

2011 Pennsylvania Youth Survey Report

Pennsylvania Statewide

**Conducted by
Pennsylvania Commission on Crime and Delinquency**



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Section 1

Summary of Results

Strengths to Build on

- Very few Pennsylvania students reported using illicit drugs other than marijuana and inhalants in the past 30 days. For example, past-30-day prevalence rates for crack cocaine, methamphetamine and heroin are 0.3%, 0.3% and 0.2%, respectively.
- Relatively few Pennsylvania students reported the nonmedical use of prescription drugs. Across the overall sample, past-30-day prevalence rates are 4.6% for pain relievers, 2.3% for stimulants and 1.6% for tranquilizers.
- Other antisocial behaviors with low prevalence rates include *Attempting to Steal a Vehicle* (1.3%), *Bringing a Weapon to School* (1.9%) and *Being Arrested* (3.4%).
- Less than 10% of the respondents reported a willingness to try or use cocaine, hallucinogens or inhalants.
- Relatively few Pennsylvania students (8.8%) reported gambling for money in the past 30 days. Even fewer, 3.5%, bet money using the internet in the past year.
- Only 2.6% of surveyed students reported having been threatened with a weapon on school property in the past year, and only 0.9% reported having been attacked with a weapon on school property in the past year.
- Majorities of respondents reported that smoking one or more packs of cigarettes per day (67.1%) and regular use of marijuana (62.1%) pose a “great risk” of harm.
- The percentage of students who believe it would be either “wrong” or “very wrong” to use cigarettes is 80.2%, followed by marijuana (80.1%) and drinking alcohol regularly (74.7%). Disapproval of other illicit drug use (“LSD, cocaine, amphetamines or another illegal drug”) was even higher, at 94.6%.
- Relatively few students reported that they would be seen as “cool” by their peers if they drank alcohol regularly (10.5%), smoked marijuana (9.9%) or smoked cigarettes (4.6%).

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- Large majorities of Pennsylvania students reported that their parents believe it is “very wrong” for them to smoke marijuana (86.0%), smoke cigarettes (82.5%) or drink alcohol regularly (75.7%).

Opportunities for Improvement

- In grades 8, 10 and 12, alcohol is the most frequently used substance. Across the overall sample, 44.0% of Pennsylvania students reported one or more occasions of use in their lifetimes and 23.3% reported one or more occasions of use in the past 30 days.
- Binge drinking—defined as the consumption of five or more drinks in a row in the last two weeks—was reported by 12.4% of surveyed Pennsylvania students, making this dangerous behavior more common than past-30-day cigarette or marijuana use.
- Across the overall sample, 10.7% of Pennsylvania students reported past-30-day marijuana use and 9.5% reported past-30-day cigarette use.
- Eighth graders reported the highest rate of past-30-day use for inhalants (6.4%). Sixth and 10th graders reported rates of 4.7% and 4.0% for inhalant use, respectively. Compared to national findings, Pennsylvania 8th, 10th and 12th graders reported higher rates of past-30-day inhalant use.
- Nearly one out of ten Pennsylvania students (8.0%) reported *Attacking Someone with Intent to Harm* in the past year, and about one out of 20 (4.6%) reported *Selling Drugs* in the past year.
- Across the seven other antisocial behaviors, Pennsylvania students reported the highest rates for *Being Drunk or High at School* (8.5%).
- Excluding students who indicated that “I don’t drive,” 18.4% of 12th graders reported that they drove under the influence of marijuana, and 16.2% drove under the influence of alcohol.
- In contrast to the lower rates for other substance categories, a high percentage of 8th graders (35.7%) and majorities of 10th and 12th graders (57.3% and 73.3%, respectively) reported a willingness to try or use alcohol.
- Across the overall sample, 20.6% of Pennsylvania students reported having “bet money or anything of value” on sporting events in the past year.
- Non-physical forms of bullying are the most prevalent. More than one half of Pennsylvania students (50.3%) reported that other students tell lies about them or spread false rumors, 41.7% have been called names or teased, and 32.9% have been left out of things on purpose.
- For physical bullying, 15.9% have been hit, kicked, pushed, or shoved in the past year and 19.8% have had other students take their money or damage their things.
- Across the overall sample, 17.0% of Pennsylvania students reported having “been threatened to be hit or beaten up on school property.”
- As with a number of other statewide health behavior surveys, many Pennsylvania students reported having symptoms of depression. Nearly one third (31.1%) reported feeling “depressed or sad most days” and 28.0% reported that “at times I think I am no good at all.”
- Only 31.6% of surveyed 12th graders reported that there is a “great risk” of harm associated with drinking alcohol regularly.

Summary of ATOD Results

Pennsylvania statewide students recorded the highest lifetime prevalence-of-use rates for alcohol (44.0%), cigarettes (23.3%) and marijuana (19.0%). Other lifetime prevalence rates ranged from 0.4% for heroin to 11.5% for smokeless tobacco. The rate of illicit drug use excluding marijuana is summarized by the indicator “any illicit drug (other than marijuana),” with 11.4% of surveyed students reporting use of these drugs in their lifetimes. Pennsylvania statewide students reported the highest past-30-day prevalence-of-use rates for alcohol (23.3%), marijuana (10.7%) and cigarettes (9.5%). Other past-30-day prevalence rates ranged from 0.2% for heroin to 5.7% for smokeless tobacco. Overall, 6.3% of Pennsylvania statewide students reported the use of any illicit drug (other than marijuana) in the past 30 days.

National data from the *Monitoring the Future* survey provide a valuable reference point for evaluating the severity of drug use behavior. Compared to their national counterparts, Pennsylvania statewide students reported lower average levels of lifetime marijuana, Ecstasy and hallucinogen use. For past-30-day ATOD use, students reported higher average levels of inhalant and alcohol use than their national counterparts and a lower average level of marijuana use.

Summary of Risk and Protective Factor Results

For the overall sample of 6th, 8th, 10th and 12th graders in Pennsylvania statewide, percentile scores across the nine protective factor scales range from a low of 37 to a high of 64, with an average score of 54, which is four points higher than the normative average of 50. The three lowest overall scores were for the following protective factor scales: *Community Opportunities for Prosocial Involvement* (37), *Religiosity* (43) and *Community Rewards for Prosocial Involvement* (53). Pennsylvania statewide students reported the three highest overall scores for the following protective factor scales: *School Rewards for Prosocial Involvement* (64), *Belief in the Moral Order* (62) and *School Opportunities for Prosocial Involvement* (61).

Overall percentile scores across the 23 risk factor scales range from a low of 36 to a high of 69, with an average score of 46, which is four points lower than the normative average of 50. Pennsylvania statewide students reported the three highest overall scores for the following risk factor scales: *Community Disorganization* (69), *Parental Attitudes Favorable toward Antisocial Behavior* (55) and *Perceived Availability of Handguns* (53). The three lowest overall scores were for the following risk factor scales: *Early Initiation of Drug Use* (36), *Rebelliousness* (38) and *Friends' Use of Drugs* (39).

While policies that target any risk or protective factor could potentially be an important resource for students in Pennsylvania statewide, focusing prevention planning in high risk and low protection areas could be especially beneficial. Similarly, factors with low risk or high protection represent strengths that Pennsylvania statewide can build on. These objective data, in conjunction with a review of community-specific issues and resources, can help direct prevention efforts for Pennsylvania statewide. It is important to keep in mind, however, that overall scores can mask problems within individual grades. Section 6 of this report provides grade-level results that will enable prevention planners to more precisely target opportunities for intervention.

Section 2

Survey Methodology

Introduction

From 1989 through 1997, Pennsylvania conducted a biennial statewide survey of students regarding their use of alcohol, tobacco and other drugs. The *Generation at Risk* survey was administered to approximately 60,000 6th, 7th, 9th and 12th graders. The survey was an important tool for professionals and policy makers who dealt with substance abuse and related issues. Results from the study provided a benchmark of alcohol, tobacco, and drug use among young Pennsylvanians, and helped indicate whether prevention and treatment programs were achieving their intended results. The survey had been expanded over the years to include questions on a range of issues such as bullying, physical fighting, carrying weapons, gangs, drinking and driving, and attitudes about school.

Prior to conducting the planned 1999 survey, an advisory group representing the Pennsylvania Departments of Health, Education, and Public Welfare, and other state agencies including the Governor's Policy Office, the Children's Partnership, Juvenile Court Judges' Commission, and the Commission on Crime and Delinquency, suggested the survey be redesigned to include additional information on risk and protective factors associated with delinquency and substance abuse. This redesign effort resulted in the development of the *Pennsylvania Youth Survey (PAYS)*. Since 2001, *PAYS*, which is sponsored and coordinated by the Pennsylvania Commission on Crime and Delinquency (PCCD), has been administered every two years, in the fall semester, to 6th, 8th, 10th and 12th grade public school students across the state.

The 2011 *PAYS* was administered to more than 150,000 public school students in grades 6 through 12. Upon completion of the project, community-level reports will be issued to nearly 400 schools, school districts, and counties. The validated statewide probability sample, which is the subject of this report, consists of 16,899 students in grades 6, 8, 10 and 12 from 156 schools.

The data gathered in the *PAYS* serve three primary needs. First, the survey results provide information about school climate and safety, such as the prevalence of bullying behavior and violence on school property. Second, *PAYS* survey results assess rates of alcohol, tobacco, and other drug (ATOD) use and help indicate whether prevention and treatment programs are achieving their intended results. Third, the survey measures risk factors that are related to these behaviors and the protective factors that guard against them. This information allows community leaders and school administrators to direct prevention resources to areas where they are likely to have the greatest impact.

The Survey Questionnaire

The *Communities That Care Youth Survey (CTCYS)* was adopted as the basis for the *PAYS*. Based on the work of Dr. J. David Hawkins and Dr. Richard F. Catalano, the *CTCYS* is designed to identify the levels of risk factors related to problem behaviors such as ATOD use—and to identify the levels of protective factors that help guard against those behaviors. In addition to measuring risk and protective factors, the *CTCYS* also measures the actual prevalence of drug use, violence and other antisocial behaviors among surveyed students. Three articles (Pollard, Hawkins & Arthur, 1999; Arthur, Hawkins, Pollard, Catalano & Baglioni, 2002; Glaser, Van Horn, Arthur, Hawkins & Catalano, 2005) describe the *CTCYS*, its uses and its ongoing development.

As in previous years, participating school districts were offered two versions of the *PAYS* questionnaire. The standard version includes the full set of survey items for school climate and safety, ATOD use, and risk and protective factors. The alternative version omits the items used to calculate the family domain risk and protective factors. The standard questionnaire, which is presented at the end of this report, was used by 71.0% of the respondents in the statewide sample, while the non-family questionnaire was used by 29.0%.

The 2011 *PAYS* questionnaires are identical to the ones used in 2009. Please note, however, that the following questionnaire changes were introduced in the 2009 survey cycle:

- Items from the 2007 questionnaire assessing the abuse of prescription drugs were replaced with six new questions designed to measure prevalence-of-use rates across the three prescription drug categories: pain relievers, stimulants and tranquilizers.
- The risk factor scale *Laws and Norms Favorable to Handguns* was dropped from the questionnaire. All other risk and protective factor scales from the 2007 questionnaire were retained in full.
- The 2009 questionnaire included six items addressing student experiences with gambling. Two of the six gambling questions—the past-12-months and past-30-days gambling for “money or anything of value” items—are identical to questions used on the 2005 and 2007 surveys. The sports betting, lottery ticket, and table gaming questions are similar to questions used in the 2007 survey.
- Starting in 2009, the *PAYS* asked students a series of eight questions about bullying at school and internet safety.
- The ordering of items throughout the 2009 questionnaire was changed so that data points most critical to the prevention planning process would be collected in first sections of the survey. This change improves the response rate for these key items.
- For some survey items, the layout of the question and response options was changed in order to improve readability.

The Statewide Sample

Sample Design

The target population of the 2011 *PAYS* is 6th, 8th, 10th and 12th grade students enrolled in regular public schools across Pennsylvania. A single-stage design was used, with stratification by grade level, and with the sampling unit defined as grade levels within schools. Schools were instructed to survey all students in

the selected grade level. There were several reasons why a single-stage design was chosen over a two-stage design:

- Since 2001, a fundamental goal of the *PAYS* project has been to provide school districts and counties with local data for prevention planning. Since most districts require near-census levels of participation in order to generate representative data, classroom sampling is inappropriate.
- Unlike many large-scale, school-based survey projects, *PAYS* is administered in the fall semester rather than the spring semester. As a result, some schools are unable to provide class lists and other necessary information at an early enough stage in the survey planning process.
- Sufficient resources were not available to train survey coordinators at the more than 250 sampled schools. Survey coordinators are needed to prepare the classroom-level sampling frame and select the participating classrooms.

Specialized sampling software, *PCSample*, was used to select a representative sample of public schools. The software is designed for stratified systematic sampling with random starts. To ensure a good distribution of schools by geographic location and enrollment size, schools were sorted by county and in descending order of grade enrollment before sampling. Within each stratum, schools were selected with probability proportional to size, with size being the grade enrollment of the school. While most selected schools were only asked to survey one grade level, four schools had two grade levels selected for participation in the statewide sample. The sample is designed to yield a self-weighting sample within strata so that every eligible student has an equal chance of selection. A self-weighting sample is desirable because it tends to improve the precision of the estimates.

Using this design, 253 school-grade combinations were selected from the sample frame.

Sample Size

Sample size depends on the distribution of the variables to be measured, the desired precision of the estimates, and the statistical confidence desired. The level of precision is conveyed by providing the survey estimate plus or minus its margin of error.

The sample size also needs to be adjusted by a design effect to account for the stratified sample design of the *PAYS*. The design effect is the ratio of the variance of the estimate obtained from a complex sample design to the variance of the estimate obtained from a simple random sample of the same size. For a population size N , the sample size needed to achieve a $\pm d\%$ margin of error for an estimated proportion p , given a design effect (d_{eff}) for p , is given by

$$n = \frac{1}{\left(\frac{d}{1.96}\right)^2 \left(\frac{N-1}{p(1-p)N(d_{eff})}\right) + \frac{1}{N}}.$$

Sample sizes were computed to yield a margin of error of less than 3.9%, within each grade level, for prevalence estimates of 50.0%. Assuming a design effect of 5.0, a sample size of approximately 3,200 completed questionnaires per stratum (grade level) is needed to produce this level of statistical precision. Given an average school-grade enrollment of about 160 students, and projected participation rates of 45.0% for schools and 70.0% for students, approximately 250 school-grade combinations would need to be selected to reach the final desired sample size.

The Sample Frame

A list of all Pennsylvania public schools with grade level enrollment data was provided by the Pennsylvania Department of Education. These enrollment data were the starting point for the development of the sampling frame. The frame cleaning process involved the following tasks:

- All schools with no enrollment in grades 6, 8, 10 or 12 were removed.
- Special schools that were unable to participate in the survey administration process—such as cyber schools, distance learning schools, juvenile detention centers, adult education centers, special education, and alternative schools—were removed.
- School-grade combinations with enrollments of fewer than 50 students were removed. This was done to avoid recruitment and administration costs associated with surveying a large number of small schools. In addition, past recruitment efforts have shown that small schools are less likely to join the survey effort due to the special requirements of their academic programs.
- All schools from Allegheny County and the Philadelphia School District were removed from the frame. Despite extensive recruitment efforts by PCCD and other state agencies in 2011 and in previous years, it has been the policy of schools in these areas to not participate in *PAYS*.

After these steps, 2,282 eligible school-grade combinations were included in the final sample frame. Enrollment totals for the sample frame are presented in Table 1.

Participation

Participation rates were calculated separately for both schools and students as a ratio of the number participating divided by the number selected. A combined participation rate consists of the two separate school and student participation rates multiplied by each other.

School Participation: 253 school-grade combinations were included in the sample. Out of these, 160, or 63.2%, participated in the survey. (Note: 156 schools were included in the sample, but four of these had two grade levels included.)

Student Participation: The 160 participating school-grade combinations had enrollments totaling 27,353 students. Out of these, 16,899, or 61.8%, returned usable survey responses for the appropriate grade levels.

Overall Participation: $63.2\% * 61.8\% = 39.1\%$

This year's school participation rate of 63.2% is substantially higher than the rate of 37.9% achieved with the 2009 *PAYS*. As a result, bias associated with selective participation is likely to be reduced, resulting in improved data quality. Participation bias occurs if there is a systematic difference between the 63.2% of sampled schools that joined the survey effort and the 36.8% that did not. If such a difference exists and it is correlated with the way students respond to the survey, the results of the survey will less accurately reflect the state as a whole.

This year's student participation rate of 61.8% is slightly lower than the rate of 67.7% achieved with the 2009 *PAYS*. This level of student participation is due in part to the *PAYS* sampling and administration plan. Under this plan, which calls for a full census of individual grade levels in order to support school-level reporting, most schools select a single class period for survey administration. If 10th graders are being surveyed during the second period, the survey administration coordinator usually includes all classes during that period that have significant numbers of 10th graders. Most schools do not institute a process for surveying 10th graders who attend classes with predominantly 9th grade or 11th grade students. In addition,

most schools do not provide an alternative survey day for students who are absent on the day of survey administration.

Weighting

A weight has been associated with each response record to reflect the likelihood of sampling each student and to reduce bias by compensating for differing patterns of nonresponse. The weight used for estimation is given by:

$$W = W_1 * f_1 * f_2 * f_3$$

W_1 = The inverse of the probability of selecting the school/grade combination.

f_1 = A school-level nonresponse adjustment factor calculated by school size category (small, medium, large). The factor was calculated in terms of school enrollment instead of number of schools.

f_2 = A student-level nonresponse adjustment factor calculated by school.

f_3 = A post-stratification adjustment factor calculated by grade. With this factor applied, the distribution of the sample across grade levels matches the grade distribution in the statewide enrollment figures.

Survey Validation

Five strategies were used to assess the validity of the completed survey forms. The first two strategies eliminated students who appeared to exaggerate their drug use and other antisocial behavior. The third strategy eliminated students who reported use of a fictitious drug. The fourth strategy eliminated the surveys of students who repeatedly reported logically inconsistent patterns of drug use. The fifth strategy eliminated students who answered less than 40% of the questions on the survey.

- In the first strategy, surveys from students who reported a combined average of four or more daily uses for illicit drugs other than marijuana were eliminated from the survey dataset. This strategy removes surveys that are not taken seriously.
- The second strategy supplements the drug use exaggeration test by examining the frequency of four other antisocial behaviors: *Attacking Someone with Intent to Harm*, *Attempting to Steal a Vehicle*, *Being Arrested*, and *Getting Suspended*. Respondents who reported an unrealistically high frequency of these behaviors—more than 80 instances within the past year—were removed from the analysis.
- In the third strategy, students were asked if they had used a fictitious drug, Derbisol, in the past 30 days or in their lifetimes. If students reported the use of Derbisol for either of these time periods, their surveys were not included in the analysis of the findings.
- The fourth strategy was used to detect logical inconsistencies among responses to the drug-related questions. Students were identified as inconsistent responders in the following circumstances only: (1) if they were inconsistent on two or more of the following four drugs: alcohol, cigarettes, smokeless tobacco and marijuana; or (2) if they were inconsistent on two or more of the remaining drugs. An example of an inconsistent response would be if a student reported that he or she had used alcohol three to five times in the past 30 days but had never used alcohol in his or her lifetime.

- For the fifth strategy, students who answered less than 40% of the questions on the survey were removed from the analysis. This test is used to identify students who did not take the survey seriously or were incapable of fully participating.

PAYS students were cooperative and produced a high percentage of valid surveys. All but 1,186 students (6.6% of 18,085) completed valid surveys. Of the 1,186 surveys identified and eliminated by one or more of the five strategies described above, 217 exaggerated drug use (strategy 1), 142 exaggerated other antisocial behavior (strategy 2), 375 reported the use of the fictitious drug (strategy 3), 345 responded in a logically inconsistent way (strategy 4) and 599 answered fewer than 40% of the questions on the survey (strategy 5). The elimination total produced by these five strategies equals more than 1,186 because a number of respondents were identified by more than one strategy.

The filtering out of these 1,186 records resulted in a final total of 16,899 respondents.

Sample Analysis

When reviewing survey results people often ask, “What is the margin of error?” This is referred to as the “confidence interval,” and it reflects the precision of a statistical estimate. For example, a confidence interval of ± 3.0 points for a drug use prevalence rate of 50.0% means that there is a 95% chance that the true score is between 47.0% and 53.0%.

For school-based survey research, confidence intervals are determined by the size of the sample relative to the school’s enrollment. The higher the percentage of a school’s total enrollment that is included in the sample, the smaller the confidence interval and the more precise the results. Table 1 presents confidence intervals for both grade-level and overall estimates. Note that these confidence intervals are for prevalence rates of 50%. For less prevalent behaviors, such as heroin use and bringing a weapon to school, the confidence interval narrows substantially. These calculations include a finite population correction and a design effect of 2.0.

Table 1. Confidence Intervals for Sample

Grade	Enrollment		Sample		Confidence Interval
	Number	Percentage	Number	Percentage	
6 th	100,947	23.4%	5,051	29.9%	$\pm 1.9\%$
7 th	--	--	--	--	--
8 th	108,259	25.1%	4,528	26.8%	$\pm 2.0\%$
9 th	--	--	--	--	--
10 th	114,796	26.6%	3,472	20.5%	$\pm 2.3\%$
11 th	--	--	--	--	--
12 th	108,037	25.0%	3,848	22.8%	$\pm 2.2\%$
Totals	432,039	100.0%	16,899	100.0%	$\pm 1.0\%$

Note: Rounding can produce totals that do not equal 100%. The total sample size in this table does not include respondents who did not report their grade level.

Demographic Profile of Surveyed Youth

The survey measures a variety of demographic characteristics. Table 2 shows selected characteristics of surveyed youth: sex, ethnicity and the primary language spoken at home. The primary language spoken at home refers to the primary language the student speaks at home (rather than what the parents speak at home).

A higher percentage of surveyed Pennsylvania statewide students were female (47.8% female versus

46.3% male). A majority of students identified themselves as White (75.7%). The largest minority group is African American (5.5%), followed by Latino (4.6%), Asian (2.7%) and American Indian (0.8%). Note that while the “Other/Multiple” category listed on all tables includes students who selected “Other” as their primary ethnicity, this category also includes those students who selected multiple ethnicities. Therefore, for example, students who reported both African American and Latino ethnicity would be classified in the “Other/Multiple” category for the purposes of this report.

Nearly all of the surveyed students (92.8%) reported English as the language they most often speak at home.

	Number of Students	Percentage of Students
Overall Valid Surveys	16,899	100.0%
Sex		
Male	7,817	46.3%
Female	8,081	47.8%
Did not respond	1,001	5.9%
Ethnicity		
White	12,790	75.7%
Black or African American	922	5.5%
Spanish/Hispanic/Latino	783	4.6%
American Indian/Native American, Eskimo or Aleut	130	0.8%
Asian or Pacific Islander	452	2.7%
Other/Multiple	1,354	8.0%
Did not respond	468	2.8%
Primary Language Spoken at Home		
English	15,678	92.8%
Spanish	348	2.1%
Other Language	358	2.1%
Did not respond	515	3.0%

Note: Rounding can produce totals that do not equal 100%.

Administration

Survey administration procedures were the same as those used in previous waves of the PAYS and were standardized throughout the state. Following school or district commitment to participate, surveys were sent directly to the participating schools. Within the school, the survey booklets were distributed to individual classrooms that were eligible for participation. Each teacher received an appropriate number of booklets and collection envelopes. Students had one classroom period in which to complete the survey. In some schools, some or all of the student respondents completed the survey in a computer lab using an internet-based survey administration system. All together, 17.4% of the survey participants included in the statewide sample took the survey online. The contractor, SmartTrack, Inc., managed the online administration.

A passive consent procedure was used by most school districts for this survey administration. That is, students were given the consent notification and were asked to give it to their parents. It was then up to the parents to notify the school if they did not want their child to participate in the survey.

The teachers reviewed the instructions with their students and asked the students to complete the survey. The instructions informed the students that there were no right or wrong answers. The instructions also explained the proper way to mark the answers. Students were asked to complete the survey but were also

told that participation is voluntary. Furthermore, students were told that they could skip any question that they were not comfortable answering. Both the teacher and the written instructions on the front of the survey form assured students that the survey was anonymous and confidential. Upon completion of the survey the survey collection envelopes were sealed and returned to SmartTrack, Inc., for processing.

Exploring PAYS Results Online via SmartTrack™

This report includes a detailed review of findings from each content area of the PAYS questionnaire. Some counties and schools, however, may wish to go beyond these key metrics. *In order to facilitate this process, all 2011 survey participants will have the ability to review their results using the SmartTrack™ online data browsing system.*

SmartTrack’s internet-based reporting tools allow for instant presentation of various reports, ranging from frequency distributions to crosstabulations. Data can be viewed in both table and graph formats (via Excel), and users can review results for any appropriate aggregation or subsample.

Here is an example of an Excel chart generated using SmartTrack. In this report, an educator is examining student perception of the risk associated with smoking cigarettes.

How much do you think people risk harming themselves (physically or in other ways) if they:						
	No risk	Slight risk	Moderate risk	Great risk	Skips	Totals
Smoke one or more packs of cigarettes per day?	07.22%	05.60%	27.15%	59.23%	0.80%	100%

SmartTrack online access will be available to authorized users beginning in late January and will continue through the end of the 2013-2014 school year. For more information on accessing your results, or any other questions about SmartTrack, you can visit the website at www.thesmarttrack.com, email info@thesmarttrack.com, or call (866) 714-8080.

Section 3

School Climate and Safety

Introduction

Over the last 15 years, many youth survey programs, including *PAYS*, have moved to incorporate risk and protective factor data alongside more traditional health behavior assessments. As this approach has evolved, school climate and safety have emerged as focal points for prevention programming and policy planning.

Over the last several survey cycles, *PAYS* has responded to this shift by adding a number of new items. In previous years, response data from these climate and safety questions were presented in the *Other Antisocial Behavior*, *Special Topics*, and *Additional Prevention Planning Data* sections of *PAYS* county and district reports. To better meet the needs of *PAYS* data users, this year's report has been reorganized, with key school climate and safety data being aggregated in this new section.

Bullying at School and Internet Safety

While bullying is not a new phenomenon, the growing awareness that bullying has serious consequences for both schools and students is new. Bullying behavior contributes to lower attendance rates, lower student achievement, low self-esteem and depression, as well as higher rates of both juvenile and adult crime (Banks, 1997). While the problem of bullying is receiving increased public attention, actual incidences of bullying often go undetected by both teachers and parents (Skiba and Fontanini, 2000). Adults often fail to both identify bullying incidences and understand the dynamics of the behavior. Without adequate training adults may actually endorse the bullying behavior, either by sending children the message that bullying is “part of growing up” or by simply ignoring the behavior (U.S. Department of Education, 1998).

