Arkansas
Prevention
Needs
Assessment
Student
Survey



Fulton County County Profile Report

Provided by
Arkansas Department of Human Services
Division of Behavioral Sciences
Office of Alcohol and Drug Abuse Prevention
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#### 1 INTRODUCTION

This report summarizes findings from the Arkansas Prevention Needs Assessment Survey (APNA), a survey of 6th, 8th, 10th and 12th grade school students, conducted in the fall of 2007. This survey was available free of charge to all Arkansas public school districts that chose to participate. The survey was designed to assess adolescent substance use and related behaviors, and risk and protective factors that predict these behaviors. In this report, the results are presented for each grade along with the overall results for the State. Table 1 contains characteristics of the students who completed the survey.

Table 1: Characteristics of Participants

Student Totals							
	County	y 2006	State 2007				
	Number	Percent	Number	Percent	Number	Percent	
Total Students	337		385	0.5	79598	100.0	
# of Districts	3		3	1.4	208	100.0	
# of Schools	6		6	1.1	570	100.0	
Grade							
6	89	26.4	105	27.3	22910	28.8	
8	94	27.9	113	29.4	22082	27.7	
10	92	27.3	94	24.4	19315	24.3	
12	62	18.4	73	19.0	15291	19.2	
Gender							
Male	176	53.5	199	52.0	37614	47.9	
Female	153	46.5	184	48.0	40835	52.1	
Ethnicity							
Hispanic	9	2.5	4	1.0	7386	8.3	
Black	4	1.1	6	1.5	14752	16.5	
Asian	1	0.3	1	0.2	1339	1.5	
American Indian	17	4.7	27	6.6	4041	4.5	
Alaska Native	1	0.3			192	0.2	
White	320	87.9	359	87.6	54915	61.3	
Native Hawaiian			1	0.2	487	0.5	
Other	12	3.3	12	2.9	6406	7.2	

The APNA Survey was first administered in the fall of 2002 and has been administered in the fall of each school year since then. Because trends over time are very important to prevention planning, readers are encouraged to review the results from the previous surveys. By comparing the results of the previous surveys, changes in ATOD (alcohol, tobacco and other drugs) use and rates of ASB (antisocial behavior), levels of risk and protective factors can be determined for a specific grade. It is important to note that the results in this report are for students who were not sampled in the even grades (6, 8, 10, and 12) during the previous years' survev. Those students are now in grades 7, 9, 11 or are out of school. gether, the results of the current and past APNA surveys provide a complete picture of ATOD use, antisocial behavior, risk, and protection for students in Arkansas.

(Methods Note Regarding Long-Term Trend Data:) The 2006 procedures varied from those used in this report, as

well as those used in the 2005 and earlier reports. Non-standard procedures for calculating: 1) drug prevalence rates, and 2) for calculating scores on the risk and protective factor questions, were used in the 2006 report. The variation in 2006 procedures related to how missing data (i.e., instances where the student did not respond to a question) were counted. The effect of the 2006 procedure was to slightly reduce the reported prevalence levels for all drugs, and to lower the calculated scores for the risk and protective factor questions.

In this report, the computational methods used for all calculations are identical to those used in the 2005 (and prior) reports. In addition, to produce the most accurate long-term trend data possible, 2006 results have been recalculated using standard procedures consistent with all reporting years. This means that, in some cases, small deviations in 2006 data points will be noted between this report and the previous 2006 report.

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

Risk and protective factor-focused prevention is based on a simple premise: To prevent a problem from happening, we need to identify the factors that increase the risk of that problem developing and then find ways to reduce the risks. Just as medical researchers have found risk factors for heart attacks such as diets high in fats, lack of exercise, and smoking, a team of researchers, the Social Development Research Group (SDRG), at the University of Washington

have defined a set of risk factors for drug abuse. The research team also found that some children exposed to multiple risk factors manage to avoid behavior problems later even though they were exposed to the same risks as children who exhibited behavior problems. Based on research, they identified protective factors and processes that work together to buffer children from the effects of high risk exposure and lead to the development of healthy behaviors.

