

2017 Massachusetts Prevention Needs Assessment Survey



Survey Results for:
Westfield Public Schools

Sponsored by:
Westfield Public School District
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2017 Prevention Needs Assessment Survey Profile Report

This report summarizes the findings from the Prevention Needs Assessment (PNA) Survey that was conducted during 2017. The results are presented along with comparisons to national data sources such as the Monitoring the Future Survey (only grades 8, 10, and 12 are surveyed) and the Bach Harrison Norm (BH Norm), which consists of a large, weighted, nationwide sample.

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

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

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percentage of students who participated from your community. The sample size for this survey administration was 1,259 students. If 60% or more of the students sample participated, the report is a good indicator of the levels of substance use, risk, protection, and antisocial behavior. If fewer than 60% participated, a review of who participated should be completed prior to generalizing the results to the entire community.

The Risk and Protective Factor Model of Substance Abuse Prevention

Many states 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

Table 1. Characteristics of Participants

Student Totals		
Total Students	Westfield Public Schools	
	2017	
	Number	Percent
	951	100
Grade		
8	333	35.0
10	334	35.1
12	284	29.9
Gender		
Male	452	48.0
Female	489	52.0
Ethnicity		
Native American	7	0.7
Asian	34	3.6
African American	19	2.0
Pacific Islander	3	0.3
Hispanic	68	7.2
White	754	80.3
Multi-racial	54	5.8

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

Risk and Protective Factors

The Risk and Protective Factor Model of Substance Abuse Prevention (Continued)

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 reviewed by Drs. Hawkins and Catalano 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. Research on risk and protective factors has important implications for prevention efforts.

The premise of this approach is that in order to promote positive youth development and prevent problem behaviors, it is necessary to address those factors that predict the problem.

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 to the right shows the links between the 20 risk factors and the six 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.

Risk Factors for Adolescent Problem Behavior	Problem Behaviors					
	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence	Depression & Anxiety
Community						
Community Laws and Norms Favorable Toward Drug Use, Firearms and Crime	✓	✓			✓	
Perceived Availability of Drugs	✓	✓				
Family						
Poor Family Management	✓	✓	✓	✓	✓	✓
Family Conflict	✓	✓	✓	✓	✓	✓
Sibling Drug Use	✓	✓	✓	✓	✓	✓
Exposure to Adult Antisocial Behavior	✓	✓	✓	✓	✓	✓
Parent Attitudes Favor Antisocial Behavior	✓	✓			✓	✓
Parent Attitudes Favor Drug Use	✓	✓			✓	✓
School						
Academic Failure	✓	✓	✓	✓	✓	✓
Low Commitment to School	✓	✓	✓	✓	✓	✓
Peer / Individual						
Early Initiation of Antisocial Behavior	✓	✓	✓	✓	✓	✓
Early Initiation of Drug Use	✓	✓	✓	✓	✓	✓
Attitudes Favorable to Antisocial Behavior	✓	✓	✓	✓	✓	
Attitudes Favorable to Drug Use	✓	✓	✓	✓	✓	
Perceived Risk of Drug Use	✓	✓	✓	✓	✓	
Interaction with Antisocial Peers	✓	✓	✓	✓	✓	✓
Friend's Use of Drugs	✓	✓	✓	✓	✓	✓
Rewards for Antisocial Behavior	✓	✓	✓	✓	✓	✓
Depressive Symptoms	✓			✓		✓
Gang Involvement	✓	✓			✓	✓

Building a Strategic Prevention Framework

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

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

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

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

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



Building a Strategic Prevention Framework (cont'd)

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

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

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

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

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

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

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

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

Validity Measures

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

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

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

How to Read the Charts

There are four types of charts presented in this report:

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

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

Understanding the Format of the Charts

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

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

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

How to Read the Charts (cont'd)

prevention services. The diamonds represent national data from either the Monitoring the Future (MTF) Survey or the Bach Harrison Norm (BH Norm). The BH Norm was developed by Bach Harrison L.L.C. to provide states and communities with the ability to compare their results on risk, protection, and antisocial measures with more national measures. Survey participants from eight statewide surveys and five large regional surveys across the nation were combined into a database of approximately 460,000 students. The results were weighted to make the contribution of each state and region proportional to its share of the national population. Bach Harrison analysts then calculated rates for antisocial behavior and for students at risk and with protection. The results appear on the charts as BH Norm. In order to keep the BH Norm relevant, it is updated approximately every two years as new data become available.

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

Cut-Points

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

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

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

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

Lifetime, 30 Day & Heavy ATOD Use Charts

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

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

Supplement 1. ATOD Questions

This contains the full wording for the ATOD questions.

How to Read the Charts (cont'd)

Antisocial Behavior, Driving and Alcohol, and Gambling Charts

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

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

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

Risk and Protective Factor Charts

Risk and protective factor scales measure specific aspects of a youth's life experience that predict whether he/she will engage in problem behaviors. The scales, defined in Table 2, are grouped into four domains: community, family, school, and peer/individual. The risk and protective factor charts show the percentage of students at risk and with protection for each of the scales. Along with the scales, there are bars that show the percentage of High Risk Youth and percentage of High Protection Youth. High Risk Youth is defined as the percentage of students who have more than a specified number of risk factors operating in their lives. The number of factors is listed on the charts and tables. High Protection Youth is defined as the percentage of students who have more than a specified number of protective factors operating in their lives and is also listed on the tables and graphs.

Additional Tables

Additional Tables in this Report

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

After that is Table 12, CSAP questions. It contains information required by communities with CSAP Grants, such as the parent attitudes regarding drinking, police response to drinking, and problems associated with drinking.

After Table 12 is Table 13, Drug Free Communities Report. It contains information required by communities with Drug Free Communities Grants, such as the perception of the risks of ATOD use, perception of parent and peer disapproval of ATOD use, past 30-day use, and average age of first use.

Next is Table 14, Youth Perceptions of Substance Use. Youth often overestimate the percentage of their peers who are using substances. Youth perceptions of the percentage of their peers who use cigarettes, alcohol, marijuana, and other illegal drugs are shown in these tables.

Finally, there are any extra questions your agency might have asked.

What are the numbers telling you?

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

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

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

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

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

How to identify high priority problem areas

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

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

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

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

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

Use these data for planning.

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

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

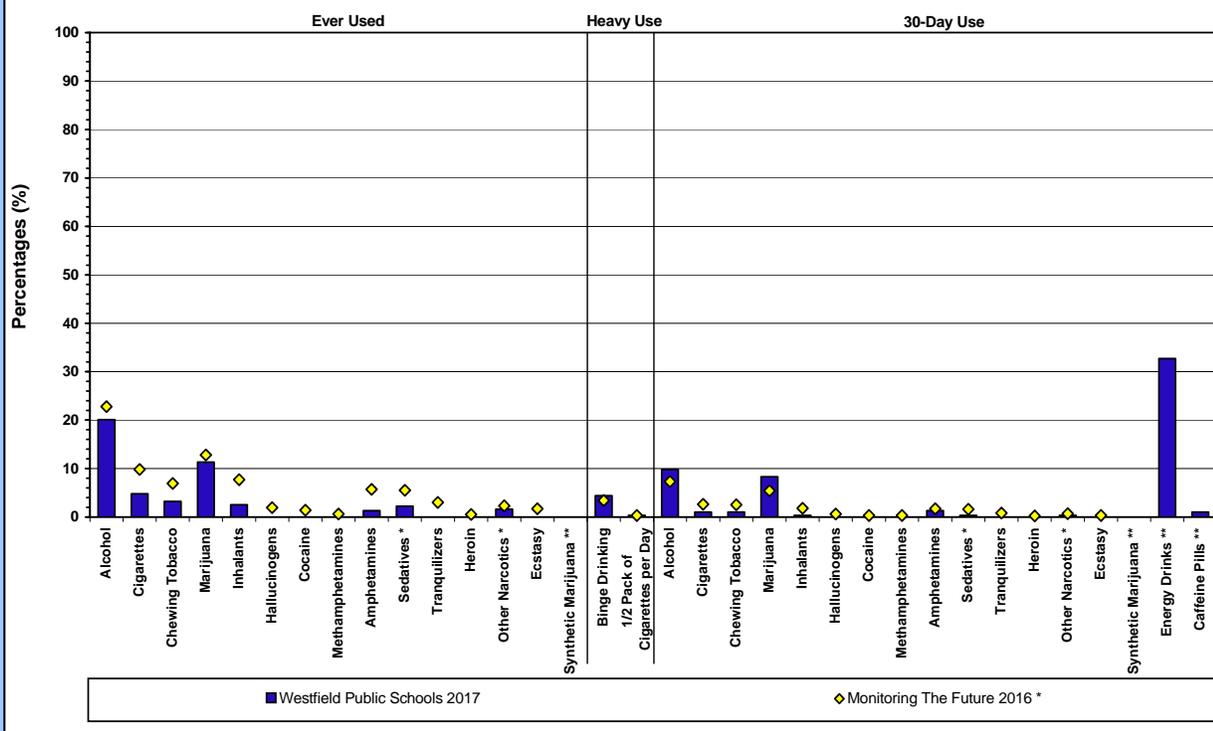
Risk and protective factor data can be used to identify exactly where the community needs to take action.

