Nebraska Risk and Protective Factor Student Survey Results for 2007

# Panhandle Public Health District Profile Report



Administered by the Nebraska Department of Health and Human Services and the Nebraska Department of Education for Nebraska Partners in Prevention

### Introduction

#### 2007 NRPFSS Panhandle Public Health District Report

This report summarizes the findings from the 2007 Nebraska Risk and Protective Factor Student Survey, the third implementation of a biennial survey of students in grades 6, 8, 10, and 12. The survey was designed to substance use, assess adolescent antisocial behavior, and many of the risk and protective factors that predict adolescent problem behaviors. The Nebraska survey is adapted from a national, scientifically validated survey and contains information on the risk and protective factors that are 1) locally actionable, 2) can not be obtained through any other source, and 3) are more highly correlated with abuse. While substance planning prevention services, communities are urged to collect and use multiple data sources, including archival and social indicators, assessment of existing resources, key informant interviews, as well as data from this survey.

Table 1 contains the characteristics of the students who completed the survey

#### CONTENTS:

#### Introduction

#### How to Read the Charts Practical Implications of the Assessment

#### Data Charts:

- Substance Use
- Antisocial Behavior and Gambling
- Risk & Protective
  Factor Profiles
- Sources and Places of Alcohol and Cigarette Use

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

Building a Strategic Prevention Framework

Tools for Assessment and Planning

Risk and Protective Factor Scale Definitions Data Tables Contacts for Prevention

from your community or region (e.g. school, district, county, or multi-county area) as well as the overall state. When using the information in this report, please pay attention to the number and percentage of students who participated from your community. If 60% or more of the students participated, the report is a good indicator of the levels of substance use, risk, protection, and antisocial behavior. If fewer than 60% participated, a review of who participated should be completed prior to generalizing the results to the entire community.

Comparisons between the number of students completing the survey from Table 1 and the student enrollment in your community and the state are shown in Table 2. The total percentage of students completing the survey and the percentage from each grade are shown in the "Percent" columns.

	Tabl	e 2. Sur	vey Con	npletion	Rate					
	R	egion 200	)7	State 2007						
Grade	Number Surveyed	Number Enrolled	Percent	Number Surveyed	Number Enrolled	Percent				
6	427	651	65.6	6511	23485	27.7				
8	456	657	69.4	8186	23842	34.3				
10	444	680	65.3	8731	25093	34.8				
12	442	717	61.6	7616	24564	31.0				
Total	1769	2705	65.4	31044	96984	32.0				

Overall, 32% of the students in grades 6, 8, 10, and 12 in Nebraska completed the NRPFSS. While this completion rate is much lower than the 60% recommended above, the results from the 31,044 students who completed the survey provide useable estimates of substance use, antisocial behavior, risk, and protection of youth in Nebraska.

The survey was sponsored by Nebraska Partners in Prevention (NePiP), and was administered by the Nebraska Department of Health and Human Services, Division of Public Health and the Nebraska Department of Education, with assistance from Bach Harrison, L.L.C.

	Tab	le 1. Cha	racteristi	cs of Pa	ticipants	;							
	Regio	n 2003	Regio	n 2005	Regio	n 2007	State	2007					
Total Students	Number	Percent	Number	Percent	Number	Percent	Number	Percent					
	1821	100	1876	100	1769	100	31044	100					
Grade													
6													
8	498	27.3	505	26.9	456	25.8	8186	26.4					
10	419	23.0	503	26.8	444	25.1	8731	28.1					
12	439	24.1	423	22.5	442	25.0	7616	24.5					
Gender													
Male	915	59.6	973	52.6	909	52.0	15350	50.1					
Female	621	40.4	876	47.4	840	48.0	15281	49.9					
Ethnicity													
Native American	134	6.7	126	6.0	145	7.1	1211	3.4					
African American	15	0.7	18	0.9	27	1.3	652	1.8					
Hispanic	153	7.6	159	7.6	170	8.4	3667	10.4					
White	1569	78.1	1639	78.0	1540	75.8	26394	74.6					
Asian	14	0.7	16	0.8	10	0.5	469	1.3					
Pacific Islander	7	0.3	15	0.7	12	0.6	138	0.4					
Other	118	5.9	128	6.1	127	6.3	2855	8.1					

### How to Read the Charts in this Report

There are five types of charts presented in this report: 1) substance use, 2) antisocial behavior and gambling, 3) risk factors, 4) protective factors, and 5) sources and places of alcohol and cigarette use. If your school or community participated in the 2003 and 2005 NRPFSS, then comparison data for those administrations will also be included in the charts. The actual percentages from the charts are presented in tables at the end of this report.

#### Substance Use Charts

This report contains information about alcohol, tobacco, and other drug use (referred to as ATOD use throughout this report) and other problem behaviors of students. The bars on each chart represent the percentage of students in that grade who reported the behavior. The three sections in the charts represent different types of problem behaviors. The definitions of each of the types of behavior are provided below.

- Ever-used is a measure of the percentage of students who tried the particular substance at least once in their lifetime and is used to show the percentage of students who have had experience with a particular substance.
- **30-day use** is a measure of the percentage of students who used the substance at least once in the 30 days prior to taking the survey and is a more sensitive indicator of the level of current use of the substance.
- Heavy use includes binge drinking (having five or more drinks in a row during the two weeks prior to the survey) and use of one-half a pack or more of cigarettes per day.

# Antisocial Behavior and Gambling Charts

• Antisocial behavior (ASB) is a measure of the percentage of students who report any involvement during the past year with ten antisocial behaviors: Suspended from School, Drunk or High at School, Sold Illegal Drugs, Stolen a Vehicle, Been Arrested, Attacked Someone to Harm Them, Carried a Handgun, Taken a Handgun to School, Drinking and Driving, and Passenger with a Drinking Driver. • **Gambling behavior** charts show the percentage of students who engaged in each of the 10 types of gambling: gambled at a casino; played the lottery; bet on team sports, played cards for money; bet money on horse races; played bingo for money or prizes; gambled on the internet; bet on dice games; bet on games of personal skill; gambled at school, church, or community event; as well as the percentage for any gambling behavior during the past year.

#### **Risk and Protective Factor Charts**

The risk and protective factor charts show the percentage of students at risk and with protection for each of the risk and protective factor scales. The risk and protective factor scales measure specific aspects of a youth's life experience that predict whether he or she will engage in problem behaviors. A definition of each risk and protective factor scale is contained in Table 3. The factors are grouped into four domains: community, family, school, and peer/individual.

• The Bars on the risk and protective factor charts, represent the percentage of students whose answers reflect significant risk or protection. There are bars for the last three administrations of the NRPFSS: 2003, 2005, and 2007. By looking at the percentage of youth at risk and with protection over time, it is possible to determine whether the percentage of students at risk or with protection is increasing, decreasing, or staying the same. This information is important when deciding which risk and protective factors warrant attention.

# Sources and Places of Alcohol and Cigarette Use Charts

The percentage of students who obtained alcohol and cigarettes from specific sources and the percentage who used alcohol and cigarettes in specific places in the past year is shown in charts for each grade. The percentages are based upon only those students who used alcohol (for alcohol questions) or cigarettes (cigarette questions) in the past year. Also included in the charts is the percentage of students who reported that an adult was present when they last used alcohol or cigarettes.

#### **Dots and Diamonds**

The dots on the charts represent the percentage of all of the youth surveyed across Nebraska who reported substance use, problem behavior, elevated risk, or elevated protection. The diamonds represent national data from either the Monitoring the Future Survey or the 8-State Norm (described below). A comparison to the state-wide and national results provides additional information for your community in determining the relative importance of levels of ATOD use, antisocial behavior, risk, and protection. Information about other students in the state and the nation can be helpful in determining the seriousness of a given level of problem behavior. Scanning across the charts, you can easily determine which factors are most (or least) prevalent for your community. This is the first step in identifying the levels of risk and protection that are operating in your community and which factors your community may choose to address.

#### The 8-State Norm

The diamonds on the charts allow a comparison between the levels of risk and protection in your community and a more national sample. The 8-State Norm value for each risk and protective factor scale represents the percentage of youth at risk or with protection for eight states across the country. In developing the 8-State Norm, the contribution of each of eight states was proportional to its percentage of the national population which helps to make the results more representative of youth nation-wide. A comparison between the ATOD use rates from the 8-State database and those from the national Monitoring the Future Survey showed the rates to be very similar, which provides added confidence in the validity of the 8-State Norm. Brief definitions of the risk and protective factors scales are provided in Table 3 following the profile charts. For more information about risk and protective factors, please refer to the resources listed on the last page of this report under Contacts for Prevention.

#### **Drug Free Communities Reports**

Table 14 contains information that needs to be reported by communities with Drug Free Communities Grants such as the perception of the risk of ATOD use, perception of parent and peer disapproval of ATOD use, past 30-day use, and average age of first use.