The most effective means of addressing bullying is through comprehensive, school-wide programs (Atlas and Pepler, 1998; Garrity et al., 1997; Skiba and Fontanini, 2000). A student survey is one of the most common methods for identifying a potential bullying problem in a school (Leff, Power, and Goldstein, 2004). Starting in 2009, the *PAYS* asked students a series of eight questions about bullying at school and internet safety. These include past-12-month prevalence measures for: (1) being “hit, kicked, pushed, shoved around, or locked indoors,” (2) being “called names, made fun of, or teased in a hurtful way,” (3) being “left out of things on purpose by other students,” (4) other students telling lies or spreading false

rumors, (5) other students taking money or damaging your things, (6) other students threatening or forcing “you to do things you do not want to do,” (7) other students using “the internet or a cell phone to threaten or embarrass you,” and (8) someone on the internet trying “to get you to talk online about sex, look at sexual pictures, or do something else sexual when you did not want to.”

Results for Pennsylvania statewide students are presented in Table 3. As they are throughout the majority of this report, survey results for this topic are presented as prevalence rates. Each data point shows the percentage of students who reported being bullied or sexually harassed on one or more occasions within the past year.

As the survey results show, non-physical forms of bullying are the most prevalent. More than one half of Pennsylvania students (50.3%) reported that other students tell lies about them or spread false rumors, 41.7% have been called names or teased, and 32.9% have been left out of things on purpose. For physical bullying, 15.9% have been hit, kicked, pushed, or shoved in the past year and 19.8% have had other students take their money or damage their things. Cyber bullying is less common, with 12.3% reporting having been sexually harassed on the internet and 12.1% reporting that other students have used “the internet or a cell phone to threaten or embarrass them.”

The pattern of gender differences for this item set is interesting. Male students are more likely than female students to report physical forms of bullying. For example, 19.5% of male students reported having been hit, kicked, pushed, or shoved, compared to 12.5% of female students. In contrast, female students are more likely to report non-physical forms of bullying. For example, 38.2% of female students reported having been left out of things on purpose, compared to 27.7% of male students.

Survey results from the 2009 PAYS for bullying (and the other subject areas of this report) are presented in Appendix C. Comparing the 2009 survey to this year’s survey, bullying has decreased slightly in most of these areas. Most notably, students who reported being hit, kicked, pushed or shoved has decreased from 18.1% in 2009 to 15.9% in 2011, and students who reported being called names or teased has dropped from 43.0% in 2009 to 41.7% in 2011. (See Table C3 for detailed 2009 results.)

Table 3. Percentage of Youth Reporting Bullying at School or Sexual Harassment on the Internet in the Past Year, Pennsylvania Statewide 2011

	Female	Male	6 th	8 th	10 th	12 th	Overall
	%	%	%	%	%	%	%
Been hit, kicked, pushed, or shoved around	12.5	19.5	20.0	21.5	13.2	9.4	15.9
Been called names, made fun of, or teased	43.7	39.8	39.1	48.4	43.2	35.9	41.7
Been left out of things on purpose	38.2	27.7	30.4	36.2	33.4	31.5	32.9
Other students telling lies or spreading false rumors	54.6	45.8	45.3	55.7	50.9	48.8	50.3
Other students taking money or damaging your things	18.7	20.9	16.3	23.6	20.3	18.6	19.8
Other students threatening or forcing you to do things	11.4	11.9	11.4	15.0	11.5	8.9	11.7
Other students using the internet or a cell phone to threaten or embarrass you	15.6	8.6	7.3	14.7	13.3	13.0	12.1
Sexual harassment on the internet	15.5	9.0	6.1	13.9	15.0	13.4	12.3

Violence and Drugs on School Property

Pennsylvania students were also surveyed regarding the frequency with which they have been threatened or attacked on school property within the past year, and whether they were offered, given, or sold illegal drugs on school property within the past year. Results for Pennsylvania statewide students are presented in Table 4.

Of the four violence-related questions in this group, Pennsylvania students were most likely to report (17.0%) having “been threatened to be hit or beaten up” on school property. The rates for the other three violence items range from 6.8% for being attacked or beaten up to 0.9% for being attacked with a weapon. Slightly more than one in ten students, 10.8%, reported being offered, given, or sold drugs on school property in the past year.

Not surprisingly, differences between male and female students are pronounced on these measures. For example, male students are more likely than female students (20.6% versus 13.6%, respectively) to report having been threatened to be hit or beaten up, and about twice as likely (9.1% versus 4.6%, respectively) to report having been attacked or beaten up.

Comparing the 2009 survey to this year’s survey, reports of violence and drugs on school property have decreased slightly in all of these areas. Most notably, students who reported being offered, given or sold an illegal drug has decreased from 12.3% in 2009 to 10.8% in 2011. (See Table C4 for detailed 2009 results.)

Table 4. Percentage of Youth Reporting Violence or Drugs on School Property in the Past Year, Pennsylvania Statewide 2011

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Threatened to be hit or beaten up	13.6	20.6	16.0	21.6	17.5	12.9	17.0
Attacked or beaten up	4.6	9.1	8.2	8.3	6.4	4.6	6.8
Threatened with a weapon	1.6	3.5	2.6	2.9	2.9	1.9	2.6
Attacked with a weapon	0.4	1.4	1.0	0.9	1.0	0.9	0.9
Been offered, given, or sold an illegal drug	8.7	12.9	1.5	7.2	15.0	18.3	10.8

Gang Involvement

Gangs have long been associated with crime, violence and other antisocial behaviors. Evidence suggests that gangs contribute to antisocial behavior beyond simple association with delinquent peers. Table 5 presents the percentage of surveyed youth indicating gang involvement.

Only 4.4% of Pennsylvania students reported ever belonging to a gang, and 4.0% say they belonged to a gang with a name. The rate of gang involvement is much higher among male students, with 6.0% reporting having belonged to a gang, compared to 2.9% of female students, and 5.7% saying they belonged to a gang with a name, compared to 2.4% for female students.

Comparing the 2009 survey to this year’s survey, students’ gang involvement has decreased for both genders and all grades. Overall, gang involvement has decreased from 5.7% in 2009 to 4.4% in 2011. (See Table C5 for detailed 2009 results.)

Table 5. Percentage of Youth Who Indicated Gang Involvement, Pennsylvania Statewide 2011

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Ever Belonged to a Gang	2.9	6.0	3.8	5.2	4.7	4.0	4.4
Belonged to a Gang with a Name	2.4	5.7	2.9	4.5	4.6	4.0	4.0

Other Antisocial Behaviors

The *PAYS* measures a series of seven other problem, or antisocial, behaviors—that is, behaviors that run counter to established norms of good behavior. For the first six other antisocial behaviors, prevalence rates are presented for the incidence of behavior over the past 12 months. For *Bringing a Weapon (Such as a Gun, Knife or Club) to School*, prevalence rates are reported for the past 30 days. Results for Pennsylvania statewide students are presented in Table 6.

In contrast to ATOD use, female and male students reported notable differences in the prevalence of most of the other antisocial behaviors. For example, male students are more likely than female students to report *Attacking Someone with Intent to Harm* (10.1% versus 6.1%, respectively), *Getting Suspended* (9.7% versus 4.7%, respectively) and *Selling Drugs* (6.3% versus 3.1%, respectively).

Comparing the 2009 survey to this year’s survey, prevalence rates for antisocial behavior have decreased slightly in all areas. Most notably, *Attacking Someone with Intent to Harm* has decreased from 9.5% in 2009 to 8.0% in 2011. (See Table C6 for detailed 2009 results.)

Table 6. Prevalence of Other Antisocial Behaviors, Pennsylvania Statewide 2011

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Attacking Someone with Intent to Harm	6.1	10.1	5.2	8.8	9.2	8.6	8.0
Attempting to Steal a Vehicle	0.8	1.8	0.3	1.2	1.7	1.8	1.3
Being Arrested	2.3	4.5	1.0	3.0	4.3	4.8	3.4
Being Drunk or High at School	7.1	9.5	1.0	4.7	11.5	15.9	8.5
Getting Suspended	4.7	9.7	5.1	7.5	7.9	8.0	7.2
Selling Drugs	3.1	6.3	0.3	1.7	6.1	9.8	4.6
Bringing a Weapon to School (within the past 30 days)	1.0	2.8	1.0	1.8	2.1	2.7	1.9
Average	3.6	6.4	2.0	4.1	6.1	7.4	5.0

Frequency of Bringing a Weapon to School

More detailed survey results for bringing a weapon (such as a gun, knife or club) to school are presented in Table 7. This table shows the percentage of students who reported bringing a weapon to school on a specific number of occasions in the past 30 days.

The percentage of students who report bringing a weapon to school is low for both genders, but male students are more likely than female students to do so. For example, 1.7% of male students report bringing a weapon to school 1 to 2 times in the past 30 days, compared to 0.7% of females.

Table 7. Past-30-Day Frequency of Bringing a Weapon to School, Pennsylvania Statewide 2011

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Never	99.0	97.2	99.0	98.2	97.9	97.3	98.1
1 or 2 times	0.7	1.7	0.8	1.3	1.4	1.3	1.2
3 to 5 times	0.1	0.3	0.1	0.1	0.1	0.4	0.2
6 to 9 times	0.1	0.1	0.0	0.1	0.1	0.2	0.1
10 to 19 times	0.1	0.1	0.0	0.0	0.1	0.1	0.1
20 to 29 times	0.1	0.1	0.0	0.0	0.0	0.1	0.1
30 to 39 times	0.0	0.1	0.0	0.1	0.0	0.2	0.1
40+ times	0.1	0.4	0.1	0.2	0.3	0.4	0.2

Note: Rounding on the above table can produce totals that do not equal 100%.

Section 4

Alcohol, Tobacco and Other Drug Use

Measurement

Alcohol, tobacco and other drug (ATOD) use is measured in the *PAYS* by a set of 36 questions. The questions are similar to those used in the *Monitoring the Future* study, a nationwide study of drug use by middle and high school students. Consequently, national data as well as data from other similar surveys can be easily compared to data from the *PAYS*.

Prevalence-of-use tables and graphs show the percentages of students who reported using ATODs. These results are presented for both lifetime and past-30-day prevalence of use periods. Lifetime prevalence of use (whether the student has ever used the drug) is a good measure of student experimentation. Past-30-day prevalence of use (whether the student has used the drug within the last month) is a good measure of current use. In addition to the standard lifetime and past-30-day prevalence rates for alcohol use, binge drinking behavior (defined as a report of five or more drinks in a row within the past two weeks) is also measured.

A multi-question indicator—“any illicit drug (other than marijuana)” —measures the use of one or more of the following drugs: inhalants, cocaine, crack cocaine, heroin, hallucinogens, methamphetamine, Ecstasy and steroids. The purpose of this drug combination rate is to provide prevention planners with an overall gauge of so-called “hard” drug use (Johnston, O’Malley, Bachman & Schulenberg, 2011).

The survey also includes six questions designed to measure nonmedical use of prescription drugs. The questions cover three general categories of nonmedical prescription drug use: pain relievers, tranquilizers and stimulants.

Results Summary

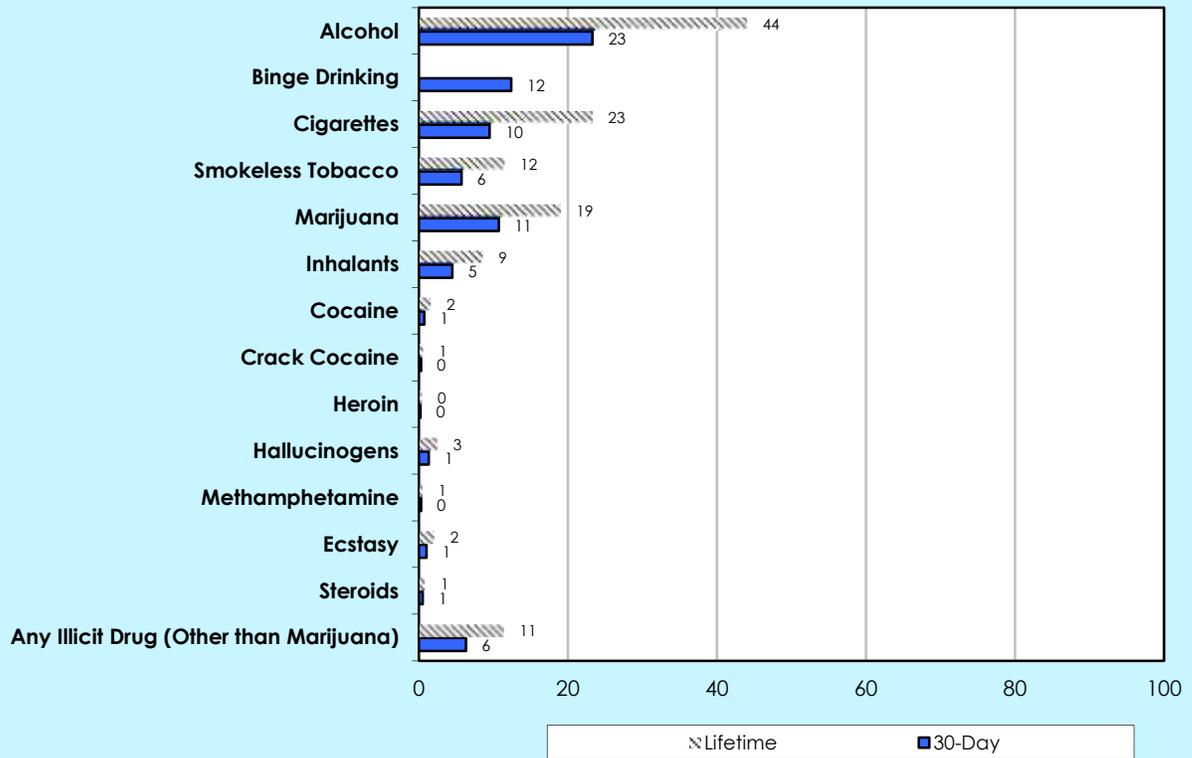
Overall Results

ATOD prevalence rates for the combined sample of 6th, 8th, 10th and 12th graders are presented in Graph 1, and in the overall results column of Tables 8 and 9. As these results show, Pennsylvania statewide students recorded the highest lifetime prevalence-of-use rates for alcohol (44.0%), cigarettes (23.3%) and marijuana (19.0%). Other lifetime prevalence rates ranged from 0.4% for heroin to 11.5% for smokeless

tobacco. The rate of illicit drug use excluding marijuana is summarized by the indicator “any illicit drug (other than marijuana),” with 11.4% of surveyed students reporting use of these drugs in their lifetimes.

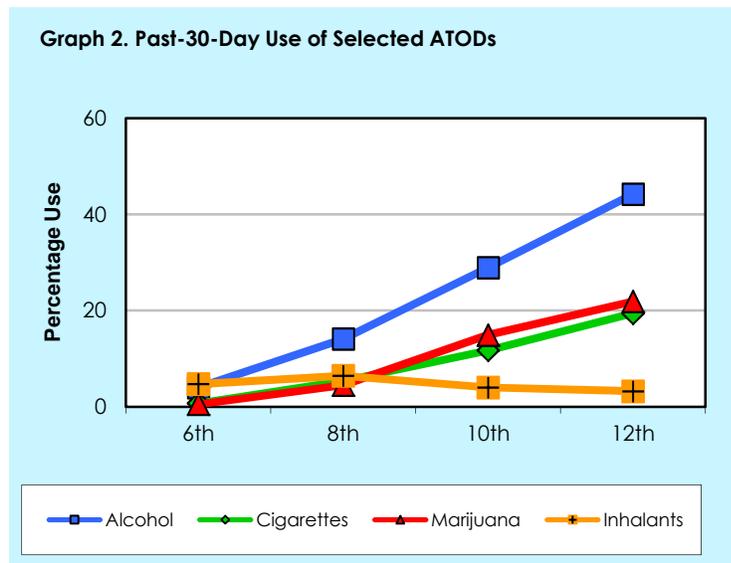
Pennsylvania statewide students reported the highest past-30-day prevalence-of-use rates for alcohol (23.3%), marijuana (10.7%) and cigarettes (9.5%). Other past-30-day prevalence rates ranged from 0.2% for heroin to 5.7% for smokeless tobacco. Overall, 6.3% of Pennsylvania statewide students reported the use of any illicit drug (other than marijuana) in the past 30 days.

Graph 1. Overall Lifetime and Past-30-Day Prevalence of Alcohol, Tobacco and Other Drug Use



Grade-Level Results

ATOD prevalence rates for individual grade levels are presented in Graph 2 and Tables 8 and 9. Typically, prevalence rates for the use of most substances increase as students enter higher grades. In many communities, however, inhalant use provides an exception to this pattern, often peaking during the late middle school or early high school years. This may be because inhalants are relatively easy for younger students to obtain. Past-30-day alcohol use in Pennsylvania statewide ranges from a low of 4.0% among 6th graders to a high of 44.2% among 12th graders. Past-30-day marijuana use ranges from a low of 0.5% among 6th graders to a high of 21.9% among 12th graders. Past-30-day cigarette use ranges from a low of 0.7% among 6th graders to a high of 19.4% among 12th graders. Past-30-day inhalant use ranges from a low of 3.2% among 12th graders to a high of 6.4% among 8th graders.



Comparisons to National Results

Comparing and contrasting findings from a county- or school-district-level survey to relevant data from a national survey provides a valuable perspective on local data. In this report, national comparisons for ATOD use will be made to the 2011 *Monitoring the Future* study. The *Monitoring the Future* survey project, which provides prevalence-of-use information for ATODs from a nationally representative sample of 8th, 10th and 12th graders, is conducted annually by the Survey Research Center of the Institute for Social Research at the University of Michigan (see www.monitoringthefuture.org). For a review of the methodology of this study, please see Johnston et al. (2011).

In addition to a complete report of prevalence-of-use rates for each surveyed grade, Tables 8 and 9 present national results from the *Monitoring the Future* study. Across the three comparison grades (8th, 10th and 12th), students in Pennsylvania statewide reported lower average levels of lifetime marijuana, Ecstasy and hallucinogen use than their national counterparts. The largest grade-level differences in lifetime substance use were for smokeless tobacco in the 12th grade (23.6% versus 16.9% for *Monitoring the Future*) and marijuana in the 8th and 10th grades (7.9% and 24.9% versus 16.4% and 34.5% for *Monitoring the Future*).

For past-30-day ATOD use, students in Pennsylvania statewide reported higher average levels of inhalant and alcohol use than their national counterparts and a lower average level of marijuana use. The largest grade-level differences in past-30-day substance use were for inhalants in the 8th grade (6.4% versus 3.2% for *Monitoring the Future*), binge drinking in the 12th grade (26.9% versus 21.6% for *Monitoring the Future*) and alcohol in the 12th grade (44.2% versus 40.0% for *Monitoring the Future*).

Comparisons to 2009 Results

Students have shown slight reductions in most ATOD categories since the 2009 *PAYS*. The most notable lifetime differences are for alcohol (49.3% versus 44.0%), cigarettes (26.3% versus 23.3%), inhalants (11.5% versus 8.6%) and any illicit drug (other than marijuana) (14.7% versus 11.4%).

These same drugs have also shown the most notable decreases in past-30-day use: alcohol (25.5% versus 23.3%), cigarettes (11.0% versus 9.5%), inhalants (5.9% versus 4.5%) and any illicit drug (other than marijuana) (8.1% versus 6.3%). Binge drinking also decreased, from 13.6% to 12.4%. (See Tables C8 and C9 for detailed 2009 results.)

Gender Differences

Like many recent national and state-level youth health behavior surveys, the 2011 *PAYS* shows relatively little difference in ATOD prevalence rates between female and male students. The only substantial difference occurs for smokeless tobacco, with lifetime use at 18.1% for males versus 5.0% for females, and past-30-day use at 9.6% for males versus 1.8% for females. Much smaller but noteworthy differences also appear for lifetime alcohol use (45.6% among females versus 42.4% among males) and lifetime and past-30-day marijuana use (20.2% and 11.9% among males versus 17.8% and 9.3% among females).

This relative parity in past-30-day rates between the sexes represents a shift in the pattern of ATOD use. Fifteen years ago male students reported higher rates of use across a number of ATOD categories. It is important to note that the closing of the ATOD gender gap is primarily a reflection of declining rates of use among male students, compared to either stable or more slowly declining rates of use among female students.

	Pennsylvania Statewide 2011							Monitoring the Future ¹		
	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %	8 th %	10 th %	12 th %
Alcohol	45.6	42.4	14.9	36.7	53.2	68.4	44.0	33.1	56.0	70.0
Cigarettes	23.5	23.1	4.2	15.6	28.5	43.1	23.3	18.4	30.4	40.0
Smokeless Tobacco	5.0	18.1	1.7	6.5	13.4	23.6	11.5	9.7	15.6	16.9
Marijuana	17.8	20.2	0.7	7.9	24.9	40.5	19.0	16.4	34.5	45.5
Inhalants	9.2	8.1	6.6	10.5	8.7	8.6	8.6	13.1	10.1	8.1
Cocaine	1.2	1.9	0.1	0.5	1.5	4.0	1.6	2.2	3.3	5.2
Crack Cocaine	0.5	0.6	0.1	0.5	0.5	1.2	0.6	1.5	1.6	1.9
Heroin	0.3	0.5	0.0	0.2	0.3	1.0	0.4	1.2	1.2	1.4
Hallucinogens	2.0	3.2	0.1	0.9	3.2	6.1	2.5	3.3	6.0	8.3
Methamphetamine	0.4	0.7	0.1	0.3	0.4	1.1	0.5	1.3	2.1	2.1
Ecstasy	2.0	2.3	0.1	0.7	2.0	5.5	2.1	2.6	6.6	8.0
Steroids	0.4	1.2	0.4	0.5	0.8	1.4	0.8	1.2	1.4	1.8
Any Illicit Drug (Other than Marijuana)	11.2	11.7	6.9	11.3	11.8	15.4	11.4	--	--	--

Note: The symbol "--" indicates that data are not available because students were not surveyed, the drug was not included in the survey, or a comparable aggregate calculation was not available. *Monitoring the Future* data are only available for 8th, 10th and 12th graders.

¹ Johnston et al. (2011).

Table 9. Past-30-Day Use of Alcohol, Tobacco and Other Drugs

	Pennsylvania Statewide 2011							Monitoring the Future ¹		
	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %	8 th %	10 th %	12 th %
Alcohol	22.9	23.3	4.0	14.1	28.9	44.2	23.3	12.7	27.2	40.0
Binge Drinking	11.7	13.2	1.5	5.1	15.0	26.9	12.4	6.4	14.7	21.6
Cigarettes	9.4	9.5	0.7	5.3	11.7	19.4	9.5	6.1	11.8	18.7
Smokeless Tobacco	1.8	9.6	0.5	3.1	7.3	11.4	5.7	3.5	6.6	8.3
Marijuana	9.3	11.9	0.5	4.5	14.9	21.9	10.7	7.2	17.6	22.6
Inhalants	4.7	4.3	4.7	6.4	4.0	3.2	4.5	3.2	1.7	1.0
Cocaine	0.4	1.0	0.0	0.4	0.8	1.4	0.7	0.8	0.7	1.1
Crack Cocaine	0.2	0.4	0.1	0.5	0.2	0.5	0.3	0.5	0.4	0.5
Heroin	0.1	0.3	0.0	0.1	0.1	0.6	0.2	0.4	0.4	0.4
Hallucinogens	1.0	1.6	0.0	0.9	1.7	2.4	1.3	1.0	1.4	1.6
Methamphetamine	0.2	0.4	0.1	0.2	0.3	0.5	0.3	0.4	0.5	0.6
Ecstasy	0.8	1.1	0.1	0.5	0.8	2.4	1.0	0.6	1.6	2.3
Steroids	0.3	0.8	0.2	0.6	0.4	0.9	0.5	0.4	0.5	0.7
Any Illicit Drug (Other than Marijuana)	5.9	6.7	4.9	7.3	6.2	6.8	6.3	--	--	--

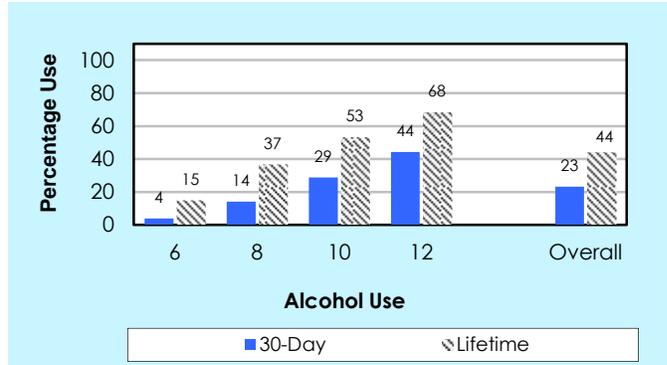
Note: The symbol "--" indicates that data are not available because students were not surveyed, the drug was not included in the survey, or a comparable aggregate calculation was not available. *Monitoring the Future* data are only available for 8th, 10th and 12th graders.

¹ Johnston et al. (2011).

Item-Level Results

Alcohol

Alcohol, including beer, wine and hard liquor, is the drug used most often by adolescents today. Findings from the *Monitoring the Future* study highlight the pervasiveness of alcohol in middle and high schools today. In comparison, cigarette use (the second most pervasive category of ATOD use) is only about half as prevalent as alcohol use. Given the national pattern, it is not surprising that alcohol is the most used drug among students in Pennsylvania statewide.



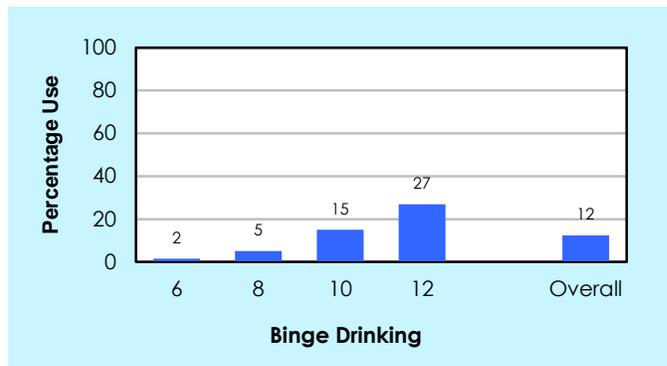
Lifetime Use:

- Lifetime prevalence of alcohol use ranges from a low of 14.9% for 6th graders to a high of 68.4% for 12th graders. Overall, 44.0% of Pennsylvania statewide students have used alcohol at least once in their lifetimes.
- Compared to national findings, 8th graders reported a higher rate of lifetime alcohol use, 10th graders reported a lower rate and 12th graders reported a similar rate of use.
- Female students are more likely than male students (45.6% female versus 42.4% male) to have reported using alcohol at least once in their lifetimes.