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

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

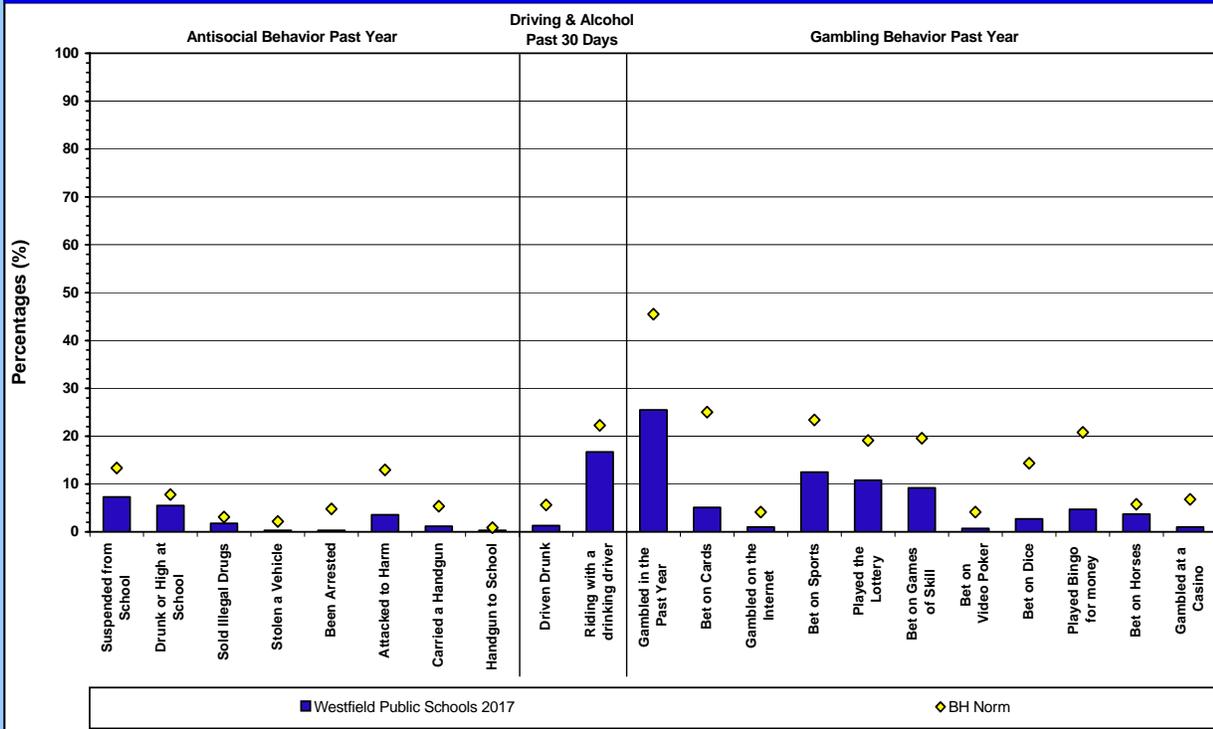
Substance Use and Antisocial Behavior

LIFETIME, 30 DAY & HEAVY ATOD USE
2017 Westfield Public Schools, Grade 8



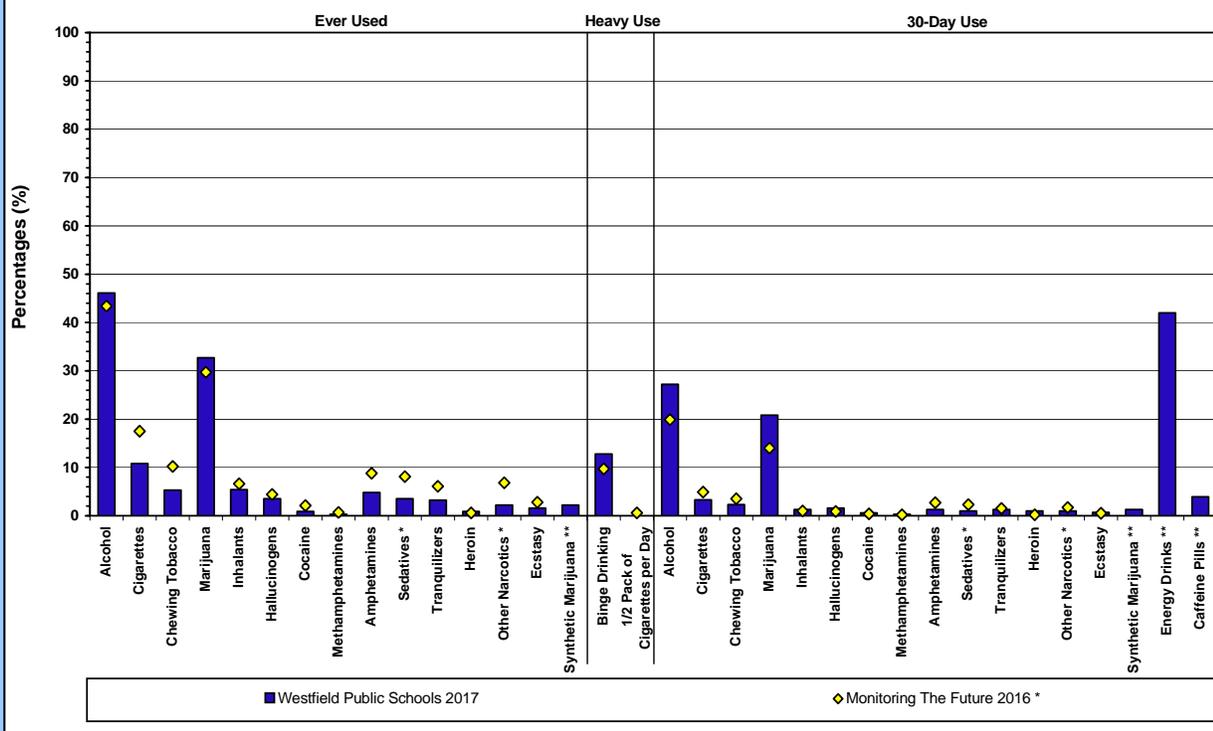
* Sedatives and Other Narcotics are 2014 values.
** MTF does not collect data on those substances.

ANTISOCIAL BEHAVIOR AND GAMBLING
2017 Westfield Public Schools, Grade 8



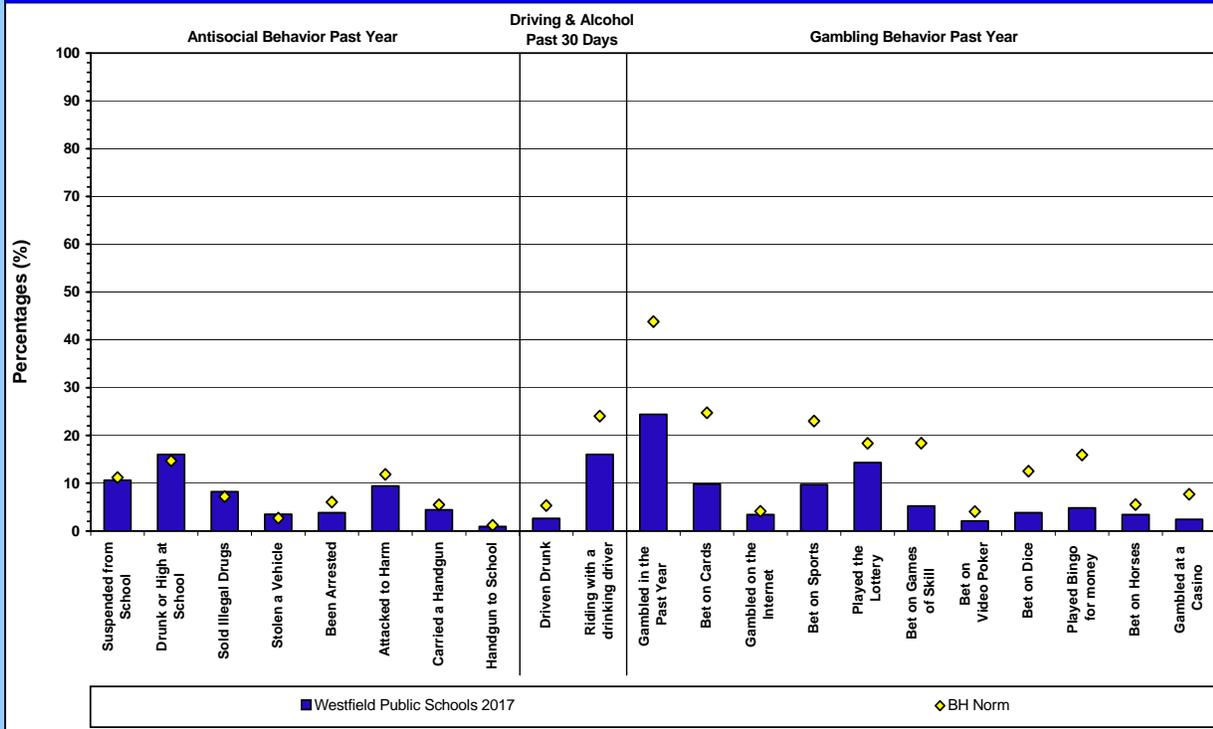
Substance Use and Antisocial Behavior

LIFETIME, 30 DAY & HEAVY ATOD USE
2017 Westfield Public Schools, Grade 10



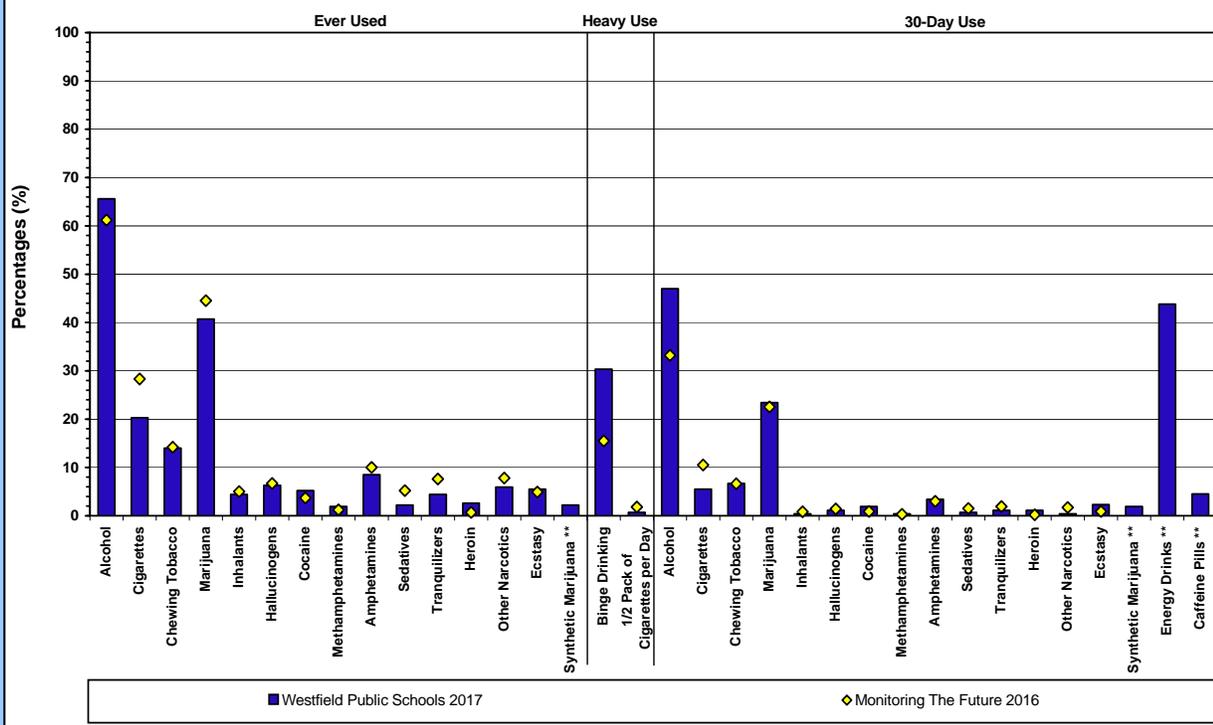
* Sedatives and Other Narcotics are 2014 values.
** MTF does not collect data on those substances.

