.9%	307	19.6%	88	5.6%	628	40.3%	101	6.5%	144	9.2%	64	4.1%	141	9.0%
12	None	132	8.3%	159	10.0%	285	18.0%	135	8.6%	781	49.2%	921	58.2%	373	23.6%	985	62.3%
	< 2 Hours	692	43.5%	727	45.9%	877	55.4%	520	33.0%	541	34.1%	371	23.4%	969	61.2%	321	20.3%
	2-4 Hours	559	35.2%	429	27.1%	344	21.7%	322	20.4%	183	11.5%	166	10.5%	181	11.4%	148	9.4%
	5+ Hours	207	13.0%	269	17.0%	76	4.8%	599	38.0%	81	5.1%	125	7.9%	60	3.8%	126	8.0%

Results presented in Table 61 indicate that team sports are consistently the most likely activity to involve students in a context outside the home for 5 or more hours per week among the choices listed below. Across grade levels, approximately 20-25% of students report doing so. Religious groups, community clubs, and volunteer efforts are each reported to involve below 10% of students for 5+ hours/week across grade levels. Involvement in school clubs for 5+ hours/week is reported by approximately 5% of students prior to high school and then by approximately 10% of students during high school. As students advance in grade, there is a shift from reporting eating with family 'less than 2 hours' to an increase in reporting not eating with family at all. By 12th-grade 16.3% of students report not eating with family.

Table 61: Number of hours spent in an average week outside of school													
		Team Sports		School Clubs		Community Clubs		Volunteer		Religious Groups		Eating w/ Family	
Grade		N	%	N	%	N	%	N	%	N	%	N	%
5	None	613	29.8%	1045	51.0%	1242	61.2%	1288	63.2%	1148	56.4%	109	5.3%
	Less than 2 hours	429	20.8%	593	28.9%	399	19.7%	459	22.5%	512	25.1%	954	46.8%
	2 to 4 hours	525	25.5%	274	13.4%	258	12.7%	190	9.3%	252	12.4%	387	19.0%
	5 to 9 hours	229	11.1%	72	3.5%	65	3.2%	60	2.9%	70	3.4%	226	11.1%
	10 to 14 hours	96	4.7%	23	1.1%	26	1.3%	16	0.8%	19	0.9%	111	5.4%
	15 to 19 hours	33	1.6%	13	0.6%	11	0.5%	10	0.5%	9	0.4%	68	3.3%
	20 or more hours	135	6.6%	30	1.5%	29	1.4%	16	0.8%	26	1.3%	185	9.1%
6	None	780	37.3%	1251	60.2%	1334	64.8%	1359	65.2%	1188	57.6%	168	8.1%
	Less than 2 hours	339	16.2%	459	22.1%	369	17.9%	423	20.3%	445	21.6%	853	41.2%
	2 to 4 hours	469	22.4%	239	11.5%	216	10.5%	177	8.5%	276	13.4%	365	17.6%
	5 to 9 hours	226	10.8%	57	2.7%	74	3.6%	58	2.8%	81	3.9%	217	10.5%
	10 to 14 hours	97	4.6%	19	0.9%	21	1.0%	26	1.2%	23	1.1%	113	5.5%
	15 to 19 hours	34	1.6%	13	0.6%	7	0.3%	10	0.5%	9	0.4%	77	3.7%
	20 or more hours	145	6.9%	39	1.9%	39	1.9%	31	1.5%	42	2.0%	278	13.4%
8	None	1013	47.5%	1437	67.5%	1475	69.6%	1417	66.7%	1234	58.3%	266	12.5%
	Less than 2 hours	260	12.2%	375	17.6%	294	13.9%	359	16.9%	390	18.4%	649	30.6%
	2 to 4 hours	296	13.9%	182	8.6%	195	9.2%	193	9.1%	313	14.8%	389	18.3%
	5 to 9 hours	218	10.2%	64	3.0%	86	4.1%	86	4.0%	103	4.9%	338	15.9%
	10 to 14 hours	126	5.9%	27	1.3%	22	1.0%	28	1.3%	34	1.6%	156	7.3%
	15 to 19 hours	69	3.2%	12	0.6%	10	0.5%	10	0.5%	13	0.6%	76	3.6%
	20 or more hours	149	7.0%	31	1.5%	37	1.7%	33	1.6%	30	1.4%	249	11.7%
10	None	783	50.0%	919	58.8%	1117	72.1%	1035	66.2%	996	64.0%	225	14.4%
	Less than 2 hours	175	11.2%	278	17.8%	187	12.1%	251	16.0%	226	14.5%	445	28.5%
	2 to 4 hours	176	11.2%	171	10.9%	126	8.1%	162	10.4%	186	12.0%	306	19.6%
	5 to 9 hours	130	8.3%	72	4.6%	59	3.8%	68	4.3%	86	5.5%	292	18.7%
	10 to 14 hours	102	6.5%	42	2.7%	24	1.5%	23	1.5%	33	2.1%	100	6.4%
	15 to 19 hours	68	4.3%	32	2.0%	12	0.8%	9	0.6%	10	0.6%	42	2.7%
	20 or more hours	132	8.4%	50	3.2%	25	1.6%	16	1.0%	19	1.2%	151	9.7%
12	None	878	55.2%	831	52.3%	1094	69.3%	1021	64.5%	1084	68.8%	258	16.3%
	Less than 2 hours	160	10.1%	315	19.8%	220	13.9%	250	15.8%	228	14.5%	430	27.2%
	2 to 4 hours	158	9.9%	226	14.2%	155	9.8%	187	11.8%	134	8.5%	362	22.9%
	5 to 9 hours	105	6.6%	88	5.5%	52	3.3%	71	4.5%	68	4.3%	291	18.4%
	10 to 14 hours	84	5.3%	43	2.7%	26	1.6%	26	1.6%	25	1.6%	107	6.8%
	15 to 19 hours	63	4.0%	30	1.9%	10	0.6%	11	0.7%	9	0.6%	32	2.0%
	20 or more hours	142	8.9%	57	3.6%	21	1.3%	18	1.1%	28	1.8%	101	6.4%