Past-30-Day Use:

- Past-30-day prevalence of alcohol use ranges from a low of 4.0% for 6th graders to a high of 44.2% for 12th graders. Overall, 23.3% of Pennsylvania statewide students have used alcohol at least once in the last 30 days.
- Compared to national findings, 8th and 10th graders reported similar rates of past-30-day alcohol use and 12th graders reported a higher rate of use.
- Male students are slightly more likely than female students (23.3% male versus 22.9% female) to report having used alcohol in the past 30 days.

Binge drinking (defined as a report of five or more drinks in a row within the past two weeks) is extremely dangerous. Several studies have shown that binge drinking is related to higher probabilities of drinking and driving as well as injury due to intoxication. As with alcohol use in general, binge drinking tends to become more pervasive as students grow older.



- Across grades, the prevalence rate of binge drinking ranges from a low of 1.5% for 6th graders to a high of 26.9% for 12th graders. Overall, 12.4% of Pennsylvania statewide students have reported at least one episode of binge drinking in the past two weeks.

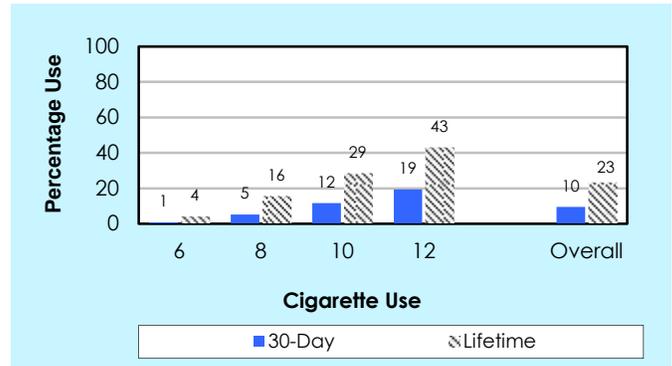
- Compared to national findings, 8th and 10th graders reported similar rates of binge drinking and 12th graders reported a higher rate of use.
- Female and male students reported similar rates of binge drinking (11.7% and 13.2%, respectively).

Tobacco

Throughout the 1990s, tobacco (including cigarettes and smokeless tobacco) was the second most commonly used drug among adolescents. National smoking rates, however, have declined substantially in recent years (Johnston et al., 2011).

Lifetime Cigarette Use:

- Lifetime prevalence of cigarette use ranges from a low of 4.2% for 6th graders to a high of 43.1% for 12th graders. Overall, 23.3% of Pennsylvania statewide students have used cigarettes at least once in their lifetimes.
- Compared to national findings, 8th graders reported a lower rate of lifetime cigarette use, 10th graders reported a similar rate and 12th graders reported a higher rate of use.
- Female and male students reported similar rates of lifetime cigarette use (23.5% female versus 23.1% male).

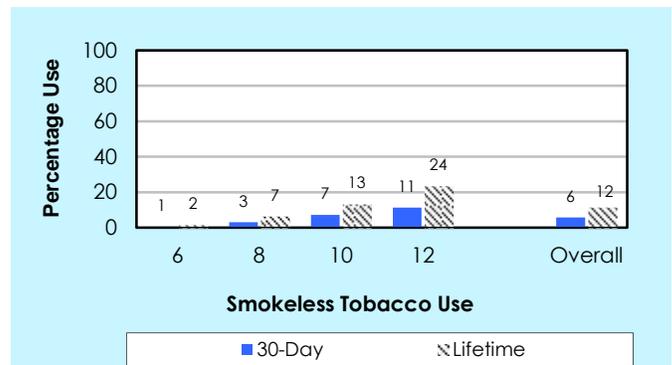


Past-30-Day Cigarette Use:

- Past-30-day prevalence of cigarette use ranges from a low of 0.7% for 6th graders to a high of 19.4% for 12th graders. Overall, 9.5% of Pennsylvania statewide students have used cigarettes at least once in the last 30 days.
- Compared to national findings, 8th, 10th and 12th graders reported similar rates of past-30-day cigarette use.
- Female and male students reported nearly identical rates of past-30-day cigarette use (9.4% and 9.5%, respectively).

Lifetime Smokeless Tobacco Use:

- Lifetime prevalence of smokeless tobacco use ranges from a low of 1.7% for 6th graders to a high of 23.6% for 12th graders. Overall, 11.5% of Pennsylvania statewide students have used smokeless tobacco at least once in their lifetimes.
- Compared to national findings, 8th and 10th graders reported lower rates of lifetime smokeless tobacco use and 12th graders reported a higher rate of use.
- Not surprisingly, lifetime smokeless tobacco use was substantially higher among male students (18.1%) compared to female students (5.0%).

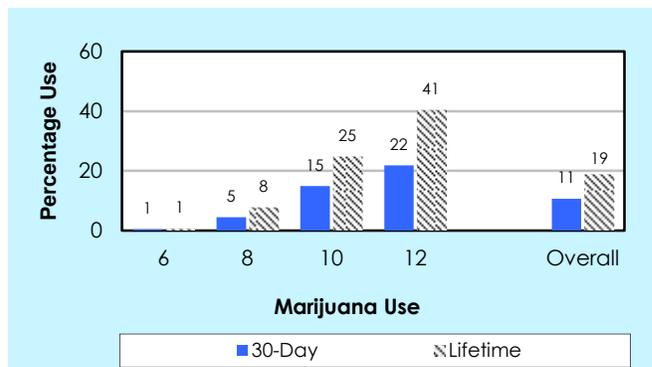


Past-30-Day Smokeless Tobacco Use:

- Past-30-day prevalence of smokeless tobacco use ranges from a low of 0.5% for 6th graders to a high of 11.4% for 12th graders. Overall, 5.7% of Pennsylvania statewide students have used smokeless tobacco at least once in the last 30 days.
- Compared to national findings, 8th and 10th graders reported similar rates of past-30-day smokeless tobacco use and 12th graders reported a higher rate of use.
- Not surprisingly, past-30-day smokeless tobacco use was substantially higher among male students (9.6%) compared to female students (1.8%).

Marijuana

During the 1990s, there were major changes in trends of marijuana use throughout the United States. Results from the *Monitoring the Future* study show dramatic increases in both lifetime and past-30-day prevalence rates through the early and mid 1990s (Johnston et al., 2011). For 8th and 10th graders the past-30-day rates more than doubled during this period. Since 1996 and 1997, when marijuana use peaked, rates started a gradual decline that lasted through the mid to late 2000s. Over the last two years, however, this trend has reversed and the prevalence of marijuana use has increased.



Lifetime Use:

- Lifetime prevalence of marijuana use ranges from a low of 0.7% for 6th graders to a high of 40.5% for 12th graders. Overall, 19.0% of Pennsylvania statewide students have used marijuana at least once in their lifetimes.
- Compared to national findings, 8th, 10th and 12th graders reported lower rates of lifetime marijuana use.
- Male students are more likely than female students (20.2% male versus 17.8% female) to have reported using marijuana at least once in their lifetimes.

Past-30-Day Use:

- Past-30-day prevalence of marijuana use ranges from a low of 0.5% for 6th graders to a high of 21.9% for 12th graders. Overall, 10.7% of Pennsylvania statewide students have used marijuana at least once in the last 30 days.
- Compared to national findings, 8th and 10th graders reported lower rates of past-30-day marijuana use and 12th graders reported a similar rate of use.
- Male students are more likely than female students (11.9% male versus 9.3% female) to have reported using marijuana at least once in the past 30 days.

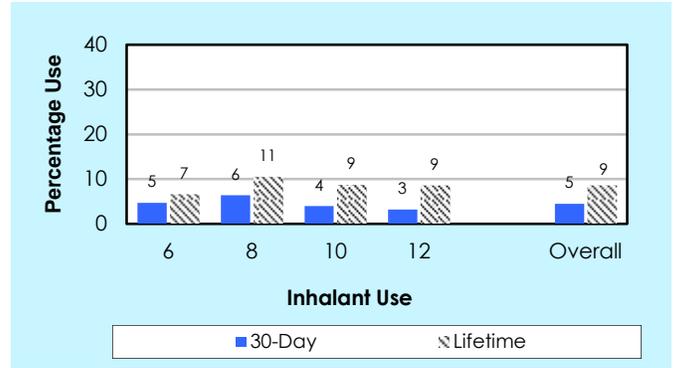
Inhalants

Inhalant use is more prevalent with younger students, perhaps because inhalants are often the easiest drugs for them to obtain. The health consequences of inhalant use can be substantial, including brain damage and heart failure. Inhalant use was measured by the survey question “On how many occasions (if any) have you used inhalants (whippets, butane, paint thinner, or glue to sniff, etc.)?” Comparisons with the

Monitoring the Future study (national results) should be made carefully because there are differences in survey questions for this class of drugs.

Lifetime Use:

- Lifetime prevalence of inhalant use ranges from a low of 6.6% for 6th graders to a high of 10.5% for 8th graders. Overall, 8.6% of Pennsylvania statewide students have used inhalants at least once in their lifetimes.
- Compared to national findings, 8th graders reported a lower rate of lifetime inhalant use and 10th and 12th graders reported similar rates of use.
- Male students reported higher rates of lifetime inhalant use than female students (9.2% and 8.1%, respectively).



Past-30-Day Use:

- Past-30-day prevalence of inhalant use ranges from a low of 3.2% for 12th graders to a high of 6.4% for 8th graders. Overall, 4.5% of Pennsylvania statewide students have used inhalants at least once in the last 30 days.
- Compared to national findings, 8th, 10th and 12th graders reported higher rates of past-30-day inhalant use.
- Female and male students reported similar rates of past-30-day inhalant use (4.7% and 4.3%, respectively).

Other Illicit Drugs

The *PAYS* also measures the prevalence of use for a variety of other drugs. This includes student use of the following: cocaine, crack cocaine, heroin, hallucinogens, methamphetamine, Ecstasy and steroids. The rates for prevalence of use of these other drugs are generally lower than the rates for alcohol, tobacco, marijuana and inhalants. Additionally, use of these other drugs tends to be concentrated in the upper grade levels.

Cocaine

Cocaine is a powerfully addictive stimulant that directly affects the brain. Users may develop tolerance and need more and more of the drug to feel the same effects. Cocaine use can cause a variety of physical problems, including chest pain, strokes, seizures and abnormal heart rhythm.

Lifetime Use:

- Lifetime prevalence of cocaine use ranges from a low of 0.1% for 6th graders to a high of 4.0% for 12th graders. Overall, 1.6% of Pennsylvania statewide students have used cocaine at least once in their lifetimes.
- Compared to national findings, 8th, 10th and 12th graders reported similar rates of lifetime cocaine use.
- Female and male students reported similar rates of lifetime cocaine use (1.2% and 1.9%, respectively).

Past-30-Day Use:

- Past-30-day prevalence of cocaine use ranges from a low of 0.0% for 6th graders to a high of 1.4% for 12th graders. Overall, 0.7% of Pennsylvania statewide students have used cocaine at least once in the last 30 days.
- Compared to national findings, 8th, 10th and 12th graders reported similar rates of past-30-day cocaine use.
- Female and male students reported similar rates of past-30-day cocaine use (0.4% and 1.0%, respectively).

Crack Cocaine

“Crack” is the street name given to the freebase form of cocaine, which has been processed into a less expensive, smokeable drug. Because crack is smoked, the user experiences a very quick, intense, but short-term high. Smoking large quantities of crack can cause acute problems, including cough, shortness of breath, and severe chest pains.

Lifetime Use:

- Lifetime prevalence of crack cocaine use ranges from a low of 0.1% for 6th graders to a high of 1.2% for 12th graders. Overall, 0.6% of Pennsylvania statewide students have used crack cocaine at least once in their lifetimes.
- Compared to national findings, 8th, 10th and 12th graders reported similar rates of lifetime crack cocaine use.
- Both female and male students reported very low rates of lifetime crack cocaine use (0.5% and 0.6%, respectively).

Past-30-Day Use:

- Past-30-day prevalence of crack cocaine use ranges from a low of 0.1% for 6th graders to a high of 0.5% for 8th and 12th graders. Overall, 0.3% of Pennsylvania statewide students have used crack cocaine at least once in the last 30 days.
- Compared to national findings, 8th and 12th graders reported the same rates of past-30-day crack cocaine use and 10th graders reported a similar rate of use.
- Both female and male students reported very low rates of past-30-day crack cocaine use (0.2% and 0.4%, respectively).

Heroin

Heroin is a highly addictive drug with rapid effects. Processed from morphine, heroin is usually injected, snorted or smoked. Physical dependence on the drug often develops among users. Long-term health problems caused by heroin use include collapsed veins, kidney or liver disease and bacterial infections.

Lifetime Use:

- Lifetime prevalence of heroin use ranges from a low of 0.0% for 6th graders to a high of 1.0% for 12th graders. Overall, 0.4% of Pennsylvania statewide students have used heroin at least once in their lifetimes.
- Compared to national findings, 8th, 10th and 12th graders reported similar rates of lifetime heroin use.
- Both female and male students reported very low rates of lifetime heroin use (0.3% and 0.5%, respectively).

Past-30-Day Use:

- Past-30-day prevalence of heroin use ranges from a low of 0.0% for 6th graders to a high of 0.6% for 12th graders. Overall, 0.2% of Pennsylvania statewide students have used heroin at least once in the last 30 days.
- Compared to national findings, 8th, 10th and 12th graders reported similar rates of past-30-day heroin use.
- Both female and male students reported very low rates of past-30-day heroin use (0.1% and 0.3%, respectively).

Hallucinogens

Hallucinogenic drugs can have short- and long-term effects on perception and mood. For instance, users of LSD, the most potent mood- and perception-altering drug, may have unpredictable experiences (known as “trips”) ranging from pleasant hallucinations to terrifying thoughts and feelings. LSD can also cause physical complications, including increased blood pressure and heart rate, dizziness, loss of appetite, nausea and numbness. For the purposes of the *PAYS*, hallucinogens were defined as “hallucinogens (acid, LSD, and ‘shrooms).”

Lifetime Use:

- Lifetime prevalence of hallucinogen use ranges from a low of 0.1% for 6th graders to a high of 6.1% for 12th graders. Overall, 2.5% of Pennsylvania statewide students have used hallucinogens at least once in their lifetimes.
- Compared to national findings, 8th, 10th and 12th graders reported lower rates of lifetime hallucinogen use.
- Male students are slightly more likely than female students (3.2% male versus 2.0% female) to have reported having used hallucinogens at least once in their lifetimes.

Past-30-Day Use:

- Past-30-day prevalence of hallucinogen use ranges from a low of 0.0% for 6th graders to a high of 2.4% for 12th graders. Overall, 1.3% of Pennsylvania statewide students have used hallucinogens at least once in the last 30 days.
- Compared to national findings, 8th, 10th and 12th graders reported similar rates of past-30-day hallucinogen use.
- Male students are slightly more likely than female students (1.6% male versus 1.0% female) to have reported having used hallucinogens in the past 30 days.

Methamphetamine

Methamphetamine is a highly addictive stimulant with effects similar to cocaine. Use of methamphetamine can cause physical and psychological problems, such as rapid or irregular heart rate, increased blood pressure, anxiety and insomnia.

Lifetime Use:

- Lifetime prevalence of methamphetamine use ranges from a low of 0.1% for 6th graders to a high of 1.1% for 12th graders. Overall, 0.5% of Pennsylvania statewide students have used methamphetamine at least once in their lifetimes.
- Compared to national findings, 8th, 10th and 12th graders reported similar rates of lifetime methamphetamine use.

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- Both female and male students reported very low rates of lifetime methamphetamine use (0.4% and 0.7%, respectively).

Past-30-Day Use:

- Past-30-day prevalence of methamphetamine use ranges from a low of 0.1% for 6th graders to a high of 0.5% for 12th graders. Overall, 0.3% of Pennsylvania statewide students have used methamphetamine at least once in the last 30 days.
- Compared to national findings, 8th, 10th and 12th graders reported similar rates of past-30-day methamphetamine use.
- Both female and male students reported very low rates of past-30-day methamphetamine use (0.2% and 0.4%, respectively).

Ecstasy

Ecstasy (also known as MDMA) has both stimulant and hallucinogenic effects. After showing an increase in use nationwide from 1998 to 2001, use of Ecstasy appears to have declined in recent years, while the proportion of young people perceiving it as dangerous has increased (Johnston et al., 2011).

Lifetime Use:

- Lifetime prevalence of Ecstasy use ranges from a low of 0.1% for 6th graders to a high of 5.5% for 12th graders. Overall, 2.1% of Pennsylvania statewide students have used Ecstasy at least once in their lifetimes.
- Compared to national findings, 8th graders reported a similar rate of lifetime Ecstasy use and 10th and 12th graders reported lower rates of use.
- Male students are slightly more likely than female students (2.3% male versus 2.0% female) to have reported using Ecstasy at least once in their lifetimes.

Past-30-Day Use:

- Past-30-day prevalence of Ecstasy use ranges from a low of 0.1% for 6th graders to a high of 2.4% for 12th graders. Overall, 1.0% of Pennsylvania statewide students have used Ecstasy at least once in the last 30 days.
- Compared to national findings, 8th, 10th and 12th graders reported similar rates of past-30-day Ecstasy use.
- Male students are slightly more likely than female students (1.1% male versus 0.8% female) to have reported using Ecstasy at least once in the past 30 days.

Steroids

The primary use for steroids in humans is to raise inadequate levels of testosterone. However, some athletes misuse the drug to “improve” their appearance or athletic performance. Improper use of steroids can prematurely stop the lengthening of bones as well as cause infertility and liver tumors.

Lifetime Use:

- Lifetime prevalence of steroid use ranges from a low of 0.4% for 6th graders to a high of 1.4% for 12th graders. Overall, 0.8% of Pennsylvania statewide students have used steroids at least once in their lifetimes.
- Compared to national findings, 8th, 10th and 12th graders reported similar rates of lifetime steroid use.

- Both female and male students reported very low rates of lifetime steroid use (0.4% and 1.2%, respectively).

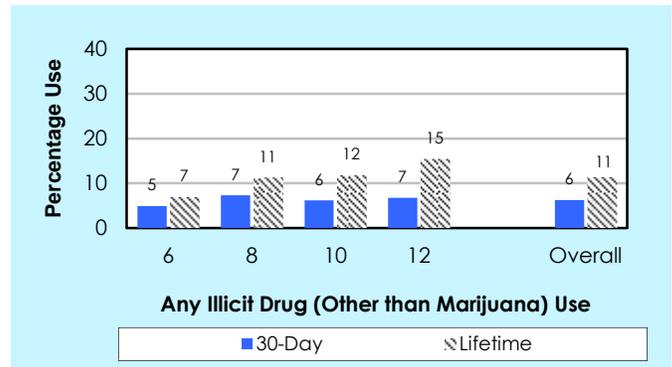
Past-30-Day Use:

- Past-30-day prevalence of steroid use ranges from a low of 0.2% for 6th graders to a high of 0.9% for 12th graders. Overall, 0.5% of Pennsylvania statewide students have used steroids at least once in the last 30 days.
- Compared to national findings, 8th, 10th and 12th graders reported similar rates of past-30-day steroid use.
- Both female and male students reported very low rates of past-30-day steroid use (0.3% and 0.8%, respectively).

Any Illicit Drug (Other than Marijuana)

The final ATOD indicator reports on the use of any illicit drug other than marijuana. This drug combination rate—which includes use of one or more of the following drugs: inhalants, cocaine, crack cocaine, heroin, hallucinogens, methamphetamine, Ecstasy and steroids—provides prevention planners with an overall indicator of so-called “hard” drug use.

Marijuana use is excluded from this index because the higher prevalence of marijuana use tends to obscure the presence or absence of the other drugs. In other words, an indicator of “Any Illicit Drug Use (Including Marijuana)” primarily measures marijuana use. Direct comparisons to *Monitoring the Future* results are not available for this measure.



Lifetime Use:

- Lifetime prevalence of any illicit drug (other than marijuana) use ranges from a low of 6.9% for 6th graders to a high of 15.4% for 12th graders. Overall, 11.4% of Pennsylvania statewide students have used any illicit drug (other than marijuana) at least once in their lifetimes.
- Male students are slightly more likely than female students (11.7% male versus 11.2% female) to have reported having used any illicit drug (other than marijuana) at least once in their lifetimes.

Past-30-Day Use:

- Past-30-day prevalence of any illicit drug (other than marijuana) use ranges from a low of 4.9% for 6th graders to a high of 7.3% for 8th graders. Overall, 6.3% of Pennsylvania statewide students have used any illicit drug (other than marijuana) at least once in the last 30 days.
- Male students are more likely than female students (6.7% male versus 5.9% female) to have reported having used any illicit drug (other than marijuana) at least once in the past 30 days.

Prescription Drugs

In recent years the nonmedical use of prescription drugs has emerged as a major public health issue. Both the *National Survey on Drug Use and Health* (Substance Abuse and Mental Health Services

Administration, 2003) and the *Monitoring the Future* study (Johnston et al., 2011), two major sources of youth drug abuse prevalence data, have reported increases in the unauthorized use of prescription drugs. This trend is particularly troubling given the adverse health consequences related to prescription drug abuse, which include addiction, physical dependence and the possibility of overdose.

Despite these concerns, the research community is still in the early stages of developing survey methods that can accurately measure the prevalence of prescription drug abuse. If anonymity is ensured, most students will honestly and accurately report their use of alcohol, tobacco, marijuana and other easily recognized categories of illicit drugs. The measurement of prescription drug use, however, is more complex. There are many prescription medicines that are subject to abuse, making it impossible to present an exhaustive list. Also, respondents may have difficulty identifying the names of prescription drugs they have used, and they may have difficulty distinguishing between prescription and over-the-counter medications.

With these challenges in mind, the 2009 *PAYS* added six questions designed to measure prevalence-of-use rates across the three prescription drug categories that, according to the National Institute on Drug Abuse, are among the most likely to be abused: pain relievers, stimulants and tranquilizers. Each question includes examples of some of the best known drugs within that category. Results for Pennsylvania statewide are presented in Tables 10 and 11.

On how many occasions (if any) have you:

- Used prescription pain relievers, such as Vicodin[®], OxyContin[®] or Tylox[®], without a doctor's orders, in your lifetime?
- Used prescription pain relievers, such as Vicodin[®], OxyContin[®] or Tylox[®], without a doctor's orders, during the past 30 days?
- Used prescription tranquilizers, such as Xanax[®], Valium[®] or Ambien[®], without a doctor's orders, in your lifetime?
- Used prescription tranquilizers, such as Xanax[®], Valium[®] or Ambien[®], without a doctor's orders, during the past 30 days?
- Used prescription stimulants, such as Ritalin[®] or Adderall[®], without a doctor's orders, in your lifetime?
- Used prescription stimulants, such as Ritalin[®] or Adderall[®], without a doctor's orders, during the past 30 days?

Pain Relievers

Lifetime Use:

- Lifetime prevalence of prescription pain reliever use ranges from a low of 1.1% for 6th graders to a high of 13.1% for 12th graders. Overall, 6.7% of Pennsylvania statewide students have used prescription pain relievers at least once in their lifetimes.
- Female and male students reported similar rates of lifetime prescription pain reliever use (7.0% and 6.3%, respectively).

Past-30-Day Use:

- Past-30-day prevalence of prescription pain reliever use ranges from a low of 0.8% for 6th graders to a high of 7.9% for 12th graders. Overall, 4.6% of Pennsylvania statewide students have used prescription pain relievers at least once in the last 30 days.

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- Female and male students reported similar rates of past-30-day prescription pain reliever use (5.0% and 4.4%, respectively).

Tranquilizers

Lifetime Use:

- Lifetime prevalence of tranquilizer use ranges from a low of 0.1% for 6th graders to a high of 6.1% for 12th graders. Overall, 2.7% of Pennsylvania statewide students have used tranquilizers at least once in their lifetimes.
- Female and male students reported nearly identical rates of lifetime tranquilizer use (2.7% and 2.6%, respectively).

Past-30-Day Use:

- Past-30-day prevalence of tranquilizer use ranges from a low of 0.1% for 6th graders to a high of 3.2% for 12th graders. Overall, 1.6% of Pennsylvania statewide students have used tranquilizers at least once in the last 30 days.
- Female and male students reported identical rates of past-30-day tranquilizer use (1.5% for both genders).

Stimulants

Lifetime Use:

- Lifetime prevalence of stimulant use ranges from a low of 0.2% for 6th graders to a high of 8.2% for 12th graders. Overall, 3.6% of Pennsylvania statewide students have used stimulants at least once in their lifetimes.
- Female and male students reported nearly identical rates of lifetime stimulant use (3.6% and 3.7%, respectively).

Past-30-Day Use:

- Past-30-day prevalence of stimulant use ranges from a low of 0.1% for 6th graders to a high of 4.9% for 12th graders. Overall, 2.3% of Pennsylvania statewide students have used stimulants at least once in the last 30 days.
- Female and male students reported nearly identical rates of lifetime stimulant use (2.3% and 2.4%, respectively).

Comparisons to 2009 Results

Comparing the 2009 survey to this year's survey, reports of prescription drug use have decreased for all three types of drugs. Most notably, lifetime use of prescription pain relievers has decreased from 7.4% in 2009 to 6.7% in 2011. (See Tables C10 and C11 for detailed 2009 results.)

Table 10. Lifetime Use of Prescription Drugs (without a Doctor's Order), Pennsylvania Statewide 2011

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Pain Relievers	7.0	6.3	1.1	3.7	8.1	13.1	6.7
Tranquilizers	2.7	2.6	0.1	1.1	3.1	6.1	2.7
Stimulants	3.6	3.7	0.2	1.2	4.4	8.2	3.6

Table 11. Past-30-Day Use of Prescription Drugs (without a Doctor's Order), Pennsylvania Statewide 2011

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Pain Relievers	5.0	4.4	0.8	3.3	6.0	7.9	4.6
Tranquilizers	1.5	1.5	0.1	0.9	2.0	3.2	1.6
Stimulants	2.3	2.4	0.1	1.1	2.9	4.9	2.3

Risk of Harm

Perception of risk is an important determinant in the decision-making process young people go through when deciding whether or not to use alcohol, tobacco or other drugs (Bachman, Johnston, O'Malley & Humphrey, 1988). Data analysis across a range of *Communities That Care Youth Survey* communities shows a consistent negative correlation between perception of risk and the level of reported ATOD use. That is, generally when the perceived risk of harm is high, reported frequency of use is low. Evidence also suggests that perceptions of the risks and benefits associated with drug use sometimes serve as a leading indicator of future drug use patterns in a community (Bachman, Johnston, O'Malley & Humphrey, 1986). Table 12 presents prevalence rates for surveyed youth assigning "great risk" of harm to four drug use behaviors: regular use of alcohol (one or two drinks nearly every day), regular use of cigarettes (a pack or more daily), trying marijuana once or twice, and regular use of marijuana. These four survey items form the risk factor scale *Low Perceived Risks of Drug Use* (see Section 6).