ANTISOCIAL BEHAVIOR AND GAMBLING
2017 Westfield Public Schools, Grade 10



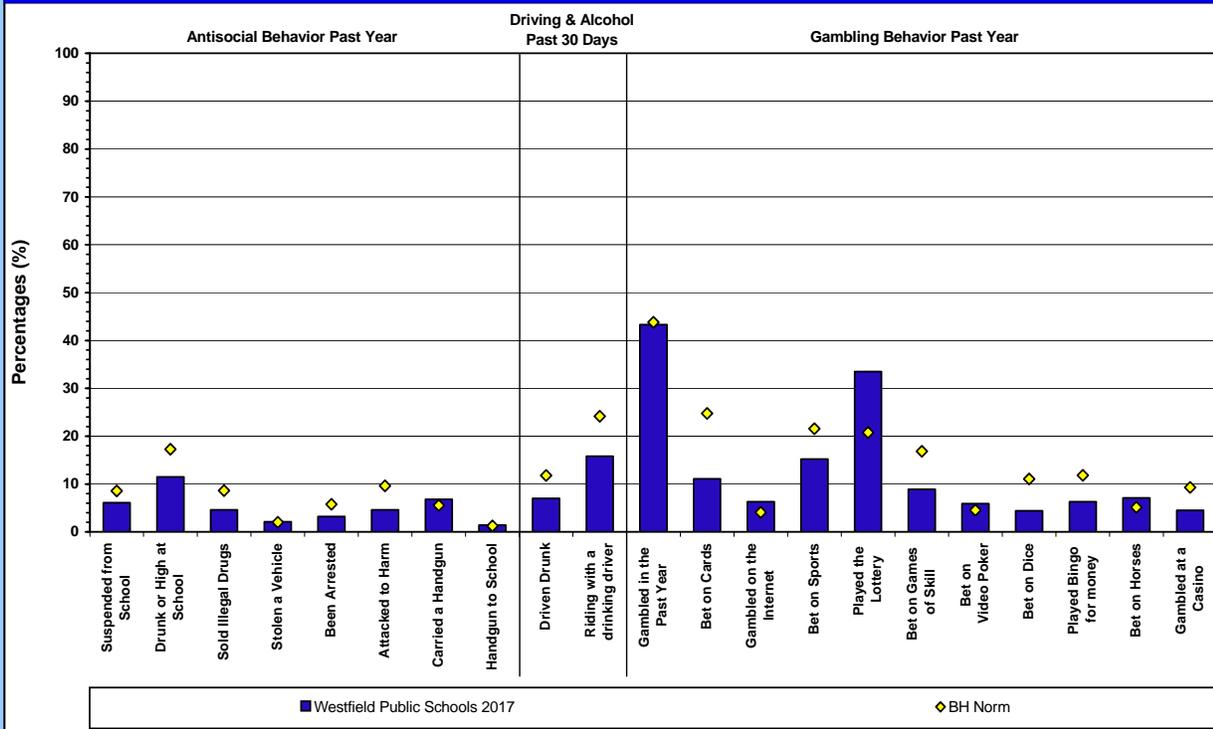
Substance Use and Antisocial Behavior

LIFETIME, 30 DAY & HEAVY ATOD USE
2017 Westfield Public Schools, Grade 12



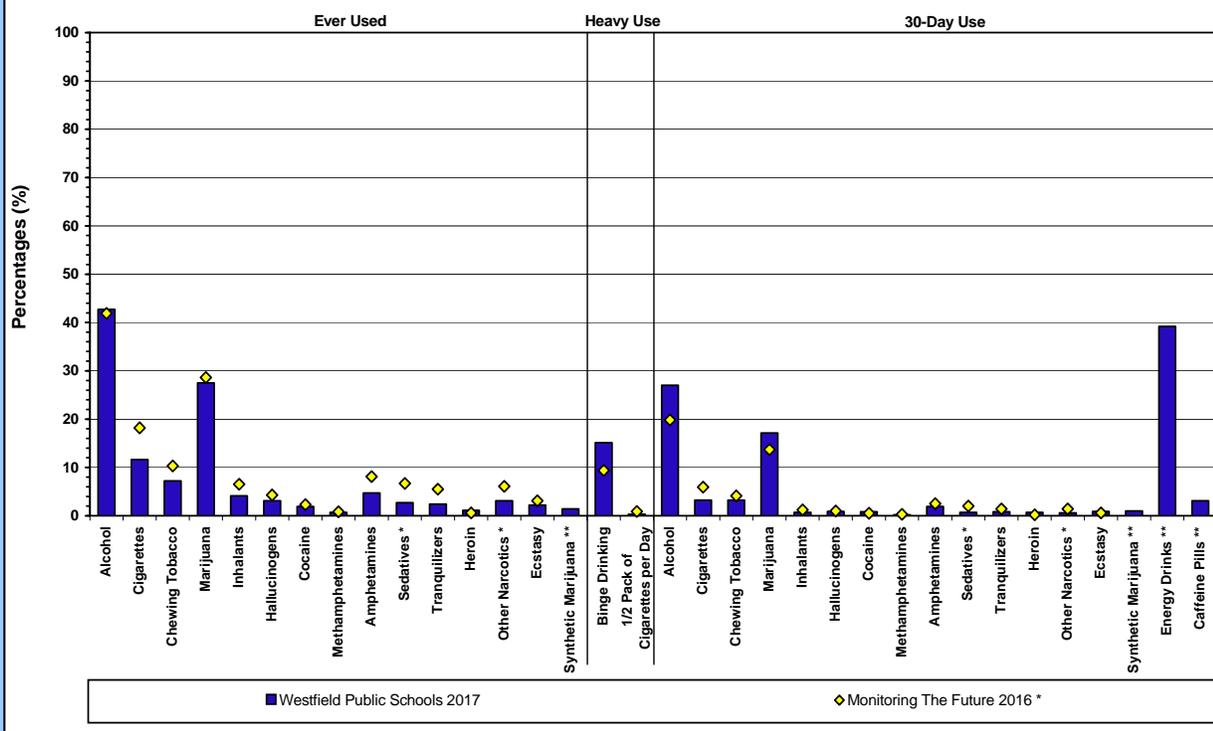
** MTF does not collect data on those substances.

ANTISOCIAL BEHAVIOR AND GAMBLING
2017 Westfield Public Schools, Grade 12



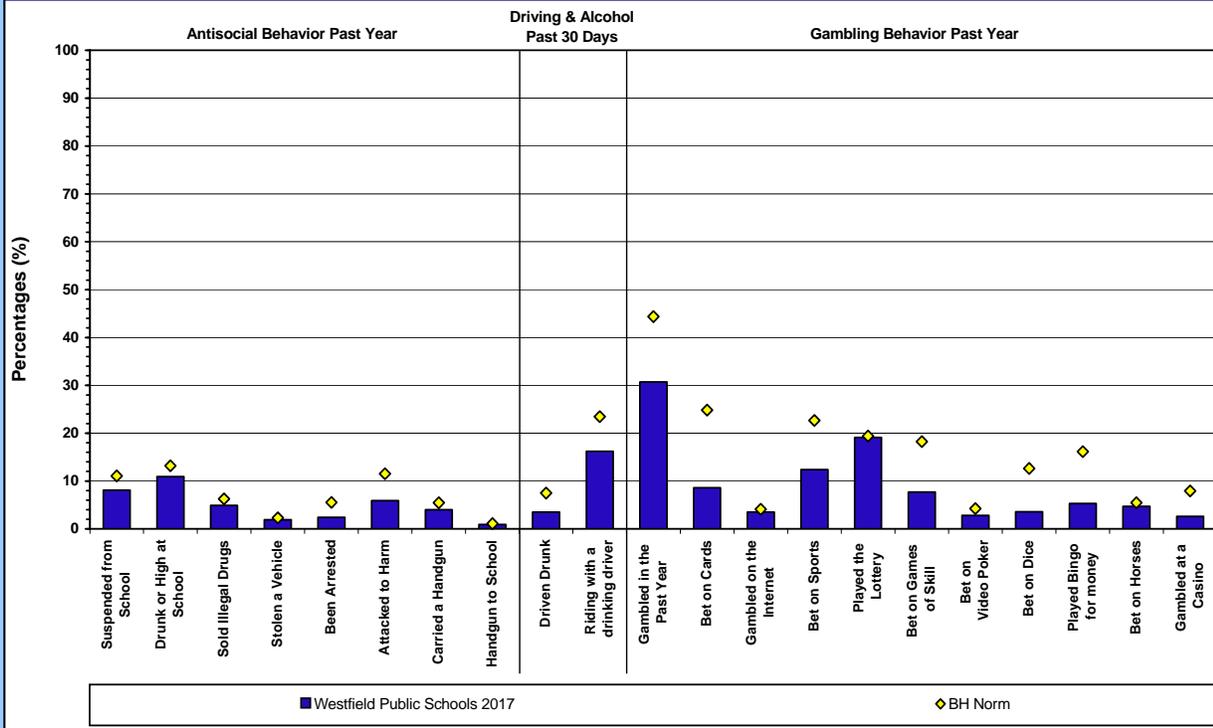
Substance Use and Antisocial Behavior

LIFETIME, 30 DAY & HEAVY ATOD USE
2017 Westfield Public Schools, All Grades

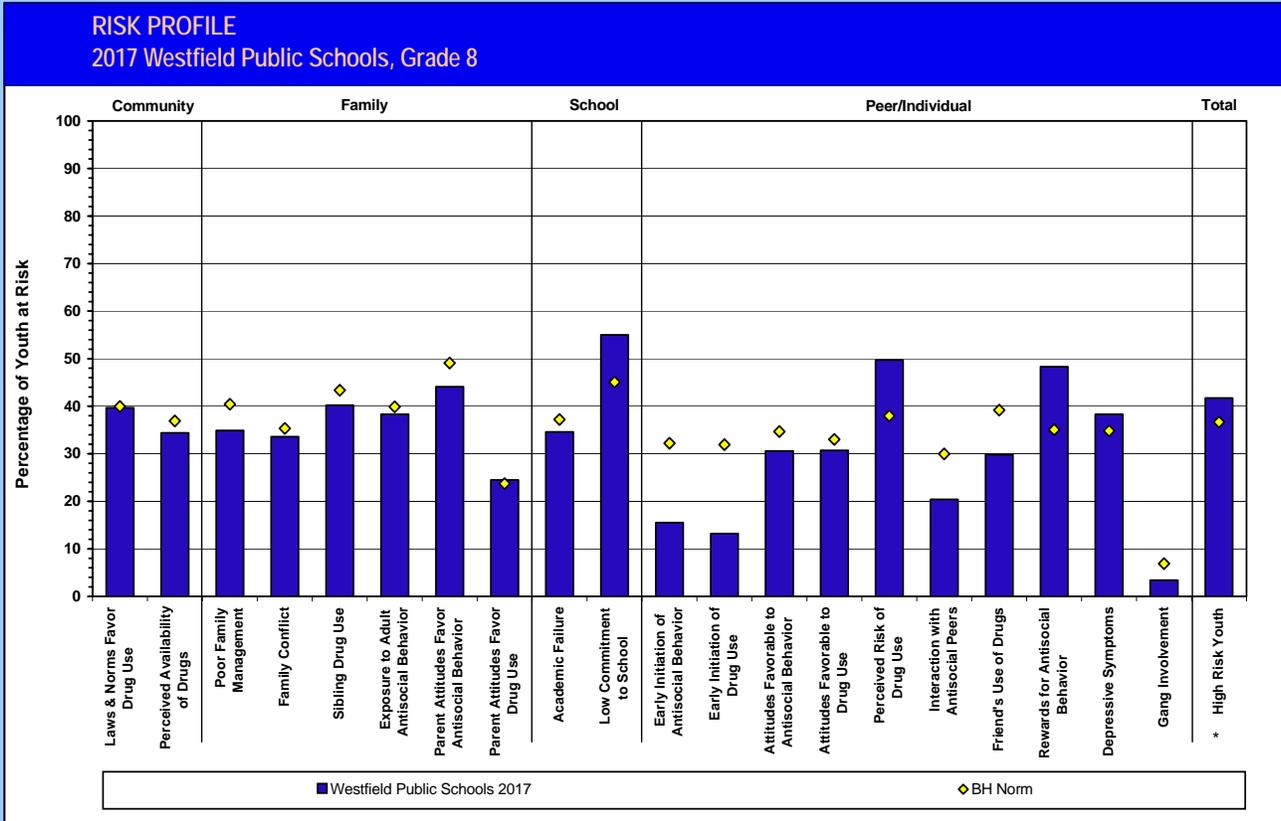


* MTF only surveys grades 8, 10, and 12. Sedatives and Other Narcotics are 2014 values.
** MTF does not collect data on those substances.