Risk factors include characteristics of school, community, and family environments, as well as characteristics of students and their peer groups that are known to predict increased likelihood of drug use, delinquency, and violent behaviors among youth (Hawkins, Catalano & Miller, 1992; Hawkins, Arthur & Catalano, 1995; Brewer, Hawkins, Catalano & Neckerman, 1995).

#### 2 TOOLS FOR ASSESSMENT AND PLANNING

Protective factors exert a positive influence or buffer against the negative influence of risk, thus reducing the likelihood that adolescents will engage in problem behaviors. Protective factors identified through research reviewed by the Social Development Research Group include social bonding to family, school, community and peers; and healthy beliefs and clear standards for behavior.

Research on risk and protective factors has important implications for prevention efforts. The premise of this approach is that in order to promote positive youth development and prevent problem behaviors, it is necessary to address those factors that predict the problem. By measuring risk and protective factors in a population, specific risk factors that are elevated and widespread can be identified and targeted by preventive interventions that also promote related protective factors. For example, if academic failure is identified as an elevated risk factor in a community, then mentoring and tutoring interventions can be provided that will improve academic performance, and also increase opportunities and rewards for classroom participation.

Risk and protective factor-focused drug abuse prevention is based on the work of J. David Hawkins, Ph.D., Richard F. Catalano, Ph.D.; and a team of researchers at the University of Washington in Seattle. Beginning in the early 1980's, the group researched adolescent problem