The percentage of Pennsylvania students who assigned "great risk" of harm to smoking one or more packs of cigarettes per day was 67.1%, followed by regular use of marijuana (62.1%), near daily use of alcohol (31.6%) and trying marijuana once or twice (28.7%). Perceptions of harm associated with cigarette use are fairly consistent across grade levels. In contrast, perceptions of harm associated with marijuana use decline as students get older. For example, 76.6% of 6th graders reported a great risk of harm associated with regular marijuana use, compared to 44.2% of 12th graders. Perceptions of harm associated with near daily use of alcohol also declined with grade level, but not as rapidly. Female students are more likely than male students to describe ATOD use as harmful. For example, 67.3% of female students assigned "great risk" of harm to smoking marijuana regularly, compared to 57.3% of male students.

Comparing the 2009 survey to this year's survey, students assigned a higher risk of harm for all four categories. Most notably, the percentage of students who believe that drinking alcohol regularly poses a great risk of harm increased from 30.1% in 2009 to 31.6% in 2011. (See Table C12 for detailed 2009 results.)

Table 12. Percentage of Youth Who Reported Perception of “Great Risk” of Harm, Pennsylvania Statewide 2011

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Drinking Alcohol Regularly	35.1	27.9	38.0	33.7	27.9	27.4	31.6
Smoking Cigarettes Regularly	71.1	63.1	66.3	70.4	66.1	65.5	67.1
Trying Marijuana Once or Twice	29.6	28.1	40.6	36.2	21.8	17.5	28.7
Smoking Marijuana Regularly	67.3	57.3	76.6	75.4	53.5	44.2	62.1

Disapproval of Drug Use

Personal approval or disapproval is another key attitudinal construct that influences drug use behavior (Bachman et al., 1988). Like risk of harm, disapproval is negatively correlated with the level of reported ATOD use across a range of *Communities That Care Youth Survey* communities. Personal disapproval was measured by asking surveyed youth how wrong it would be for someone their age to drink alcohol regularly, smoke cigarettes, smoke marijuana, or use other illicit drugs (“LSD, cocaine, amphetamines or another illegal drug”). The rates presented in Table 13 represent the percentages of surveyed youth who thought it would be “wrong” or “very wrong” to use each drug. These four survey items form the risk factor scale *Favorable Attitudes toward ATOD Use* (see Section 6).

The percentage of Pennsylvania students who disapprove of other illicit drug use was 94.6%, followed by smoking cigarettes (80.2%), smoking marijuana (80.1%) and drinking alcohol regularly (74.7%). While disapproval of other illicit drug use remains above the 90% level for all grades, the other three categories show substantial reductions as students get older. In particular, the percentage of students who disapprove of regular alcohol use declines from a high of 97.1% among 6th graders to a low of 51.2% among 12th graders. Female and male students reported similar rates of disapproval for alcohol, cigarette and other illicit drug use. For marijuana, female students reported a higher rate of disapproval (83.0%) than male students (77.7%).

Comparing the 2009 survey to this year’s survey, students indicated higher levels of personal disapproval in all four areas. Most notably, the percentage of students who disapprove of drinking alcohol regularly increased from 71.6% in 2009 to 74.7% in 2011. (See Table C13 for detailed 2009 results.)

Table 13. Percentage of Youth Who Indicated Personal Disapproval of Drug Use, Pennsylvania Statewide 2011

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Drinking Alcohol Regularly	76.7	73.0	97.1	86.6	66.2	51.2	74.7
Smoking Cigarettes	81.0	79.7	97.7	88.4	76.3	60.0	80.2
Smoking Marijuana	83.0	77.7	98.2	89.8	73.1	61.4	80.1
Using Other Illicit Drugs	96.1	93.2	98.6	96.5	92.9	90.6	94.6

Social Norms about ATOD Use

In addition to students' own attitudes, social norms—the written and unwritten rules and expectations about what constitutes desirable behavior—shape drug use choices. Since drug-related attitudes and behaviors are often acquired through peer group interactions, expectations of how one's peer group might react have an especially strong impact on whether or not young people choose to use drugs. The data presented in Table 14 show the percentage of surveyed youth who said that there is a “pretty good” or “very good” chance that they would be seen as cool if they smoked cigarettes, drank alcohol regularly (once or twice a month) or smoked marijuana. These three survey items form part of the risk factor scale *Peer Rewards for Antisocial Behavior* (see Section 6).

Relatively few Pennsylvania students reported that drug use would be seen as cool. Only 10.5% of students felt that drinking alcohol would be seen as cool, 9.9% felt that smoking marijuana would be seen as cool and 4.6% felt that smoking cigarettes would be seen as cool. Peer approval of all three categories of ATOD use increases as students get older; however, this increase is much more rapid for alcohol and marijuana. For example, peer approval of alcohol use increases steadily from 1.1% among 6th graders to 21.1% among 12th graders. Female and male students reported similar rates of peer approval for alcohol and cigarette use. For marijuana use, approval is higher among male students than among female students (10.7% versus 8.9%, respectively).

Comparing the 2009 survey to this year's survey, the percentages of students who think they would be seen as cool for using drugs have decreased slightly in all of these areas. Most notably, the percentage of students who think drinking alcohol would make them look cool has decreased from 11.4% in 2009 to 10.5% in 2011. (See Table C14 for detailed 2009 results.)

Table 14. Percentage of Youth Who Indicated Peer Approval of Drug Use, Pennsylvania Statewide 2011

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Drinking Alcohol Regularly	10.5	10.3	1.1	4.8	14.1	21.1	10.5
Smoking Cigarettes	4.7	4.4	1.0	3.7	6.0	7.1	4.6
Smoking Marijuana	8.9	10.7	1.0	4.7	15.0	17.8	9.9

In addition to peer attitudes, social norms toward drug use were measured by asking how most neighborhood adults would view student alcohol, cigarette and marijuana use. Table 15 presents the percentage of surveyed youth who thought other adults would feel it was “wrong” or “very wrong” to use each drug. These three survey items form part of the risk factor scale *Laws and Norms Favorable to Drug Use* (see Section 6).

Across the overall sample, 86.3% of Pennsylvania students reported that neighborhood adults disapprove of smoking marijuana, 79.0% reported that neighborhood adults disapprove of smoking cigarettes, and 76.8% reported that neighborhood adults disapprove of drinking alcohol. Younger students are more likely to believe that neighborhood adults disapprove of ATOD use. For example, neighborhood adult disapproval of alcohol use drops from 91.2% among 6th graders to 60.0% among 12th graders. In all three categories, female students reported slightly higher rates of neighborhood adult disapproval, with the largest difference being 4.2 percentage points for alcohol use.

Comparing the 2009 survey to this year's survey, higher percentages of students reported that other adults would disapprove of drug use. Most notably, students who reported that other adults would disapprove of

drinking alcohol increased from 74.8% in 2009 to 76.8% in 2011. (See Table C15 for detailed 2009 results.)

Table 15. Percentage of Youth Who Indicated “Other Adults” Disapprove of Drug Use, Pennsylvania Statewide 2011

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Drinking Alcohol	79.0	74.8	91.2	84.6	72.4	60.0	76.8
Smoking Cigarettes	79.9	78.1	91.8	86.2	77.1	61.7	79.0
Smoking Marijuana	88.1	84.6	95.3	91.9	83.0	75.9	86.3

Parental Disapproval of Drug Use

Parental disapproval was measured by asking surveyed youth “how wrong do your parents feel it would be for you to” drink alcohol regularly, smoke cigarettes, and smoke marijuana. The rates presented in Table 16 represent the percentages of surveyed youth who reported that their parents feel it would be “very wrong” to use each drug. These three survey items form the risk factor scale *Parental Attitudes Favorable toward ATOD Use* (see Section 6).

Not surprisingly, most Pennsylvania students report that their parents disapprove of ATOD use. Across the overall sample, 86.0% reported that their parents believe smoking marijuana is “very wrong,” followed by 82.5% for smoking cigarettes and 75.7% for drinking alcohol regularly. As with other adult disapproval, the rates drop as students get older. For example, 93.6% of 6th graders reported parental disapproval of regular alcohol use, compared to 55.2% of 12th graders. In all three categories, females reported higher rates of parental disapproval, with the largest difference being 5.1 percentage points for drinking alcohol regularly.

Comparing the 2009 survey to this year’s survey, percentages of students who say their parents disapprove of ATOD use have increased. Most notably, the percentage of students who reported that their parents disapprove of drinking alcohol has increased from 73.5% in 2009 to 75.7% in 2011. (See Table C16 for detailed 2009 results.)

Table 16. Percentage of Youth Who Indicated Parental Disapproval of Drug Use, Pennsylvania Statewide 2011

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Drink Alcohol Regularly	78.3	73.2	93.6	85.6	70.3	55.2	75.7
Smoke Cigarettes	84.1	81.2	95.2	89.3	79.9	66.8	82.5
Smoke Marijuana	88.3	84.0	97.3	92.2	81.4	74.1	86.0

Frequency of Drug Use

While prevalence rates are useful for determining how many students are currently using or have experimented with a drug, they give no indication of the frequency or intensity of use. A respondent who reports 1 or 2 occasions of use in the past 30 days is counted the same as one who reports 40 or more occasions of use, even though the level of use is drastically different. Tables 17-20 present the past-30-day frequency of use reported by surveyed youth for the following drugs: alcohol, cigarettes, marijuana, and inhalants.

Not surprisingly, given that these prevalence rates only include students who reported drug use, there were no substantial differences between females and males. See Tables C17 to C20 for 2009 results for frequency of drug use.

Table 17. Past-30-Day Frequency of Alcohol Use, Pennsylvania Statewide 2011

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
0 occasions	77.1	76.7	96.0	85.9	71.1	55.8	76.7
1 or 2 occasions	14.7	14.2	3.3	10.3	18.3	24.9	14.4
3 to 5 occasions	5.1	5.0	0.5	2.6	6.5	10.7	5.2
6 to 9 occasions	1.8	2.0	0.1	0.6	2.0	4.9	1.9
10 to 19 occasions	0.9	1.3	0.0	0.4	1.1	2.7	1.1
20 to 39 occasions	0.2	0.3	0.0	0.1	0.4	0.4	0.2
40 or more occasions	0.1	0.5	0.0	0.2	0.5	0.6	0.3

Note: Rounding on the above table can produce totals that do not equal 100%.

Table 18. Past-30-Day Frequency of Cigarette Use, Pennsylvania Statewide 2011

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Not at all	90.6	90.5	99.3	94.7	88.3	80.6	90.5
Less than one cigarette per day	4.2	3.9	0.6	3.0	5.4	7.1	4.1
One to five cigarettes per day	3.1	2.8	0.1	1.4	3.7	6.0	2.9
About one-half pack per day	1.5	1.3	0.0	0.4	1.3	3.8	1.4
About one pack per day	0.4	0.8	0.0	0.2	0.6	1.7	0.6
About one and one-half packs per day	0.2	0.3	0.0	0.1	0.2	0.5	0.2
Two packs or more per day	0.1	0.4	0.0	0.2	0.5	0.3	0.3

Note: Rounding on the above table can produce totals that do not equal 100%.

Table 19. Past-30-Day Frequency of Marijuana Use, Pennsylvania Statewide 2011

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
0 occasions	90.7	88.1	99.5	95.5	85.1	78.1	89.3
1 or 2 occasions	4.3	4.0	0.3	2.2	5.7	7.8	4.1
3 to 5 occasions	1.7	1.7	0.1	0.8	2.5	3.1	1.7
6 to 9 occasions	0.8	1.3	0.0	0.5	1.6	2.1	1.1
10 to 19 occasions	0.9	1.5	0.0	0.4	1.7	2.8	1.3
20 to 39 occasions	0.8	1.3	0.0	0.1	1.6	2.5	1.1
40 or more occasions	0.7	2.2	0.1	0.3	1.7	3.7	1.5

Note: Rounding on the above table can produce totals that do not equal 100%.

Table 20. Past-30-Day Frequency of Inhalant Use, Pennsylvania Statewide 2011

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
0 occasions	95.3	95.7	95.3	93.6	96.0	96.8	95.5
1 or 2 occasions	3.2	3.0	3.6	4.5	2.7	1.8	3.1
3 to 5 occasions	0.9	0.7	0.5	1.2	0.8	0.8	0.8
6 to 9 occasions	0.3	0.2	0.2	0.4	0.1	0.3	0.3
10 to 19 occasions	0.1	0.2	0.1	0.1	0.2	0.1	0.1
20 to 39 occasions	0.1	0.1	0.0	0.1	0.0	0.0	0.1
40 or more occasions	0.1	0.1	0.2	0.1	0.1	0.1	0.1

Note: Rounding on the above table can produce totals that do not equal 100%.

Section 5

Special Topics

Introduction

The *PAYS* included questions on the following special topics: age of onset of ATOD use and other antisocial behavior, driving under the influence of alcohol or marijuana, willingness to try or use ATODs, gambling, symptoms of depression, and the frequency of having been threatened or attacked at school.

Age of Onset of ATOD Use and Other Antisocial Behaviors

Using age-of-initiation data to coordinate the timing of prevention efforts can be an important tool for maximizing program effectiveness. For example, programs delivered after the majority of potential drug users have already initiated the behavior may have limited impact. Alternatively, very early intervention might prove less effective because it is not close enough to the critical initiation period.

Pennsylvania statewide students were asked nine questions about the age at which they first used ATODs and participated in other antisocial behaviors. The topics covered include: trying alcohol (“more than a sip or two”), drinking alcohol regularly (“at least once or twice a month”), smoking cigarettes, smoking marijuana, being suspended from school, being arrested, carrying a handgun, attacking someone with intent to harm, and belonging to a gang. Results for Pennsylvania statewide students are presented in Table 21.

While the average age of onset is typically lower in the earlier grades than it is in the later ones, this should not be interpreted as indicating that the younger cohorts are initiating substance use at an earlier age than the older cohorts did. Rather, the average age for each cohort increases as its members progress through school and more of them initiate experimentation with ATODs and engage in other antisocial behaviors. For this reason, the question “When do students first start using alcohol?” is best answered by examining the responses of students in the highest grade level surveyed because they can best reflect on their high school and/or middle school experiences and accurately report the age they first started using drugs or engaging in other antisocial behaviors.

As Table 21 shows, 12th grade Pennsylvania students reported the earliest age of onset for ATOD use for smoking cigarettes (14.1 years), followed by trying alcohol (14.5 years), smoking marijuana (14.9 years) and drinking alcohol regularly (15.7 years). Average age of onset among 12th graders for the other antisocial behaviors ranges from 13.1 years for carrying a handgun to 14.7 years for being

arrested. Not surprisingly, given that age of onset scores only include students who reported drug use or other antisocial behaviors, there were no substantial differences between females and males.

Comparing the 2009 survey to this year’s survey, the average age of onset remains mostly the same for all categories. (See Table C21 for detailed 2009 results.)

Table 21. Average Age of Onset of ATOD Use and Other Antisocial Behaviors, Pennsylvania Statewide 2011

	Female	Male	6 th	8 th	10 th	12 th	Overall
Trying Alcohol	13.4	13.0	10.5	11.7	13.3	14.5	13.2
Drinking Alcohol Regularly	14.8	14.8	11.5	12.5	14.2	15.7	14.8
Smoking Cigarettes	13.2	13.1	10.7	11.7	13.0	14.1	13.2
Smoking Marijuana	14.3	14.0	12.0	12.3	13.6	14.9	14.1
Being Suspended from School	12.8	12.2	10.4	11.4	12.6	13.5	12.4
Being Arrested	13.6	13.3	10.7	12.0	13.1	14.7	13.4
Carrying a Handgun	12.0	12.0	10.5	11.3	12.5	13.1	12.0
Attacking Someone with Intent to Harm	12.2	12.0	10.4	11.3	12.4	13.2	12.1
Belonging to a Gang	12.1	12.3	10.7	11.8	12.6	13.4	12.2

Driving after Alcohol or Marijuana Use

Driving a car requires clear thinking and good hand-eye coordination. Operating a vehicle after using alcohol or marijuana may impair driving skills, making the driver a hazard on any roadway. The impact of ATOD usage on automobile safety is assessed with two items: (1) “How often have you driven a car while or shortly after drinking?” and (2) “How often have you driven a car while or shortly after smoking pot?” Results for Pennsylvania statewide students are presented in Table 22.

As expected, given the age requirement for obtaining a driver’s license, these rates increase dramatically once students reach the 12th grade. While only 0.5% of 6th graders, 1.3% of 8th graders and 2.8% of 10th graders reported the operation of a vehicle while under the influence of alcohol, 16.2% of high school seniors reported at least one drinking and driving incident. Results for driving after marijuana use show a similar pattern. Less than 1% of 6th and 8th graders and 3.5% of 10th graders report driving under the influence of marijuana, compared to 18.4% of 12th graders. It is important to note that the 12th grade rate for driving under the influence of marijuana is higher than the rate for driving under the influence of alcohol. Male students reported a higher rate than female students for both driving after alcohol use (6.1% versus 4.4%, respectively) and driving after marijuana use (7.2% versus 4.5%, respectively).

Comparing the 2009 survey to this year’s survey, there is no substantial difference in the percentages of students who reported driving under the influence. For example, in 2009, 5.8% of students reported driving after alcohol use, compared to 5.4% in 2011. (See Table C22 for detailed 2009 results.)

Table 22. Percentage of Youth Reporting Any Occasion of Driving Under the Influence, Pennsylvania Statewide 2011

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Driving after Alcohol Use	4.4	6.1	0.5	1.3	2.8	16.2	5.4
Driving after Marijuana Use	4.5	7.2	0.2	0.9	3.5	18.4	5.9

Willingness to Try or Use ATODs

Along with perceptions of risk and level of disapproval (Bachman et al., 1988), willingness to try or use ATODs may be viewed as one of the attitudinal constructs that facilitates drug use. Pennsylvania students were questioned regarding their willingness to try or use alcohol, marijuana, cocaine, hallucinogens and inhalants. Results for Pennsylvania statewide students are presented in Table 23.

Interest in alcohol use was by far the highest among the five substances. Overall, 46.0% of Pennsylvania students reported that they “would use it any chance I got,” “would like to try or use it” or “not sure whether or not I would use it.” Respondents reported the second highest willingness to try or use rate for marijuana (20.4%). Willingness to try hallucinogens (6.1%), cocaine (2.9%) and inhalants (2.6%) are substantially lower.

Overall, differences between male and female students’ willingness to try or use ATODs are minimal. The largest difference occurs for alcohol use, where 47.5% of female students reported a willingness to use it, compared to 44.5% of male students.

Comparing the 2009 survey to this year’s survey, fewer students report being willing to try ATODs. Most notably, the percentage of students who were willing to try alcohol has decreased from 49.6% in 2009 to 46.0% in 2011. (See Table C23 for detailed 2009 results.)

Table 23. Percentage of Youth Reporting Willingness to Try Selected ATODs, Pennsylvania Statewide 2011

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Alcohol	47.5	44.5	14.5	35.7	57.3	73.3	46.0
Marijuana	18.8	21.9	1.8	11.4	28.8	37.5	20.4
Cocaine	2.5	3.3	1.1	2.1	3.5	4.8	2.9
Hallucinogens	5.2	6.9	0.7	2.9	8.5	11.6	6.1
Inhalants	2.6	2.7	0.9	2.5	3.3	3.6	2.6

Note: The percentages reported in this table represent the percentage of students who indicated “would use it any chance I got,” “would like to try it or use it” or “not sure whether or not I would use it.” Students who indicated “probably wouldn’t use it” or “would never use it” were considered to be unwilling to try the substance.

Gambling

The 2011 *PAYS* asks students a series of six questions about their experiences with gambling. These include past-12-month prevalence measures for: gambling for “money or anything of value,” betting “money or anything of value on sporting events,” buying “lottery tickets,” betting “money using the internet,” and betting “money or anything of value on table games like poker or other card games, dice, backgammon, or dominoes.” A question about gambling for “money or anything of value” in the past 30 days is also asked. Results for Pennsylvania statewide students are presented in Table 24.

Please note that two of the six gambling questions—the past-12-months and past-30-days gambling for “money or anything of value” items—have been in use since the 2005 survey. The sports betting, lottery ticket, and table gaming questions were introduced in 2007 and modified in 2009.

Across the overall sample, 15.3% of Pennsylvania students have “gambled for money or anything of value” in the past year, and 8.8% have done so in the past 30 days. Interestingly, a higher number, 20.6%, reported having “bet money or anything of value” on sporting events in the past year, suggesting that young people interpret the terms “gambled” and “bet” in different ways. Lottery tickets were purchased by 14.1%, table gaming (poker, cards, dice, etc.) was reported by 12.5% and internet betting was reported by only 3.5%.

Gender differences in gambling are substantial. For example, 14.1% of male students reported gambling in the past 30 days, compared to just 3.8% of female students. The category with the smallest gender difference is the lottery, with 16.7% of male students purchasing tickets in the past year, compared to 11.4% of female students.

Comparing the 2009 survey to this year’s survey, fewer students reported gambling. Most notably, the percentage of students who bet money on table games has decreased from 16.0% in 2009 to 12.5% in 2011. (See Table C24 for detailed 2009 results.)

Table 24. Percentage of Youth Reporting Gambling, Pennsylvania Statewide 2011

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Gambled for money in the past year	6.5	24.6	7.9	13.9	17.6	20.8	15.3
Gambled for money in the past 30 days	3.8	14.1	4.9	7.9	9.5	12.6	8.8
Bet on sporting events in the past year	10.3	31.6	13.5	20.1	23.0	25.0	20.6
Bought lottery tickets in the past year	11.4	16.7	10.9	11.9	13.2	20.1	14.1
Bet money using the internet in the past year	1.9	5.1	2.7	3.7	3.7	3.7	3.5
Bet money on table games in the past year	6.0	19.4	8.1	12.2	13.4	15.6	12.5

Symptoms of Depression

A number of scientific studies have identified a link between mental health problems, such as depression, and the use of alcohol, tobacco and other drugs during adolescence. The *PAYS* includes four questions that asks students about feelings—sadness, hopelessness and worthlessness—that can be symptoms of depression. Results for Pennsylvania statewide students are presented in Table 25.

Strikingly high percentages of Pennsylvania students reported having symptoms of depression. Nearly one third (31.1%) reported feeling “depressed or sad most days,” 28.0% reported that “at times I think I am no good at all,” 19.4% reported that “sometimes I think that life is not worth it” and 12.9% reported that “I am inclined to think that I am a failure.” It should be noted that while these results are both noteworthy and troubling, rates of this magnitude for these items are not unusual in student health behavior surveys.

Following the pattern shown in a number of other large-scale youth health behavior surveys, female students in Pennsylvania are more likely to report symptoms of depression than male students. For example, 37.8% of female students reporting feeling sad or depressed most days, compared to 23.9% of male students.

Comparing the 2009 survey to this year’s survey, reports of depression symptoms have decreased slightly. However, the percentage of students reporting that “at times I think I am no good at all” has increased slightly, from 27.8% in 2009 to 28.0% in 2011. (See Table C25 for detailed 2009 results.)

Table 25. Percentage of Youth Reporting Symptoms of Depression, Pennsylvania Statewide 2011

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
In the past year, felt depressed or sad most days	37.8	23.9	27.6	30.1	32.8	33.4	31.1
Sometimes I think that life is not worth it	24.4	14.1	15.0	20.2	21.7	20.4	19.4
At times I think I am no good at all	35.1	20.5	23.0	27.3	31.2	29.6	28.0
All in all, I am inclined to think that I am a failure	14.7	10.7	10.2	13.0	14.1	13.7	12.9

Note: The numbers reported in this table represent the percentage of students who answered either "yes" or "Yes!" to each question.

Section 6

Risk and Protective Factors

Introduction

Just as eating a high-fat diet is a risk factor for heart disease and getting regular exercise is a protective factor for heart disease and other health problems, there are factors that can help protect youth from, or put them at risk for, drug use and other problem behaviors.

Protective factors, also known as “assets,” are conditions that buffer children and youth from exposure to risk by either reducing the impact of the risks or changing the way that young people respond to risks. Protective factors identified through research include strong bonding to family, school, community and peers. These groups support the development of healthy behaviors for children by setting and communicating healthy beliefs and clear standards for children’s behavior. Young people are more likely to follow the standards for behavior set by these groups if the bonds are strong. Strong bonds are encouraged by providing young people with opportunities to make meaningful contributions, by teaching them the skills they need to be successful in these new opportunities, and by recognizing their contributions.

Risk factors are conditions that increase the likelihood of a young person becoming involved in drug use, delinquency, school dropout and/or violence. For example, children living in families with poor parental monitoring are more likely to become involved in these problems.

Research during the past 30 years supports the view that delinquency; alcohol, tobacco and other drug use; school achievement; and other important outcomes in adolescence are associated with specific characteristics in the student’s community, school and family environments, as well as with characteristics of the individual (Hawkins, Catalano & Miller, 1992). In fact, these characteristics have been shown to be more important in understanding these behaviors than ethnicity, income or family structure (Blum et al., 2000).

There is a substantial amount of research showing that adolescents’ exposure to a greater number of risk factors is associated with more drug use and delinquency. There is also evidence that exposure to a number of protective factors is associated with lower prevalence of these problem behaviors (Bry, McKeon & Pandina, 1982; Newcomb, Maddahian & Skager, 1987; Newcomb & Felix-Ortiz, 1992; Newcomb, 1995; Pollard et al., 1999).

The analysis of risk and protective factors is the most powerful tool available for understanding what promotes both positive and negative adolescent behavior and for helping design successful prevention programs for young people. To promote positive development and prevent problem behavior, it is necessary to address the factors that predict these outcomes. By measuring these risk and protective factors, specific factors that are elevated should be prioritized in the community. This process also helps in selecting targeted tested-effective prevention programming shown to address those elevated factors and consequently provide the greatest likelihood for success.

This system of risk and protective factors is organized into a strategy that families can use to help children develop healthy behaviors—the Social Development Strategy (Hawkins, Catalano & Associates, 1992). The Social Development Strategy is a theoretical framework that organizes risk and protective factors for adolescent problem behavior prevention.

Measurement

The *Communities That Care Youth Survey*, the survey upon which the *PAYS* was based, provides the most comprehensive measurement of risk and protective factors currently available for 6th to 12th graders. Risk and protective factors are measured by sets of survey items called scales. All together, the *PAYS* assesses 22 risk factor and nine protective factor scales across four domains: Community Domain, Family Domain, School Domain, and Peer and Individual Domain. Please see Appendix A for a list of the survey items used to form each scale.