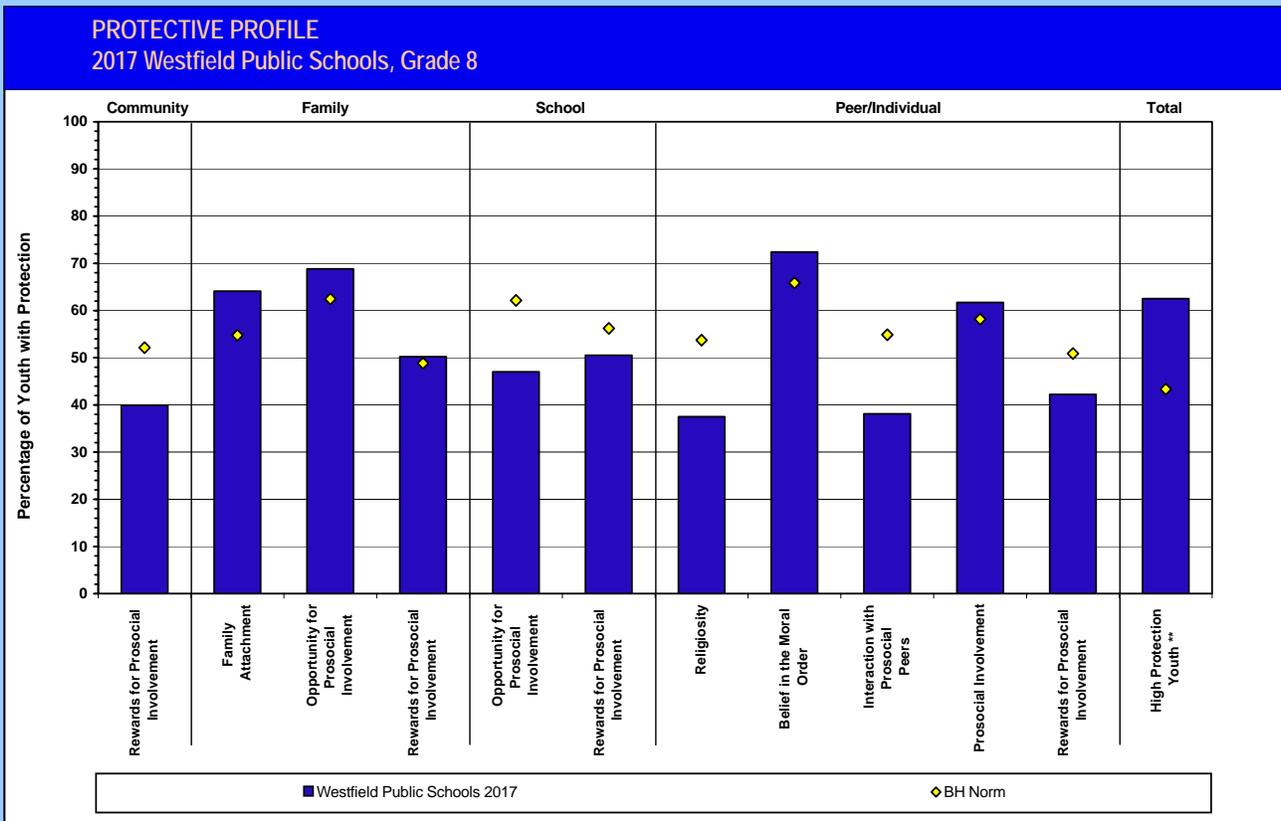
ANTISOCIAL BEHAVIOR AND GAMBLING
2017 Westfield Public Schools, All Grades



Risk and Protective Factor Profiles



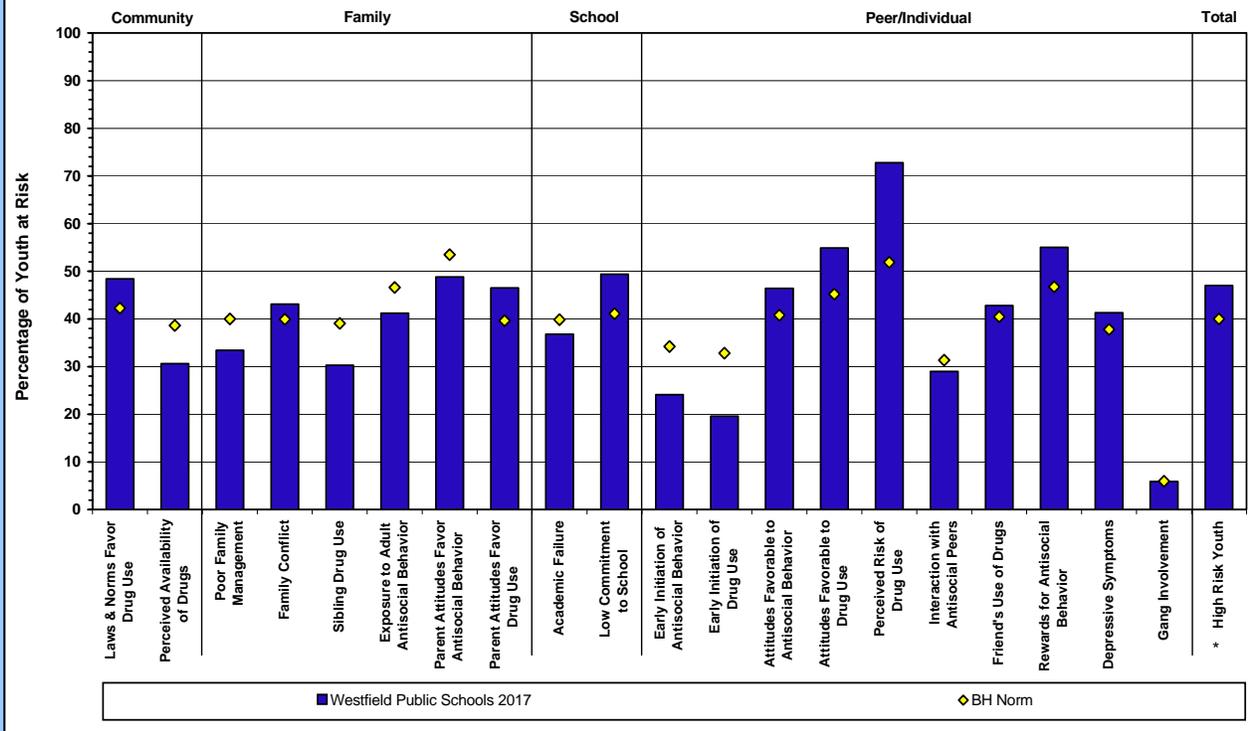
* High Risk Youth are defined as the percentage of students who have more than a specified number of risk factors operating in their lives. (6th grade: 5 or more risk factors, 7th-9th grades: 6 or more factors, 10th-12th grades: 7 or more factors)



** High Protection Youth are defined as the percentage of students who have more than a specified number of protective factors operating in their lives. (6th and 7th grades: 3 or more protective factors, 8th-12th grades: 4 or more factors).

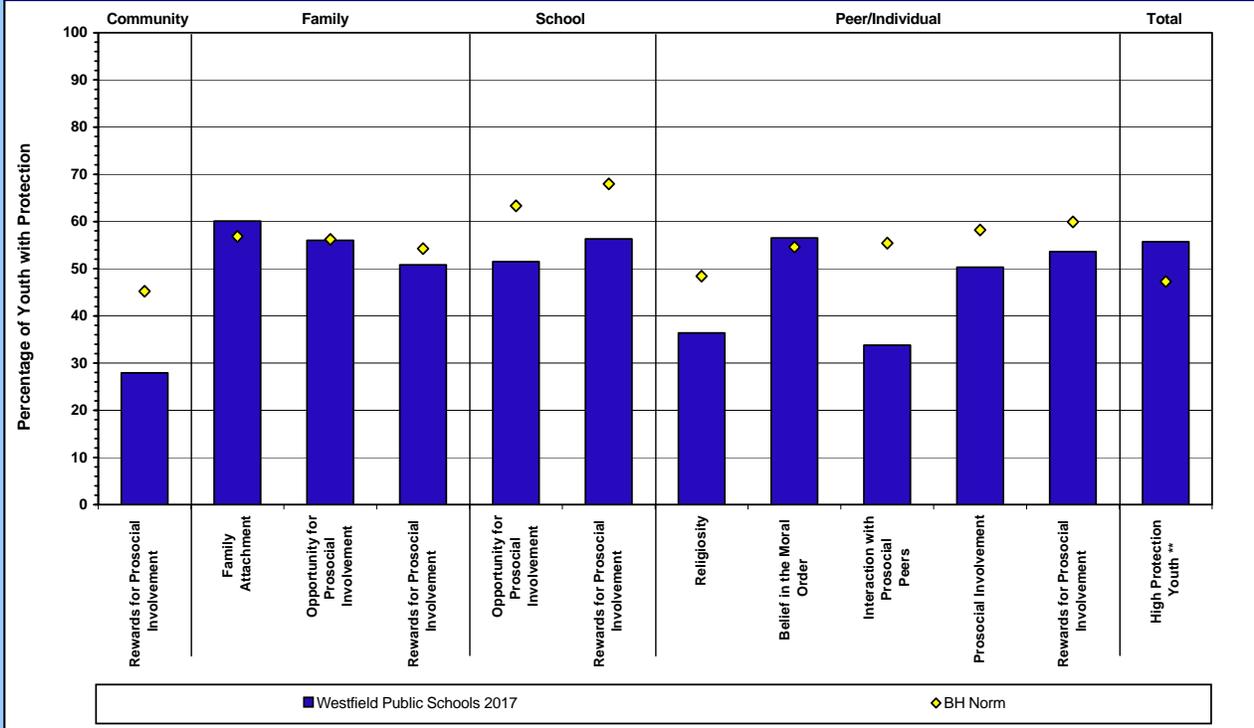
Risk and Protective Factor Profiles

RISK PROFILE 2017 Westfield Public Schools, Grade 10



* High Risk Youth are defined as the percentage of students who have more than a specified number of risk factors operating in their lives. (6th grade: 5 or more risk factors, 7th-9th grades: 6 or more factors, 10th-12th grades: 7 or more factors)

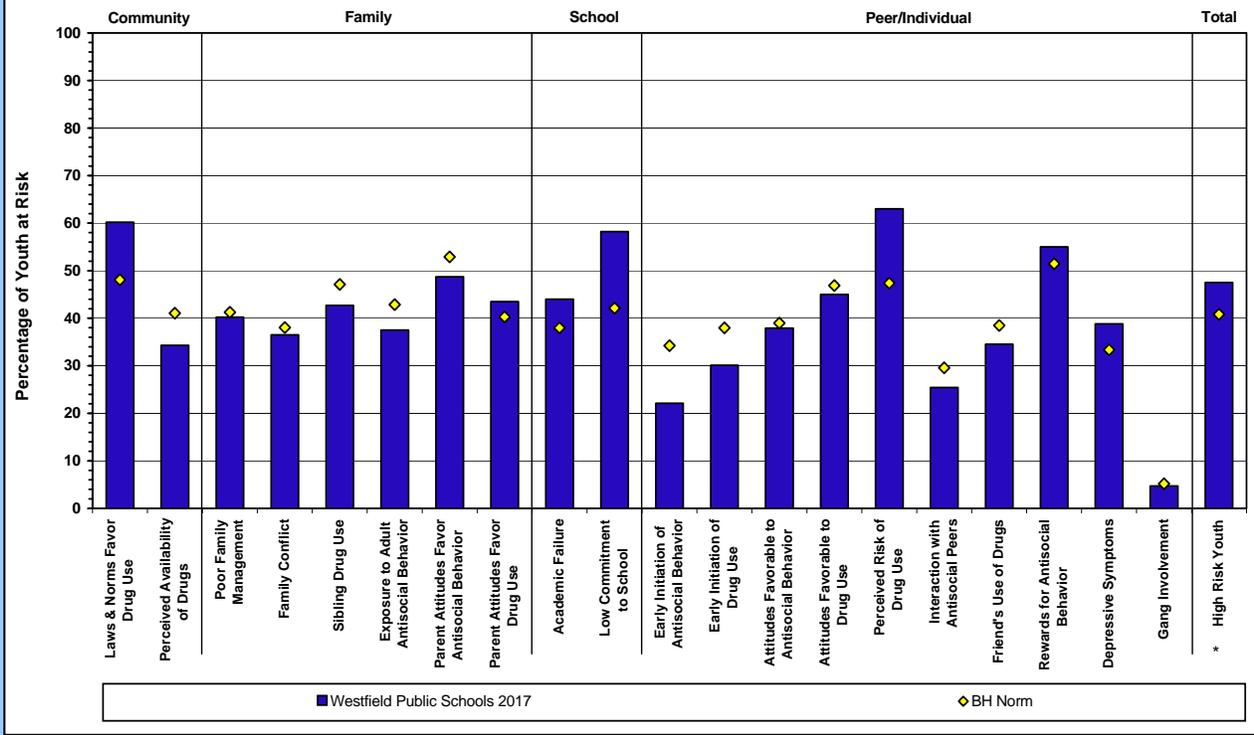
PROTECTIVE PROFILE 2017 Westfield Public Schools, Grade 10



** High Protection Youth are defined as the percentage of students who have more than a specified number of protective factors operating in their lives. (6th and 7th grades: 3 or more protective factors, 8th-12th grades: 4 or more factors).