### **Practical Implications of the Assessment**

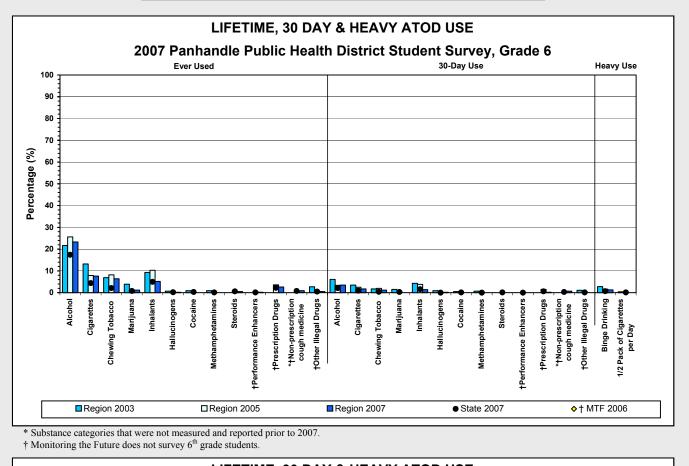
#### No Child Left Behind

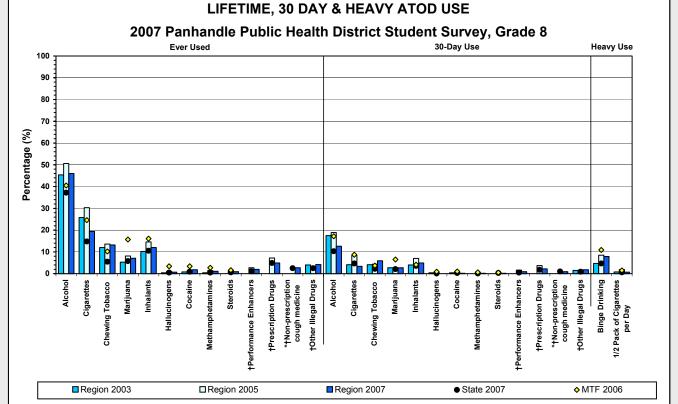
The Safe and Drug Free Schools and Communities section of the No Child Left Behind Act (NCLB) requires that schools and communities use six Principles of Effectiveness to guide their decisions and spending on federally funded prevention and intervention programs. First introduced in 1998 by the Department of Education, the Principles of Effectiveness outline a data-driven process for ensuring that prevention programs achieve the desired results. The Principles of Effectiveness stipulate that local prevention programs and activities must:

- 1. be based on a needs assessment using objective data regarding the incidence of drug use and violence,
- 2. target specific performance objectives,
- 3. be based on scientific research and be proven to reduce violence or drug use,
- 4. be based on the analysis of predictor variables such as risk and protective factors,
- 5. include meaningful and on-going parental input in program implementation, and
- 6. have periodic evaluations of established performance measures.

The results of the NRPFSS presented in this report can help your school and community comply with the NCLB Act. The Substance Use and Antisocial Behavior charts provide information related to Principle 1 above. The Risk and Protective Factor charts provide information related to Principle 4. Overall, using the Risk and Protective factors planning framework helps schools meet all of the Principles of Effectiveness, and thereby assists schools in complying with the NCLB Act.

### Substance Use

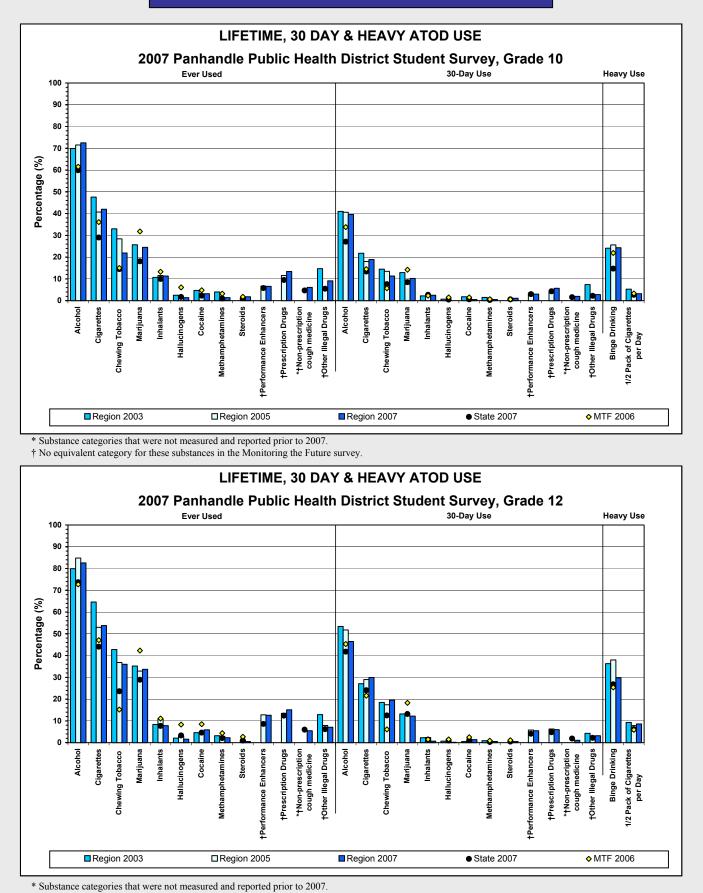




\* Substance categories that were not measured and reported prior to 2007.

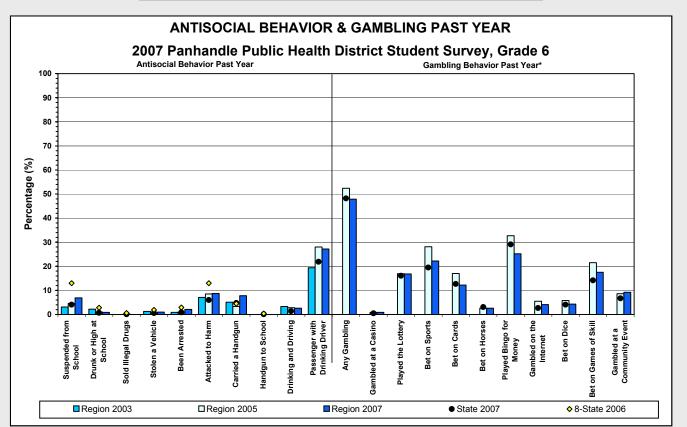
† No equivalent category for these substances in the Monitoring the Future survey.

### Substance Use

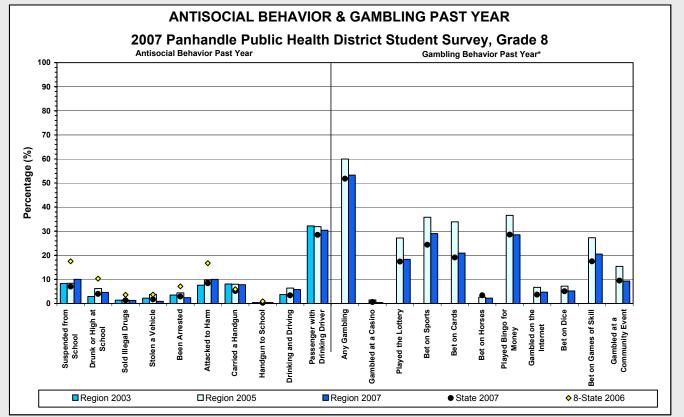


\* Substance categories that were not measured and reported prior to 2007. † No equivalent category for these substances in the Monitoring the Future survey.

### **Antisocial Behavior and Gambling**

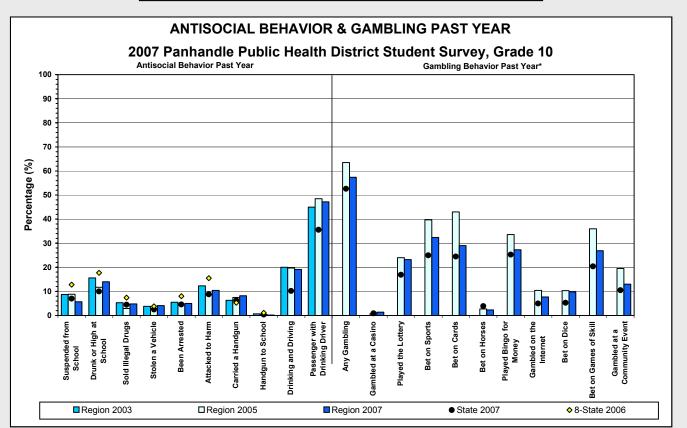


\* Since not all eight states ask gambling questions, no 8-State value is reported. Gambling data were not collected prior to 2005.

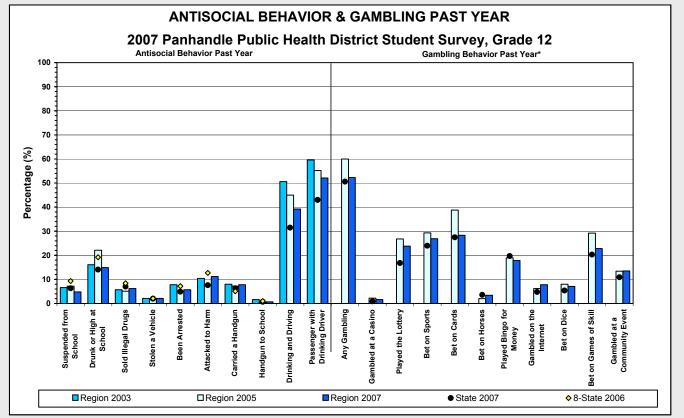


\* Since not all eight states ask gambling questions, no 8-State value is reported. Gambling data were not collected prior to 2005.