SECTION SUMMARY

Results presented earlier in Tables 50, 52, and 53 had indicated that student reports of having an adult present in the home after school decline with increasing grade level. The degree to which they report consulting a teacher

with a problem also declines as does their reported perceptions concerning whether their family has clear rules regarding substance use. Despite these declines, adult influence likely continues to have an effect upon student engagement in risky behaviors including substance use. This assertion is supported by relationships found in this report among reports of adult presence in the home after school, clear family rules regarding substance use, and students' reported prevalence of substance use. However, the phone data reported in this section provided a good indication of the marked developmental shift that takes place in which students' integration in peer networks involve increasingly considerable amounts of their time with increasing grade level. To the degree to which students are involved in constructive after school activities they may form relationships with peers that are not strongly related to engagement in substance use[24]. Further work is necessary to understand the degree to which involvement in positive peer networks and after school activities protect students from engagement in substance use in Pinellas County.

CONCLUSIONS

Results obtained from surveys of student health behaviors in 2006 and 2008 have provided potentially useful information concerning patterns of student substance use, bullying, and safety issues in Pinellas County Schools. Results suggest a low prevalence of substance use by the Fall of students' 5th-grade year. However, by the Fall of their 6th-grade year a significant minority of students report having used tobacco or alcohol. The percentage of students who report having tried tobacco or alcohol by the Fall of their 6th-grade year appears to have risen from 2006 to 2008.

Results then show a sizable increase in substance use among students during their middle school years. Results also suggest that usage of alcohol among middle school students may be increasing modestly from levels reported in 2006. The recent and lifetime prevalence of substance use appears to continue to rise from 8th- to 10th-grade. Results suggest that tobacco, alcohol, and marijuana use may have increased modestly among Pinellas high school students from 2006 to 2008. There also appears to be an increase in non-prescription drug use from 2006 to 2008 among older high school students. Results also indicate that the percentage of students who report being offered or sold illegal drugs on school grounds rises sharply from 5th- through 12th-grade, with a rate over 20% at the high school level.

Reports of teasing and bullying by students surveyed suggest that these behaviors have persisted at relatively high rates of prevalence from 2006 to 2008. While reports of teasing and bullying are higher among younger students, these behaviors remain problematic across grade levels. Of particular concern is the consistent presence of approximately 10% of students who report being teased 20 or more times in the 30 days prior to the survey at each grade level. Students also report being hit, kicked, pushed, or shoved at elevated rates of prevalence across years. These data are consistent with students' reports of having engaged in a physical fight on school property at an approximate prevalence of 20% through middle school, 15% in 10th-grade, and 10% in 12th-grade. Data indicate that reports of carrying a weapon to school increase at each grade level with 3.7% of 12th-grade students reporting carrying a weapon to school 6 or more times in the 30 days prior to the survey. The number of students reporting being threatened with a weapon and not going to school for safety reasons also suggest that these behaviors are not uncommon.