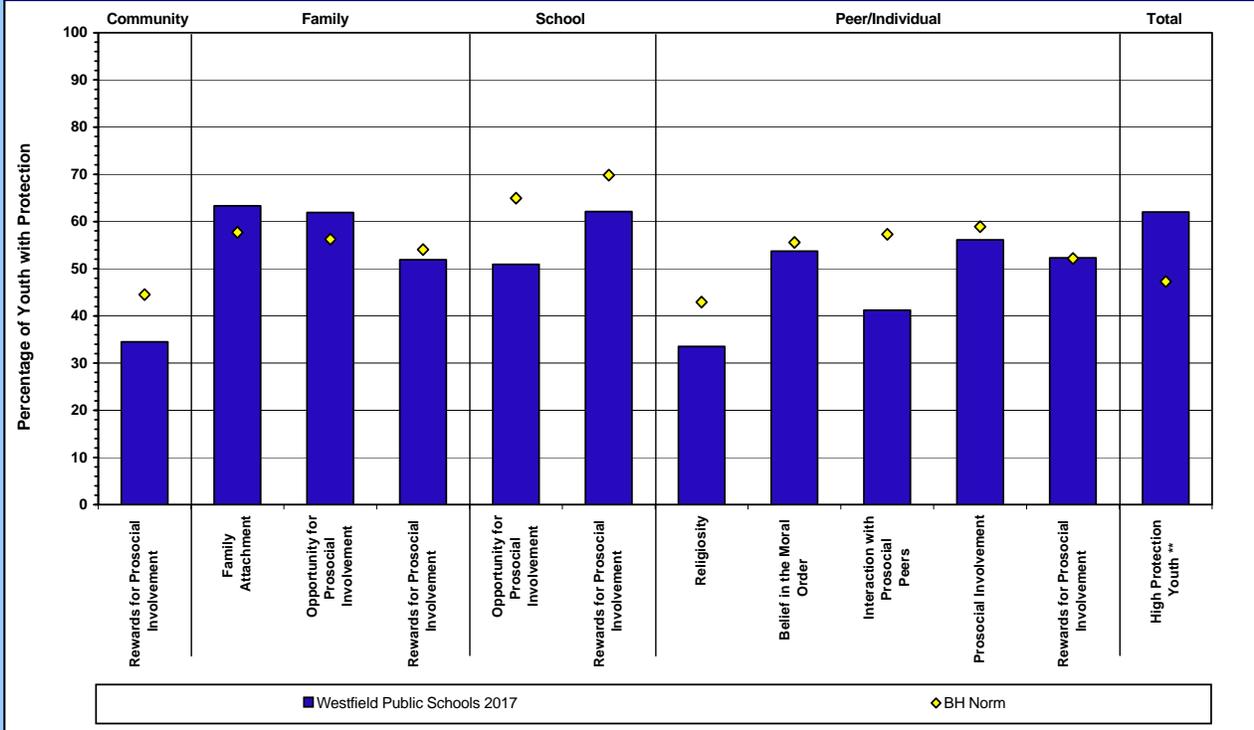
Risk and Protective Factor Profiles

RISK PROFILE
2017 Westfield Public Schools, Grade 12



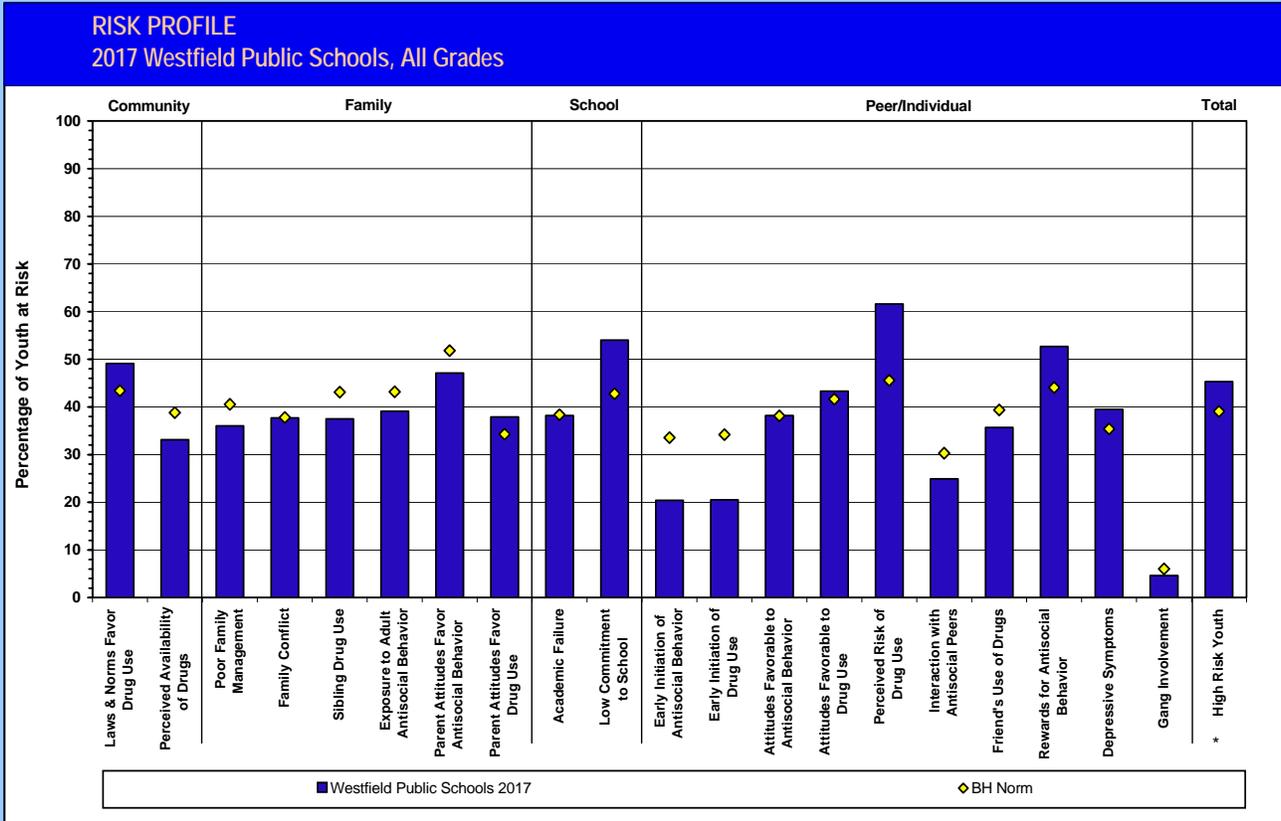
* High Risk Youth are defined as the percentage of students who have more than a specified number of risk factors operating in their lives. (6th grade: 5 or more risk factors, 7th-9th grades: 6 or more factors, 10th-12th grades: 7 or more factors)

PROTECTIVE PROFILE
2017 Westfield Public Schools, Grade 12

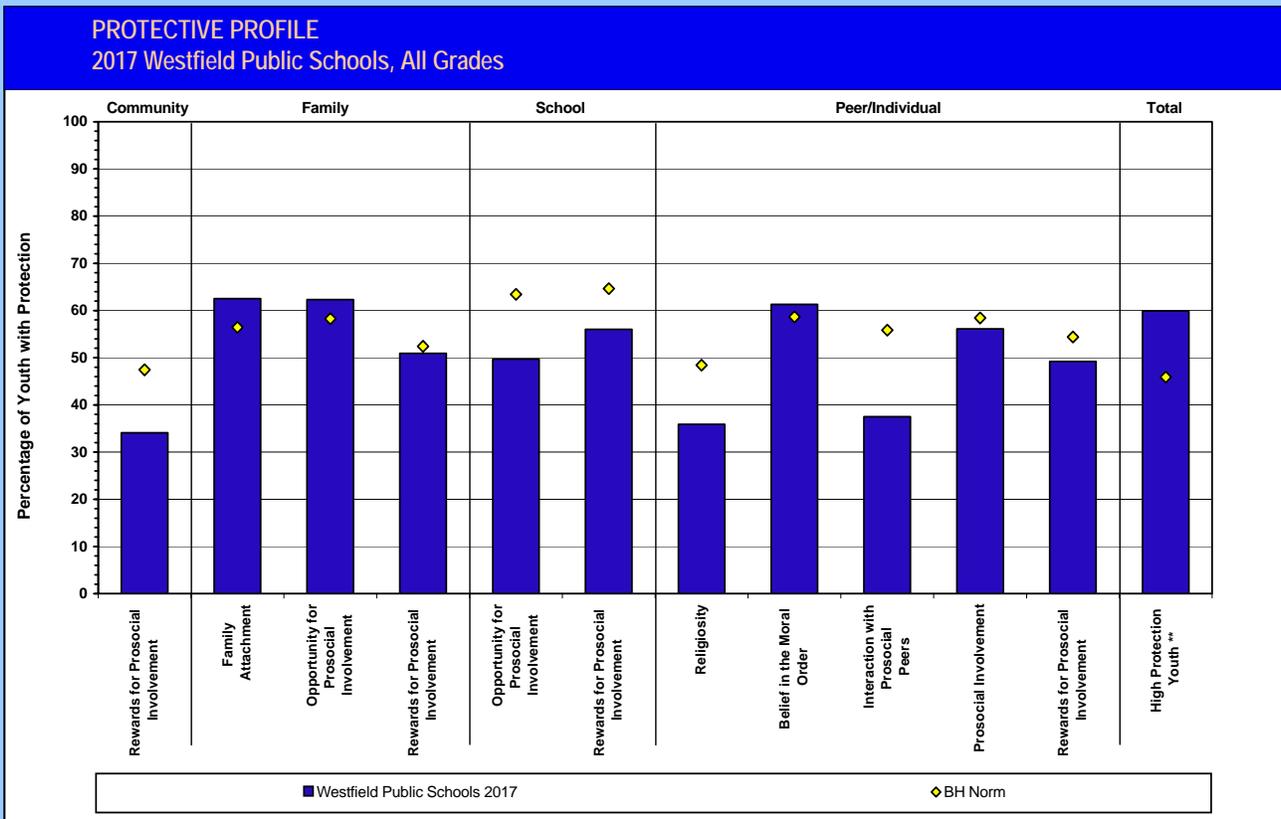


** High Protection Youth are defined as the percentage of students who have more than a specified number of protective factors operating in their lives. (6th and 7th grades: 3 or more protective factors, 8th-12th grades: 4 or more factors).