Risk and protective factor scales are scored against the *Communities That Care* normative database. Like the scoring systems used by many national testing programs—such as the SAT[®] and ACT[™]—this method generates percentile scores ranging from 0 to 100. A score of 50, which matches the normative median, indicates that 50% of the respondents in the normative sample reported a score that is lower than the average for Pennsylvania statewide and 50% reported a score that is higher. Similarly, a score of 75 indicates that 75% of the normative sample reported a lower score and 25% reported a higher score. Because risk is associated with negative behavioral outcomes, it is better to have lower risk factor scale scores, not higher. Conversely, because protective factors are associated with better behavioral outcomes, it is better to have higher protective factor scale scores, not lower.

The *Communities That Care* normative database contains survey responses from over 280,000 students in grades 6 through 12. It was compiled by combining the results of selected *Communities That Care Youth Survey* efforts conducted in 2000, 2001 and 2002. To enhance representativeness, statistical weights were applied to adjust the sample to exactly match the population of U.S. public school students on four key demographic variables: ethnicity, sex, socioeconomic status and urbanicity. Information on the U.S. public school student population was obtained from the Common Core of Data program at the U.S. Department of Education's National Center for Education Statistics.

The risk and protective factor measurement and scoring model employed in the 2011 *PAYS* is identical to the 2009 model and nearly identical to the 2007 model, with the only difference being that the risk factor scale *Laws and Norms Favorable to Handguns* is not included in this year's survey. Please note that a number of changes to the model were introduced in 2007. Please see the 2007 statewide report for a description of these changes. Also note that some school districts elected to administer a secondary version of the *PAYS* that excluded questions measuring risk and protective factors within the family. In these cases, scale scores for the Family Domain risk and protective factors are not available.

Results Summary

Overall Results

Overall risk and protective factor scale scores are presented in Graphs 3 and 4. These results provide a general description of the prevention needs of Pennsylvania statewide 6th, 8th, 10th and 12th graders as a whole.

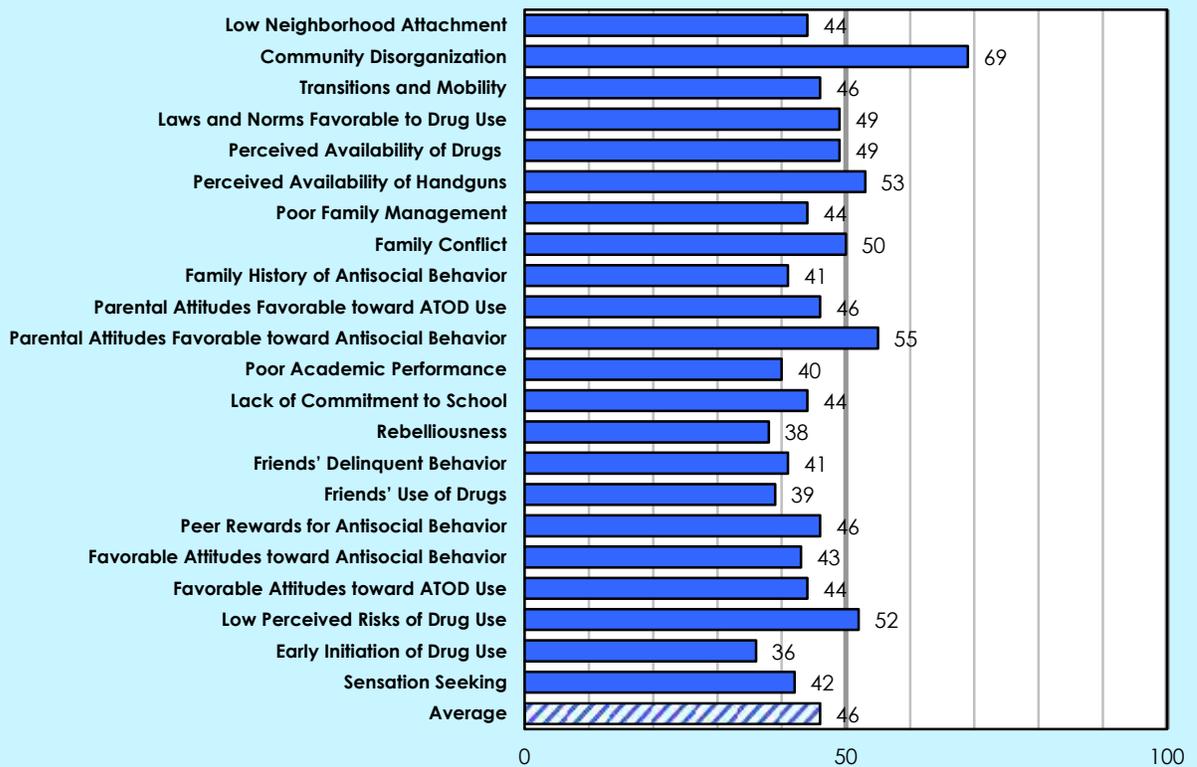
As Graph 3 shows, overall percentile scores across the nine protective factor scales range from a low of 37 to a high of 64, with an average score of 54, which is four points higher than the normative average of 50. The three lowest overall scores were for the following protective factor scales: *Community Opportunities for Prosocial Involvement* (37), *Religiosity* (43) and *Community Rewards for Prosocial Involvement* (53). While policies that target any protective factor could potentially be an important resource for students in Pennsylvania statewide, focusing prevention planning in these areas could be especially beneficial. Pennsylvania statewide students reported the three highest overall scores for the following protective factor scales: *School Rewards for Prosocial Involvement* (64), *Belief in the Moral Order* (62) and *School Opportunities for Prosocial Involvement* (61). The higher scores reported by students in these areas represent strengths that Pennsylvania statewide can build on.

As Graph 4 shows, overall scores across the 22 risk factor scales range from a low of 36 to a high of 69, with an average score of 46, which is four points lower than the normative average of 50. The three highest risk factor scales are *Community Disorganization* (69), *Parental Attitudes Favorable toward Antisocial Behavior* (55) and *Perceived Availability of Handguns* (53). Once again, while policies that target any risk factor could potentially be an important resource for students in Pennsylvania statewide, directing prevention programming in these areas is likely to be especially beneficial. The three lowest risk factor scales are *Early Initiation of Drug Use* (36), *Rebelliousness* (38) and *Friends' Use of Drugs* (39). The lower scores reported by students in these areas represent strengths that Pennsylvania statewide can build on.

Graph 3. Overall Protective Factor Scale Scores



Graph 4. Overall Risk Factor Scale Scores



Grade-Level Results

While overall scores provide a general picture of the risk and protective factor profile for Pennsylvania statewide, they can mask problems within individual grades. Tables 26 and 27 present individual-grade data for risk and protective factor scale scores. This detailed information provides prevention planners with a snapshot revealing which risk and protective factor scales are of greatest concern by grade. It allows those prevention planners to focus on the most appropriate points in youth development for preventive intervention action—and to target their prevention efforts as precisely as possible.

For example, younger students tend to report different factors than older students as being the most elevated or suppressed. Pennsylvania statewide 6th graders reported their five highest levels of risk for *Community Disorganization* (75), *Perceived Availability of Handguns* (57), *Parental Attitudes Favorable toward Antisocial Behavior* (55), *Perceived Availability of Drugs* (51) and *Low Perceived Risks of Drug Use* (51). Pennsylvania statewide 12th graders reported their four highest levels of risk for *Community Disorganization* (70), *Parental Attitudes Favorable toward Antisocial Behavior* (58), *Low Perceived Risks of Drug Use* (55) and *Peer Rewards for Antisocial Behavior* (54).

Comparisons to 2009 Results

In general, results from the 2011 PAYS show a slight increase in protection and a slight decrease in risk when compared to the 2009 PAYS. (See Tables C26 and C27 for detailed 2009 results.) The most notable increases are in the following protective factors: *Belief in the Moral Order* (4-point increase), *School Opportunities for Prosocial Involvement* (6-point increase) and *School Rewards for Prosocial Involvement* (7-point increase). The most notable decreases are in the following risk factors: *Perceived Availability of Drugs* (4-point decrease), *Lack of Commitment to School* (4-point decrease) and *Rebelliousness* (5-point decrease).

Table 26. Protective Factor Scale Scores, Pennsylvania Statewide 2011

		6 th	7 th	8 th	9 th	10 th	11 th	12 th	Overall
Community Domain	Community Opportunities for Prosocial Involvement	31	--	38	--	40	--	40	37
	Community Rewards for Prosocial Involvement	51	--	52	--	54	--	53	53
Family Domain	Family Attachment	59	--	57	--	57	--	53	56
	Family Opportunities for Prosocial Involvement	54	--	54	--	54	--	52	54
	Family Rewards for Prosocial Involvement	54	--	55	--	55	--	52	54
School Domain	School Opportunities for Prosocial Involvement	62	--	63	--	61	--	59	61
	School Rewards for Prosocial Involvement	63	--	64	--	67	--	64	64
Peer and Individual Domain	Religiosity	40	--	44	--	45	--	43	43
	Belief in the Moral Order	63	--	63	--	62	--	59	62
Average		53	--	54	--	55	--	53	54

Table 27. Risk Factor Scale Scores, Pennsylvania Statewide 2011

		6 th	7 th	8 th	9 th	10 th	11 th	12 th	Overall
Community Domain	Low Neighborhood Attachment	43	--	45	--	45	--	44	44
	Community Disorganization	75	--	64	--	66	--	70	69
	Transitions and Mobility	44	--	47	--	44	--	48	46
	Laws and Norms Favorable to Drug Use	47	--	45	--	49	--	53	49
	Perceived Availability of Drugs	51	--	51	--	48	--	49	49
	Perceived Availability of Handguns	57	--	56	--	51	--	49	53
Family Domain	Poor Family Management	43	--	43	--	44	--	45	44
	Family Conflict	47	--	51	--	50	--	53	50
	Family History of Antisocial Behavior	39	--	43	--	39	--	44	41
	Parental Attitudes Favorable toward ATOD Use	45	--	44	--	47	--	48	46
	Parental Attitudes Favorable toward Antisocial Behavior	55	--	52	--	54	--	58	55
School Domain	Poor Academic Performance	41	--	38	--	41	--	41	40
	Lack of Commitment to School	43	--	43	--	46	--	45	44
Peer and Individual Domain	Rebelliousness	35	--	37	--	40	--	41	38
	Friends' Delinquent Behavior	41	--	40	--	41	--	42	41
	Friends' Use of Drugs	42	--	38	--	38	--	40	39
	Peer Rewards for Antisocial Behavior	42	--	40	--	47	--	54	46
	Favorable Attitudes toward Antisocial Behavior	44	--	42	--	44	--	43	43
	Favorable Attitudes toward ATOD Use	44	--	42	--	45	--	46	44
	Low Perceived Risks of Drug Use	51	--	47	--	53	--	55	52
	Early Initiation of Drug Use	38	--	35	--	34	--	36	36
Sensation Seeking	42	--	42	--	41	--	42	42	
Average		46	--	45	--	46	--	48	46

Protective Factors

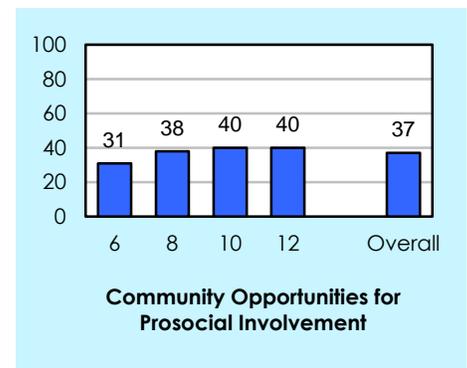
Protective factors are characteristics that are known to decrease the likelihood that a student will engage in problem behaviors. For example, bonding to parents reduces the risk of an adolescent engaging in problem behaviors.

The Social Development Strategy organizes the research on protective factors. Protective factors can buffer young people from risks and promote positive youth development. To develop these healthy positive behaviors, young people must be immersed in environments that consistently communicate healthy beliefs and clear standards for behavior; that foster the development of strong bonds to members of their family, school and community; and that recognize the individual characteristics of each young person.

Community Opportunities for Prosocial Involvement

When young people become involved in their communities by participating in activities and organizations that foster healthy development, they are more likely to form connections with prosocial peers. Community involvement also provides the opportunity to bond with adult role models—such as neighbors, police, clergy and other community leaders—who can give moral guidance and emotional support. This protective factor is measured by survey items such as “Which of the following activities for people your age are available in your community: Sports teams, Scouting, Boys and Girls Clubs, 4-H Clubs, Service Clubs?”

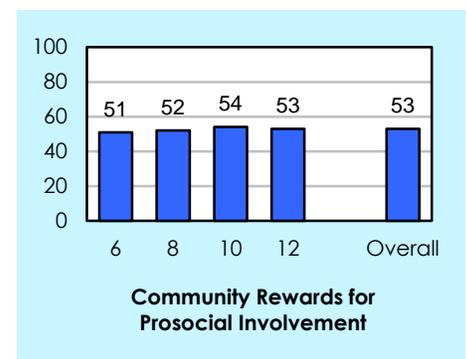
- Overall, Pennsylvania statewide students received a percentile score of 37 on the *Community Opportunities for Prosocial Involvement* scale, 13 points lower than the normative average of 50.
- Across grade levels, percentile scores for *Community Opportunities for Prosocial Involvement* range from a low of 31 among 6th graders to a high of 40 among 10th and 12th graders.



Community Rewards for Prosocial Involvement

Young people experience bonding as feeling valued and being seen as an asset. Students who feel recognized and rewarded by their community are less likely to engage in negative behaviors, because that recognition helps increase a student’s self-esteem and the feeling of bondedness to that community. *Community Rewards for Prosocial Involvement* is measured by such items as “There are people in my neighborhood who are proud of me when I do something well.”

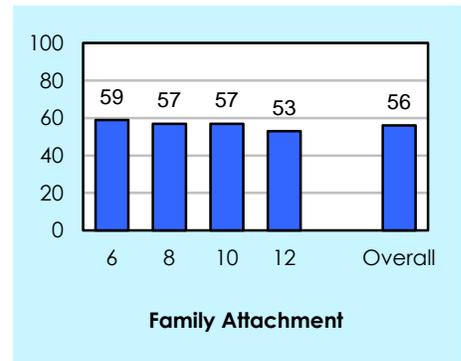
- Overall, Pennsylvania statewide students received a percentile score of 53 on the *Community Rewards for Prosocial Involvement* scale, three points higher than the normative average of 50.
- Across grade levels, percentile scores for *Community Rewards for Prosocial Involvement* range from a low of 51 among 6th graders to a high of 54 among 10th graders.



Family Attachment

One of the most effective ways to buffer children against risk factors is to strengthen their bonds with family members who embody healthy beliefs and clear standards. If children are attached to their parents and want to please them, they will be less likely to threaten that connection by doing things that their parents strongly disapprove of. This protective factor is measured by such items on the survey as “Do you share your thoughts and feelings with your mother?”

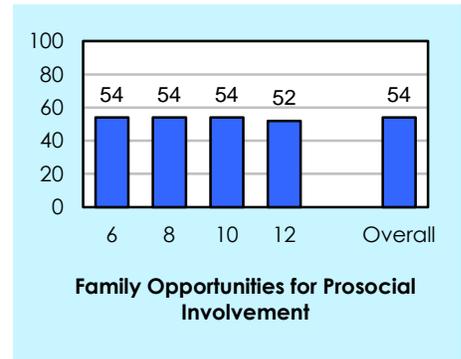
- Overall, Pennsylvania statewide students received a percentile score of 56 on the *Family Attachment* scale, six points higher than the normative average of 50.
- Across grade levels, percentile scores for *Family Attachment* range from a low of 53 among 12th graders to a high of 59 among 6th graders.



Family Opportunities for Prosocial Involvement

When students have the opportunity to make meaningful contributions to their families, they feel closer to their family members and are less likely to get involved in risky behaviors. These opportunities for involvement reinforce family bonds and cause students to more easily adopt the norms projected by their families. For instance, children whose parents have high expectations for their school success and achievement are less likely to drop out of school. This protective factor is surveyed by such items as “My parents ask me what I think before most family decisions affecting me are made.”

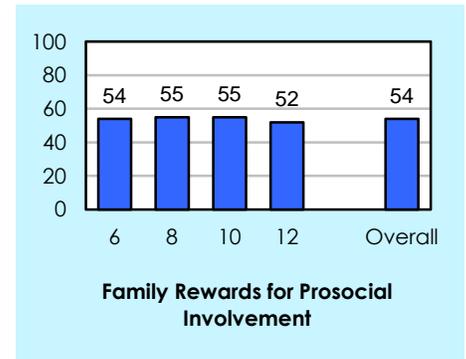
- Overall, Pennsylvania statewide students received a percentile score of 54 on the *Family Opportunities for Prosocial Involvement* scale, four points higher than the normative average of 50.
- Across grade levels, percentile scores for *Family Opportunities for Prosocial Involvement* range from a low of 52 among 12th graders to a high of 54 among 6th, 8th and 10th graders.



Family Rewards for Prosocial Involvement

When family members reward their children for positive participation in activities, it further strengthens the bonds the children feel to their families, and helps promote clear standards for behavior. This protective factor is measured by such survey items as “How often do your parents tell you they’re proud of you for something you’ve done?”

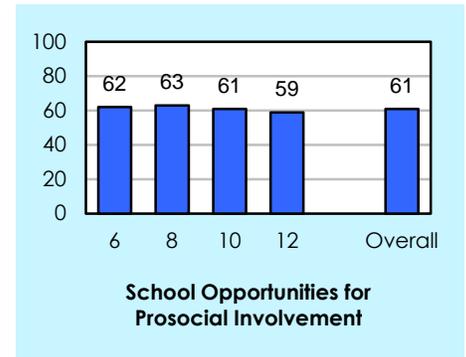
- Overall, Pennsylvania statewide students received a percentile score of 54 on the *Family Rewards for Prosocial Involvement* scale, four points higher than the normative average of 50.
- Across grade levels, percentile scores for *Family Rewards for Prosocial Involvement* range from a low of 52 among 12th graders to a high of 55 among 8th and 10th graders.



School Opportunities for Prosocial Involvement

Giving students opportunities to participate in important activities at school helps to create a feeling of personal investment in their school. This results in greater bonding and adoption of the school’s standards of behavior, reducing the likelihood that they will become involved in problem behaviors. This protective factor is measured by survey items such as “In my school, students have lots of chances to help decide things like class activities and rules.”

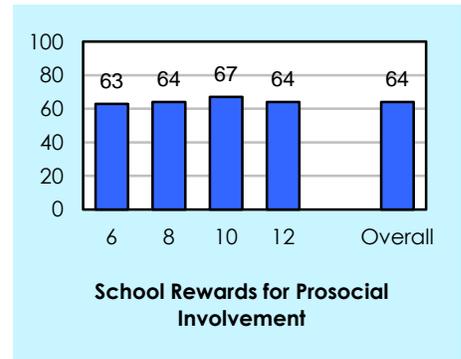
- Overall, Pennsylvania statewide students received a percentile score of 61 on the *School Opportunities for Prosocial Involvement* scale, 11 points higher than the normative average of 50.
- Across grade levels, percentile scores for *School Opportunities for Prosocial Involvement* range from a low of 59 among 12th graders to a high of 63 among 8th graders.



School Rewards for Prosocial Involvement

Making students feel appreciated and rewarded for their involvement at school further strengthens school bonding, and helps to reduce the likelihood of their involvement in drug use and other problem behaviors. This protective factor is measured by such statements as “The school lets my parents know when I have done something well.”

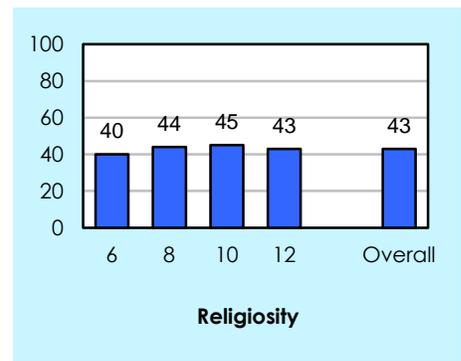
- Overall, Pennsylvania statewide students received a percentile score of 64 on the *School Rewards for Prosocial Involvement* scale, 14 points higher than the normative average of 50.
- Across grade levels, percentile scores for *School Rewards for Prosocial Involvement* range from a low of 63 among 6th graders to a high of 67 among 10th graders.



Religiosity

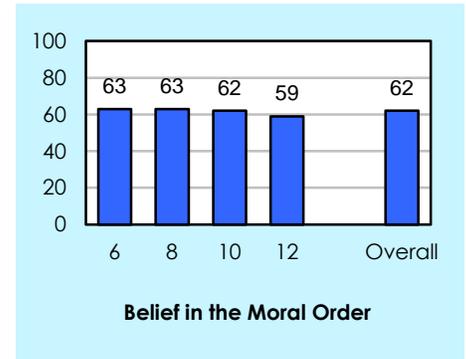
Religious institutions can help students develop firm prosocial beliefs. Students who have preconceived ideas about certain activities are less vulnerable to becoming involved with antisocial behaviors because they have already adopted a social norm against those activities. *Religiosity* is measured by the question “How often do you attend religious services or activities?”

- Overall, Pennsylvania statewide students received a percentile score of 43 on the *Religiosity* scale, seven points lower than the normative average of 50.
- Across grade levels, percentile scores for *Religiosity* range from a low of 40 among 6th graders to a high of 45 among 10th graders.



Belief in the Moral Order

When people feel bonded to society, they are more motivated to follow society's standards and expectations. Therefore, it is important for families, schools and communities to have clearly stated policies on ATOD use. Young people who have developed a positive belief system, and a clear sense of right and wrong, are less likely to become involved in problem behaviors. For example, young people who believe that drug use is wrong might be protected against peer influences to use drugs. *Belief in the Moral Order* is measured by items on the survey such as "It is all right to beat up people if they start the fight."



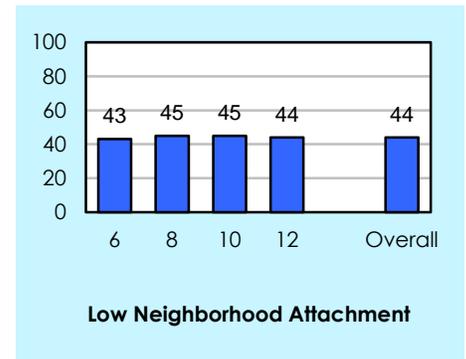
- Overall, Pennsylvania statewide students received a percentile score of 62 on the *Belief in the Moral Order* scale, 12 points higher than the normative average of 50.
- Across grade levels, percentile scores for *Belief in the Moral Order* range from a low of 59 among 12th graders to a high of 63 among 6th and 8th graders.

Risk Factors

Risk factors are characteristics in the community, family, school and individual's environments that are known to increase the likelihood that a student will engage in one or more problem behaviors. For example, a risk factor in the community environment is the existence of laws and norms favorable to drug use, which can affect the likelihood that a young person will try alcohol, tobacco or other drugs. In those communities where there is acceptance or tolerance of drug use, students are more likely to engage in alcohol, tobacco and other drug use.

Low Neighborhood Attachment

Higher rates of drug problems, delinquency and violence occur in communities or neighborhoods where people feel little attachment to the community. Perhaps the most significant issue affecting community attachment is whether residents feel they can make a difference in their own lives. If the key players in the neighborhood—such as merchants, teachers, clergy, police and social services personnel—live outside the neighborhood, residents' sense of commitment will be lower. This low sense of commitment may be reflected in lower rates of voter participation and parental involvement in schools.



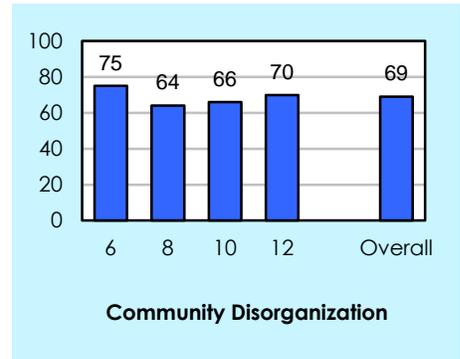
The *Low Neighborhood Attachment* scale on the survey uses three items to measure the level of attachment that students feel to their neighborhoods. This risk factor is measured by items such as "I'd like to get out of my neighborhood" and "If I had to move, I would miss the neighborhood I now live in."

- Overall, Pennsylvania statewide students received a percentile score of 44 on the *Low Neighborhood Attachment* scale, six points lower than the normative average of 50.
- Across grade levels, percentile scores for *Low Neighborhood Attachment* range from a low of 43 among 6th graders to a high of 45 among 8th and 10th graders.

Community Disorganization

The *Community Disorganization* scale pertains to students' feelings and perceptions regarding their communities and other external attributes. It is based on students' responses to five items, four of which indicate a neighborhood in disarray (e.g., the existence of graffiti, abandoned buildings, fighting and drug selling). The fifth item is "I feel safe in my neighborhood."

- Overall, Pennsylvania statewide students received a percentile score of 69 on the *Community Disorganization* scale, 19 points higher than the normative average of 50.
- Across grade levels, percentile scores for *Community Disorganization* range from a low of 64 among 8th graders to a high of 75 among 6th graders.

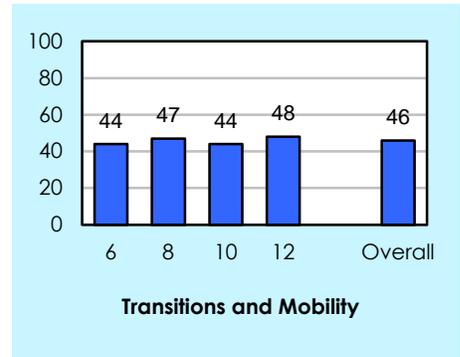


Transitions and Mobility

Even normal school transitions are associated with an increase in problem behaviors. When children move from elementary school to middle school or from middle school to high school, significant increases in the rates of drug use, school dropout and antisocial behavior may occur. This is thought to occur because by making a transition to a new environment, students no longer have the bonds they had in their old environment. Consequently, students may be less likely to become attached to their schools and neighborhoods, and do not develop the bonds that protect them from involvement in problem behaviors.

The *Transitions and Mobility* scale on the survey measures how often the student has changed homes or schools in the past year and since kindergarten. This risk factor is measured with items such as "How many times have you changed schools (including changing from elementary to middle and middle to high school) since kindergarten?" and "How many times have you changed homes since kindergarten?"

- Overall, Pennsylvania statewide students received a percentile score of 46 on the *Transitions and Mobility* scale, four points lower than the normative average of 50.
- Across grade levels, percentile scores for *Transitions and Mobility* range from a low of 44 among 6th and 10th graders to a high of 48 among 12th graders.