Table 2: Youth at Risk

YOUTH AT RISK  Community  Availability of Drugs and Firearms  Community Laws and Norms Favorable Toward Drug Use  Transitions and Mobility  Low Neighborhood Attachment and Community Disorganization  Extreme Economic and Social Deprivation  Family  Family History of High Risk Behavior  Family Management Problems  Family Conflict  Favorable Parental Attitudes and Involvement in the Problem Behavior  School  Early and Persistent Antisocial Behavior  Academic Failure in Elementary School  Lack of Commitment to School  Individual/Peer  Alienation and Rebelliousness  Friends Who Engage in a Problem Behavior  Favorable Attitudes Toward the Problem Behavior  Early Initiation of the Problem Behavior  V V V V V V	Table 2: Youth	at nis	K				
Community  Availability of Drugs and Firearms  Community Laws and Norms Favorable Toward Drug Use  Transitions and Mobility  Low Neighborhood Attachment and Community Disorganization  Extreme Economic and Social Deprivation  Family  Family History of High Risk Behavior  Family Management Problems  Family Conflict  Favorable Parental Attitudes and Involvement in the Problem Behavior  School  Early and Persistent Antisocial Behavior  Academic Failure in Elementary School  Individual/Peer  Alienation and Rebelliousness  Friends Who Engage in a Problem Behavior  Favorable Attitudes Toward the Problem Behavior		PROBLEM BEHAVIORS					
Community  Availability of Drugs and Firearms  Community Laws and Norms Favorable Toward Drug Use  Transitions and Mobility  Low Neighborhood Attachment and Community Disorganization  Extreme Economic and Social Deprivation  Family  Family History of High Risk Behavior  Family Management Problems  Family Conflict  Favorable Parental Attitudes and Involvement in the Problem Behavior  School  Early and Persistent Antisocial Behavior  Academic Failure in Elementary School  Lack of Commitment to School  Individual/Peer  Alienation and Rebelliousness  Friends Who Engage in a Problem Behavior  Favorable Attitudes Toward the Problem Behavior	YOUTH AT RISK	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence	
Community Laws and Norms Favorable Toward Drug Use  Transitions and Mobility  Low Neighborhood Attachment and Community Disorganization  Extreme Economic and Social Deprivation  Family  Family History of High Risk Behavior  Family Management Problems  Fawily Conflict  Favorable Parental Attitudes and Involvement in the Problem Behavior  School  Early and Persistent Antisocial Behavior  Academic Failure in Elementary School  Lack of Commitment to School  Individual/Peer  Alienation and Rebelliousness  Friends Who Engage in a Problem Behavior  Favorable Attitudes Toward the Problem Behavior	Community						
Toward Drug Use  Transitions and Mobility  Low Neighborhood Attachment and Community Disorganization  Extreme Economic and Social Deprivation  Family  Family History of High Risk Behavior  Family Management Problems  Fawily Conflict  Favorable Parental Attitudes and Involvement in the Problem Behavior  School  Early and Persistent Antisocial Behavior  Academic Failure in Elementary School  Lack of Commitment to School  Individual/Peer  Alienation and Rebelliousness  Friends Who Engage in a Problem Behavior  Behavior	Availability of Drugs and Firearms	✓				1	
Low Neighborhood Attachment and Community Disorganization  Extreme Economic and Social Deprivation  Family  Family History of High Risk Behavior  Family Management Problems  Family Conflict  Favorable Parental Attitudes and Involvement in the Problem Behavior  School  Early and Persistent Antisocial Behavior  Academic Failure in Elementary School  Lack of Commitment to School  Individual/Peer  Alienation and Rebelliousness  Friends Who Engage in a Problem Behavior  A volume of the problem Behavior  Favorable Attitudes Toward the Problem Behavior	-	1					
Community Disorganization  Extreme Economic and Social Deprivation  Family  Family History of High Risk Behavior  Family Management Problems  Family Conflict  Favorable Parental Attitudes and Involvement in the Problem Behavior  School  Early and Persistent Antisocial Behavior  Academic Failure in Elementary School  Lack of Commitment to School  Individual/Peer  Alienation and Rebelliousness  Friends Who Engage in a Problem Behavior  A volume of the problem Behavior  Favorable Attitudes Toward the Problem Behavior	Transitions and Mobility	1	1		1		
Family Family History of High Risk Behavior  Family Management Problems  Family Conflict  Favorable Parental Attitudes and Involvement in the Problem Behavior  School  Early and Persistent Antisocial Behavior  Academic Failure in Elementary School  Lack of Commitment to School  Individual/Peer  Alienation and Rebelliousness  Friends Who Engage in a Problem Behavior  Favorable Attitudes Toward the Problem Behavior		1	1			1	
Family History of High Risk Behavior  Family Management Problems  Family Conflict  Favorable Parental Attitudes and Involvement in the Problem Behavior  School  Early and Persistent Antisocial Behavior  Academic Failure in Elementary School  Lack of Commitment to School  Individual/Peer  Alienation and Rebelliousness  Friends Who Engage in a Problem Behavior  Behavior	Extreme Economic and Social Deprivation	/	1	1	/	1	
Family Management Problems  Family Conflict  Favorable Parental Attitudes and Involvement in the Problem Behavior  School  Early and Persistent Antisocial Behavior  Academic Failure in Elementary School  Lack of Commitment to School  Individual/Peer  Alienation and Rebelliousness  Friends Who Engage in a Problem Behavior  Behavior	Family						
Family Conflict  Favorable Parental Attitudes and Involvement in the Problem Behavior  School  Early and Persistent Antisocial Behavior  Academic Failure in Elementary School  Lack of Commitment to School  Individual/Peer  Alienation and Rebelliousness  Friends Who Engage in a Problem Behavior  Behavior	Family History of High Risk Behavior	/	1	<b>/</b>	1		
Favorable Parental Attitudes and Involvement in the Problem Behavior  School  Early and Persistent Antisocial Behavior  Academic Failure in Elementary School  Lack of Commitment to School  Individual/Peer  Alienation and Rebelliousness  Friends Who Engage in a Problem Behavior  Behavior	Family Management Problems	<b>✓</b>	1	1	✓	1	
Involvement in the Problem Behavior  School  Early and Persistent Antisocial Behavior  Academic Failure in Elementary School  Lack of Commitment to School  Individual/Peer  Alienation and Rebelliousness  Friends Who Engage in a Problem Behavior  Favorable Attitudes Toward the Problem Behavior	Family Conflict	<b>✓</b>	1	1	✓	1	
Involvement in the Problem Behavior  School  Early and Persistent Antisocial Behavior  Academic Failure in Elementary School  Lack of Commitment to School  Individual/Peer  Alienation and Rebelliousness  Friends Who Engage in a Problem Behavior  Favorable Attitudes Toward the Problem Behavior	Favorable Parental Attitudes and	./	1			1	
Early and Persistent Antisocial Behavior  Academic Failure in Elementary School  Lack of Commitment to School  Individual/Peer  Alienation and Rebelliousness  Friends Who Engage in a Problem Behavior  Favorable Attitudes Toward the Problem Behavior	Involvement in the Problem Behavior	_					
Academic Failure in Elementary School  Lack of Commitment to School  Individual/Peer  Alienation and Rebelliousness  Friends Who Engage in a Problem Behavior  Favorable Attitudes Toward the Problem Behavior	School						
Lack of Commitment to School  Individual/Peer  Alienation and Rebelliousness  Friends Who Engage in a Problem Behavior  Favorable Attitudes Toward the Problem Behavior	Early and Persistent Antisocial Behavior	✓	✓	✓	✓	1	
Individual/Peer  Alienation and Rebelliousness  Friends Who Engage in a Problem Behavior  Favorable Attitudes Toward the Problem Behavior	Academic Failure in Elementary School	1	✓	✓	1	1	
Alienation and Rebelliousness  Friends Who Engage in a Problem Behavior  Favorable Attitudes Toward the Problem Behavior	Lack of Commitment to School	✓	1	✓	<b>✓</b>		
Friends Who Engage in a Problem Behavior    Favorable Attitudes Toward the Problem Behavior    Behavior	Individual/Peer						
Favorable Attitudes Toward the Problem Behavior	Alienation and Rebelliousness	✓	<b>/</b>		✓		
Behavior V V	Friends Who Engage in a Problem Behavior	✓	<b>✓</b>	<b>✓</b>	✓	1	
	Favorable Attitudes Toward the Problem	./	1	./	./		
Early Initiation of the Problem Behavior	Behavior	•			•		
	Early Initiation of the Problem Behavior	✓	<b>/</b>	✓	✓	✓	