Results suggest that students' peer contexts play a strong role in the development and maintenance of substance use behaviors. Students in 5th and 6th-grade report attitudes consistent with substance use prevention. Attitudes favoring prevention efforts concerning both substance use and bullying appear to have become stronger from 2006 to 2008. However, despite what appears to be early recognition of the dangers associated with substance use,

[24] Examination of relationships between reports of involvement in after school activities in Table 61 and substance use reports did not yield significant findings. However, these data were omitted as they would represent a poor test of these relationships given the method of data collection. There are much preferable ways to evaluate the effectiveness of after school programs in relation to substance use.

students report engagement in substance use at increasingly higher levels from 8th-grade onward. Students' attitudes and perceptions also shift toward those more favorable to use of substances. This is particularly true regarding the use of marijuana at the high school level. Attitudes favorable to substance use are also stronger among students who report using substances, particularly among those who report having used them recently.

Student reports of fairly easy availability of illegal substances also appear to represent a key obstacle to prevention efforts. Among high school students who report using tobacco, alcohol, marijuana, and inhalants, 90% report that they are easy to obtain. Among those students who report use of lower prevalence illegal drugs such as heroin, approximately 50% or more report that they have been offered, bought, or were given an illegal drug on school grounds. Based upon these data, it appears that successful prevention efforts must account for the availability of these substances.

Despite strong increases in orientation toward peers, data suggest that families may continue to exert influence upon students' participation in substance use activities at the high school level. Students who report having an adult present at home after school report lower levels of alcohol use across contexts and across grade levels. Students who report that their parents feel it would be wrong to use substances and those who report that adults have clear rules toward use of substances are less likely to report using them. It is not clear whether students are aligning their reports of parental attitudes with their own substance use or whether parental attitudes and behaviors are having a protective effect. While directionality is unclear from these data, the presence of a strong relationship among these variables through time suggests that a protective effect associated with adult supervision and internalization of adult attitudes may persist through late adolescence.

A central finding that emerged repeatedly throughout this study was the co-occurrence of problem behaviors. These findings are backed by what is now considerably more than 30 years of research[25]. Students will rarely demonstrate difficulties in just one area of functioning. Results of this survey indicate that students who obtain in-school suspensions and out-of-school suspensions are much more likely to engage in substance use behaviors relative to students who do not report receipt of suspensions. The same is true among students who bring weapons to school and among those who engage in physical violence and skip school. While there is not complete overlap in these behaviors, they are strongly related. While we are unable to examine relationships among these behaviors, student achievement, and student non-completion, there is a strong chance that these outcomes are related.

Results of the present study provide a fairly good understanding of substance use, health, and safety behaviors among students in Pinellas County and the developmental and social contexts in which these behaviors are formed and maintained. Several results contained in this report have suggested that education efforts in Pinellas County have reached their intended audience. Results suggest that continued efforts to structure students' social environments to focus them on activities other than substance appear necessary. Results suggest that efforts to reduce the availability of substances, especially in the immediate school context, are also likely a necessary component of a broader ecological systems approach to substance use prevention in Pinellas County schools.

RECOMMENDATIONS

The school district and the community provide a variety of prevention and intervention programs for youth in Pinellas County. However, this survey documents that youth substance use, school safety risk factors, and bullying continue to be a concern. In considering the increase in reported use from previous surveys, it is prudent to consider how drugs and the manner in which youth access drugs have changed since the 2006 survey

[25] Hawkins, J.D., Catalano, R.F., & Miller, J.Y. (1992) Risk and protective factors for alcohol and other drug problems in adolescence and early adulthood: Implications for substance abuse prevention. *Psychological Bulletin, 112,* 64-105.

administration. For example, marijuana is not just marijuana but has an increased amount of THC and can be laced with heroin. The ability to purchase drugs over the Internet has increased. Adolescents who report using are reporting poly-drug use, particularly alcohol mixed with prescription drugs. Substance abuse related crime is changing with an increase in theft of prescription medications.

The Pinellas corridor is the third largest distributor of pain relief medication and according to a recent coroner's report, the leader in number of deaths related to prescription drug overdose. This is particularly problematic since youth are taking prescription medications without knowing the dangers and possible fatal consequences of what they are ingesting. There is also an increase in the media influence, notably music, which has influenced the cultural acceptability of drug use. Considering all of these factors, a comprehensive, community wide approach to prevention is needed.