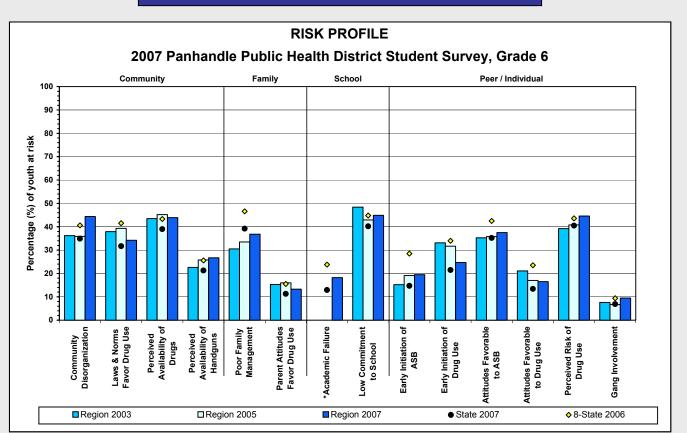
### **Antisocial Behavior and Gambling**

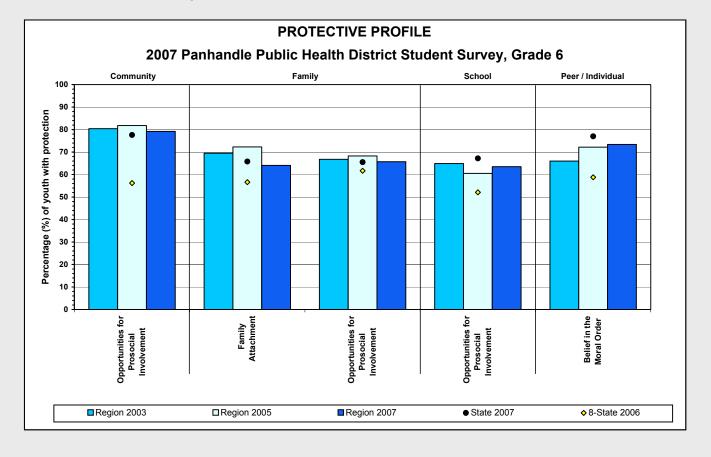


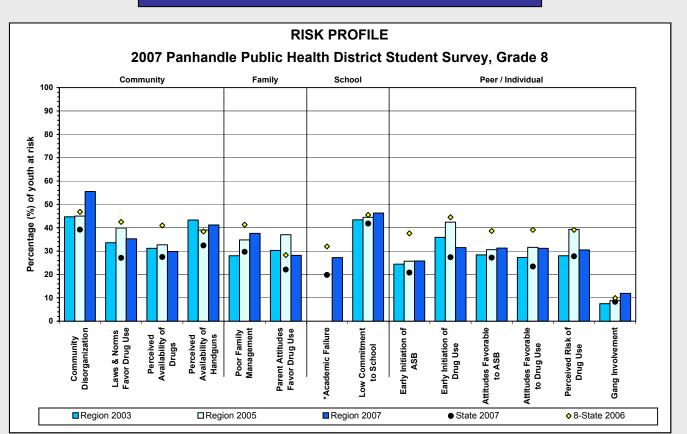
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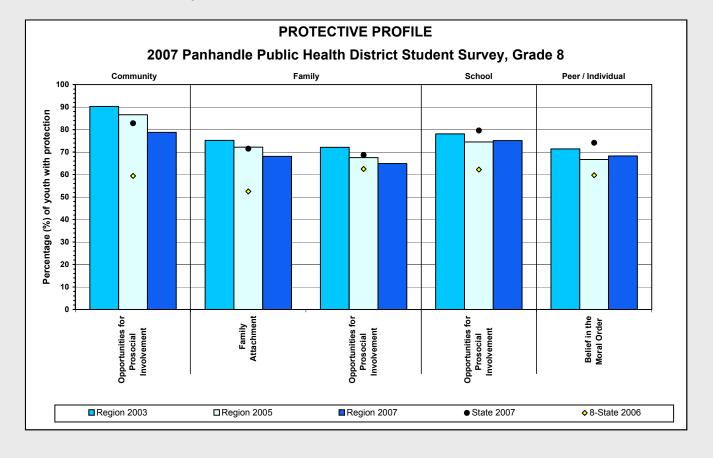


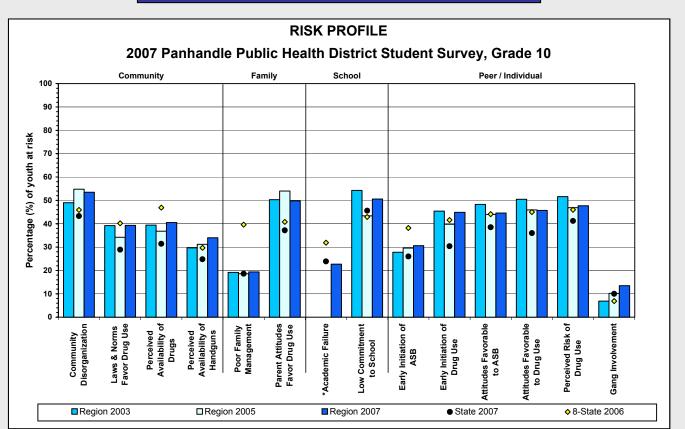
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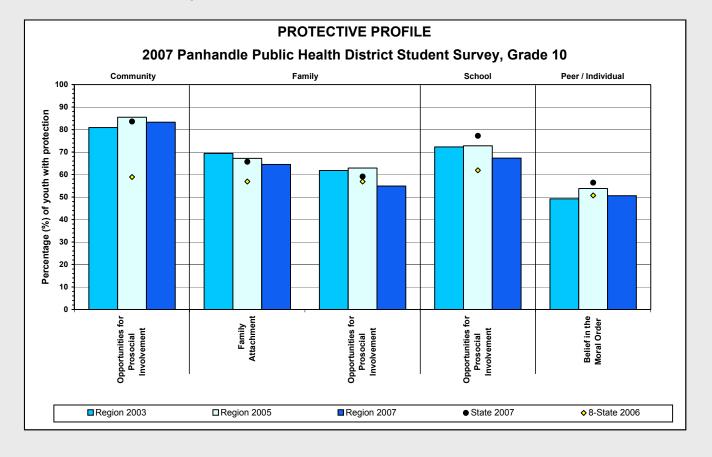