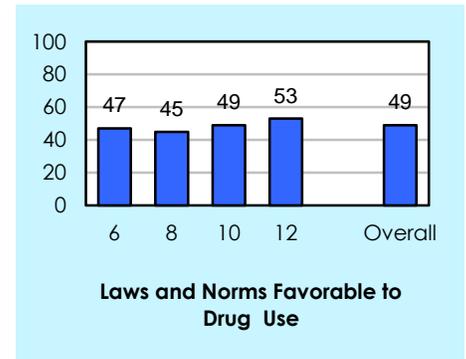
Laws and Norms Favorable to Drug Use

Students' perceptions of the rules and regulations concerning alcohol, tobacco and other drug use that exist in their neighborhoods are also associated with problem behaviors in adolescence. Community norms—the attitudes and policies a community holds in relation to drug use and other antisocial behaviors—are communicated in a variety of ways: through laws and written policies, through informal social practices and through the expectations parents and other members of the community have of young people. When laws and community standards are favorable toward drug use, violence and/or other crime, or even when they are just unclear, young people are more likely to engage in negative behaviors (Bracht and Kingsbury, 1990).

An example of conflicting messages about drug use can be found in the acceptance of alcohol use as a social activity within the community. The beer gardens popular at street fairs and community festivals are in contrast to the “Just Say No” messages that schools and parents may be promoting. These conflicting and ambiguous messages are problematic in that they do not have the positive impact on preventing alcohol and other drug use that a clear, consistent, community-level, anti-drug message can have.

This risk factor is measured by six items on the survey, such as “How wrong would most adults in your neighborhood think it was for kids your age to drink alcohol?” and “If a kid smoked marijuana in your neighborhood, would he or she be caught by the police?”

- Overall, Pennsylvania statewide students received a percentile score of 49 on the *Laws and Norms Favorable to Drug Use* scale, one point lower than the normative average of 50.
- Across grade levels, percentile scores for *Laws and Norms Favorable to Drug Use* range from a low of 45 among 8th graders to a high of 53 among 12th graders.



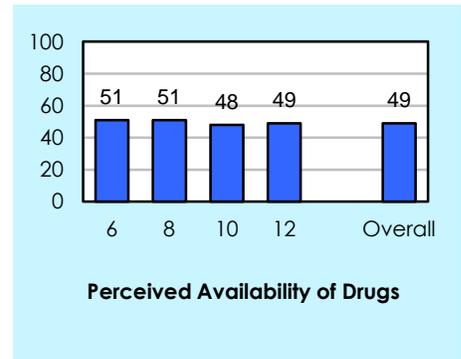
Perceived Availability of Drugs

The perceived availability of drugs, alcohol and handguns in a community is directly related to the prevalence of delinquent behaviors. In schools where children believe that drugs are more available, a higher rate of drug use occurs.

The *Perceived Availability of Drugs* scale on the survey is designed to assess students' feelings about how easily they can get alcohol, tobacco and other drugs. Elevation of this risk factor scale may indicate the need to make alcohol, tobacco and other drugs more difficult for students to acquire. For instance, a number of policy changes have been shown to reduce the availability of alcohol and cigarettes. Minimum-age requirements, taxation and responsible beverage service have all been shown to affect the perception of availability of alcohol.

This risk factor is measured by four items on the survey, such as "If you wanted to get some marijuana, how easy would it be for you to get some?"

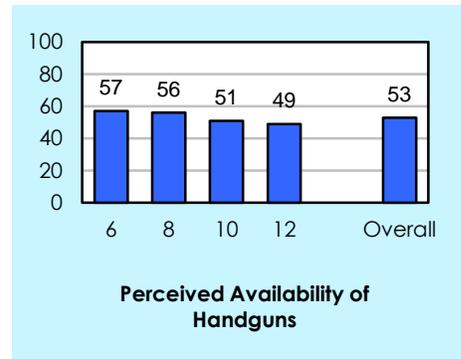
- Overall, Pennsylvania statewide students received a percentile score of 49 on the *Perceived Availability of Drugs* scale, one point lower than the normative average of 50.
- Across grade levels, percentile scores for *Perceived Availability of Drugs* range from a low of 48 among 10th graders to a high of 51 among 6th and 8th graders.



Perceived Availability of Handguns

If students believe that it would be difficult to get a handgun, they are less likely to become involved with the unauthorized and unsupervised use of firearms. *Perceived Availability of Handguns* is measured by the question "If you wanted to get a handgun, how easy would it be for you to get one?"

- Overall, Pennsylvania statewide students received a percentile score of 53 on the *Perceived Availability of Handguns* scale, three points higher than the normative average of 50.
- Across grade levels, percentile scores for *Perceived Availability of Handguns* range from a low of 49 among 12th graders to a high of 57 among 6th graders.

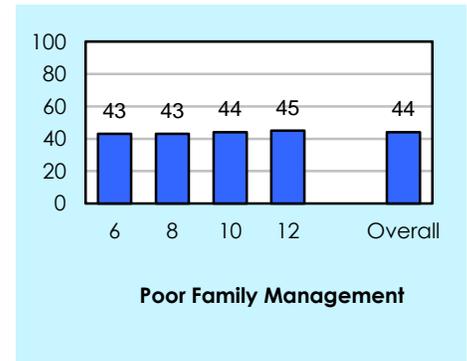


Poor Family Management

The risk factor scale *Poor Family Management* measures two components of family life: “poor family supervision,” which is defined as parents failing to supervise and monitor their children, and “poor family discipline,” which is defined as parents failing to communicate clear expectations for behavior and giving excessively severe, harsh or inconsistent punishment. Children who experience poor family supervision and poor family discipline are at higher risk of developing problems with drug use, delinquency, violence and school dropout.

Sample items used to survey *Poor Family Management* include “Would your parents know if you did not come home on time?” and “My family has clear rules about alcohol and drug use.”

- Overall, Pennsylvania statewide students received a percentile score of 44 on the *Poor Family Management* scale, six points lower than the normative average of 50.
- Across grade levels, percentile scores for *Poor Family Management* range from a low of 43 among 6th and 8th graders to a high of 45 among 12th graders.

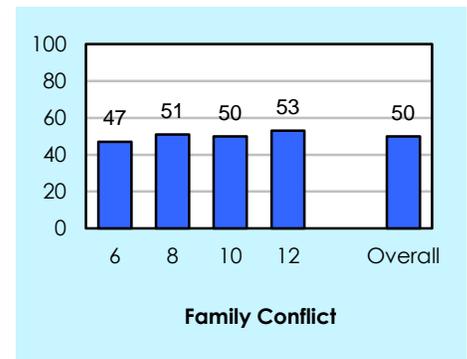


Family Conflict

Bonding between family members, especially between children and their parents or guardians, is a key component in the development of positive social norms. High levels of family conflict interfere with the development of these bonds, and increase the likelihood that young people will engage in illegal drug use and other forms of delinquent behavior.

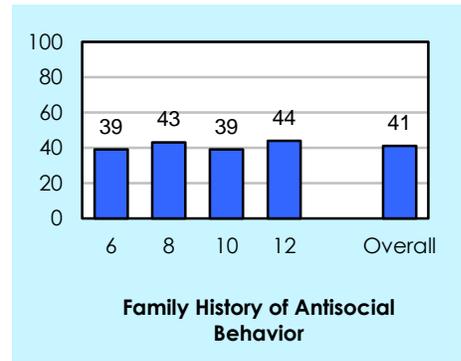
Family Conflict is measured by four items on the survey, such as “People in my family often insult or yell at each other.”

- Overall, Pennsylvania statewide students received a percentile score of 50 on the *Family Conflict* scale, equaling the normative average of 50.
- Across grade levels, percentile scores for *Family Conflict* range from a low of 47 among 6th graders to a high of 53 among 12th graders.



Family History of Antisocial Behavior

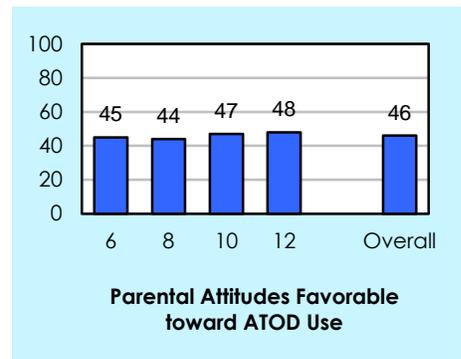
If children are raised in a family where a history of addiction to alcohol or other drugs exists, the risk of their having alcohol or other drug problems themselves increases. If children are born or raised in a family where criminal activity or behavior is normal, their risk for delinquency increases. Similarly, children who are born to a teenage mother are more likely to become teen parents, and children of dropouts are more likely to drop out of school themselves. Children whose parents engage in violent behavior inside or outside the home are at greater risk for exhibiting violent behavior themselves. Students' perceptions of their families' behavior and standards regarding drug use and other antisocial behaviors are measured by the survey. *Family History of Antisocial Behavior* is assessed by items such as "Has anyone in your family ever had a severe alcohol or drug problem?"



- Overall, Pennsylvania statewide students received a percentile score of 41 on the *Family History of Antisocial Behavior* scale, nine points lower than the normative average of 50.
- Across grade levels, percentile scores for *Family History of Antisocial Behavior* range from a low of 39 among 6th and 10th graders to a high of 44 among 12th graders.

Parental Attitudes Favorable toward ATOD Use

Students' perceptions of their parents' opinions about alcohol, tobacco and other drug use are an important risk factor. In families where parents use illegal drugs, are heavy users of alcohol or are tolerant of use by their children, children are more likely to become drug users in adolescence. *Parental Attitudes Favorable toward ATOD Use* is measured by survey items such as "How wrong do your parents feel it would be for you to smoke marijuana?"

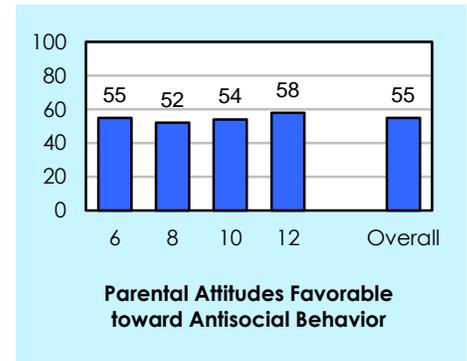


- Overall, Pennsylvania statewide students received a percentile score of 46 on the *Parental Attitudes Favorable toward ATOD Use* scale, four points lower than the normative average of 50.
- Across grade levels, percentile scores for *Parental Attitudes Favorable toward ATOD Use* range from a low of 44 among 8th graders to a high of 48 among 12th graders.

Parental Attitudes Favorable toward Antisocial Behavior

Students' perceptions of their parents' opinions about antisocial behavior are also an important risk factor. Parental attitudes and behavior regarding crime and violence influence the attitudes and behavior of children. If parents approve of or excuse their children for breaking the law, then the children are more likely to develop problems with juvenile delinquency. *Parental Attitudes Favorable toward Antisocial Behavior* is measured by survey items such as "How wrong do your parents feel it would be for you to pick a fight with someone?"

- Overall, Pennsylvania statewide students received a percentile score of 55 on the *Parental Attitudes Favorable toward Antisocial Behavior* scale, five points higher than the normative average of 50.
- Across grade levels, percentile scores for *Parental Attitudes Favorable toward Antisocial Behavior* range from a low of 52 among 8th graders to a high of 58 among 12th graders.

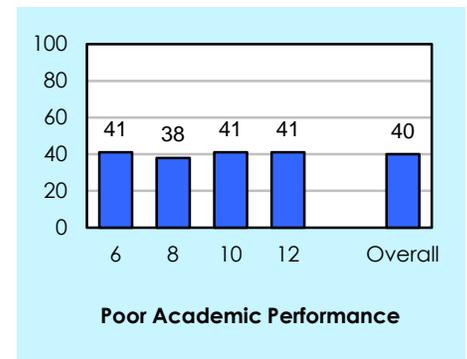


Poor Academic Performance

Beginning in the late elementary grades, poor academic performance increases the risk of drug use, delinquency, violence and school dropout. Children fail for many reasons, but it appears that the experience of failure increases the risk of these problem behaviors.

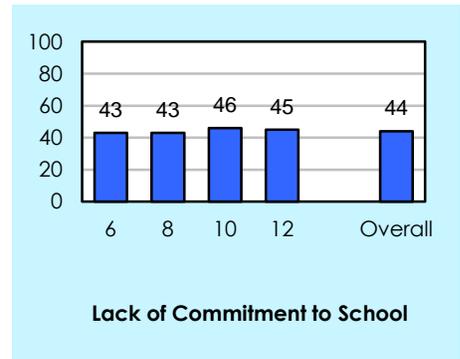
Poor Academic Performance—students' feelings about their performance at school—is measured with two questions on the survey: "Putting them all together, what were your grades like last year?" and "Are your school grades better than the grades of most students in your class?" Elevated findings for this risk factor scale suggest that students believe that they have lower grades than would be expected, and they perceive they have below-average grades, compared to their peers.

- Overall, Pennsylvania statewide students received a percentile score of 40 on the *Poor Academic Performance* scale, 10 points lower than the normative average of 50.
- Across grade levels, percentile scores for *Poor Academic Performance* range from a low of 38 among 8th graders to a high of 41 among 6th, 10th and 12th graders.



Lack of Commitment to School

Nine items on the survey assess *Lack of Commitment to School*—a student’s general feelings about his or her schooling. Survey items include “How important do you think the things you are learning in school are going to be for your later life?” and “Now, thinking back over the past year in school, how often did you enjoy being in school?” Elevated findings for this risk factor scale suggest that students feel less attached to, or connected with, their classes and school environments. Lack of commitment to school means the child has ceased to see the role of student as a positive one. Young people who have lost this commitment to school are at higher risk for a variety of problem behaviors.



- Overall, Pennsylvania statewide students received a percentile score of 44 on the *Lack of Commitment to School* scale, six points lower than the normative average of 50.
- Across grade levels, percentile scores for *Lack of Commitment to School* range from a low of 43 among 6th and 8th graders to a high of 46 among 10th graders.

Rebelliousness

The survey also assesses the number of young people who feel they are not part of society, who feel they are not bound by rules, and who don’t believe in trying to be successful or responsible. These students are at higher risk of drug use, delinquency and school dropout. *Rebelliousness* is measured by three items, such as “I ignore the rules that get in my way.”

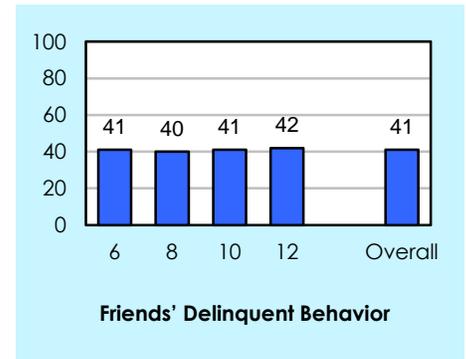


- Overall, Pennsylvania statewide students received a percentile score of 38 on the *Rebelliousness* scale, 12 points lower than the normative average of 50.
- Across grade levels, percentile scores for *Rebelliousness* range from a low of 35 among 6th graders to a high of 41 among 12th graders.

Friends' Delinquent Behavior

Young people who associate with peers who engage in delinquent behavior are much more likely to engage in delinquent behavior themselves. This is one of the most consistent predictors identified by research. Even when young people come from well-managed families and do not experience other risk factors, spending time with peers who engage in delinquent behavior greatly increases the risk of their becoming involved in delinquent behavior. *Friends' Delinquent Behavior* is measured by survey items such as “In the past year, how many of your four best friends have been suspended from school?”

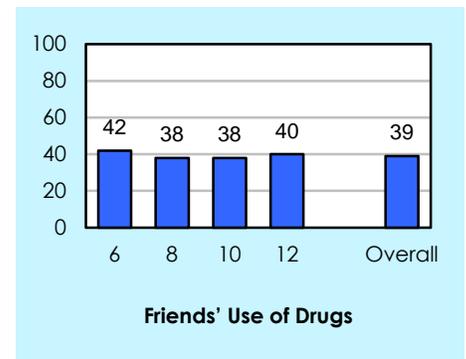
- Overall, Pennsylvania statewide students received a percentile score of 41 on the *Friends' Delinquent Behavior* scale, nine points lower than the normative average of 50.
- Across grade levels, percentile scores for *Friends' Delinquent Behavior* range from a low of 40 among 8th graders to a high of 42 among 12th graders.



Friends' Use of Drugs

Young people who associate with peers who engage in substance use are much more likely to engage in it themselves. This is one of the most consistent predictors identified by research. Even when young people come from well-managed families and do not experience other risk factors, spending time with peers who use drugs greatly increases a youth's risk of becoming involved in such behavior. *Friends' Use of Drugs* is measured by survey items such as “In the past year, how many of your best friends have used marijuana?”

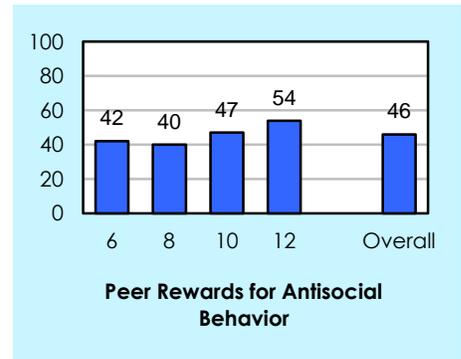
- Overall, Pennsylvania statewide students received a percentile score of 39 on the *Friends' Use of Drugs* scale, 11 points lower than the normative average of 50.
- Across grade levels, percentile scores for *Friends' Use of Drugs* range from a low of 38 among 8th and 10th graders to a high of 42 among 6th graders.



Peer Rewards for Antisocial Behavior

Students' perceptions of their peer groups' social norms are also an important predictor of involvement in problem behavior. Any indication that students feel that they get positive feedback from their peers if they use alcohol, tobacco or other drugs, or if they get involved in delinquent behaviors, is important to note and understand. When young people believe that their peer groups are involved in antisocial behaviors, they are more likely to become involved in antisocial behaviors themselves. This risk factor is measured by items such as "What are the chances you would be seen as cool if you smoked marijuana?"

- Overall, Pennsylvania statewide students received a percentile score of 46 on the *Peer Rewards for Antisocial Behavior* scale, four points lower than the normative average of 50.
- Across grade levels, percentile scores for *Peer Rewards for Antisocial Behavior* range from a low of 40 among 8th graders to a high of 54 among 12th graders.

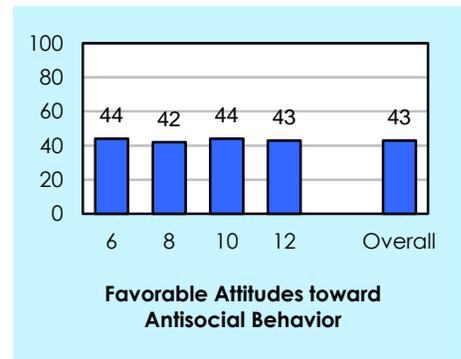


Favorable Attitudes toward Antisocial Behavior

During the elementary school years, children usually express anticrime and prosocial attitudes and have difficulty imagining why people commit crimes or drop out of school. However, in middle school, as others they know participate in such activities, their attitudes often shift toward greater acceptance of these behaviors. This acceptance places them at higher risk for these antisocial behaviors.

These attitudes are measured on the survey by items like "How wrong do you think it is for someone your age to pick a fight with someone?"

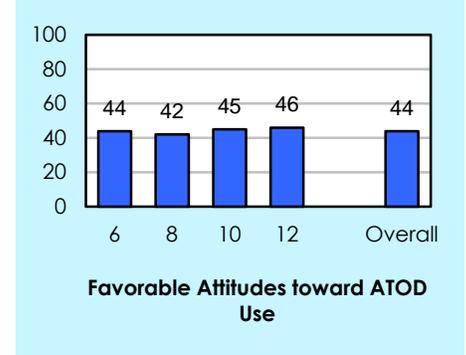
- Overall, Pennsylvania statewide students received a percentile score of 43 on the *Favorable Attitudes toward Antisocial Behavior* scale, seven points lower than the normative average of 50.
- Across grade levels, percentile scores for *Favorable Attitudes toward Antisocial Behavior* range from a low of 42 among 8th graders to a high of 44 among 6th and 10th graders.



Favorable Attitudes toward ATOD Use

During the elementary school years, children usually express anti-drug attitudes and have difficulty imagining why people use drugs. However, in middle school, as others they know participate in such activities, their attitudes often shift toward greater acceptance of these behaviors. This acceptance places them at higher risk. This risk factor scale, *Favorable Attitudes toward ATOD Use*, assesses risk by asking young people how wrong they think it is for someone their age to use drugs. Survey items used to measure this risk factor include “How wrong do you think it is for someone your age to drink beer, wine or hard liquor (for example, vodka, whiskey or gin) regularly?” An elevated score for this risk factor scale can indicate that students see little wrong with using drugs.

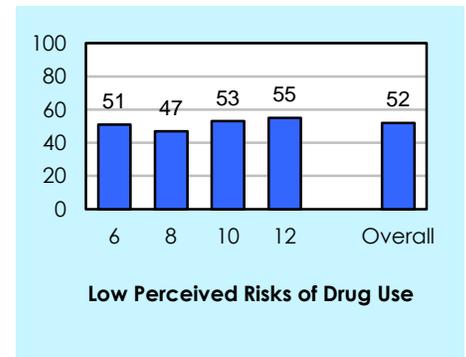
- Overall, Pennsylvania statewide students received a percentile score of 44 on the *Favorable Attitudes toward ATOD Use* scale, six points lower than the normative average of 50.
- Across grade levels, percentile scores for *Favorable Attitudes toward ATOD Use* range from a low of 42 among 8th graders to a high of 46 among 12th graders.



Low Perceived Risks of Drug Use

The perception of harm from drug use is related to both experimentation and regular use. The less harm that an adolescent perceives as the result of drug use, the more likely it is that he or she will use drugs. *Low Perceived Risks of Drug Use* is measured with four survey items, such as “How much do you think people risk harming themselves if they try marijuana once or twice?” An elevated score can indicate that students are not aware of, or do not comprehend, the possible harm resulting from drug use.

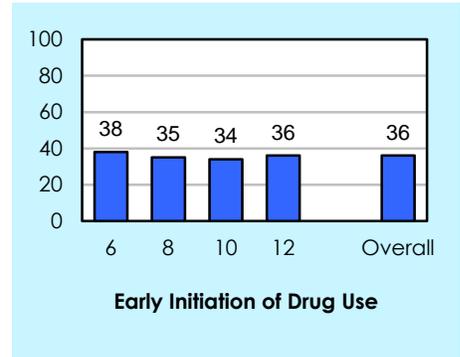
- Overall, Pennsylvania statewide students received a percentile score of 52 on the *Low Perceived Risks of Drug Use* scale, two points higher than the normative average of 50.
- Across grade levels, percentile scores for *Low Perceived Risks of Drug Use* range from a low of 47 among 8th graders to a high of 55 among 12th graders.



Early Initiation of Drug Use

The initiation of alcohol, tobacco or other drug use at an early age is linked to a number of negative outcomes. The earlier that experimentation with drugs begins, the more likely it is that experimentation will become consistent, regular use. Early initiation may lead to the use of a greater range of drugs, as well as other problem behaviors. This scale is measured by survey items that ask when drug use began.

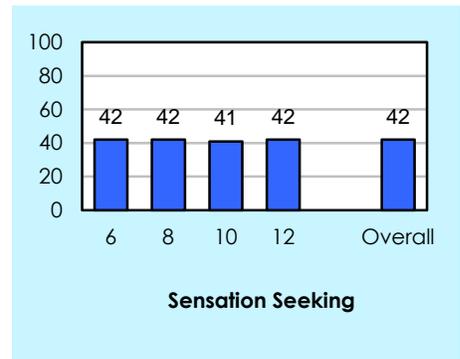
- Overall, Pennsylvania statewide students received a percentile score of 36 on the *Early Initiation of Drug Use* scale, 14 points lower than the normative average of 50.
- Across grade levels, percentile scores for *Early Initiation of Drug Use* range from a low of 34 among 10th graders to a high of 38 among 6th graders.



Sensation Seeking

Constitutional factors are individual characteristics that may have a biological or physiological basis. Constitutional factors that increase risk are often seen as sensation seeking, low harm avoidance and lack of impulse control. They appear to increase the risk of young people using drugs, engaging in delinquent behavior and/or committing violent acts. *Sensation Seeking* is measured by survey items such as "How many times have you done crazy things even if they are a little dangerous?"

- Overall, Pennsylvania statewide students received a percentile score of 42 on the *Sensation Seeking* scale, eight points lower than the normative average of 50.
- Across grade levels, percentile scores for *Sensation Seeking* range from a low of 41 among 10th graders to a high of 42 among 6th, 8th and 12th graders.



Appendix A

Risk and Protective Factor Scale Construction Summary

Community Domain Scales

RISK FACTORS

COMMUNITY DOMAIN	Low Neighborhood Attachment	
	Q109	I'd like to get out of my neighborhood.
	Q102	I like my neighborhood.
	Q100	If I had to move, I would miss the neighborhood I now live in.
	Community Disorganization	
	Q103a	How much do each of the following statements describe your neighborhood: crime and/or drug selling.
	Q103b	How much do each of the following statements describe your neighborhood: fights.
	Q103c	How much do each of the following statements describe your neighborhood: lots of empty or abandoned buildings.
	Q103d	How much do each of the following statements describe your neighborhood: lots of graffiti.
	Q107	I feel safe in my neighborhood.
	Transitions and Mobility	
	Q110	Have you changed homes in the past year?
	Q104	How many times have you changed homes since kindergarten?
	Q106	Have you changed schools (including changing from elementary to middle and middle to high school) in the past year?
Q108	How many times have you changed schools since kindergarten?	

RISK FACTORS, CONTINUED

COMMUNITY DOMAIN	Laws and Norms Favorable to Drug Use	
	Q33a	How wrong would most adults (over 21) in your neighborhood think it was for kids your age: to use marijuana?
	Q33b	How wrong would most adults (over 21) in your neighborhood think it was for kids your age: to drink alcohol?
	Q33c	How wrong would most adults (over 21) in your neighborhood think it was for kids your age: to smoke cigarettes?
	Q29	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?
	Q27	If a kid smoked marijuana in your neighborhood, would he or she be caught by the police?
	Perceived Availability of Drugs	
	Q25	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?
	Q26	If you wanted to get some cigarettes, how easy would it be for you to get some?
	Q32	If you wanted to get some marijuana, how easy would it be for you to get some?
	Q28	If you wanted to get a drug like cocaine, LSD, or amphetamines, how easy would it be for you to get some?
	Perceived Availability of Handguns	
	Q30	If you wanted to get a handgun, how easy would it be for you to get one?

PROTECTIVE FACTORS

COMMUNITY DOMAIN	Community Rewards for Prosocial Involvement	
	Q101	My neighbors notice when I am doing a good job and let me know.
	Q111	There are people in my neighborhood who encourage me to do my best.
	Q105	There are people in my neighborhood who are proud of me when I do something well.
	Community Opportunities for Prosocial Involvement	
	Q2912	Which of the following activities for people your age are available in your community: sports teams?
	Q2913	Which of the following activities for people your age are available in your community: scouting?
	Q2914	Which of the following activities for people your age are available in your community: boys and girls clubs?
	Q2915	Which of the following activities for people your age are available in your community: 4-H clubs?
	Q2916	Which of the following activities for people your age are available in your community: service clubs?
Q555	There are lots of adults in my neighborhood I could talk to about something important.	