1. **Continue to provide substance use prevention and refusal skills training in all grades.**
2. **Continue to improve the systematic focus on school-based substance use prevention programming for middle school- and high school-age students *and their families.***
3. **Key prevention leaders and stakeholders are encouraged to join the LiveFree! coalition to expand the effectiveness, reach and alignment of the Pinellas prevention system. The LiveFree! Purpose is to maximize resources that form a unified voice around public policy and action which covers a broad array of substance abuse prevention and treatment efforts that are focused and guided in an identified direction**
4. **Expand substance use prevention programming in community-based programs to reach elementary school, middle school, and high school-aged youth *and their families*.**
5. **Infuse alcohol, tobacco, prescription drug, marijuana, and other drug-prevention programming into all programs serving middle school-age youth that receive funding from JWB.**

The degree to which students are exposed to substance use prevention education varies considerably. It is unclear as to the impact, if any, changes in the delivery of health education and the elimination of the DARE program in 5th grade have had on components related to substance use prevention. Regardless of changes in the delivery and curriculum, it is important that schools continue to provide a clear and strong message about the consequences of using alcohol, tobacco, inhalants, illicit drugs and use and abuse of prescription and non-prescription drugs. The youth of Pinellas County need to hear a strong message about avoiding substance use with a focus on the fact that most students do not use drugs. Pinellas substance use surveys indicates that teens are not getting enough consistent messages about the consequences of substance use and about what parents and other adults expect with regard to teens avoiding alcohol and other drug use. Specific messages need to include discussions about inhalant use, especially in elementary and middle schools, and the use and abuse of prescription and non-prescription drugs. Middle and high school-age students, need to hear more about the dangers of binge drinking. These messages must be presented in a way that is consistent with how teens communicate including the use of technology.

The community must work to change norms and beliefs held by parents and other adults about experimentation with drugs being a normal 'rite of passage,' and address erroneous beliefs about the negative effects of substance use not only on their minds and bodies, but on their ability to learn and do well in school. The community also must work to change parents' behaviors that enable their children to use and abuse alcohol and other drugs. Data on rules set by parents and the community indicates that youth perceive a greater opposition to youth substance use by the community and in their schools than they do from their parents. Children and teens are receiving a clear message and a clearer standard from their community than from their own homes. This underscores the need to focus in this community on changing parents' attitudes and enabling behaviors. Numerous studies show that parental disapproval is a powerful force. Parents need to clearly voice their concern and establish rules for use of alcohol and other drugs.

Young people need ongoing positive influences outside of the school day to reduce unhealthy behaviors. As the Search Institute notes, Building 'developmental assets' has an important role in reducing youth substance use, particularly as when asset building engages the whole community in contributing to young people's healthy development. Widespread availability of positive youth development programs is related to reduced substance use.[26] A new report from the Institute indicates that "young people with low levels of developmental assets are two to four times more likely to use alcohol, tobacco, and other drugs than those who have above-average asset levels. This relationship is true for young people from all racial/ethnic, family, and socioeconomic backgrounds. Prevention programs are necessary, but not sufficient to substantially reduce overall substance use among youth.

A collaborative approach and sustained commitment from the entire community is needed. A comprehensive evidence based substance abuse prevention program should be provided across all grades and community sectors. Families must be included in these efforts and they need to be responsive to the changing needs of the community. Readers of this report should consider how to develop a better community prevention model. What is needed to create a unified effort for community response to prevention and intervention that includes both direct prevention and environmental strategies?

6. **Inform educators as well as parents about the negative impact that substance use and bullying have on academic achievement.**
7. **Expand existing bullying-prevention initiatives by increasing the number of schools offering a comprehensive prevention/intervention program, and including families and communities in the effort to prevent bullying at school.**

When students perceive their teachers as supporting, fair, respectful, and having high expectations, they show an increased self-efficacy, self-regulation and academic achievement. Positive adult relationships contribute to school bonding, which in turn is related to lower rates of alcohol consumption and smoking initiation.[27] Academics and social emotional learning can no longer be considered as separate entities. They must become part of the same educational discourse. Students cannot be expected to perform at their highest level if they do not feel physically and emotionally safe at school. A conscious effort to include prevention and intervention in school improvement planning is needed in order for schools to successfully prepare students for graduation.

Bullying behavior has both short- and long-term consequences for the students involved. Without intervention, children who bully are more likely to develop a criminal record, engage in antisocial behaviors, be involved in alcoholism and substance abuse, and are more likely to drop out of school. Students who are bullied have lower self-esteem and higher levels of stress, anxiety, depression, illness, and suicidal thoughts.[28] Victims also tend to have more problems with social skills than non-victims. The negative outcomes of bullying and victimization present additional risk factors associated with substance use. Therefore, it is imperative that the social and emotional needs of students are addressed in schools. Fewer negative effects will be exhibited the earlier the bully/victim pattern can be broken.