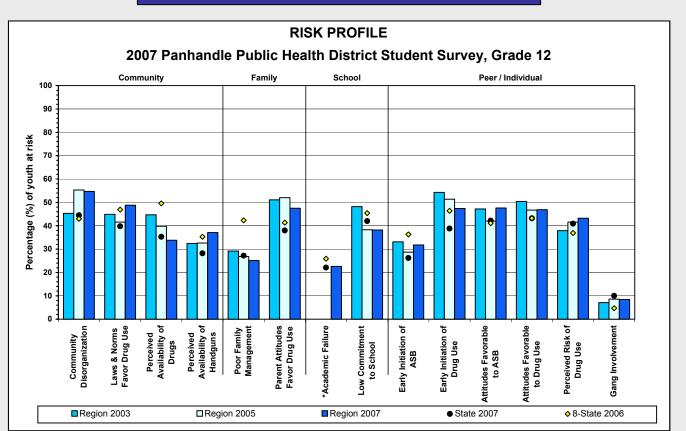


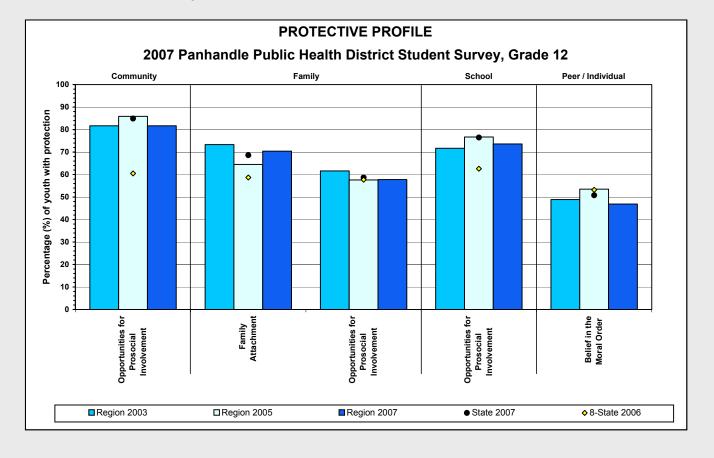


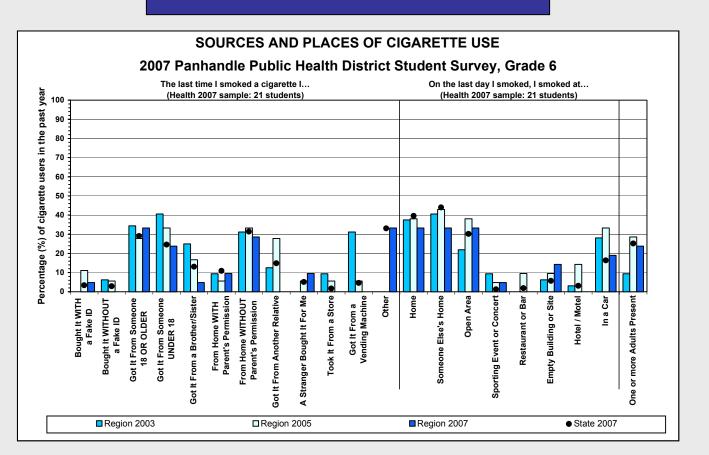


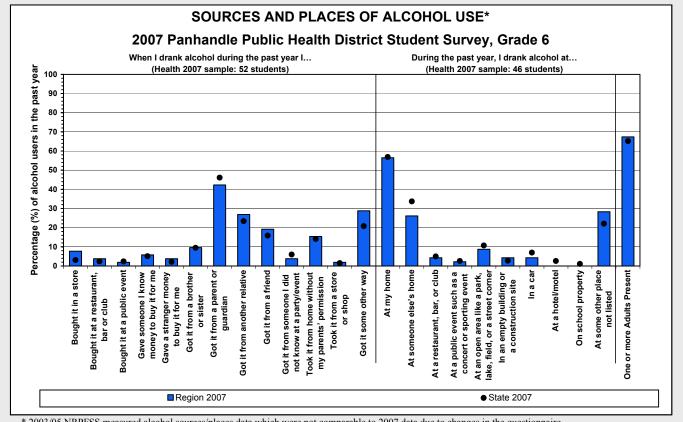


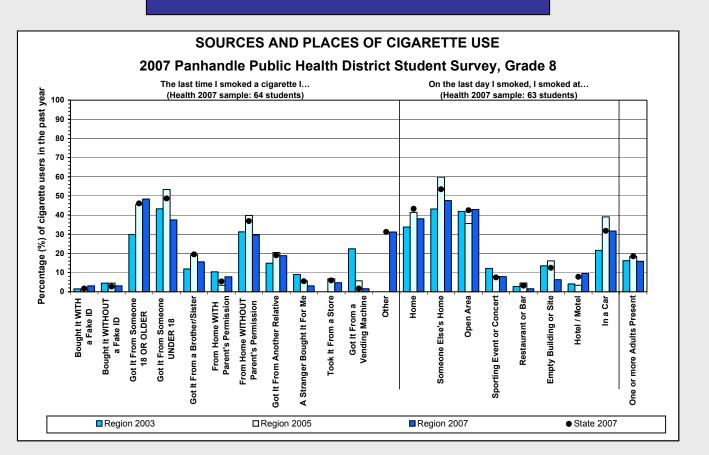


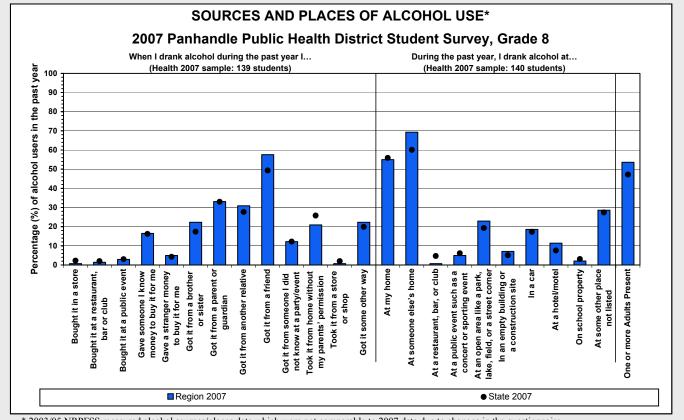


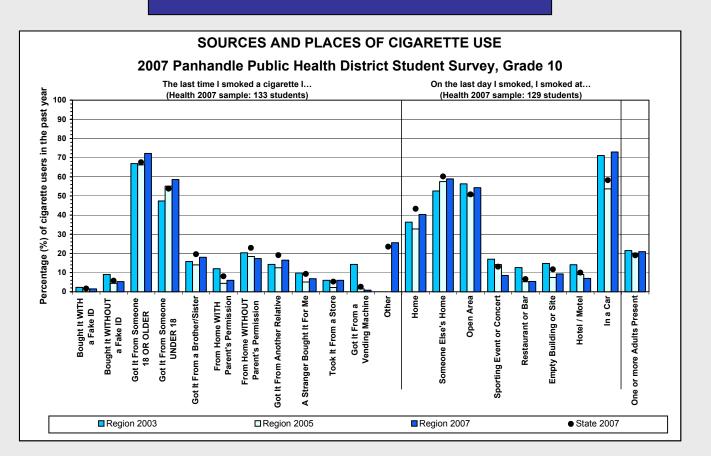


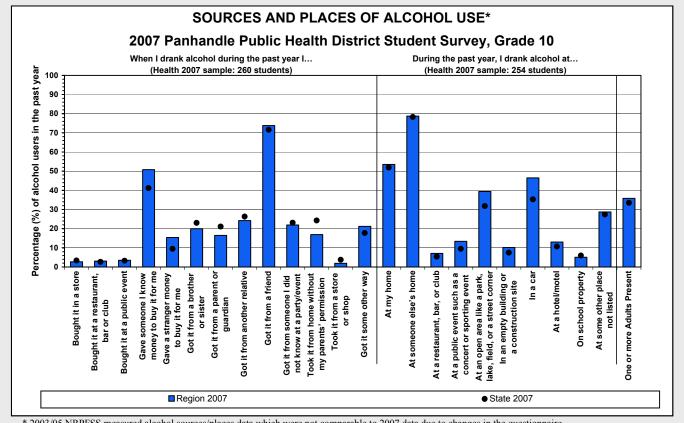


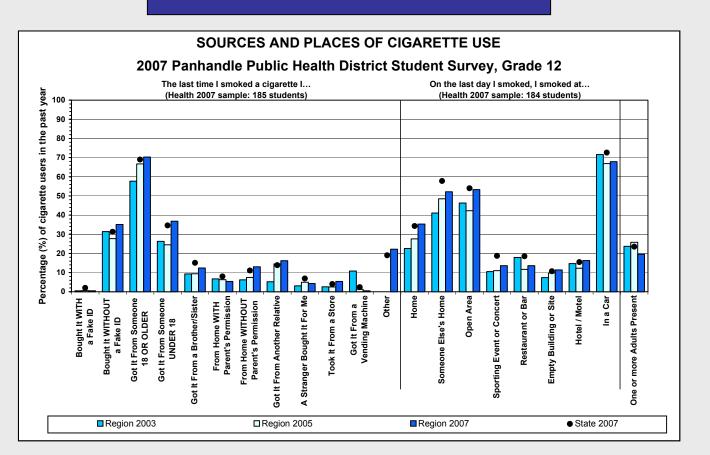


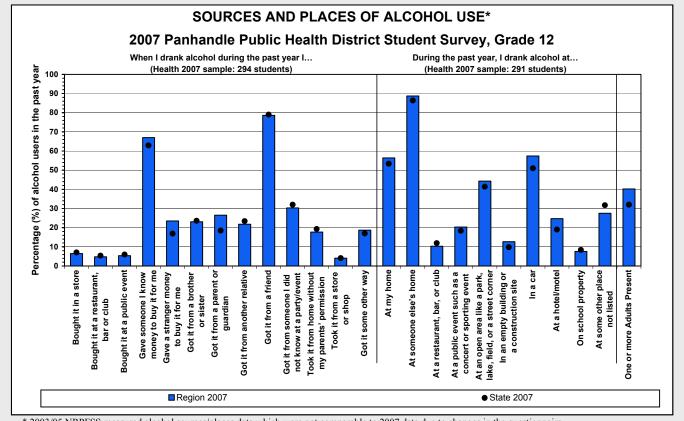












# The Risk and Protective Factor Model of Substance Abuse Prevention

Many states, school districts and local agencies have adopted the Risk and Protective Factor Model to guide their prevention efforts. The Risk and Protective Factor Model of Prevention is based on the simple premise that to prevent a problem from happening, we need to identify the factors that increase the risk of that problem developing and then find ways to reduce the risks. Just as medical researchers have found risk factors for heart disease such as diets high in fat, lack of exercise, and smoking; a team of researchers at the University of Washington have defined a set of risk factors for youth problem behaviors. Risk factors are characteristics of school, community, and family environments, as well as characteristics of students and their peer groups that are known to predict increased likelihood of drug use, delinquency, school dropout, teen pregnancy, and violent behavior among youth. Dr. J. David Hawkins, Dr. Richard F. Catalano, and their colleagues at the University of Washington, Social Development Research Group have investigated the relationship between risk and protective factors and youth problem behavior. For example, they have found that children who live in families with high levels of conflict are more likely to become involved in problem behaviors such as delinquency and drug use than children who live in families with low levels of family conflict.

Protective factors exert a positive influence or buffer against the negative influence of risk, thus reducing the likelihood that adolescents will engage in problem behaviors. Protective factors identified through research include social bonding to family, school, community, and peers; healthy beliefs and clear standards for behavior; and individual characteristics. For bonding to serve as a protective influence, it must occur through involvement with peers and adults who communicate healthy values and set clear standards for behavior.

By measuring risk and protective factors in a population, prevention programs can be implemented that will reduce the elevated risk factors and increase the protective factors. For example, if academic failure is identified as an elevated risk factor in a community, then mentoring, tutoring, and increased opportunities and rewards for classroom participation can be provided to improve academic performance.

The chart below shows the links between the 19 risk factors and the five problem behaviors. The check marks have been placed in the chart to indicate where at least two well designed, published research studies have shown a link between the risk factor and the problem behavior.

	Pr	obler	n Be	havi	ors
Youth at Risk	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence
Community					
Availability of Drugs and Firearms	1	1			<
Community Laws and Norms Favorable Toward Drug Use, Firearms and Crime	1	1			~
Media Portrayals of Violence					<
Transitions and Mobility	1	1		1	
Low Neighborhood Attachment and Community Disorganization	1	~			~
Extreme Economic and Social Deprivation	~	>	>	>	~
Family					
Family History of the Problem Behavior	1	1	~	1	1
Family Management Problems	1	>	1	1	~
Family Conflict	1	~	1	1	~
Favorable Parental Attitudes and Involvement in the Problem Behavior	>	>			~
School					
Academic Failure in Elementary School	1	1	1	1	~
Lack of Commitment to School	1	>	>	>	~
Peer / Individual					
Early and Persistent Antisocial Behavior	1	1	1	1	1
Alienation and Rebelliousness	1	1		1	
Friends Who Use Drugs and Engage in a Problem Behavior	1	1	1	1	~
Gang Involvement	1	>			<
Favorable Attitudes Toward Drug Use and Other Problem Behaviors	~	~	~	1	
Early Initiation of the Problem Behavior	1	>	1	1	✓
Constitutional Factors	1	~			~

### Building a Strategic Prevention Framework

The Nebraska Risk and Protective Factor Student Survey is an important data source for guiding substance abuse prevention activities and it aligns nicely with the Strategic Prevention Framework (SPF). The SPF is a substance abuse prevention planning model created by the Substance Abuse and Mental Health Services Administration. The five-step SPF model was created to guide states and communities through the process of creating planned, data-driven, effective, and sustainable prevention programs. A summary of the five SPF steps are presented below.