Family Domain Scales

RISK FACTORS

FAMILY DOMAIN	Poor Family Management	
	Q78	My parents ask if I've gotten my homework done.
	Q80	Would your parents know if you did not come home on time?
	Q79	When I am not at home, one of my parents knows where I am and whom I am with.
	Q76	The rules in my family are clear.
	Q83	My family has clear rules about alcohol and drug use.
	Q82	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?
	Q85	If you skipped school, would you be caught by your parents?
	Q84	If you carried a handgun without your parents' permission, would you be caught by your parents?
	Family Conflict	
	Q2909	People in my family often insult or yell at each other.
	Q2911	People in my family have serious arguments.
	Q2910	We argue about the same things in my family over and over.
	Parental Attitudes Favorable toward Antisocial Behavior	
	Q74d	How wrong do your parents feel it would be for you to: steal anything worth more than \$5?
	Q74e	How wrong do your parents feel it would be for you to: draw graffiti, or write things or draw pictures on buildings or other property (without the owner's permission)?
	Q74f	How wrong do your parents feel it would be for you to: pick a fight with someone?

RISK FACTORS, CONTINUED

FAMILY DOMAIN	Parental Attitudes Favorable toward ATOD Use	
	Q74a	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?
	Q74b	How wrong do your parents feel it would be for you to: smoke cigarettes?
	Q74c	How wrong do your parents feel it would be for you to: smoke marijuana?
	Family History of Antisocial Behavior	
	Q77	Has anyone in your family ever had a severe alcohol or drug problem?
	Q75a	Have any of your brothers or sisters ever: drunk beer, wine or hard liquor (for example, vodka, whiskey or gin)?
	Q75b	Have any of your brothers or sisters ever: smoked marijuana?
	Q75c	Have any of your brothers or sisters ever: smoked cigarettes?
	Q75d	Have any of your brothers or sisters ever: taken a handgun to school?
	Q75e	Have any of your brothers or sisters ever: been suspended or expelled from school?
	Q34a	About how many adults (over 21) have you known personally who in the past year have: used marijuana, crack, cocaine, or other drugs?
	Q34b	About how many adults (over 21) have you known personally who in the past year have: sold or dealt drugs?
	Q34c	About how many adults (over 21) have you known personally who in the past year have: done other things that could get them in trouble with the police, like stealing, selling stolen goods, mugging or assaulting others, etc?
Q34d	About how many adults (over 21) have you known personally who in the past year have: gotten drunk or high?	

PROTECTIVE FACTORS

FAMILY DOMAIN	Family Attachment	
	Q87	Do you feel very close to your mother?
	Q88	Do you share your thoughts and feelings with your mother?
	Q97	Do you feel very close to your father?
	Q92	Do you share your thoughts and feelings with your father?
	Family Opportunities for Prosocial Involvement	
	Q99	My parents give me lots of chances to do fun things with them.
	Q89	My parents ask me what I think before most family decisions affecting me are made.
	Q96	If I had a personal problem, I could ask my mom or dad for help.
	Family Rewards for Prosocial Involvement	
	Q86	My parents notice when I am doing a good job and let me know about it.
	Q91	How often do your parents tell you they're proud of you for something you've done?
	Q93	Do you enjoy spending time with your mother?
Q94	Do you enjoy spending time with your father?	

School Domain Scales

RISK FACTORS

SCHOOL DOMAIN	Poor Academic Performance	
	Q13	Putting them all together, what were your grades like last year?
	Q23	Are your school grades better than the grades of most students in your class?
	Lack of Commitment to School	
	Q3681	How often do you feel that the schoolwork you are assigned is meaningful and important?
	Q3682	How interesting are most of your courses to you?
	Q3683	How important do you think the things you are learning in school are going to be for your later life?
	Q3684	Now, thinking back over the past year in school, how often did you: Enjoy being in school?
	Q3685	Now, thinking back over the past year in school, how often did you: Hate being in school?
	Q3686	Now, thinking back over the past year in school, how often did you: Try to do your best work in school?
Q738	During the LAST FOUR WEEKS, how many whole days have you missed because you skipped or “cut”?	

PROTECTIVE FACTORS

SCHOOL DOMAIN	School Opportunities for Prosocial Involvement	
	Q14	In my school, students have lots of chances to help decide things like class activities and rules.
	Q17	There are lots of chances for students in my school to talk with a teacher one-on-one.
	Q2891	Teachers ask me to work on special classroom projects.
	Q2057	There are lots of chances for students in my school to get involved in sports, clubs, and other school activities outside of class.
	Q3668	I have lots of chances to be part of class discussions or activities.
	School Rewards for Prosocial Involvement	
	Q15	My teacher(s) notices when I am doing a good job and lets me know about it.
	Q21	The school lets my parents know when I have done something well.
	Q18	I feel safe at my school.
Q731	My teachers praise me when I work hard in school.	

Peer and Individual Domain Scales

RISK FACTORS

PEER AND INDIVIDUAL DOMAIN	Low Perceived Risks of Drug Use	
	Q3687	How much do you think people risk harming themselves (physically or in other ways) if they: smoke one or more packs of cigarettes per day?
	Q3679	How much do you think people risk harming themselves (physically or in other ways) if they: try marijuana once or twice?
	Q3688	How much do you think people risk harming themselves (physically or in other ways) if they: smoke marijuana regularly?
	Q3680	How much do you think people risk harming themselves (physically or in other ways) if they: take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day?
	Early Initiation of Drug Use	
	Q60a	How old were you when you first: smoked marijuana?
	Q60b	How old were you when you first: smoked a cigarette, even just a puff?
	Q60c	How old were you when you first: had more than a sip or two of beer, wine or hard liquor (for example, vodka, whiskey, or gin)?
	Q60d	How old were you when you first: began drinking alcoholic beverages regularly, that is, at least once or twice a month?
	Sensation Seeking	
	Q57a	How many times have you done the following things? Done what feels good no matter what.
	Q57b	How many times have you done the following things? Done something dangerous because someone dared you to do it.
Q57c	How many times have you done the following things? Done crazy things even if they are a little dangerous.	

RISK FACTORS, CONTINUED

PEER AND INDIVIDUAL DOMAIN	Rebelliousness	
	Q55	I do the opposite of what people tell me, just to get them mad.
	Q62	I ignore rules that get in my way.
	Q73	I like to see how much I can get away with.
	Friends' Delinquent Behavior	
	Q65a	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 been suspended from school?
	Q65b	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 carried a handgun?
	Q65c	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 sold illegal drugs?
	Q65d	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 stolen or tried to steal a motor vehicle such as a car or motorcycle?
	Q65e	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 been arrested?
Q65f	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 dropped out of school?	

RISK FACTORS, CONTINUED

PEER AND INDIVIDUAL DOMAIN	Friends' Use of Drugs	
	Q58a	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 smoked cigarettes?
	Q58b	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 tried beer, wine or hard liquor (for example, vodka, whiskey or gin) when their parents didn't know about it?
	Q58c	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 used marijuana?
	Q58d	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 used LSD, cocaine, amphetamines, or other illegal drugs?
	Peer Rewards for Antisocial Behavior	
	Q59a	What are the chances you would be seen as cool if you smoked cigarettes?
	Q59b	What are the chances you would be seen as cool if you began drinking alcoholic beverages regularly, that is, at least once or twice a month?
	Q59c	What are the chances you would be seen as cool if you smoked marijuana?
	Q59d	What are the chances you would be seen as cool if you carried a handgun?

RISK FACTORS, CONTINUED

PEER AND INDIVIDUAL DOMAIN	Favorable Attitudes toward Antisocial Behavior	
	Q61a	How wrong do you think it is for someone your age to take a handgun to school?
	Q61b	How wrong do you think it is for someone your age to steal anything worth more than \$5?
	Q61c	How wrong do you think it is for someone your age to pick a fight with someone?
	Q61d	How wrong do you think it is for someone your age to attack someone with the idea of seriously hurting him or her?
	Q61e	How wrong do you think it is for someone your age to stay away from school all day when their parents think they are at school?
	Favorable Attitudes toward ATOD Use	
	Q67a	How wrong do you think it is for someone your age to drink beer, wine or hard liquor (for example, vodka, whiskey or gin) regularly?
	Q67b	How wrong do you think it is for someone your age to smoke cigarettes?
	Q67c	How wrong do you think it is for someone your age to smoke marijuana?
Q67d	How wrong do you think it is for someone your age to use LSD, cocaine, amphetamines or another illegal drug?	

PROTECTIVE FACTORS

PEER AND INDIVIDUAL DOMAIN	Religiosity	
	Q54	How often do you attend religious services or activities?
	Belief in the Moral Order	
	Q56	I think it is okay to take something without asking, if you can get away with it.
	Q72	I think sometimes it's okay to cheat at school.
	Q63	It is all right to beat up people if they start the fight.
	Q64	It is important to be honest with your parents, even if they become upset or you get punished.

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Appendix C

Historical Data

Introduction

This appendix presents the results of key elements from the 2009 *PAYS*. Caution should be exercised when comparing overall results across survey administrations. This is because differences in the samples, particularly the distribution of the sample across grade levels, can dramatically impact overall results, making comparisons inaccurate.

Confidence Intervals and Demographic Profile, 2009

Grade	Enrollment		Sample		Confidence Interval
	Number	Percentage	Number	Percentage	
6 th	131,228	22.6%	4,884	21.6%	±2.8%
7 th	--	--	--	--	--
8 th	139,259	23.9%	4,406	19.5%	±2.9%
9 th	--	--	--	--	--
10 th	159,711	27.5%	6,694	29.6%	±2.4%
11 th	--	--	--	--	--
12 th	151,521	26.0%	6,663	29.4%	±2.4%
Totals	581,719	100.0%	22,647	100.0%	±1.3%

Note: Rounding can produce totals that do not equal 100%. The distribution of the sample across grade levels is before the application of the weights.

Table C2. Selected Demographic Characteristics of Surveyed Youth, Pennsylvania Statewide 2009

	<i>Number of Students</i>	<i>Percentage of Students</i>
Overall Valid Surveys	22,647	100.0%
Sex		
Male	10,716	47.3%
Female	11,062	48.8%
Did not respond	869	3.8%
Ethnicity		
White	16,426	72.5%
African American	1,082	4.8%
Latino	1,784	7.9%
American Indian	125	0.6%
Asian	634	2.8%
Other/Multiple	2,365	10.4%
Did not respond	231	1.0%
Primary Language Spoken at Home		
English	20,902	92.3%
Spanish	974	4.3%
Other Language	579	2.6%
Did not respond	192	0.8%

Note: Rounding can produce totals that do not equal 100%.

School Climate and Safety Results, 2009

Table C3. Percentage of Youth Reporting Bullying at School or Sexual Harassment on the Internet in the Past Year, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Been hit, kicked, pushed, or shoved around	14.3	22.0	23.2	24.5	16.5	9.5	18.1
Been called names, made fun of, or teased	44.7	41.5	45.5	49.5	43.0	34.9	43.0
Been left out of things on purpose	36.2	28.5	35.6	34.9	31.5	28.7	32.5
Other students telling lies or spreading false rumors	55.0	48.0	50.1	57.2	51.3	47.4	51.4
Other students taking money or damaging your things	19.0	22.4	20.4	23.0	21.2	18.1	20.7
Other students threatening or forcing you to do things	12.2	11.7	13.1	14.3	11.4	9.2	11.9
Other students using the internet or a cell phone to threaten or embarrass you	12.6	7.5	6.7	10.7	11.8	10.7	10.1
Sexual harassment on the internet	15.9	8.8	6.6	12.2	17.0	12.9	12.4

Table C4. Percentage of Youth Reporting Violence or Drugs on School Property in the Past Year, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Threatened to be hit or beaten up	14.7	22.2	16.1	23.6	19.0	14.7	18.3
Attacked or beaten up	4.5	9.9	8.9	8.0	6.2	5.9	7.2
Threatened with a weapon	2.1	3.9	2.5	3.5	3.1	2.7	3.0
Attacked with a weapon	0.6	1.8	0.7	1.2	1.4	1.1	1.1
Been offered, given, or sold an illegal drug	10.7	13.9	1.5	8.2	17.2	20.1	12.3

Table C5. Percentage of Youth Who Indicated Gang Involvement, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Ever Belonged to a Gang	3.4	8.1	4.5	6.2	6.7	5.4	5.7
Belonged to a Gang with a Name	2.6	7.1	3.1	5.4	6.2	4.5	4.8

Table C6. Prevalence of Other Antisocial Behaviors, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Attacking Someone with Intent to Harm	7.3	11.8	5.8	10.3	10.8	10.5	9.5
Attempting to Steal a Vehicle	1.1	2.5	0.5	1.8	2.5	1.8	1.7
Being Arrested	2.9	5.8	0.6	4.6	5.8	5.5	4.3
Being Drunk or High at School	8.7	10.8	1.6	6.9	11.5	17.4	9.7
Getting Suspended	5.7	10.8	3.0	9.1	10.8	9.0	8.2
Selling Drugs	3.3	7.2	0.1	2.3	6.7	10.7	5.2
Bringing a Weapon to School	1.4	3.3	0.9	2.1	2.8	3.2	2.3
Average	4.3	7.4	1.8	5.3	7.3	8.3	5.8

Table C7. Past-30-Day Frequency of Bringing a Weapon to School, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Never	98.6	96.7	99.1	97.9	97.2	96.8	97.7
1 or 2 times	0.9	2.1	0.8	1.6	1.5	1.8	1.5
3 to 5 times	0.2	0.5	0.0	0.2	0.4	0.6	0.3
6 to 9 times	0.1	0.1	0.0	0.1	0.2	0.1	0.1
10 to 19 times	0.0	0.1	0.0	0.0	0.1	0.2	0.1
20 to 29 times	0.0	0.1	0.0	0.1	0.0	0.1	0.1
30 to 39 times	0.0	0.0	0.0	0.0	0.0	0.0	0.0
40+ times	0.2	0.4	0.0	0.1	0.6	0.4	0.3

Note: Rounding on the above table can produce totals that do not equal 100%.

ATOD Results, 2009

Table C8. Lifetime Use of Alcohol, Tobacco and Other Drugs, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Alcohol	51.5	47.3	20.8	45.0	56.7	70.0	49.3
Cigarettes	27.0	25.5	4.6	20.6	32.0	44.3	26.3
Smokeless Tobacco	5.6	19.1	2.5	8.8	14.2	21.4	12.1
Marijuana	18.9	21.3	0.6	9.8	25.1	41.1	20.0
Inhalants	12.0	11.0	10.2	13.9	12.2	9.7	11.5
Cocaine	1.5	2.2	0.0	0.5	1.8	4.8	1.9
Crack Cocaine	0.6	0.9	0.2	0.4	1.2	1.1	0.8
Heroin	0.6	0.7	0.1	0.2	0.9	1.4	0.7
Hallucinogens	2.4	4.3	0.1	1.0	3.7	8.0	3.3
Methamphetamine	0.5	0.7	0.2	0.2	0.7	1.1	0.6
Ecstasy	1.9	2.3	0.2	0.7	2.2	4.8	2.1
Steroids	0.5	1.3	0.6	0.7	1.1	1.0	0.8
Any Illicit Drug (Other than Marijuana)	14.1	15.4	10.5	15.0	15.4	17.2	14.7

Table C9. Past-30-Day Use of Alcohol, Tobacco and Other Drugs, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Alcohol	26.1	24.8	5.1	17.2	30.5	46.0	25.5
Binge Drinking	13.6	13.8	1.2	7.5	15.7	27.6	13.6
Cigarettes	11.0	11.0	0.9	6.7	13.9	20.8	11.0
Smokeless Tobacco	2.5	10.1	0.6	4.7	7.6	10.9	6.2
Marijuana	9.9	12.9	0.3	5.4	14.2	23.7	11.4
Inhalants	6.0	5.8	6.8	8.2	5.5	3.3	5.9
Cocaine	0.4	0.7	0.1	0.2	0.6	1.2	0.6
Crack Cocaine	0.3	0.3	0.0	0.3	0.4	0.4	0.3
Heroin	0.2	0.3	0.0	0.2	0.2	0.5	0.2
Hallucinogens	1.2	2.4	0.1	0.8	2.3	3.5	1.8
Methamphetamine	0.2	0.3	0.0	0.1	0.5	0.4	0.3
Ecstasy	0.8	1.3	0.0	0.4	1.4	2.2	1.1
Steroids	0.2	1.0	0.5	0.3	0.7	0.8	0.6
Any Illicit Drug (Other than Marijuana)	7.3	9.0	7.3	9.3	8.1	7.6	8.1

Table C10. Lifetime Use of Prescription Drugs, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Pain Relievers	7.9	6.9	1.6	3.7	8.3	14.8	7.4
Tranquilizers	3.4	3.1	0.2	0.7	3.0	8.4	3.2
Stimulants	4.0	4.5	0.4	1.5	4.3	10.1	4.2

Table C11. Past-30-Day Use of Prescription Drugs, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Pain Relievers	5.3	4.8	1.0	3.6	6.1	8.7	5.0
Tranquilizers	2.0	1.8	0.2	0.8	2.1	4.2	1.9
Stimulants	2.5	3.1	0.2	1.2	3.2	6.0	2.8

Table C12. Percentage of Youth Who Reported Perception of "Great Risk" of Harm, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Drinking Alcohol Regularly	33.0	27.0	40.3	30.2	25.2	26.2	30.1
Smoking Cigarettes Regularly	70.1	62.6	71.7	67.5	63.0	64.6	66.5
Trying Marijuana Once or Twice	29.7	28.5	46.0	36.1	21.5	15.4	29.0
Smoking Marijuana Regularly	67.7	58.3	83.2	74.5	54.9	43.2	63.0

Table C13. Percentage of Youth Who Indicated Personal Disapproval of Drug Use, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Drinking Alcohol Regularly	72.4	70.9	97.2	82.5	62.5	49.2	71.6
Smoking Cigarettes	77.9	76.7	97.3	86.7	72.1	56.8	77.3
Smoking Marijuana	81.9	77.7	98.4	89.0	73.1	62.3	79.8
Using Other Illicit Drugs	95.6	92.9	98.7	96.3	92.8	90.3	94.3

Table C14. Percentage of Youth Who Indicated Peer Approval of Drug Use, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Drinking Alcohol Regularly	11.0	11.8	1.4	6.7	13.5	22.2	11.4
Smoking Cigarettes	5.0	5.3	1.3	4.7	6.8	7.1	5.1
Smoking Marijuana	8.8	11.8	1.1	6.0	13.5	18.6	10.3

Table C15. Percentage of Youth Who Indicated “Other Adults” Disapprove of Drug Use, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Drinking Alcohol	76.0	73.5	90.6	80.5	70.1	60.6	74.8
Smoking Cigarettes	77.2	75.6	92.2	83.2	73.7	59.5	76.5
Smoking Marijuana	87.5	84.5	96.2	90.3	83.3	75.9	86.0

Table C16. Percentage of Youth Who Indicated Parental Disapproval of Drug Use, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Drink Alcohol Regularly	75.6	71.3	93.1	81.9	68.3	54.1	73.5
Smoke Cigarettes	81.8	79.5	95.1	87.3	77.4	65.4	80.6
Smoke Marijuana	87.9	83.3	97.2	91.2	82.7	73.3	85.6

Table C17. Past-30-Day Frequency of Alcohol Use, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
0 occasions	73.9	75.2	94.9	82.8	69.5	54.0	74.5
1 or 2 occasions	17.1	15.2	4.4	11.9	19.8	26.6	16.1
3 to 5 occasions	5.2	5.0	0.5	2.9	5.5	10.8	5.1
6 to 9 occasions	2.1	2.3	0.1	1.0	2.7	4.8	2.2
10 to 19 occasions	1.1	1.3	0.1	0.6	1.7	2.4	1.2
20 to 39 occasions	0.3	0.4	0.0	0.3	0.3	0.6	0.3
40 or more occasions	0.3	0.6	0.0	0.5	0.4	0.8	0.5

Note: Rounding on the above table can produce totals that do not equal 100%.

Table C18. Past-30-Day Frequency of Cigarette Use, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Not at all	89.0	89.0	99.1	93.3	86.1	79.2	89.0
Less than one cigarette per day	4.4	5.0	0.6	3.9	6.1	7.7	4.7
One to five cigarettes per day	3.8	2.9	0.2	2.0	4.8	6.2	3.4
About one-half pack per day	1.7	1.6	0.1	0.3	1.8	4.2	1.7
About one pack per day	0.6	0.9	0.0	0.2	0.6	2.1	0.8
About one and one-half packs per day	0.2	0.2	0.0	0.0	0.4	0.4	0.2
Two packs or more per day	0.1	0.3	0.0	0.2	0.3	0.3	0.2

Note: Rounding on the above table can produce totals that do not equal 100%.

Table C19. Past-30-Day Frequency of Marijuana Use, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
0 occasions	90.1	87.1	99.7	94.6	85.8	76.3	88.6
1 or 2 occasions	4.6	4.3	0.1	2.5	5.7	8.7	4.4
3 to 5 occasions	1.9	1.9	0.0	1.0	2.6	3.6	1.9
6 to 9 occasions	1.0	1.1	0.0	0.6	1.6	1.7	1.0
10 to 19 occasions	0.8	1.6	0.0	0.4	1.6	2.6	1.2
20 to 39 occasions	0.5	1.2	0.0	0.2	0.9	2.3	0.9
40 or more occasions	1.0	2.8	0.0	0.8	1.7	4.8	1.9

Note: Rounding on the above table can produce totals that do not equal 100%.

Table C20. Past-30-Day Frequency of Inhalant Use, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
0 occasions	94.0	94.2	93.2	91.8	94.5	96.7	94.1
1 or 2 occasions	4.5	4.3	5.6	6.0	3.7	2.4	4.3
3 to 5 occasions	0.7	0.6	0.6	0.7	0.8	0.6	0.7
6 to 9 occasions	0.4	0.3	0.3	0.6	0.4	0.2	0.4
10 to 19 occasions	0.2	0.2	0.2	0.4	0.2	0.1	0.2
20 to 39 occasions	0.0	0.1	0.0	0.1	0.1	0.1	0.1
40 or more occasions	0.2	0.2	0.1	0.4	0.3	0.1	0.2

Note: Rounding on the above table can produce totals that do not equal 100%.

Table C21. Average Age of Onset of ATOD Use and Other Antisocial Behaviors, Pennsylvania Statewide 2009

	Female	Male	6 th	8 th	10 th	12 th	Overall
Trying Alcohol	13.3	12.8	10.4	11.7	13.2	14.3	13.1
Drinking Alcohol Regularly	14.7	14.6	11.5	12.6	14.2	15.6	14.7
Smoking Cigarettes	13.1	12.9	10.6	11.7	12.9	13.9	13.0
Smoking Marijuana	14.3	13.9	11.8	12.4	13.7	14.7	14.1
Being Suspended from School	12.8	12.2	10.4	11.4	12.6	13.3	12.4
Being Arrested	13.8	13.3	10.4	11.9	13.4	14.6	13.5
Carrying a Handgun	12.0	12.1	10.6	11.5	12.5	13.2	12.1
Attacking Someone with Intent to Harm	12.4	11.9	10.5	11.4	12.3	13.2	12.1
Belonging to a Gang	12.4	12.3	10.6	11.7	13.0	13.4	12.3

Special Topics Results, 2009

Table C22. Percentage of Youth Reporting Any Occasion of Driving Under the Influence, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Driving after Alcohol Use	4.8	6.9	0.5	1.9	3.2	16.5	5.8
Driving after Marijuana Use	5.1	7.9	0.1	1.2	4.7	18.5	6.5

Table C23. Percentage of Youth Reporting Willingness to Try Selected ATODs, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Alcohol	51.7	47.5	17.3	42.7	60.2	72.0	49.6
Marijuana	20.5	22.3	1.6	13.2	28.4	38.4	21.4
Cocaine	3.2	3.5	0.9	2.2	3.8	5.7	3.3
Hallucinogens	6.4	7.8	0.8	2.8	9.2	14.1	7.1
Inhalants	3.7	3.7	1.3	3.2	5.0	4.7	3.7

Note: The percentages reported in this table represent the percentage of students who indicated "would use it any chance I got," "would like to try it or use it" or "not sure whether or not I would use it." Students who indicated "probably wouldn't use it" or "would never use it" were considered to be unwilling to try the substance.

Table C24. Percentage of Youth Reporting Gambling, Pennsylvania Statewide 2009

	Female %	Male %	6 th %	8 th %	10 th %	12 th %	Overall %
Gambled for money in the past year	7.9	27.6	8.7	16.6	20.6	22.3	17.5
Gambled for money in the past 30 days	4.7	15.7	5.0	9.8	11.5	12.6	10.0
Bet on sporting events in the past year	11.7	34.0	14.8	23.2	25.0	25.7	22.5
Bought lottery tickets in the past year	12.6	16.6	11.5	12.1	14.5	19.2	14.5
Bet money using the internet in the past year	1.9	5.8	2.5	3.7	4.6	4.1	3.8
Bet money on table games in the past year	8.3	24.1	9.9	16.4	17.9	18.6	16.0

Table C25. Percentage of Youth Reporting Symptoms of Depression, Pennsylvania Statewide 2009

	Female %	Male %	6th %	8th %	10th %	12th %	Overall %
In the past year, felt depressed or sad most days	38.7	24.1	26.8	32.1	33.2	33.2	31.6
Sometimes I think that life is not worth it	25.4	15.7	14.7	23.0	22.9	21.0	20.6
At times I think I am no good at all	34.2	21.0	23.6	29.1	29.0	28.9	27.8
All in all, I am inclined to think that I am a failure	15.6	11.6	10.6	13.6	14.9	15.2	13.7

Note: The numbers reported in this table represent the percentage of students who answered either "yes" or "Yes!" to each question.