behaviors and identified risk factors for adolescent drug abuse and delinquency. The chart above shows the links between the 16 risk factors and the five problem behaviors. The check marks have been placed in the chart to indicate where at least two well designed, published research studies have shown a link between the risk factor and the problem behavior.

#### 3 SCHOOL IMPROVEMENT USING SURVEY DATA

Data from the Arkansas Prevention Needs Assessment Survey can be used to help school and community planners assess current conditions and prioritize areas of greatest need.

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

#### What are the numbers telling you?

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

- Which 3 to 5 risk factors appear to be higher than you would want?
- Which 3 to 5 protective factors appear to be lower than you would want?
- Which levels of 30 day drug use are increasing and/or unacceptably high?
  - Which substances are your students using the most?
  - At which grades do you see unacceptable usage levels?
- Which levels of antisocial behaviors are increasing and/or unacceptably high?
  - Which behaviors are your students exhibiting the most?
  - At which grades do you see unacceptable behavior levels?

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

- Look across the charts to determine which items stand out as either much higher or much lower than the others.
- Compare your data to statewide data and national data. Differences of 5% or more between the local and other data should be carefully reviewed.
- Determine the standards and values held in your area. For example: Is it acceptable in your community for 75% of high school students to drink alcohol regularly even when the statewide percentage is 90?

#### Use these data for planning:

- Substance use and antisocial behavior data raise awareness about the problems and promote dialogue.
- Risk and protective factor data identify exactly where the community needs to take action.
- Promising approaches talk with resources listed on the last page of this report for ideas about programs
  that have been proven effective in addressing the risk factors that are high in your area, and in improving the
  protective factors that are low.