Risk and Protective Factor Profiles



* High Risk Youth are defined as the percentage of students who have more than a specified number of risk factors operating in their lives. (6th grade: 5 or more risk factors, 7th-9th grades: 6 or more factors, 10th-12th grades: 7 or more factors)



** High Protection Youth are defined as the percentage of students who have more than a specified number of protective factors operating in their lives. (6th and 7th grades: 3 or more protective factors, 8th-12th grades: 4 or more factors).

Risk and Protective Scale Definitions

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

<i>Community Domain Risk Factors</i>	
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.
Scale Questions for Laws and Norms Favorable Toward Drug Use	<i>If a kid drank some beer, wine or hard liquor (for example, vodka, whiskey or gin) in your neighborhood would he or she be caught by the police?</i>
	<i>If a kid smoked marijuana in your neighborhood, would he or she be caught by the police?</i>
	<i>If a kid carried a handgun in your neighborhood, would he or she be caught by the police?</i>
	<i>How wrong would most adults (over 21) in your neighborhood think it is for kids your age to use marijuana?</i>
	<i>How wrong would most adults (over 21) in your neighborhood think it is for kids your age to drink alcohol?</i>
Perceived Availability of Drugs	The availability of cigarettes, alcohol, marijuana, and other illegal drugs has been related to the use of these substances by adolescents.
	<i>If you wanted to get some cigarettes, how easy would it be for you to get some?</i>
Scale Questions for Perceived Availability of Drugs	<i>If you wanted to get some beer, wine or hard liquor (for example, vodka, whiskey or gin), how easy would it be for you to get some?</i>
	<i>If you wanted to get some marijuana, how easy would it be for you to get some?</i>
	<i>If you wanted to get a drug like cocaine, LSD, or amphetamines, how easy would it be for you to get some?</i>
<i>Community Domain Protective Factors</i>	
Rewards for Prosocial Involvement	Rewards for positive participation in activities helps youth bond to the community, thus lowering their risk for substance use.
Scale Questions for Rewards for Prosocial Involvement	<i>My neighbors notice when I am doing a good job and let me know about it.</i>
	<i>There are people in my neighborhood who are proud of me when I do something well.</i>
	<i>There are people in my neighborhood who encourage me to do my best.</i>
<i>Family Domain Risk Factors</i>	
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.
Scale Questions for Poor Family Management	<i>The rules in my family are clear.</i>
	<i>When I am not at home, one of my parents knows where I am and who I am with.</i>
	<i>If you drank some beer or wine or liquor (for example, vodka, whiskey or gin) without your parents' permission, would you be caught by your parents?</i>
	<i>My family has clear rules about alcohol use.</i>
	<i>My family has clear rules about other drug use.</i>
	<i>If you carried a handgun without your parents' permission, would you be caught by your parents?</i>
	<i>If you skipped school, would you be caught by your parents?</i>
	<i>My parents ask if I've gotten my homework done.</i>
<i>Would your parents know if you did not come home on time?</i>	

Risk and Protective Scale Definitions

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

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

Risk and Protective Scale Definitions

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

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

Risk and Protective Scale Definitions

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

<i>School Domain Protective Factors (Continued)</i>	
Rewards for Prosocial Involvement	When young people are recognized and rewarded for their contributions at school, they are less likely to be involved in substance use and other problem behaviors.
Scale Questions for Rewards for Prosocial Involvement	<i>My teachers notice when I am doing a good job and lets me know about it.</i>
	<i>The school lets my parents know when I have done something well.</i>
	<i>My teachers praise me when I work hard in school.</i>
<i>Peer-Individual Risk Factors</i>	
Early Initiation of Antisocial Behavior and Early Initiation of 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.
Scale Questions for Early Initiation of Antisocial Behavior	<i>How old were you when you first...</i>
	<i>got suspended from school?</i>
	<i>got arrested?</i>
	<i>carried a handgun?</i>
	<i>attacked someone with the idea of seriously hurting them?</i>
Scale Questions for Early Initiation of Drug Use	<i>How old were you when you first...</i>
	<i>smoked a cigarette, even just a puff?</i>
	<i>had more than a sip or two of beer, nine or hard liquor (for example, vodka, whiskey or gin)?</i>
	<i>began drinking alcoholic beverages regularly, that is, at least once or twice a month?</i>
	<i>smoked marijuana?</i>
Attitudes Favorable Toward Antisocial Behavior and Attitudes Favorable Toward 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.
Scale Questions for Attitudes Favorable Toward Antisocial Behavior	<i>How wrong do you think it is for someone your age to...</i>
	<i>take a handgun to school?</i>
	<i>steal anything worth more than \$5?</i>
	<i>pick a fight with someone?</i>
	<i>attack someone with the idea of seriously hurting them?</i>
Scale Questions for Attitudes Favorable Toward Drug Use	<i>stay away from school all day when their parents think they are at school?</i>
	<i>How wrong do you think it is for someone your age to...</i>
	<i>drink beer, nine or hard liquor (for example, vodka, whiskey or gin) regularly?</i>
	<i>smoke cigarettes?</i>
	<i>smoke marijuana?</i>
	<i>use LSD, cocaine, amphetamines or another illegal drug?</i>

Risk and Protective Scale Definitions

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

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

Risk and Protective Scale Definitions

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

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

Data Tables

Table 3. Number of Students Who Completed the Survey

Number of Youth	Grade 8		Grade 10		Grade 12		Total	
	2017	MTF †	2017	MTF †	2017	MTF †	2017	MTF †
	333	n/a	334	†	284	†	951	†

Table 4. Percentage of Students Who Used ATODs During Their Lifetime

Substance	Grade 8		Grade 10		Grade 12		Total	
	2017	MTF †	2017	MTF †	2017	MTF †	2017	MTF †
Alcohol	20.1	22.8	46.1	43.4	65.6	61.2	42.7	41.9
Cigarettes	4.8	9.8	10.8	17.5	20.3	28.3	11.6	18.2
Chewing Tobacco	3.2	6.9	5.3	10.2	14.0	14.2	7.2	10.3
Marijuana	11.3	12.8	32.7	29.7	40.7	44.5	27.5	28.6
Inhalants	2.5	7.7	5.4	6.6	4.4	5.0	4.1	6.5
Hallucinogens	0.0	1.9	3.5	4.4	6.3	6.7	3.1	4.3
Cocaine	0.0	1.4	0.9	2.1	5.2	3.7	1.9	2.3
Methamphetamines	0.0	0.6	0.3	0.7	1.9	1.2	0.7	0.8
Amphetamines	1.3	5.7	4.8	8.8	8.5	10.0	4.7	8.1
Sedatives *	2.2	5.5	3.5	n/a	2.2	5.2	2.7	n/a
Tranquilizers	0.0	3.0	3.2	6.1	4.4	7.6	2.4	5.5
Heroin	0.0	0.5	0.9	0.6	2.6	0.7	1.1	0.6
Other Narcotics *	1.6	2.3	2.2	n/a	5.9	n/a	3.1	n/a
Ecstasy	0.0	1.7	1.6	2.8	5.5	4.9	2.2	3.1
Synthetic Marijuana **	0.0	n/a	2.2	n/a	2.2	n/a	1.4	n/a

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

* The Substances in Blue are 2014 values.

** MTF does not collect data on that substance.

Data Tables

Table 5. Percentage of Students Who Used ATODs During The Past 30 Days

Substance	Grade 8		Grade 10		Grade 12		Total	
	2017	MTF †	2017	MTF †	2017	MTF †	2017	MTF †
Alcohol	9.8	7.3	27.2	19.9	47.0	33.2	27.0	19.8
Cigarettes	1.0	2.6	3.3	4.9	5.5	10.5	3.2	5.9
Chewing Tobacco	1.0	2.5	2.3	3.5	6.7	6.6	3.2	4.1
Marijuana	8.3	5.4	20.8	14.0	23.4	22.5	17.1	13.7
Inhalants	0.3	1.8	1.3	1.0	0.4	0.8	0.7	1.2
Hallucinogens	0.0	0.6	1.6	0.9	1.1	1.4	0.9	1.0
Cocaine	0.0	0.3	0.6	0.4	1.9	0.9	0.8	0.5
Methamphetamines	0.0	0.3	0.3	0.2	0.4	0.3	0.2	0.3
Amphetamines	1.3	1.7	1.3	2.7	3.4	3.0	1.9	2.5
Sedatives *	0.3	1.6	1.0	2.3	0.7	1.5	0.7	2.0
Tranquilizers	0.0	0.8	1.3	1.5	1.1	1.9	0.8	1.4
Heroin	0.0	0.2	1.0	0.2	1.1	0.2	0.7	0.2
Other Narcotics *	0.3	0.7	1.0	1.7	0.4	1.7	0.6	1.4
Ecstasy	0.0	0.3	0.7	0.5	2.3	0.9	0.9	0.6
Synthetic Marijuana **	0.0	n/a	1.3	0.0	1.9	0.0	1.0	0.0
Energy Drinks **	32.7	n/a	42.0	n/a	43.8	n/a	39.2	n/a
Caffeine Pills **	1.0	n/a	3.9	n/a	4.5	n/a	3.1	n/a

Table 6. Percentage of Students With Problem ATOD Use

Problem Use	2017	MTF †						
Binge Drinking (past 2 weeks)	4.4	3.4	12.8	9.7	30.3	15.5	15.1	9.4
1/2 Pack of Cigarettes per Day	0.3	0.3	0.0	0.6	0.7	1.8	0.3	0.9
Alcohol and Driving in the Past 30 Days	2017	BH Norm						
Drinking and Driving	1.3	5.6	2.6	5.3	7.0	11.8	3.5	7.5
Riding with a Drinking Driver	16.7	22.3	16.0	24.0	15.8	24.1	16.2	23.5

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

* The Substances in Blue are 2014 values.

** MTF does not collect data on that substance.

Data Tables, Supplement 1

Supplement 1. ATOD Questions

Cigarettes	"Have you ever smoked cigarettes?" And "How frequently have you smoked cigarettes during the past 30 days?"
Chewing Tobacco	"Have you ever used smokeless tobacco (chew, snuff, plug, dipping tobacco, or chewing tobacco)? " and "How frequently have you used smokeless tobacco during the past 30 days?"
On how many occasions (if any) have you:	
Alcohol	had alcoholic beverages (beer, wine or hard liquor) to drink in your lifetime (or during the past 30 days) -- more than just a few sips?
Marijuana	used marijuana (grass, pot) or hashish (hash, hash oil) in your lifetime (or during the past 30 days)?
Inhalants	sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high in your lifetime (or during the past 30 days)?
Hallucinogens	used LSD (acid) or other hallucinogens (like PCP, mescaline, peyote, "shrooms" or psilocybin) in your lifetime (or during the past 30 days)?
Cocaine	used cocaine (like cocaine powder) or "crack" (cocaine in chunk or rock form) in your lifetime (or during the past 30 days)?
Methamphetamines	used methamphetamines (meth, speed, crank, crystal meth) in your lifetime (or during the past 30 days)?
Amphetamines	used prescription stimulants or amphetamines (such as Adderall, Ritalin, or Dexedrine) without a doctor telling you to take them, in your lifetime (or during the past 30 days)?
Sedatives	used prescription sedatives including barbiturates or sleeping pills (such as phenobarbital, Tuinal, Seconal, Ambien, Lunesta, or Sonata) without a doctor telling you to take them, in your lifetime (or during the past 30 days)?
Tranquilizers	used prescription tranquilizers (such as Librium, Valium, Xanax, Ativan, Soma, or Klonopin) without a doctor telling you to take them, in your lifetime (or during the past 30 days)?
Heroin	used heroin in your lifetime (or during the past 30 days)?
Other Narcotics	used narcotic prescription drugs (such as OxyContin, methadone, morphine, codeine, Demerol, Vicodin, or Percocet) without a doctor telling you to take them, in your lifetime (or during the past 30 days)?
Ecstasy	used MDMA (X,E, or ecstasy) in your lifetime (or during the past 30 days)?
Synthetic Marijuana	used "synthetic marijuana" ("K2", "Spice") to get high in your lifetime (or during the past 30 days)?
Energy Drinks	drank energy drinks with caffeine (like Red Bull, Monster, Rockstar, or 5-Hour-Energy) during the past 30 days?
Caffeine Pills	used caffeine pills (No-Doz, Vivarin, Dexatrim) during the past 30 days?
Problem Use	
Binge Drinking (past 2 weeks)	Think back over the last two weeks. How many times have you had five or more alcoholic drinks in a row? (A "drink" is a glass of wine, a bottle of beer, a wine cooler, a shot glass of liquor, or a mixed drink.)
1/2 Pack of Cigarettes per Day	How frequently have you smoked cigarettes during the past 30 days?
Alcohol and Driving in the Past 30 Days	
Drinking and Driving	During the past 30 days, how many times did you DRIVE a car or other vehicle when you had been drinking alcohol?
Riding with a Drinking Driver	During the past 30 days, how many times did you RIDE in a car or other vehicle driven by someone who had been drinking alcohol?