8. **Continue to invest in youth leadership by expanding existing service learning opportunities and peer-to-peer efforts among youth, parents, and community volunteers working with youth. Schedule LiveFree! youth and coalition members to speak at public forums, PTA meetings, Pinellas County Commissioners, JWB Childern's Services Council, School Board and Substance Abuse Advisory Board.**

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[26] Search Institute (March, 2004). Tapping the Power of Community: Building Assets to Strengthen Substance Abuse Prevention. Search Institute Insights & Evidence, Vol. 2, No. 1.

[27] Catalano, R.F., Haggerty, K.P., Oesterle, S., Fleming, C.B., and Hawkins, J.D. (September 2004). The importance of bonding to school for healthy development: Findings from the Social development research group. Journal of School Health, 74(7), 252-261.

[28] Olweus, D. (1993). *Bullying at school*. Cambridge, MA: Blackwell Publishers.

Examples include the work being done by the Students Teach Students program, the Students Working Against Tobacco (SWAT) team, and the LiveFree! school clubs. The LiveFree! Initiative has created a Speaker's Bureau that includes youth and parents. More parents and guardians need to be encouraged to get involved with the Speaker's Bureau, as it can be an important way to inform other parents about the impact of their child's substance use on their family, and 'warning signs' of youth substance use. Youth involvement in the Florida Youth Delegation should be supported by schools and the community. Involving more youth and developing a Pinellas Youth Delegation should be a priority.

Youth leadership development needs to go beyond a focus on substance abuse issues and continue to include universal prevention strategies as well. Programs focusing on developing character based leadership such as those offered through Lead On! and Camp Anytown are important for the social emotional development of students and can also serve as a protective factor against substance use and violence.

9. **Continue to improve both the administration of the survey and the questionnaires.**
10. **Continue to administer Health Behavior Surveys using a passive permission format.**
11. **Conduct additional analysis of the survey data to examine poly drug use and the correlation between health behavior choices, bullying, and substance use rates.**
12. **Gather and use existing youth substance data from various sources, improve data collection methods utilizing the Strategic Prevention Framework, Substance Abuse Response Guide planning tools and strategies working collectively with LiveFree!.**

The value of this survey has been demonstrated over the years in providing a mechanism for identifying substance use activity among Pinellas County youth. The survey serves as a guide to school officials in the development of new programs and the adjustment of current curriculum to address new and emerging trends in substance use. Agencies funded by the community organizations and JWB also use results from the survey to target specific student population segments, develop effective intervention programs, and adjust current programs to changing community needs.

It is critical to continue administering surveys that measure substance use, health behavior, and school safety. This type of survey data is used as a needs assessment and to measure program success. District and community programming for prevention and intervention are based on valid needs assessment data. Use of a passive permission form allows for a strong sampling and more accurate representation of the population. Future funding could be jeopardized if a less reliable survey format is utilized.

It is recommended that key stakeholders and users of this survey information review and recommend options for future administrations of the survey. These options include:

- new and creative methods of administration to increase teacher and student participations;
- the possible use of school, class, and student recognition awards for participation;
- reevaluating the questionnaire to ensure the alignment of questions with current and future need.

Future surveys should include a clearer classification of prescription medications similar to the Florida Youth Substance Abuse Survey. In addition to gathering data on the prevalence of use, questions related to how youth are obtaining alcohol and other drugs should be included. Question to address environmental strategies would also provide relevant data to drive community prevention strategies. Questions related to gang prevention should also be considered for inclusion in future surveys.

13. **Use the data presented in this report to increase awareness and make a positive change in schools and the community. View the report as bridge rather than barrier.**

Data should be used to help the school district and community move to a strength based prevention model. Take what is working and make it better. Look at the needs of individual students, families, schools, and/or communities

and provide safety net opportunities for those who need it. Encourage schools to look at individual factors in schools and communicate with community and neighborhoods. Encourage communities and neighborhoods to do the same with schools. It is imperative for all to be working together to leverage funding and maximize effectiveness.

The community needs to invest in prevention. It is the most cost effective resource to address substance use issues. A comprehensive prevention program addressing both substance abuse and violence prevention needs to be available across all grades and community sectors. Alternative methods for dealing with delinquent behavior must also be explored. Families must be included in these efforts. Social marketing strategies and media literacy should be a component of the prevention plan and all efforts must be culturally aligned to the communities where they will be implemented.

Research has shown that when youth are connected to their school or community, that are less likely to engage in violence or risky behaviors. Therefore, youth need to be provided with opportunities to connect with their school and community to develop a sense of ownership. Adults can provide leadership through mentoring, service learning, apprenticeships, and arranging for volunteering opportunities. These activities will not just prevent bad behavior but continue to foster healthy decision making for youth in Pinellas County.