**Step 1: Profile Population Needs, Resources, and Readiness to Address the Problems and Gaps:** The SPF begins with an assessment of the needs in the community that are based on data. The NRPFSS is an important data source for helping to accomplish this at the community level. While planning prevention activities, communities are urged to use multiple data sources, including archival and social indicators, assessment of existing resources, key informant interviews, and community readiness.

- **Community Needs Assessment:** The NRPFSS results presented in this Profile Report will help you to identify needs for prevention activities. NRPFSS data include adolescent substance use, anti-social behavior, and many of the risk and protective factors that predict adolescent problem behaviors.
- **Community Resource Assessment:** It is likely that existing agencies and programs are already addressing some of the prioritized substance abuse problems and identified risk and protective factors. It is important to identify the assets and resources that already exist in the community and the gaps in services and capacity.
- **Community Readiness Assessment:** It is very important for states and communities to have the commitment and support of their members and ample resources to implement effective prevention efforts. Therefore, the readiness and capacity of communities and resources to act should also be assessed.
- **Step 2: Mobilize and/or Build Capacity to Address Needs:** Engagement of key stakeholders at the State and community levels is critical to plan and implement successful prevention activities that will be sustained over time. Some of the key tasks to mobilize the state and communities are to work with leaders and stakeholders to build coalitions, provide training, leverage resources, and help sustain prevention activities.
- **Step 3: Develop a Comprehensive Strategic Plan:** States and communities should develop a strategic plan that articulates not only a vision for the prevention activities, but also strategies for organizing and implementing prevention efforts. The strategic plan should be based on the assessments conducted during Step 1. The Plan should address the priority needs, build on identified resources/strengths, set measurable objectives, and identify how progress will be monitored. Plans should be adjusted with ongoing needs assessment and monitoring activities.
- **Step 4: Implement Evidence-based Prevention Programs and Infrastructure Development Activities:** By measuring and identifying the risk factors and other causal factors that contribute to the targeted problems specified in your strategic plan, programs can be implemented that will reduce the prioritized substance abuse problems. After completing Steps 1, 2, and 3, communities will be able to choose prevention strategies that have been shown to be effective, are appropriate for the population served, can be implemented with fidelity, are culturally appropriate, and can be sustained over time. The Western Center for the Application of Prevention Technology has developed an internet tool located at <a href="http://casat.unr.edu/bestpractices/search.php">http://casat.unr.edu/bestpractices/search.php</a> for identifying Best Practice Programs. Another resource for evidence-based prevention practices is SAMHSA's National Registry of Evidence-based Programs and Practices <a href="http://www.nrepp.samhsa.gov">www.nrepp.samhsa.gov</a>.
- Step 5: Monitor Process, Evaluate Effectiveness, Sustain Effective Programs/Activities, and Improve or Replace Those That Fail: Finally, ongoing monitoring and evaluation are essential to determine if the desired outcomes are achieved, assess service delivery quality, identify successes, encourage needed improvement, and promote sustainability of effective policies, programs, and practices. The NRPFSS allows communities to monitor levels of ATOD use, antisocial behavior, risk, and protection.

#### School and Community Improvement Using Survey Data

## Why Conduct the Risk and Protective Factor Survey?

Data from the Nebraska Risk and Protective Factor Student Survey can be used to help schools and communities assess current conditions and identify and prioritize local prevention issues. The risk and protective factor profiles provided by this survey reflect underlying conditions that can be addressed through specific types of interventions that have been proven to be effective in either reducing risk(s) or enhancing protection(s).

#### What are the numbers telling you?

Review the charts and data tables presented in this report. Using the table below, note your findings as you discuss the following questions.

- Which 3-5 risk factors are of the greatest concern?
- Which 3-5 protective factors are your community's highest priority?
- Which levels of 30-day drug use are of greatest concern?
  - Which substances are your students using the most?
  - o At which grades do you see unacceptable usage levels?
- Which levels of antisocial behaviors are of greatest concern?
  - o Which behaviors are your students exhibiting the most?
  - o At which grades do you see unacceptable behavior levels?

#### How to decide if a rate is "unacceptable."

- Look across the charts which items stand out as either much higher or much lower than the others?
- Compare your data with statewide and national data differences of 5% between local and other data are probably significant.
- Determine the standards and values held within your community For example: Is it acceptable in your community for a percentage of high school students to drink alcohol regularly as long as that percentage is lower than the overall state rate?

#### Use these data for planning.

- Substance use and antisocial behavior data identify issues, raise awareness about the problems, and promote school and community dialogue.
- **Risk and protective factor data** identify key objectives that will help your school or community achieve its prevention goals.
- The SPF planning model guides your prevention planning process. Use the resources listed on the last page of this report, *Contacts for Prevention*, for ideas about prevention programs that have proven effective in addressing the risk factors that are high in your community and improving the protective factors that are low.

MEASURE	Unacceptable Rate #1	Unacceptable Rate #2	Unacceptable Rate #3	Unacceptable Rate #4
<b>Risk Factors</b>				
Protective Factors Substance Use				
Antisocial Behaviors				

### **Risk and Protective Scale Definitions**

Table 3. Scales that Measure the	Risk and Protective Factors Shown in the Profiles
	Community Domain Risk Factors
Community Disorganization	Research has shown that neighborhoods with high population density, lack of natural surveillance of public places, physical deterioration, and high rates of adult crime also have higher rates of juvenile crime and drug selling.
Laws and Norms Favorable Toward Drug Use	Research has shown that legal restrictions on alcohol and tobacco use, such as raising the legal drinking age, restricting smoking in public places, and increased taxation have been followed by decreases in consumption. Moreover, national surveys of high school seniors have shown that shifts in normative attitudes toward drug use have preceded changes in prevalence of use.
Perceived Availability of Drugs and Handguns	The availability of cigarettes, alcohol, marijuana, and other illegal drugs has been related to the use of these substances by adolescents. The availability of handguns is also related to a higher risk of crime and substance use by adolescents.
	Community Domain Protective Factors
Opportunities for Positive Involvement	When opportunities are available in a community for positive participation, children are less likely to engage in substance use and other problem behaviors.
	Family Domain Risk Factors
Parental Attitudes Favorable Toward Antisocial Behavior & Drugs	In families where parents use illegal drugs, are heavy users of alcohol, or are tolerant of children's use, children are more likely to become drug abusers during adolescence. The risk is further increased if parents involve children in their own drug (or alcohol) using behavior, for example, asking the child to light the parent's cigarette or get the parent a beer from the refrigerator.
Poor Family Management	Parents' use of inconsistent and/or unusually harsh or severe punishment with their children places them at higher risk for substance use and other problem behaviors. Also, parents' failure to provide clear expectations and to monitor their children's behavior makes it more likely that they will engage in drug abuse whether or not there are family drug problems.
	Family Domain Protective Factors
Family Attachment	Young people who feel that they are a valued part of their family are less likely to engage in substance use and other problem behaviors.
<i>Opportunities for Positive Involvement</i>	Young people who are exposed to more opportunities to participate meaningfully in the responsibilities and activities of the family are less likely to engage in drug use and other problem behaviors.

### **Risk and Protective Scale Definitions**

Table 3. Scales that Measure the l	Risk and Protective Factors Shown in the Profiles (cont'd)
	School Domain Risk Factors
Low Commitment to School	Surveys of high school seniors have shown that the use of hallucinogens, cocaine, heroin, stimulants, and sedatives or nonmedically prescribed tranquilizers is significantly lower among students who expect to attend college than among those who do not. Factors such as liking school, spending time on homework, and perceiving the coursework as relevant are also negatively related to drug use.
	School Domain Protective Factors
<i>Opportunities for Positive</i> <i>Involvement</i>	When young people are given more opportunities to participate meaningfully in important activities at school, they are less likely to engage in drug use and other problem behaviors.
	Peer-Individual Risk Factors
Early Initiation of Antisocial Behavior and Drug Use	Early onset of drug use predicts misuse of drugs. The earlier the onset of any drug use, the greater the involvement in other drug use and the greater frequency of use. Onset of drug use prior to the age of 15 is a consistent predictor of drug abuse, and a later age of onset of drug use has been shown to predict lower drug involvement and a greater probability of discontinuation of use.
Attitudes Favorable Toward Antisocial Behavior and Drug Use	During the elementary school years, most children express anti-drug, anti- crime, and pro-social attitudes and have difficulty imagining why people use drugs or engage in antisocial behaviors. However, in middle school, as more youth are exposed to others who use drugs and engage in antisocial behavior, their attitudes often shift toward greater acceptance of these behaviors. Youth who express positive attitudes toward drug use and antisocial behavior are more likely to engage in a variety of problem behaviors, including drug use.
Perceived Risk of Drug Use	Young people who do not perceive drug use to be risky are far more likely to engage in drug use.
Gang Involvement	Youth who belong to gangs are more at risk for antisocial behavior and drug use.
	Peer-Individual Protective Factors
Social Skills	Young people who are socially competent and engage in positive interpersonal relations with their peers are less likely to use drugs and engage in other problem behaviors.
Belief in the Moral Order	Young people who have a belief in what is "right" or "wrong" are less likely to use drugs.