Data Tables

Table 7. Percentage of Students With Antisocial Behavior in the Past Year

How many times in the past year (12 months) have you: (One or more times)	Grade 8		Grade 10		Grade 12		Total	
	2017	BH Norm	2017	BH Norm	2017	BH Norm	2017	BH Norm
Been Suspended from School	7.3	13.4	10.6	11.2	6.1	8.5	8.1	11.1
Been Drunk or High at School	5.5	7.8	16.0	14.7	11.5	17.3	10.9	13.2
Sold Illegal Drugs	1.8	3.1	8.2	7.2	4.6	8.6	4.9	6.3
Stolen or Tried to Steal a Motor Vehicle	0.3	2.2	3.5	2.7	2.1	2.0	1.9	2.3
Been Arrested	0.3	4.8	3.8	6.0	3.2	5.8	2.4	5.5
Attacked Someone with the Idea of Seriously Hurting Them	3.6	12.9	9.4	11.8	4.6	9.6	5.9	11.5
Carried a Handgun	1.2	5.4	4.4	5.5	6.8	5.5	4.0	5.5
Carried a Handgun to School	0.3	0.9	0.9	1.2	1.4	1.2	0.9	1.1

Table 8. Percentage of Students Gambling in the Past Year

How many times in the past year (12 months) have you: (A few times or more)	Grade 8		Grade 10		Grade 12		Total	
	2017	BH Norm	2017	BH Norm	2017	BH Norm	2017	BH Norm
Gambled in the Past Year	25.5	45.5	24.4	43.8	43.3	43.8	30.7	44.3
Bet on Cards	5.1	25.0	9.8	24.7	11.1	24.7	8.6	24.8
Gambled on the Internet	1.0	4.1	3.4	4.1	6.3	4.1	3.5	4.1
Bet on Sports	12.5	23.4	9.7	23.0	15.2	21.6	12.4	22.7
Played the Lottery	10.8	19.1	14.3	18.3	33.5	20.8	19.1	19.4
Bet on Games of Skill	9.2	19.6	5.2	18.4	8.9	16.9	7.7	18.3
Bet on Video Poker	0.7	4.2	2.1	4.0	5.9	4.5	2.8	4.2
Bet on Dice	2.7	14.3	3.8	12.5	4.4	11.1	3.6	12.6
Played Bingo for money	4.7	20.8	4.8	15.9	6.3	11.8	5.3	16.1
Bet on Horses	3.7	5.8	3.4	5.5	7.1	5.2	4.7	5.5
Gambled at a Casino	1.0	6.8	2.4	7.7	4.5	9.3	2.6	7.9



Data Tables

Table 9. Percentage of Students Reporting Protection

Protective Factors	Grade 8		Grade 10		Grade 12		Total	
	2017	BH Norm	2017	BH Norm	2017	BH Norm	2017	BH Norm
Community Domain								
Rewards for Prosocial Involvement	39.9	52.1	27.9	45.2	34.5	44.5	34.1	47.4
Family Domain								
Family Attachment	64.1	54.8	60.1	56.8	63.3	57.7	62.5	56.4
Opportunity for Prosocial Involvement	68.8	62.5	56.0	56.2	61.9	56.2	62.3	58.3
Rewards for Prosocial Involvement	50.2	48.8	50.8	54.3	51.9	54.0	50.9	52.4
School Domain								
Opportunity for Prosocial Involvement	47.0	62.1	51.5	63.3	50.9	64.9	49.7	63.4
Rewards for Prosocial Involvement	50.5	56.2	56.3	68.0	62.1	69.8	56.0	64.6
Peer-Individual Domain								
Religiosity	37.5	53.7	36.4	48.4	33.5	42.9	35.9	48.4
Belief in the Moral Order	72.4	65.8	56.5	54.6	53.7	55.6	61.3	58.7
Interaction with Prosocial Peers *	38.1	54.9	33.8	55.4	41.2	57.3	37.5	55.8
Prosocial Involvement	61.7	58.1	50.3	58.2	56.1	58.9	56.1	58.4
Rewards for Prosocial Involvement	42.2	50.9	53.6	59.9	52.3	52.2	49.2	54.4
High Protection								
High Protection Youth **	62.5	43.3	55.7	47.3	62.0	47.3	59.9	45.9

** High Protection Youth are defined as the percentage of students who have more than a specified number of protective factors operating in their lives. (6th and 7th grades: 3 or more protective factors, 8th-12th grades: 4 or more factors).

Data Tables

Table 10. Percentage of Students Reporting Risk

Risk Factors	Grade 8		Grade 10		Grade 12		Total	
	2017	BH Norm	2017	BH Norm	2017	BH Norm	2017	BH Norm
Community Domain								
Laws & Norms Favor Drug Use	39.7	40.0	48.4	42.3	60.2	48.1	49.1	43.4
Perceived Availability of Drugs	34.4	36.9	30.6	38.6	34.3	41.0	33.1	38.8
Family Domain								
Poor Family Management	34.9	40.4	33.4	40.0	40.2	41.2	36.0	40.5
Family Conflict	33.6	35.3	43.1	39.9	36.5	38.0	37.7	37.8
Sibling Drug Use	40.2	43.3	30.3	39.1	42.7	47.1	37.5	43.1
Exposure to Adult Antisocial Behavior	38.3	39.9	41.2	46.6	37.5	42.9	39.1	43.2
Parent Attitudes Favor Antisocial Behavior	44.1	49.1	48.8	53.5	48.7	52.9	47.1	51.8
Parent Attitudes Favor Drug Use	24.5	23.7	46.5	39.6	43.5	40.3	37.9	34.3
School Domain								
Academic Failure	34.6	37.2	36.8	39.8	44.0	37.9	38.2	38.3
Low Commitment to School	55.0	45.1	49.4	41.1	58.2	42.1	54.0	42.8
Peer-Individual Domain								
Early Initiation of Antisocial Behavior	15.5	32.2	24.1	34.2	22.1	34.2	20.4	33.6
Early Initiation of Drug Use	13.2	31.9	19.6	32.8	30.1	38.0	20.5	34.2
Attitudes Favorable to Antisocial Behavior	30.6	34.7	46.4	40.8	37.9	39.0	38.2	38.1
Attitudes Favorable to Drug Use	30.7	33.0	54.9	45.2	45.0	46.9	43.3	41.6
Perceived Risk of Drug Use	49.7	37.9	72.8	51.9	63.0	47.4	61.6	45.6
Interaction with Antisocial Peers	20.4	30.0	29.0	31.3	25.4	29.6	24.9	30.3
Friend's Use of Drugs	29.8	39.2	42.8	40.4	34.5	38.5	35.7	39.4
Rewards for Antisocial Behavior	48.3	35.1	55.0	46.7	55.0	51.5	52.7	44.1
Depressive Symptoms	38.3	34.8	41.3	37.8	38.8	33.4	39.5	35.4
Gang Involvement	3.4	6.9	5.9	5.9	4.7	5.2	4.6	6.0
High Risk								
High Risk Youth *	41.7	36.7	47.0	40.0	47.5	40.8	45.3	39.1

* High Risk Youth are defined as the percentage of students who have more than a specified number of risk factors operating in their lives. (6th grade: 5 or more risk factors, 7th-9th grades: 6 or more factors, 10th-12th grades: 7 or more factors).

Student Alcohol Table

Table 11. Sources and Places of Student Alcohol Use

If you drank alcohol (not just a sip or taste) in the past year (12 months), how did you get it?	Grade 8	Grade 10	Grade 12	Total
	2017	2017	2017	2017
Sample size *	59	131	159	349
I bought it myself from a store.	8.5	6.9	17.0	11.7
I got it at a party.	50.8	68.7	71.7	67.0
I gave someone else money to buy it for me.	22.0	42.0	62.9	48.1
I got it from someone I know age 21 or older.	37.3	55.0	69.8	58.7
I got it from someone I know under age 21.	33.9	47.3	47.2	45.0
I got it from a family member or relative other than my parents.	25.4	30.5	37.1	32.7
I got it from home with my parents' permission.	30.5	34.4	32.7	33.0
I got it from home without my parents' permission.	39.0	45.0	33.3	38.7
I got it at work.	1.7	1.5	13.2	6.9
I bought it over the internet.	1.7	1.5	4.4	2.9
I got it in another way.	15.3	11.5	13.2	12.9

During the past year (12 months) did you drink alcohol at any of the following places?	Grade 8	Grade 10	Grade 12	Total
	2017	2017	2017	2017
Sample size *	62	136	153	351
At my home or someone else's home without any parent permission.	56.5	62.5	64.1	62.1
At my home with my parent's permission.	37.1	45.6	51.0	46.4
At someone else's home with their parent's permission.	16.1	30.9	55.6	39.0
At an open area like a park, beach, or back road.	21.0	30.1	52.9	38.5
At public events such as a sporting event, festival, or concert.	9.7	29.4	47.7	33.9
At a restaurant, bar, or a nightclub.	8.1	16.9	31.4	21.7
In a car.	9.7	27.9	41.2	30.5
At a school dance, a game, or other event.	8.1	18.4	25.5	19.7
At school during the day.	8.1	11.0	10.5	10.3
Near school.	8.1	9.6	11.1	10.0
In another place.	19.4	20.6	27.5	23.4