Risk and Protective Results, 2009

		6th	8th	10th	12th	Overall
Community Domain	Community Opportunities for Prosocial Involvement	33	38	38	40	37
	Community Rewards for Prosocial Involvement	50	51	53	52	52
Family Domain	Family Attachment	59	55	54	52	55
	Family Opportunities for Prosocial Involvement	54	52	50	50	51
	Family Rewards for Prosocial Involvement	56	52	53	51	53
School Domain	School Opportunities for Prosocial Involvement	58	59	51	53	55
	School Rewards for Prosocial Involvement	58	59	55	54	57
Peer and Individual Domain	Religiosity	45	45	45	43	45
	Belief in the Moral Order	62	59	57	55	58
Average		53	52	51	50	51

Table C27. Risk Factor Scale Scores, Pennsylvania Statewide 2009

		6 th	8 th	10 th	12 th	Overall
Community Domain	Low Neighborhood Attachment	42	45	47	45	45
	Community Disorganization	72	70	69	69	70
	Transitions and Mobility	41	49	51	47	47
	Laws and Norms Favorable to Drug Use	50	52	52	55	52
	Perceived Availability of Drugs	54	56	53	52	53
	Perceived Availability of Handguns	59	58	53	47	53
Family Domain	Poor Family Management	44	47	50	48	47
	Family Conflict	51	53	50	53	52
	Family History of Antisocial Behavior	41	44	43	46	44
	Parental Attitudes Favorable toward ATOD Use	45	46	47	49	47
	Parental Attitudes Favorable toward Antisocial Behavior	56	54	57	61	57
School Domain	Poor Academic Performance	42	44	43	44	43
	Lack of Commitment to School	49	46	48	49	48
Peer and Individual Domain	Rebelliousness	40	45	44	42	43
	Friends' Delinquent Behavior	40	42	43	44	42
	Friends' Use of Drugs	41	42	40	42	41
	Peer Rewards for Antisocial Behavior	43	43	47	55	47
	Favorable Attitudes toward Antisocial Behavior	46	45	46	48	46
	Favorable Attitudes toward ATOD Use	43	46	47	48	46
	Low Perceived Risks of Drug Use	45	49	55	57	51
	Early Initiation of Drug Use	39	40	38	39	39
Sensation Seeking	47	43	43	42	44	
Average	47	48	48	49	48	

Appendix D

Other Resources

Web Sites

Office of National Drug Control Policy: www.whitehouse.gov/ondcp

National Clearinghouse for Alcohol and Drug Information: www.ncadi.samhsa.gov

Substance Abuse and Mental Health Services Administration (SAMHSA): www.samhsa.gov

Communities That Care: www.sdrg.org/ctcresource

Monitoring the Future: www.monitoringthefuture.org

National Institute on Drug Abuse (NIDA): www.nida.nih.gov and www.drugabuse.gov

National Institute on Alcohol Abuse and Alcoholism (NIAAA): www.niaaa.nih.gov

Social Development Research Group: www.uwsrd.org/sdrg

Prevention Program Guides

Office of Juvenile Justice and Delinquency Prevention (OJJDP). *Model Programs Guide*: www.ojjdp.gov/mpg.

Center for the Study and Prevention of Violence, Institute of Behavioral Science. *Blueprints for Violence Prevention*. Available from the University of Colorado Boulder's web site: www.colorado.edu/cspv/blueprints.

Social Development Research Group, University of Washington. *Communities That Care Prevention Strategies Guide*: [www.sdrg.org/ctcresource/Prevention Strategies Guide/introduction.pdf](http://www.sdrg.org/ctcresource/Prevention%20Strategies%20Guide/introduction.pdf).

U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA). *Model Programs List*: www.nrepp.samhsa.gov.

Prevention Planning

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The 2011 *PAYS* Questionnaire

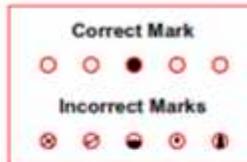
Pennsylvania Youth Survey

Thank you for agreeing to participate in this survey. The survey asks your opinion about a number of things in your life, including your friends, your family, your neighborhood and your community. Your answers to these questions will be confidential and anonymous. This means your answers will stay secret. Your name will never be asked. Please do not write your name on this survey form.

This survey is completely voluntary. You may skip any question.

Instructions

1. This is not a test, so there are no right or wrong answers.
2. Each question should be answered by marking only one of the answer spaces. If you don't find an answer that fits exactly, use one that comes closest. If any question does not apply to you, or you are not sure of what it means, just leave it blank.
3. Your answers will be read by a computer. Please follow these instructions carefully.
 - Use a #2 pencil only.
 - Make heavy marks inside the circles.
 - Completely erase any answer you want to change.
 - Make no other markings or comments on the answer pages.



4. Some of the questions have the following format:
Please fill in the circle for the word that best describes how you feel. **NO!** **no** **yes** **YES!**

EXAMPLE: Pepperoni pizza is one of my favorite foods.

Mark (the Big) NO! if you think the statement is definitely not true for you.

Mark (the little) no if you think the statement is mostly not true for you.

Mark (the little) yes if you think the statement is mostly true for you.

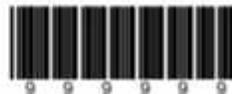
Mark (the Big) YES! if you think the statement is definitely true for you.



THE SURVEY BEGINS WITH ITEM ONE, BELOW



1. How old are you?
 10 11 12 13 14 15 16 17 18 19 or older
2. What grade are you in?
 6th 7th 8th 9th 10th 11th 12th
3. Are you? Female Male
4. What do you consider yourself to be? (Choose all that apply)
 - White
 - Black or African American
 - American Indian/Native American, Eskimo or Aleut
 - Spanish/Hispanic/Latino
 - Asian or Pacific Islander
 - Other
5. What is the language you use most often at home?
 - English
 - Spanish
 - Another language
6. Think of where you live most of the time. Which of the following people live there with you? (Choose all that apply)
 - Mother Stepmother Foster mother
 - Grandmother Aunt Father
 - Stepfather Foster father Grandfather
 - Uncle Other adults Brother(s)
 - Stepbrother(s) Sister(s) Stepsister(s)
 - Other children



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7. What are the chances you would be seen as cool if you:

a. Smoked cigarettes?

- No or very little chance
- Little chance
- Some chance
- Pretty good chance
- Very good chance

b. Began drinking alcoholic beverages regularly, that is, at least once or twice a month?

- No or very little chance
- Little chance
- Some chance
- Pretty good chance
- Very good chance

c. Smoked marijuana?

- No or very little chance
- Little chance
- Some chance
- Pretty good chance
- Very good chance

d. Carried a handgun?

- No or very little chance
- Little chance
- Some chance
- Pretty good chance
- Very good chance

8. How interesting are most of your courses to you?

- Very dull
- Slightly dull
- Fairly interesting
- Quite interesting
- Very interesting and stimulating

9. How important do you think the things you are learning in school are going to be for your later life?

- Not at all important
- Slightly important
- Fairly important
- Quite important
- Very important

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10. During the LAST FOUR WEEKS, how many whole days have you missed because you skipped or "cut"?

- None
- 1
- 2
- 3
- 4-5
- 6-10
- 11 or more

11. How often do you feel that the schoolwork you are assigned is meaningful and important?

- Never
- Seldom
- Sometimes
- Often
- Almost always

12. Putting them all together, what were your grades like last year?

- Mostly F's
- Mostly D's
- Mostly C's
- Mostly B's
- Mostly A's

13. Are your school grades better than the grades of most students in your class?

- NO!
- no
- yes
- YES!

14. Which of the following activities for people your age are available in your community? (Choose all that apply.)

- Sports teams
- Scouting
- Boys and girls clubs
- 4-H clubs
- Service clubs



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	NO!	no	yes	YES!
15. There are lots of adults in my neighborhood I could talk to about something important.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. Teachers ask me to work on special classroom projects.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. There are lots of chances for students in my school to talk with a teacher one-on-one.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. I have lots of chances to be part of class discussions or activities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. My teacher(s) notices when I am doing a good job and lets me know about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. I feel safe at my school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. The school lets my parents know when I have done something well.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. My teachers praise me when I work hard in school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. In my school, students have lots of chances to help decide things like class activities and rules.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. There are lots of chances for students in my school to get involved in sports, clubs, and other school activities outside of class.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

25. How wrong do you think it is for someone your age to:	Not at all wrong	A little bit wrong	Wrong	Very wrong
a. Stay away from school all day when their parents think they are at school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Take a handgun to school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Steal anything worth more than \$5?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Pick a fight with someone?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Attack someone with the idea of seriously hurting them?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

26. Now, thinking back over the past year in school, how often did you:	Never	Seldom	Sometimes	Often	Almost always
a. Enjoy being in school?	<input type="radio"/>				
b. Hate being in school?	<input type="radio"/>				
c. Try to do your best work in school?	<input type="radio"/>				

27. How wrong do you think it is for someone your age to:	Not at all wrong	A little bit wrong	Wrong	Very wrong
a. Drink beer, wine or hard liquor (for example, vodka, whiskey, or gin) regularly?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Smoke cigarettes?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Smoke marijuana?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Use LSD, cocaine, amphetamines or another illegal drug?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

28. How wrong do your parents feel it would be for you to:	Not at all wrong	A little bit wrong	Wrong	Very wrong
a. Drink beer, wine or hard liquor (for example, vodka, whiskey, or gin) regularly?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Pick a fight with someone?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Smoke cigarettes?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Smoke marijuana?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Steal anything worth more than \$5?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Draw graffiti, or write things or draw pictures on buildings or other property (without the owner's permission)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



29. How old were you when you first:

a. Smoked marijuana?

- Never have
- 10 or younger
- 11
- 12
- 13
- 14
- 15
- 16
- 17 or older

b. Smoked a cigarette, even just a puff?

- Never have
- 10 or younger
- 11
- 12
- 13
- 14
- 15
- 16
- 17 or older

c. Had more than a sip or two of beer, wine or hard liquor (for example, vodka, whiskey, or gin)?

- Never have
- 10 or younger
- 11
- 12
- 13
- 14
- 15
- 16
- 17 or older

d. Began drinking alcoholic beverages regularly, that is, at least once or twice a month?

- Never have
- 10 or younger
- 11
- 12
- 13
- 14
- 15
- 16
- 17 or older

30. How frequently have you smoked cigarettes during the past 30 days?

- Not at all
- Less than one cigarette per day
- One to five cigarettes per day
- About one-half pack per day
- About one pack per day
- About one and one-half packs per day
- Two packs or more per day

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31. On how many occasions (if any) have you had beer, wine, or hard liquor during the past 30 days?

- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

32. On how many occasions (if any) have you used marijuana during the past 30 days?

- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

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

a. Take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day?

- No risk
- Slight risk
- Moderate risk
- Great risk

b. Smoke one or more packs of cigarettes per day?

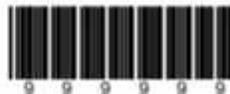
- No risk
- Slight risk
- Moderate risk
- Great risk

c. Try marijuana once or twice?

- No risk
- Slight risk
- Moderate risk
- Great risk

d. Smoke marijuana regularly?

- No risk
- Slight risk
- Moderate risk
- Great risk



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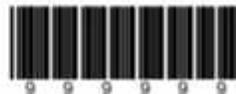
34. How much do each of the following statements describe your neighborhood?	NO!	no	yes	YES!
a. If a kid smoked marijuana in your neighborhood, would he or she be caught by the police?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Crime and/or drug selling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Fights	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Lots of empty or abandoned buildings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Lots of graffiti	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. I feel safe in my neighborhood.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. 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?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

35. Think of your <u>four best friends</u> (the friends you feel closest to). In the past year (12 months), how many of your best friends have:	None	1	2	3	4
a. Smoked cigarettes?	<input type="radio"/>				
b. Used marijuana?	<input type="radio"/>				
c. Used LSD, cocaine, amphetamines, or other illegal drugs?	<input type="radio"/>				
d. Been suspended from school?	<input type="radio"/>				
e. Carried a handgun?	<input type="radio"/>				
f. Sold illegal drugs?	<input type="radio"/>				
g. Been arrested?	<input type="radio"/>				
h. Dropped out of school?	<input type="radio"/>				
i. Been a member of a gang?	<input type="radio"/>				
j. Stolen or tried to steal a motor vehicle such as a car or motorcycle?	<input type="radio"/>				
k. Tried beer, wine, or hard liquor (for example, vodka, whiskey, or gin) when their parents didn't know about it?	<input type="radio"/>				

36. How wrong would most adults (over 21) in your neighborhood think it was for kids your age:	Not at all wrong	A little bit wrong	Wrong	Very wrong
a. To use marijuana?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. To drink alcohol?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. To smoke cigarettes?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Very hard	Sort of hard	Sort of easy	Very easy
37. If you wanted to get some marijuana, how easy would it be for you to get some?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38. If you wanted to get a handgun, how easy would it be for you to get one?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
39. 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?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
40. If you wanted to get some cigarettes, how easy would it be for you to get some?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
41. If you wanted to get a drug like cocaine, LSD, or amphetamines, how easy would it be for you to get some?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Very false	Somewhat false	Somewhat true	Very true
42. I like to see how much I can get away with.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
43. I ignore rules that get in my way.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
44. I do the opposite of what people tell me, just to get them mad.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



45. How many times have you done the following things?

a. Done what feels good no matter what.

- Never
- I've done it, but not in the past year
- Less than once a month
- About once a month
- 2 or 3 times a month
- Once a week or more

b. Done something dangerous because someone dared you to do it.

- Never
- I've done it, but not in the past year
- Less than once a month
- About once a month
- 2 or 3 times a month
- Once a week or more

c. Done crazy things even if they are a little dangerous.

- Never
- I've done it, but not in the past year
- Less than once a month
- About once a month
- 2 or 3 times a month
- Once a week or more

46. Have you ever belonged to a gang?

- Yes
- No

47. If you have ever belonged to a gang, did that gang have a name?

- Yes
- No
- I have never belonged to a gang.

48. How old were you when you first belonged to a gang?

- Never have
- 10 or younger
- 11
- 12
- 13
- 14
- 15
- 16
- 17 or older

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49. This year at school, how often have other students:

a. Told lies or spread false rumors about you?

- Not at all
- Only once or twice
- 2 or 3 times a month
- About once a week
- Several times a week

b. Taken money or other things from you or damaged your things?

- Not at all
- Only once or twice
- 2 or 3 times a month
- About once a week
- Several times a week

c. Threatened or forced you to do things you did not want to do?

- Not at all
- Only once or twice
- 2 or 3 times a month
- About once a week
- Several times a week

d. Used the Internet or a cell phone to threaten or embarrass you by posting or sending mean or hurtful messages or photos of you?

- Not at all
- Only once or twice
- 2 or 3 times a month
- About once a week
- Several times a week

50. In the past 12 months, did anyone on the Internet ever try to get you to talk online about sex, look at sexual pictures, or do something else sexual when you did not want to?

- Yes
- No



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51. This year at school, how often have you been:

a. Called mean names, made fun of, or teased in a hurtful way?

- Not at all
- Only once or twice
- 2 or 3 times a month
- About once a week
- Several times a week

b. Left out of things on purpose by other students, excluded from their group of friends, or completely ignored?

- Not at all
- Only once or twice
- 2 or 3 times a month
- About once a week
- Several times a week

c. Hit, kicked, pushed, shoved around, or locked indoors?

- Not at all
- Only once or twice
- 2 or 3 times a month
- About once a week
- Several times a week

52. I think it is okay to take something without asking if you can get away with it.

- NO!
- no
- yes
- YES!

53. It is all right to beat up people if they start the fight.

- NO!
- no
- yes
- YES!

54. I think sometimes it's okay to cheat at school.

- NO!
- no
- yes
- YES!

55. It is important to be honest with your parents, even if they become upset or you get punished.

- NO!
- no
- yes
- YES!

56. Have you ever smoked cigarettes?

- Never
- Once or twice
- Once in a while but not regularly
- Regularly in the past
- Regularly now

57. Have you ever used smokeless tobacco (chew, snuff, plug, dipping tobacco, chewing tobacco)?

- Never
- Once or twice
- Once in a while but not regularly
- Regularly in the past
- Regularly now

58. How frequently have you used smokeless tobacco during the past 30 days?

- Never
- Once or twice
- Once or twice per week
- About once a day
- More than once a day

59. Think back over the last two weeks. How many times have you had five or more alcoholic drinks in a row?

- None
- Once
- Twice
- 3-5 times
- 6-9 times
- 10 or more times

60. How many times in the past year (12 months) have you been drunk or high at school?

- Never
- 1 or 2 times
- 3 to 5 times
- 6 to 9 times
- 10 to 19 times
- 20 to 29 times
- 30 to 39 times
- 40+ times



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61. On how many occasions (if any) have you:	0	1 or 2	3 to 5	6 to 9	10 to 19	20 to 39	40 or more
a. Sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays in order to get high during the <u>past 30 days</u> ?	<input type="radio"/>						
b. Used cocaine during the <u>past 30 days</u> ?	<input type="radio"/>						
c. Used crack during the <u>past 30 days</u> ?	<input type="radio"/>						
d. Used heroin during the <u>past 30 days</u> ?	<input type="radio"/>						
e. Used derbisol during the <u>past 30 days</u> ?	<input type="radio"/>						
f. Used Ecstasy during the <u>past 30 days</u> ?	<input type="radio"/>						
g. Used hallucinogens (acid, LSD, shrooms) during the <u>past 30 days</u> ?	<input type="radio"/>						
h. Taken steroids without a doctor's orders during the <u>past 30 days</u> ?	<input type="radio"/>						
i. Used methamphetamine (meth, crystal meth, crank) during the <u>past 30 days</u> ?	<input type="radio"/>						
j. Used prescription pain relievers, such as Vicodin, OxyContin or Tylox, without a doctor's orders, during the <u>past 30 days</u> ?	<input type="radio"/>						
k. Used prescription tranquilizers, such as Xanax, Valium or Ambien, without a doctor's orders, during the <u>past 30 days</u> ?	<input type="radio"/>						
l. Used prescription stimulants, such as Ritalin or Adderall, without a doctor's orders, during the <u>past 30 days</u> ?	<input type="radio"/>						

62. On how many occasions (if any) have you:	0	1 or 2	3 to 5	6 to 9	10 to 19	20 to 39	40 or more
a. Sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays in order to get high in your <u>lifetime</u> ?	<input type="radio"/>						
b. Had beer, wine, or hard liquor in your <u>lifetime</u> ?	<input type="radio"/>						
c. Used marijuana in your <u>lifetime</u> ?	<input type="radio"/>						
d. Used cocaine in your <u>lifetime</u> ?	<input type="radio"/>						
e. Used crack in your <u>lifetime</u> ?	<input type="radio"/>						
f. Used heroin in your <u>lifetime</u> ?	<input type="radio"/>						
g. Used derbisol in your <u>lifetime</u> ?	<input type="radio"/>						
h. Used Ecstasy in your <u>lifetime</u> ?	<input type="radio"/>						
i. Used hallucinogens (acid, LSD, shrooms) in your <u>lifetime</u> ?	<input type="radio"/>						
j. Taken steroids without a doctor's orders in your <u>lifetime</u> ?	<input type="radio"/>						
k. Used methamphetamine (meth, crystal meth, crank) in your <u>lifetime</u> ?	<input type="radio"/>						
l. Used prescription pain relievers, such as Vicodin, OxyContin or Tylox, without a doctor's orders, in your <u>lifetime</u> ?	<input type="radio"/>						
m. Used prescription tranquilizers, such as Xanax, Valium or Ambien, without a doctor's orders, in your <u>lifetime</u> ?	<input type="radio"/>						
n. Used prescription stimulants, such as Ritalin or Adderall, without a doctor's orders, in your <u>lifetime</u> ?	<input type="radio"/>						



63. How willing are you to try or use the drugs listed below. These are not questions about current or past use of these drugs.

a. ALCOHOL (beer, wine, coolers, hard liquor)

- I would never use it
- I probably wouldn't use it
- I'm not sure whether or not I would use it
- I would like to try it or use it
- I would use it any chance I got

b. MARIJUANA (pot, hash, hemp, weed)

- I would never use it
- I probably wouldn't use it
- I'm not sure whether or not I would use it
- I would like to try it or use it
- I would use it any chance I got

c. COCAINE (coke, snow, blow, dust)

- I would never use it
- I probably wouldn't use it
- I'm not sure whether or not I would use it
- I would like to try it or use it
- I would use it any chance I got

d. HALLUCINOGENS (acid, trip, LSD, shrooms)

- I would never use it
- I probably wouldn't use it
- I'm not sure whether or not I would use it
- I would like to try it or use it
- I would use it any chance I got

e. INHALANTS (whippets, butane, paint thinner)

- I would never use it
- I probably wouldn't use it
- I'm not sure whether or not I would use it
- I would like to try it or use it
- I would use it any chance I got

64. How many times in the past year (12 months) have you been arrested?

- Never
- 1 or 2 times
- 3 to 5 times
- 6 to 9 times
- 10 to 19 times
- 20 to 29 times
- 30 to 39 times
- 40+ times

65. How old were you when you first got arrested?

- Never have
- 10 or younger
- 11
- 12
- 13
- 14
- 15
- 16
- 17 or older

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66. How many times in the past year (12 months) have you:

a. Been offered, given, or sold an illegal drug on school property?

- Never
- Once
- 2 or 3 times
- 4 or 5 times
- 6 to 9 times
- 10 times or more

b. Sold illegal drugs?

- Never
- 1 or 2 times
- 3 to 5 times
- 6 to 9 times
- 10 to 19 times
- 20 to 29 times
- 30 to 39 times
- 40+ times

c. Stolen or tried to steal a motor vehicle such as a car or motorcycle?

- Never
- 1 or 2 times
- 3 to 5 times
- 6 to 9 times
- 10 to 19 times
- 20 to 29 times
- 30 to 39 times
- 40+ times

67. Have you changed homes in the past year?

- Yes
- No

68. How many times have you changed homes since kindergarten?

- Never
- 1 or 2 times
- 3 or 4 times
- 5 or 6 times
- 7 or more times



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69. Have you changed schools (including changing from elementary to middle and middle to high school) in the past year?

- Yes
- No

70. How many times have you changed schools (including changing from elementary to middle and middle to high school) since kindergarten?

- Never
- 1 or 2 times
- 3 or 4 times
- 5 or 6 times
- 7 or more times

71. How often do you attend religious services or activities?

- Never
- Rarely
- 1-2 times a month
- About once a week or more

72. How often have you:

a. Driven a car while or shortly after drinking?

- I don't drive
- Never
- Before, but not in the past year
- About once or twice a year
- About once or twice a month
- About once or twice a week
- Almost every day

b. Driven a car while or shortly after smoking pot?

- I don't drive
- Never
- Before, but not in the past year
- About once or twice a year
- About once or twice a month
- About once or twice a week
- Almost every day

73. How many times in the past 30 days have you brought a weapon (such as a gun, knife, or club) to school?

- Never
- 1 or 2 times
- 3 to 5 times
- 6 to 9 times
- 10 to 19 times
- 20 to 29 times
- 30 to 39 times
- 40+ times

74. How old were you when you first carried a handgun?

- Never have
- 10 or younger
- 11
- 12
- 13
- 14
- 15
- 16
- 17 or older

75. How many times in the past year (12 months) have you attacked someone with the idea of seriously hurting them?

- Never
- 1 or 2 times
- 3 to 5 times
- 6 to 9 times
- 10 to 19 times
- 20 to 29 times
- 30 to 39 times
- 40+ times

76. How old were you when you first attacked someone with the idea of seriously hurting them?

- Never have
- 10 or younger
- 11
- 12
- 13
- 14
- 15
- 16
- 17 or older

77. How many times in the past year (12 months) have you been suspended from school?

- Never
- 1 or 2 times
- 3 to 5 times
- 6 to 9 times
- 10 to 19 times
- 20 to 29 times
- 30 to 39 times
- 40+ times

78. How old were you when you first got suspended from school?

- Never have
- 10 or younger
- 11
- 12
- 13
- 14
- 15
- 16
- 17 or older



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79. In the past 12 months, how often have you:	Never	Once	2 or 3	4 or 5	6 to 9	10 times or more
a. Been threatened to be hit or beaten up on school property?	<input type="radio"/>					
b. Been attacked and hit by someone or beaten up on school property?	<input type="radio"/>					
c. Been threatened by someone with a weapon on school property?	<input type="radio"/>					
d. Been attacked by someone with a weapon on school property?	<input type="radio"/>					

	NOT	no	yes	YES!
80. In the past year have you felt depressed or sad MOST days, even if you feel OK sometimes?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
81. Sometimes I think that life is not worth it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
82. At times I think I am no good at all.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
83. All in all, I am inclined to think that I am a failure.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

84. In the past year, have you...	Yes	No
a. Bet money or anything of value on sporting events (includes participating in sports pools)?	<input type="radio"/>	<input type="radio"/>
b. Gambled for money or anything of value?	<input type="radio"/>	<input type="radio"/>
c. Bought lottery tickets?	<input type="radio"/>	<input type="radio"/>
d. Bet money using the Internet?	<input type="radio"/>	<input type="radio"/>
e. Bet money or anything of value on table games like poker or other card games, dice, backgammon, or dominoes?	<input type="radio"/>	<input type="radio"/>
85. In the last 30 days have you gambled for money or anything of value?	<input type="radio"/>	<input type="radio"/>

	NOT	no	yes	YES!
86. I like my neighborhood.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
87. If I had to move, I would miss the neighborhood I now live in.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
88. I'd like to get out of my neighborhood.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
89. My neighbors notice when I am doing a good job and let me know.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
90. There are people in my neighborhood who are proud of me when I do something well.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
91. There are people in my neighborhood who encourage me to do my best.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

92. My parents notice when I am doing a good job and let me know about it. Never or almost never Sometimes Often All the time

93. How often do your parents tell you they're proud of you for something you've done? Never or almost never Sometimes Often All the time

94. Has anyone in your family ever had a severe alcohol or drug problem? Yes No



95. About how many adults (over 21) have you known personally who in the past year have:					
	None	1	2	3 or 4	5 or more
a. Used marijuana, crack, cocaine, or other drugs?	<input type="radio"/>				
b. Sold or dealt drugs?	<input type="radio"/>				
c. Gotten drunk or high?	<input type="radio"/>				
d. Done other things that could get them in trouble with the police, like stealing, selling stolen goods, mugging or assaulting others, etc.?	<input type="radio"/>				

96. Have any of your brothers or sisters ever:			
	Yes	No	I don't have any brothers or sisters
a. Drunk beer, wine or hard liquor (for example, vodka, whiskey or gin)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Smoked marijuana?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Smoked cigarettes?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Taken a handgun to school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Been suspended or expelled from school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	NO!	no	yes	YES!
97. 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?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
98. The rules in my family are clear.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
99. When I am not at home, one of my parents knows where I am and who I am with.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
100. My family has clear rules about alcohol and drug use.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
101. My parents ask if I've gotten my homework done.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
102. Would your parents know if you did not come home on time?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
103. People in my family often insult or yell at each other.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
104. We argue about the same things in my family over and over.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
105. People in my family have serious arguments.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
106. Do you enjoy spending time with your:				
a. Mother?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Father?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
107. Do you feel very close to your:				
a. Mother?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Father?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
108. Do you share your thoughts and feelings with your:				
a. Mother?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Father?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
109. My parents ask me what I think before most family decisions affecting me are made.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
110. If I had a personal problem, I could ask my mom or dad for help.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
111. If you skipped school, would you be caught by your parents?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
112. If you carried a handgun without your parents' permission, would you be caught by your parents?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
113. My parents give me lots of chances to do fun things with them.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