			Gra	de 6			Gra	de 8			Grad	de 10	_		Gra	de 12	
Number of Youth		Region 2003	Region 2005	Region 2007	State 2007												
Table 5 Devesuéeurs a		465	445	427	6511	498	505	456	8186	419	503	444	8731	439	423	442	761
Table 5. Percentage C	of Students Who Used ATODs During	g i neir L		de 6		Grade 8					Grad	de 10			Gra	de 12	
In your lifetime, on he (if any) have you: (Or	ow many occasions ne or more occasions)	Region 2003	Region 2005	Region 2007	State 2007												
Alcohol	had alcoholic beverages (beer, wine or hard liquor) to drink - more than just a few sips?	21.7	25.6	23.3	17.4	45.4	50.6	46.0	37.2	69.9	71.5	72.5	59.9	79.9	84.8	82.6	73.7
Cigarettes	smoked cigarettes?	13.2	7.9	7.6	4.4	25.8	30.3	19.4	14.8	47.6	40.7	42.0	29.0	64.6	53.0	53.8	44.
Chewing Tobacco	used smokeless tobacco (chew, snuff, plug, dipping tobacco, chewing tobacco)?	6.9	8.2	6.4	2.1	12.0	13.6	13.2	5.5	33.0	28.4	21.9	14.5	42.8	36.8	36.0	23.0
Marijuana	used marijuana (grass, pot) or hashish (hash, hash oil)?	3.9	1.2	1.2	0.8	5.3	8.1	7.1	5.8	25.7	17.2	24.5	18.1	35.2	32.9	33.7	28.9
Inhalants	sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high?	9.3	10.3	5.2	5.0	10.2	14.6	12.0	10.5	10.7	11.6	11.3	10.0	8.4	11.0	7.8	7.
Hallucinogens	used LSD or other hallucinogens?	0.7	0.0	0.2	0.2	0.4	1.0	0.7	0.5	2.5	1.2	1.4	1.7	2.1	3.1	1.6	3.3
Cocaine	used cocaine or crack?	0.9	0.0	0.0	0.3	0.8	1.4	1.8	0.9	4.7	1.8	3.2	2.3	4.6	4.1	5.9	4.0
Methamphetamines	used methamphetamines (meth, speed, crank, crystal meth)?	0.9	0.3	0.0	0.1	0.4	1.4	1.1	0.5	4.0	1.2	1.4	1.0	3.2	2.9	2.3	2.
Steroids	used steroids without a doctor telling you to take them?	n/a	0.8	0.5	0.6	n/a	1.4	0.9	0.6	n/a	1.0	1.8	1.2	n/a	1.0	0.5	1.(
Performance Enhancers	used performance enhancing drugs other than steroids (ephedrine, EPO, creatine, DHEA, or diuretics) without a doctor telling you to take them?	n/a	0.5	0.2	0.1	n/a	2.7	2.0	1.1	n/a	6.7	6.6	5.8	n/a	12.8	12.6	8.6
Prescription Drugs	used prescription drugs (such as Valium, Xanax, Ritalin, Adderall, Oxycontin or sleeping pills) without a doctor telling you to take them?	n/a	3.6	2.6	2.2	n/a	7.2	4.9	4.9	n/a	11.6	13.4	9.5	n/a	13.5	15.1	12.4
Non-prescription cough medicine*	used a non-prescription cough or cold medicine (robos, DMX, etc.) to get high and not for medical reasons?	n/a	n/a	0.9	0.8	n/a	n/a	2.7	2.5	n/a	n/a	6.1	4.7	n/a	n/a	5.5	6.0
Other Illegal Drugs	used other illegal drugs?	2.7	0.8	0.5	0.5	4.0	3.3	4.2	2.5	14.7	5.5	9.1	5.5	12.9	7.9	7.1	6.

			Gra	ide 6			Gra	de 8			Grad	de 10			Grad	de 12	
• •	n how many occasions e or more occasions)	Region 2003	Region 2005	Region 2007	State 2007												
Alcohol	had alcoholic beverages (beer, wine or hard liquor) to drink - more than just a few sips?	6.1	3.4	3.5	2.1	17.5	18.9	12.6	10.3	41.0	40.6	39.6	27.1	53.4	51.8	46.5	41.8
Cigarettes	smoked cigarettes?	3.5	2.5	1.7	0.9	4.1	8.4	3.4	4.7	21.8	18.0	18.9	13.4	27.1	29.0	29.9	24.1
Chewing Tobacco	used smokeless tobacco (chew, snuff, plug, dipping tobacco, chewing tobacco)?	1.7	2.0	1.2	0.4	4.1	4.4	5.9	2.2	14.5	13.5	11.3	7.6	18.5	17.4	19.5	12.5
Marijuana	used marijuana (grass, pot) or hashish (hash, hash oil)?	1.5	0.5	0.0	0.3	2.7	2.4	2.7	2.1	12.9	7.6	10.2	8.5	13.2	12.4	12.2	13.2
Inhalants	sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high?	4.3	3.8	1.4	1.6	4.0	7.0	4.9	3.6	2.2	1.9	2.5	2.7	2.3	2.4	0.7	1.4
Hallucinogens	used LSD or other hallucinogens?	0.9	0.0	0.2	0.0	0.4	0.6	0.0	0.1	0.7	0.2	0.0	0.5	0.7	0.5	0.2	1.0
Cocaine	used cocaine or crack?	0.5	0.0	0.0	0.1	0.4	0.8	0.2	0.3	1.8	0.2	0.5	0.6	0.5	0.7	1.4	1.1
Methamphetamines	used methamphetamines (meth, speed, crank, crystal meth)?	0.7	0.3	0.0	0.0	0.0	0.4	0.2	0.1	1.5	0.4	0.5	0.3	0.9	0.7	0.5	0.3
Steroids	used steroids without a doctor telling you to take them?	n/a	0.0	0.0	0.1	n/a	0.6	0.2	0.3	n/a	0.6	1.1	0.6	n/a	0.0	0.5	0.5
Performance Enhancers	used performance enhancing drugs other than steroids (ephedrine, EPO, creatine, DHEA, or diuretics) without a doctor telling you to take them?	n/a	0.3	0.0	0.0	n/a	1.6	0.9	0.5	n/a	3.5	3.0	3.0	n/a	5.8	5.5	4.1
Prescription Drugs	used prescription drugs (such as Valium, Xanax, Ritalin, Adderall, Oxycontin or sleeping pills) without a doctor telling you to take them?	n/a	1.5	0.2	0.6	n/a	3.7	2.2	1.8	n/a	4.3	5.7	4.3	n/a	6.3	6.0	4.8
Non-prescription cough medicine*	used a non-prescription cough or cold medicine (robos, DMX, etc.) to get high and not for medical reasons?	n/a	n/a	0.7	0.3	n/a	n/a	0.9	1.0	n/a	n/a	2.0	1.6	n/a	n/a	1.1	1.9
Other Illegal Drugs	used other illegal drugs?	1.1	0.5	0.0	0.1	1.5	1.6	1.8	0.9	7.4	2.3	2.8	2.2	4.3	3.0	3.2	2.

\* Substance categories that were not measured and reported prior to 2007.

			Gra	de 6			Gra	de 8			Grad	de 10		Grade 12				
Heavy Use		Region 2003	Region 2005	Region 2007	State 2007	Region 2003	Region 2005	Region 2007	State 2007	Region 2003	Region 2005	Region 2007	State 2007	Region 2003	Region 2005	Region 2007	State 2007	
Binge Drinking	How many times have you had 5 or more alcoholic drinks in a row in the past 2 weeks?	2.8	1.6	1.3	0.7	4.7	8.5	7.9	4.7	24.1	25.6	24.3	14.7	36.3	38.0	29.8	26.	
One-Half Pack of Cigarettes/Day	During the past 30 days, have you smoked a half a pack of cigarettes a day or more?	0.4	0.3	0.0	0.1	0.8	1.9	0.7	0.6	5.3	2.0	3.2	2.7	9.3	7.8	8.6	6.	
Table 8. Percentag	e of Students With Antis	social Be	havior in	the Past	Year													
How many times ir	n the past vear		Gra	de 6			Gra	de 8			Grad	de 10		Grad	de 12			
(12 months) have (One or more time	Region 2003	Region 2005	Region 2007	State 2007	Region 2003	Region 2005	Region 2007	State 2007	Region 2003	Region 2005	Region 2007	State 2007	Region 2003	Region 2005	Region 2007	State 2007		
Been suspended fro	om school	3.1	4.6	6.9	4.1	8.3	8.4	10.0	7.0	8.7	8.8	5.7	7.0	6.6	7.2	4.8	6.	
Been drunk or high	at school	2.2	1.0	0.9	0.7	2.9	6.2	4.6	4.0	15.6	11.7	14.0	10.0	16.1	22.1	14.9	14.	
Sold illegal drugs		0.0	0.2	0.0	0.1	1.4	1.4	1.3	1.3	5.3	2.9	4.8	4.5	5.7	5.1	6.2	7	
Stolen or tried to sto	eal a motor vehicle	1.3	0.7	1.0	0.6	2.2	3.8	0.9	1.7	3.8	2.9	4.1	2.5	2.1	1.7	2.1	2	
Been arrested		0.9	1.0	2.1	0.9	3.5	4.4	2.4	2.9	5.5	4.3	5.0	4.6	7.8	5.1	5.7	4	
Attacked someone of seriously hurting		7.1	8.5	8.7	6.0	7.6	9.7	10.0	8.4	12.3	8.7	10.4	8.8	10.4	7.7	11.2	7.	
Carried a handgun		5.1	3.3	7.8	4.8	8.1	8.0	7.8	5.2	6.3	7.5	8.2	6.2	8.0	7.2	7.8	6.	
Carried a handgun		0.0	0.0	0.0	0.1	0.4	0.2	0.4	0.3	0.7	0.4	0.2	0.4	1.6	0.5	0.7	0.	
Driven after drinking	0	3.3	2.8	2.6	1.4	3.7	6.4	5.8	3.4	20.0	19.7	19.1	10.2	50.6	45.0	39.2	31	
Been a passenger	0	19.4	28.0	27.2	21.9	32.2	31.9	30.4	28.5	45.0	48.5	47.2	35.6	59.6	55.2	52.1	43	
Table 9. Percentag	e of Students Gambling	in the Pa				-								-				
How many times ir	n the past year		Gra	de 6			Gra	de 8			Grad	de 10			Grad	de 12		
(12 months) have ('A few times' or m		Region 2003	Region 2005	Region 2007	State 2007	Region 2003	Region 2005	Region 2007	State 2007	Region 2003	Region 2005	Region 2007	State 2007	Region 2003	Region 2005	Region 2007	Stat 200	
Gambled in the pas	st vear	n/a	52.4	47.9	48.2	n/a	60.0	53.3	51.8	n/a	63.5	57.4	52.6	n/a	60.0	52.3	50	
Gambled at a casin		n/a	0.9	0.9	0.5	n/a	1.5	0.4	0.6	n/a	0.8	1.4	0.9	n/a	2.2	1.6	0	
Played the lottery		n/a	16.9	16.8	16.1	n/a	27.2	18.3	17.4	n/a	24.0	23.2	16.9	n/a	26.8	23.8	16	
Bet on sports		n/a	28.1	22.2	19.5	n/a	35.8	29.0	24.4	n/a	39.7	32.4	25.0	n/a	29.3	26.9	24	
Bet on cards		n/a	17.0	12.2	12.7	n/a	33.9	20.9	19.1	n/a	43.0	29.0	24.5	n/a	38.8	28.3	27	
Bet on horses		n/a	2.6	2.6	3.1	n/a	2.6	2.2	3.4	n/a	2.7	2.3	3.9	n/a	2.0	3.4	3	
Played bingo for mo		n/a	32.7	25.2	29.1	n/a	36.6	28.5	28.6	n/a	33.6	27.3	25.3	n/a	18.9	17.8	19	
Gambled on the inte	ernet	n/a	5.5	4.1	2.7	n/a	6.7	4.7	3.7	n/a	10.4	7.7	5.0	n/a	6.2	7.8	4	
Bet on dice		n/a	5.8	4.3	4.1	n/a	7.2	5.2	5.1	n/a	10.3	9.8	5.3	n/a	8.0	7.1	5	
Bet on games of sk		n/a	21.5	17.5	14.2	n/a	27.3	20.5	17.5	n/a	36.0	26.9	20.4	n/a	29.2	22.8	20	
Gambled at a comr	munity event	n/a	8.6	9.2	6.7	n/a	15.4	9.3	9.5	n/a	19.5	13.0	10.5	n/a	13.4	13.5	10	