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

Data Tables

Table 12. CSAP Questions

Question	Response	Grade 8		Grade 10		Grade 12		Total	
		Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>For the following for questions, during the past 12 months, have you talked with at least one of your parents (by parents, we mean either your biological parents, adoptive parents, stepparents, foster parents, or other adult caregivers whether or not they live with you) about :</i>									
The dangers of underage drinking?	Yes	199	66.6	162	55.1	114	43.7	475	55.6
	No	100	33.4	132	44.9	147	56.3	379	44.4
The dangers of tobacco use?	Yes	215	72.1	174	59.2	135	50.9	524	61.1
	No	83	27.9	120	40.8	130	49.1	333	38.9
When parents find out their kids have been drinking they may discuss it, take away privileges, add chores, take away cell phones, use of the car, etc. In the past 12 months, if your parents found out you were drinking, how did they usually respond? (Select one option).	I didn't drink.	245	82.2	184	62.4	133	50.6	562	65.7
	I drank but I was not caught.	21	7.0	54	18.3	56	21.3	131	15.3
	I was caught but there were no consequences.	4	1.3	16	5.4	44	16.7	64	7.5
	There were minor consequences.	6	2.0	22	7.5	19	7.2	47	5.5
	There were major consequences.	22	7.4	19	6.4	11	4.2	52	6.1
If the police caught you drinking, which of the following would most likely happen? (Select one option).	There would be no consequence.	14	4.8	20	6.9	33	12.5	67	7.9
	I would be given a warning and then let go.	40	13.8	38	13.1	62	23.6	140	16.6
	I would be taken home to my parents.	148	51.0	161	55.3	118	44.9	427	50.6
	I would be arrested but would get no penalty.	35	12.1	25	8.6	15	5.7	75	8.9
	I would be arrested and the court would impose a penalty.	53	18.3	47	16.2	35	13.3	135	16.0
<i>For the following for questions, during the past 12 months, how many times has each of the following things happened?</i>									
You had problems at school or work because you had been drinking.	Never	304	99.7	281	95.3	255	97.3	840	97.4
	Once	0	0.0	8	2.7	3	1.1	11	1.3
	Twice	1	0.3	3	1.0	2	0.8	6	0.7
	Three or four times	0	0.0	2	0.7	2	0.8	4	0.5
	Five or more times	0	0.0	1	0.3	0	0.0	1	0.1

Data Tables

Table 12. (Continued) CSAP Questions

Question	Response	Grade 8		Grade 10		Grade 12		Total	
		Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>For the following for questions, during the past 12 months, how many times has each of the following things happened?</i>									
You had problems with your friends because you had been drinking.	Never	297	97.7	276	93.9	241	90.9	814	94.3
	Once	6	2.0	11	3.7	18	6.8	35	4.1
	Twice	1	0.3	3	1.0	5	1.9	9	1.0
	Three or four times	0	0.0	2	0.7	1	0.4	3	0.3
	Five or more times	0	0.0	2	0.7	0	0.0	2	0.2
You had problems with someone you were dating because you had been drinking.	Never	299	98.0	282	95.3	239	91.2	820	95.0
	Once	4	1.3	5	1.7	8	3.1	17	2.0
	Twice	0	0.0	3	1.0	6	2.3	9	1.0
	Three or four times	2	0.7	6	2.0	6	2.3	14	1.6
	Five or more times	0	0.0	0	0.0	3	1.1	3	0.3
You were hung over.	Never	290	96.0	237	81.7	190	71.2	717	83.5
	Once	7	2.3	25	8.6	25	9.4	57	6.6
	Twice	2	0.7	12	4.1	20	7.5	34	4.0
	Three or four times	1	0.3	7	2.4	13	4.9	21	2.4
	Five or more times	2	0.7	9	3.1	19	7.1	30	3.5
You were sick to your stomach or threw up after drinking.	Never	297	98.7	260	88.4	198	76.4	755	88.4
	Once	3	1.0	13	4.4	32	12.4	48	5.6
	Twice	0	0.0	8	2.7	13	5.0	21	2.5
	Three or four times	0	0.0	11	3.7	13	5.0	24	2.8
	Five or more times	1	0.3	2	0.7	3	1.2	6	0.7
You got into a sexual situation that you later regretted because you had been drinking.	Never	300	99.0	269	93.4	229	87.4	798	93.6
	Once	0	0.0	14	4.9	19	7.3	33	3.9
	Twice	2	0.7	1	0.3	12	4.6	15	1.8
	Three or four times	0	0.0	1	0.3	0	0.0	1	0.1
	Five or more times	1	0.3	3	1.0	2	0.8	6	0.7
You got into a physical fight because you had been drinking.	Never	300	99.3	278	95.5	246	95.0	824	96.7
	Once	0	0.0	8	2.7	5	1.9	13	1.5
	Twice	1	0.3	2	0.7	5	1.9	8	0.9
	Three or four times	0	0.0	0	0.0	2	0.8	2	0.2
	Five or more times	1	0.3	3	1.0	1	0.4	5	0.6
You were drunk at school or work.	Never	292	99.0	278	95.5	247	94.3	817	96.3
	Once	2	0.7	9	3.1	2	0.8	13	1.5
	Twice	1	0.3	4	1.4	10	3.8	15	1.8
	Three or four times	0	0.0	0	0.0	2	0.8	2	0.2
	Five or more times	0	0.0	0	0.0	1	0.4	1	0.1

DFC and Youth Perception Tables

Table 13. Drug Free Communities Report *

Outcomes	Definition	Grade 8		Grade 10		Grade 12		Total		Male		Female	
		Per.	Num.	Per.	Num.	Per.	Num.	Per.	Num.	Per.	Num.	Per.	Num.
How do you feel about someone your age having one or two drinks of an alcoholic beverage nearly every day? †	Neither Approve nor Disapprove	12.9	41	23.4	74	17.8	47	18.1	162	22.7	95	13.6	64
	Somewhat Disapprove	8.5	27	19.0	60	19.3	51	15.4	138	14.3	60	16.1	76
	Strongly Disapprove	67.8	215	45.6	144	52.3	138	55.4	497	51.8	217	59.0	278
	Don't know or can't say	10.7	34	12.0	38	10.6	28	11.1	100	11.2	47	11.3	53
How much do you think people risk harming themselves (physically or in other ways) if they: (Moderate risk or Great Risk)	take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day?	73.0	319	65.6	305	69.0	271	69.3	895	63.3	414	75.1	473
	have five or more drinks of an alcoholic beverage once or twice a week?	75.3	320	71.9	303	66.3	270	71.4	893	67.9	414	75.4	471
	smoke 1 or more packs of cigarettes per day.	80.8	317	83.0	306	79.9	268	81.3	891	78.1	411	84.5	472
	smoke marijuana once or twice a week?	61.4	319	37.7	300	36.8	269	45.9	888	42.8	411	49.0	471
	use prescription pain relievers that are not prescribed to them?	84.0	318	80.2	298	80.7	269	81.7	885	79.4	412	84.3	466
How wrong do your parents feel it would be for YOU to: (Wrong or Very Wrong)	have one or two drinks of an alcoholic beverage nearly every day?	98.7	307	96.0	297	94.7	266	96.6	870	96.0	396	97.0	467
	smoke cigarettes	99.0	306	97.3	301	95.1	267	97.3	874	96.0	398	98.3	469
	smoke marijuana	94.1	307	82.6	298	82.2	269	86.5	874	85.4	397	87.2	469
	use prescription pain relievers that are not prescribed to them?	99.0	305	97.7	298	97.0	269	97.9	872	98.0	398	97.9	467
How wrong do your friends feel it would be for you to: (Wrong or Very Wrong)	have one or two drinks of an alcoholic beverage nearly every day?	94.1	324	75.2	315	74.5	271	81.8	910	77.1	424	86.0	477
	smoke cigarettes	95.7	326	87.1	311	81.6	272	88.6	909	84.4	422	92.2	477
	smoke marijuana	82.5	326	48.6	315	50.6	271	61.3	912	58.5	424	63.8	478
	use prescription pain relievers that are not prescribed to them?	95.4	326	91.4	313	90.0	271	92.4	910	90.6	424	94.1	476
Past 30 day use of (at least one use in the Past 30 Days):	Alcohol	9.8	316	27.2	313	47.0	268	27.0	897	24.4	414	29.4	473
	Cigarettes	1.0	312	3.3	302	5.5	271	3.2	885	4.2	407	2.3	471
	Marijuana	8.3	315	20.8	308	23.4	265	17.1	888	17.1	409	16.8	471
	Any Prescription Drug	1.6	317	2.6	311	4.5	268	2.8	896	2.7	413	3.0	474
Average Age of Onset **		Age	Num.	Age	Num.	Age	Num.	Age	Num.	Age	Num.	Age	Num.
	Alcohol	12.5	72	14.0	157	14.6	180	14.0	409	13.7	174	14.2	232
	Cigarettes	11.7	19	13.8	40	14.1	61	13.6	120	14.1	66	14.7	52
	Marijuana	12.9	34	13.9	103	14.7	116	14.2	253	14.7	126	15.0	124
	Prescription Pain Relievers	12.9	9	13.3	18	14.1	21	13.6	48	13.9	15	13.7	32

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

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

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

DFC and Youth Perception Tables

Table 14. Youth Perceptions of Substance Use

Now think about all the students in your grade at school. How many of them do you think:	Substance	Grade 8		Grade 10		Grade 12		Total	
		Number	Percent	Number	Percent	Number	Percent	Number	Percent
a. smoke one or more cigarettes a day?	None (0%)	116	35.4	81	24.9	45	16.1	242	26.0
	Few (1-10%)	148	45.1	113	34.8	109	39.1	370	39.7
	Some (11-30%)	39	11.9	66	20.3	48	17.2	153	16.4
	Half or less (31-50%)	12	3.7	32	9.8	37	13.3	81	8.7
	Half or more (51-70%)	6	1.8	13	4.0	21	7.5	40	4.3
	Most (71-90%)	7	2.1	13	4.0	11	3.9	31	3.3
	Almost All (91-100%)	0	0.0	7	2.2	8	2.9	15	1.6
b. drank alcohol sometime in the past month?	None (0%)	49	15.0	44	13.5	26	9.3	119	12.8
	Few (1-10%)	75	23.0	25	7.7	9	3.2	109	11.7
	Some (11-30%)	109	33.4	28	8.6	20	7.1	157	16.8
	Half or less (31-50%)	49	15.0	46	14.1	37	13.2	132	14.2
	Half or more (51-70%)	27	8.3	69	21.2	41	14.6	137	14.7
	Most (71-90%)	10	3.1	78	23.9	87	31.1	175	18.8
	Almost All (91-100%)	7	2.1	36	11.0	60	21.4	103	11.1
c. used marijuana sometime in the past month?	None (0%)	61	18.7	43	13.2	30	10.7	134	14.3
	Few (1-10%)	90	27.5	20	6.1	14	5.0	124	13.3
	Some (11-30%)	70	21.4	24	7.4	27	9.6	121	13.0
	Half or less (31-50%)	42	12.8	36	11.0	35	12.5	113	12.1
	Half or more (51-70%)	34	10.4	58	17.8	49	17.4	141	15.1
	Most (71-90%)	23	7.0	93	28.5	75	26.7	191	20.4
	Almost All (91-100%)	7	2.1	52	16.0	51	18.1	110	11.8
d. used an illegal drug in the past month (not including marijuana)?	None (0%)	149	45.4	81	24.8	47	16.7	277	29.6
	Few (1-10%)	113	34.5	83	25.4	83	29.5	279	29.8
	Some (11-30%)	38	11.6	64	19.6	51	18.1	153	16.3
	Half or less (31-50%)	9	2.7	35	10.7	43	15.3	87	9.3
	Half or more (51-70%)	9	2.7	33	10.1	28	10.0	70	7.5
	Most (71-90%)	4	1.2	19	5.8	17	6.0	40	4.3
	Almost All (91-100%)	6	1.8	12	3.7	12	4.3	30	3.2

NATIONAL RESOURCES

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

info@samhsa.hhs.org

www.samhsa.gov

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

Center for Substance Abuse Prevention (CSAP)

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

info@samhsa.hhs.org

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

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

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

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

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

STATE RESOURCES

Massachusetts Department of Public Health
Bureau of Substance Abuse Services
250 Washington Street #3
Boston, MA 02108

<http://www.mass.gov/eohhs/gov/department/s/dph/programs/substance-abuse/>

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