		Gra	de 6			Gra	de 8			Grad	de 10			Grad	de 12	
Risk Factor	Region 2003	Region 2005	Region 2007	State 2007	Region 2003	Region 2005	Region 2007	State 2007	Region 2003	Region 2005	Region 2007	State 2007	Region 2003	Region 2005	Region 2007	State 2007
Community Domain		•														
Community Disorganization	36.2	35.9	44.4	34.9	44.7	45.0	55.5	39.2	49.0	54.8	53.5	43.3	45.3	55.3	54.7	44
Laws & Norms Favor Drug Use	37.9	39.3	34.2	31.7	33.6	39.9	35.3	27.1	39.2	34.2	39.3	28.9	44.9	41.6	48.8	39
Perceived Availability of Drugs	43.5	45.2	43.9	39.0	31.2	32.7	29.8	27.5	39.4	36.8	40.5	31.4	44.7	39.8	33.8	35
Perceived Availability of Handguns	22.6	25.8	26.7	21.3	43.3	39.0	41.2	32.4	29.7	31.2	34.0	24.8	32.4	32.6	37.1	28
Family Domain																
Poor Family Management	30.5	33.5	36.8	39.2	28.0	34.8	37.6	29.7	19.2	18.6	19.4	18.6	29.2	26.8	25.1	27
Parent Attitudes Favor Drug Use	15.3	16.0	13.3	11.3	30.3	37.0	28.2	22.1	50.3	54.0	49.8	37.2	51.1	52.0	47.5	38
School Domain																
Academic Failure*	n/a	n/a	18.2	12.9	n/a	n/a	27.2	19.8	n/a	n/a	22.7	23.9	n/a	n/a	22.6	22
Low Commitment to School	48.4	42.9	44.9	40.2	43.4	44.5	46.3	41.8	54.3	43.4	50.6	45.6	48.2	38.3	38.2	42
Peer-Individual Domain																
Early Initiation of ASB	15.2	19.1	19.5	14.7	24.4	25.7	25.8	20.8	27.8	29.6	30.6	26.0	33.1	28.7	31.8	26
Early Initiation of Drug Use	33.1	31.7	24.7	21.5	35.9	42.4	31.5	27.4	45.4	39.8	44.9	30.4	54.3	51.4	47.4	38
Attitudes Favorable to ASB	35.3	35.8	37.5	35.2	28.4	30.6	31.3	27.2	48.3	44.0	44.6	38.5	47.2	42.0	47.6	42
Attitudes Favorable to Drug Use	21.1	17.0	16.5	13.4	27.3	31.6	31.2	23.4	50.5	45.9	45.7	36.0	50.4	46.7	46.9	43
Low Perceived Risk of Drug Use	39.2	40.8	44.6	40.5	28.0	39.3	30.5	27.8	51.6	46.9	47.7	41.2	37.9	41.6	43.2	40
Gang Involvement	7.6	6.7	9.5	6.9	7.5	8.8	11.9	8.3	6.9	10.2	13.5	10.0	7.1	8.6	8.4	10.
Table 11. Percentage of Students Reporti	ng Protec	tion														
		Gra	de 6			Gra	de 8			Grad	de 10			Grad	de 12	
Protective Factor	Region	Region	Region	State	Region	Region	Region	State	Region	Region	Region	State	Region	Region	Region	State
	2003	2005	2007	2007	2003	2005	2007	2007	2003	2005	2007	2007	2003	2005	2007	2007
Community Domain	1				,											
Opportunities for Prosocial Involvement	80.4	81.8	79.2	77.6	90.3	86.6	78.8	82.8	80.9	85.5	83.3	83.6	81.7	85.9	81.7	84
Family Domain	00.4	01.0	10.2	77.0	00.0	00.0	70.0	02.0	00.0	00.0	00.0	00.0	01.7	00.0	01.7	01
Family Attachment	69.5	72.3	64.1	65.8	75.2	72.2	68.1	71.5	69.4	67.2	64.5	65.7	73.3	64.5	70.4	68
Opportunities for Prosocial Involvement	66.8	68.3	65.7	65.5	72.1	67.5	64.9	68.7	61.8	62.9	54.9	59.1	61.6	57.6	57.8	58
School Domain	00.0	00.0	00.7	00.0	14.1	07.0	04.0	00.1	01.0	02.0	04.0	00.1	01.0	07.0	07.0	
Opportunities for Prosocial Involvement	64.9	60.5	63.5	67.2	78.1	74.5	75.1	79.6	72.3	72.8	67.3	77.2	71.7	76.7	73.6	76
Peer-Individual Domain	00	00.0	00.0	02					. 2.0	. 2.0	00				. 0.0	
Belief in the Moral Order	66.0	72.2	73.4	77.0	71.4	66.7	68.3	74.1	49.2	53.8	50.6	56.4	48.9	53.5	46.9	50
* Academic Failure was not measured prior to 200		12.2	70.4	11.0	/ 14	50.7	50.5	77.1	- <del>1</del> 0.2	00.0	50.0	00.4	-10.0	55.5	-10.0	0

#### Table 12. Sources and Places of Student Cigarette Use

		Gra	de 6			Gra	de 8			Grad	de 10		Grade 12					
The last time I smoked a cigarette I	Region 2003	Region 2005	Region 2007	State 2007														
Sample size*	32	18	21	175	67	88	64	837	133	136	133	1861	194	159	185	2537		
Bought it WITH a fake ID	0.0	11.1	4.8	3.4	1.5	1.1	3.1	1.7	2.3	1.5	1.5	1.7	0.5	0.6	0.5	2.0		
Bought it WITHOUT a fake ID	6.2	5.6	0.0	2.9	4.5	4.5	3.1	2.7	9.0	4.4	5.3	5.8	31.4	27.7	35.1	31.3		
Got it from someone 18 OR OLDER	34.4	27.8	33.3	29.1	29.9	45.5	48.4	46.1	66.9	66.2	72.2	67.6	57.7	66.7	70.3	69.0		
Got it from someone UNDER 18	40.6	33.3	23.8	24.6	43.3	53.4	37.5	48.7	47.4	55.1	58.6	53.8	26.3	24.5	36.8	34.6		
Got it from a brother/sister	25.0	16.7	4.8	13.1	11.9	19.3	15.6	19.5	15.8	14.0	18.0	19.6	9.3	9.4	12.4	15.1		
From home WITH parent's permission	9.4	5.6	9.5	10.9	10.4	3.4	7.8	5.4	12.0	4.4	6.0	8.1	6.7	6.3	5.4	8.0		
From home WITHOUT parent's permission	31.2	33.3	28.6	31.4	31.3	39.8	29.7	36.9	20.3	18.4	17.3	22.9	6.2	7.5	13.0	11.1		
Got it from another relative	12.5	27.8	0.0	14.9	14.9	20.5	18.8	19.0	14.3	12.5	16.5	19.1	5.2	14.5	16.2	13.9		
A stranger bought it for me	0.0	5.6	9.5	5.1	9.0	5.7	3.1	5.5	9.8	5.1	6.8	9.3	3.1	5.0	4.3	6.9		
Took it from a store	9.4	5.6	0.0	1.7	0.0	6.8	4.7	5.9	6.0	2.2	6.0	5.3	2.6	2.5	5.4	4.(		
Got It From a Vending Machine	31.2	5.6	0.0	4.6	22.4	5.7	1.6	1.7	14.3	1.5	0.8	2.6	10.8	1.3	0.5	2.4		
Other	n/a	n/a	33.3	33.1	n/a	n/a	31.2	31.2	n/a	n/a	25.6	23.5	n/a	n/a	22.2	19.0		
		Gra	de 6			Gra	de 8			Grad	de 10		Grade 12					
On the last day I smoked, I smoked at	Region 2003	Region 2005	Region 2007	State 2007														
Sample size*	32	21	21	159	74	87	63	818	135	134	129	1845	190	163	184	2488		
Home	37.5	38.1	33.3	39.6	33.8	41.4	38.1	43.3	36.3	32.8	40.3	43.3	22.6	27.6	35.3	34.3		
Someone else's home	40.6	42.9	33.3	44.0	43.2	59.8	47.6	53.5	52.6	57.5	58.9	60.2	41.1	48.5	52.2	57.8		
Open area	21.9	38.1	33.3	30.2	41.9	35.6	42.9	42.5	56.3	50.0	54.3	50.8	46.3	42.3	53.3	54.0		
Sporting event or concert	9.4	4.8	4.8	1.3	12.2	8.0	7.9	7.5	17.0	14.2	8.5	13.1	10.5	11.0	13.6	18.7		
Restaurant or bar	0.0	9.5	0.0	1.9	2.7	4.6	1.6	3.2	12.6	5.2	5.4	6.6	17.9	11.7	13.6	18.5		
Empty building or site	6.2	9.5	14.3	5.7	13.5	16.1	6.3	12.5	14.8	7.5	9.3	11.7	7.4	9.8	11.4	10.7		
Hotel/motel	3.1	14.3	0.0	3.1	4.1	3.4	9.5	7.8	14.1	9.0	7.0	10.0	14.7	12.3	16.3	15.5		
In a car	28.1	33.3	19.0	16.4	21.6	39.1	31.7	31.8	71.1	53.7	72.9	58.2	71.6	66.9	67.9	72.6		
One or more adults present at last day of cigarette use	9.4	28.6	23.8	25.2	16.2	18.4	15.9	18.5	21.5	20.1	20.9	19.0	23.7	25.8	19.6	23.5		

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

Table 13. Sources and Places of Student Alcohol Use*											
	Grade 6		Gra	de 8	Grad	le 10	Grac	le 12			
When I drank alcohol during the past year I	Region 2007	State 2007	Region 2007	State 2007	Region 2007	State 2007	Region 2007	State 2007			
Sample size**	52	453	139	1813	260	3801	294	4472			
Bought it in a store such as a liquor store, gas station, or grocery store	7.7	3.1	0.7	2.3	2.7	3.4	6.5	7.1			
Bought it at a restaurant, bar or club	3.8	2.4	1.4	2.0	3.1	2.7	4.8	5.4			
Bought it at a public event	1.9	2.4	2.9	3.0	3.5	3.3	5.4	6.0			
Gave someone I know money to buy it for me	5.8	5.1	16.5	16.2	50.8	41.2	67.0	62.9			
Gave a stranger money to buy it for me	3.8	2.2	5.0	4.3	15.4	9.5	23.5	16.9			
Got it from a brother or sister	9.6	9.5	22.3	17.4	20.0	23.0	23.1	23.6			
Got it from a parent or guardian	42.3	46.1	33.1	33.0	16.5	21.1	26.5	18.5			
Got it from another relative	26.9	23.4	30.9	27.7	24.2	26.3	21.8	23.4			
Got it from a friend	19.2	15.9	57.6	49.3	73.8	71.6	78.6	79.0			
Got it from someone I did not know at a party or event	3.8	6.0	12.2	12.2	21.9	23.1	30.3	32.0			
Took it from home without my parents' permission	15.4	14.1	20.9	25.8	16.9	24.3	17.7	19.3			
Took it from a store or shop	1.9	1.5	0.7	2.0	1.9	3.8	4.1	4.1			
Got it some other way	28.8	20.8	22.3	19.9	21.2	17.7	18.7	17.0			
· · · · ·	Grade 6		Grade 8		Grade 10		Grade 12				
During the past year, I drank alcohol at	Region 2007	State 2007	Region 2007	State 2007	Region 2007	State 2007	Region 2007	State 2007			
Sample size**	46	457	140	1830	254	3822	291	4481			
At my home	56.5	56.9	55.0	55.9	53.5	51.9	56.4	53.4			
At someone else's home	26.1	33.7	69.3	60.1	78.7	78.3	88.7	86.4			
At a restaurant, bar, or club	4.3	5.0	0.7	4.7	7.1	5.4	10.3	11.9			
At a public event such as a concert or sporting event	2.2	2.6	5.0	6.1	13.4	9.5	20.3	18.4			
At an open area like a park, lake, field, or a street corner	8.7	10.7	22.9	19.3	39.4	31.8	44.3	41.4			
In an empty building or a construction site	4.3	2.8	7.1	5.1	10.2	7.5	12.7	9.8			
In a car	4.3	7.0	18.6	17.3	46.5	35.3	57.4	51.0			
At a hotel/motel	0.0	2.6	11.4	7.6	13.0	10.7	24.7	19.0			
On school property	0.0	1.1	2.1	3.1	5.1	6.0	7.6	8.4			
At some other place not listed	28.3	22.1	28.6	27.4	28.7	27.4	27.5	31.7			
One or more adults present at last day of alcohol use	4.3	7.0	18.6	17.3	46.5	35.3	57.4	51.0			

\* 2003/05 NRPFSS measured alcohol sources/places data which were not comparable to 2007 data due to changes in the questionnaire.

\*\* Sample size represents the number of youth who answered the question. (Students reporting no drinking in the past year were directed to skip the question.) In the case of smaller sample sizes, caution should be exercised before generalizing results to the entire community.

Table 14. Drug Free Communities Report*														
Outcome	Definition	Substance	Region 2007											
			Grade 6		Grade 8		Grade 10		Grade 12		Male†		Female†	
			Percent	Sample	Percent	Sample	Percent	Sample	Percent	Sample	Percent	Sample	Percent	Sample
Perception of Risk (People are at Moderate or Great Risk of harming themselves if they)	drink 1 or two drinks nearly every day	Alcohol	68.0	415	66.7	442	57.3	436	60.4	434	60.8	886	65.5	822
	smoke 1 or more packs of cigarettes per day	Cigarettes	83.7	417	88.6	446	89.7	438	93.1	437	88.1	891	89.6	828
	smoke marijuana regularly	Marijuana	86.5	400	87.1	434	84.3	421	77.6	425	83.2	856	85.0	805
Perception of Parent Disapproval (Parents feel it would be Wrong or Very Wrong to)	drink beer, wine, or hard liquor regularly	Alcohol	98.6	422	92.9	452	84.4	443	71.6	436	86.5	901	87.2	833
	smoke cigarettes	Cigarettes	98.8	427	97.1	454	92.1	444	85.2	438	93.8	906	92.8	838
	smoke marijuana	Marijuana	100.0	425	98.7	454	96.8	444	95.7	438	97.8	906	97.8	836
Perception of Peer Disapproval (I think it is Wrong or Very Wrong for someone my age to)	drink beer, wine, or hard liquor regularly	Alcohol	96.9	425	85.1	451	61.3	442	49.7	437	73.0	901	73.7	834
	smoke cigarettes	Cigarettes	97.2	424	91.2	452	70.4	442	57.9	439	80.3	902	78.0	836
	smoke marijuana	Marijuana	98.8	425	94.9	451	81.7	443	76.9	438	87.6	902	88.8	836
Past 30-Day Use	at least one use in the past 30 days	Alcohol	3.5	424	12.6	452	39.6	442	46.5	434	26.6	897	24.3	836
		Cigarettes	1.7	419	3.4	439	18.9	433	29.9	428	12.9	878	14.1	821
		Marijuana	0.0	422	2.7	450	10.2	441	12.2	436	6.2	894	6.2	835
			Percent	Sample	Percent	Sample	Percent	Sample	Percent	Sample	Percent	Sample	Percent	Sample
Average Age of Onset** (How old were you when you first)	had more than a sip or two of	Alcohol	22.6	425	44.2	453	69.1	444	82.0	439	56.4	903	52.8	839
	beer, wine or hard liquor?	Average age:	10.5 years		11.7 years		13.2 years		,		12.7 years			
	puff? An smoked marijuana?	Cigarettes	7.7	426	22.0	449	48.6	442	60.0	440	34.6	903	35.0	835
		Average age:		).5 years		.3 years		.7 years		.9 years		.6 years		8.1 years
		Marijuana Average age:	0.5	-	6.8	455	24.9	441	33.8		17.0	904	15.7	836
		Average age.	10.5 years		12 years		13.8 years		15.1 years		14.2 years		14.3 years	

\* The "Sample" column represents the sample size (the number of youth who answered the question). The "Percent" column represents the percentage of youth in the sample answering the question as defined.

\*\* For Average Age of Onset, "Sample" represents the number of youth who answered the question (including students who did not use). The "Percent" column represents the percentage of youth in the sample reporting any age of first use for the specified substance. "Average age" is calculated by averaging the ages of first use of students reporting any use.

+ The male and female values allow a gender comparison for youth who completed the survey. However, unless the percentage of students who participated from each grade is similar, the gender results are not necessarily representative of males and females in the community.

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