	Unacceptable	Unacceptable	Unacceptable	Unacceptable
Measure	Rate #1	Rate #2	Rate #3	Rate #4
30 day drug use				
Antisocial behavior				
Risk factors				
Protective factors				

#### How do I decide which intervention(s) to employ?

- Strategies should be selected based on the risk factors that are high in your community and the protective factors
  that are low.
- Strategies should be age appropriate and employed prior to the onset of the problem behavior.
- Strategies chosen should address more than a single risk and protective factor.
- No single strategy offers the solution.

#### How do I know whether or not the intervention was effective?

Participation in the annual administration of the survey provides trend data necessary for determining the
effectiveness of the implemented intervention(s) and also provides data for determining any new efforts that are
needed.

#### 4 HOW TO READ THE CHARTS

- 1. Student responses for risk and protective factors, substance use and antisocial behavior questions are displayed by grade on the following pages.
- 2. The factors are grouped into 4 domains: community, family, peer-individual, and school.
- 3. The bars represent the percent of students in the grade who reported elevated risk or protection, substance use, antisocial behaviors or school safety concerns.
- 4. Scanning across these charts, you can easily determine which factors are most (or least) prevalent, thus identifying which are the most important for your community to address.
- 5. Bars will be complemented by a small dot. The dot shows the comparison from the state and provides additional information for you in determining the relative importance of each risk or protective factor.
- 6. A dashed line on each risk and protective factor chart represents the percentage of youth at risk or with protection for the seven state sample upon which the cut-points were developed. The seven states included in the norm group were Colorado, Illinois, Kansas, Maine, Oregon, Utah and Washington. This gives you a comparison to a national sample.
- 7. Brief definitions of the risk and protective factors can be found following the graphs.
- 8. Actual percentages are provided in the data tables following the charts.

## ATOD USE AND ANTISOCIAL BEHAVIOR, GRADE 6 Fulton County

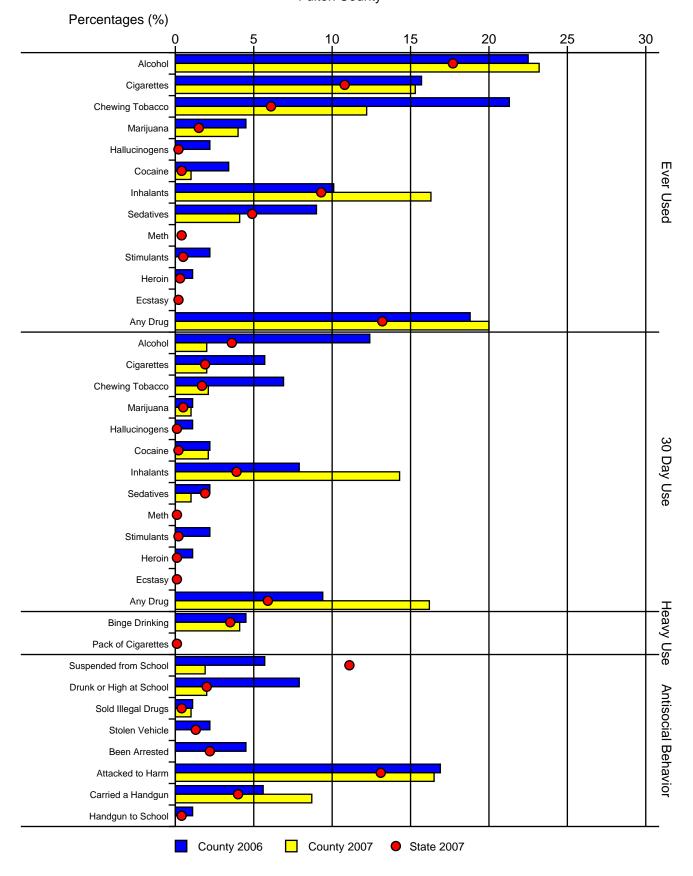


Figure 1: ATOD Use and Antisocial Behavior, Grade 6

## ATOD USE AND ANTISOCIAL BEHAVIOR, GRADE 8 Fulton County

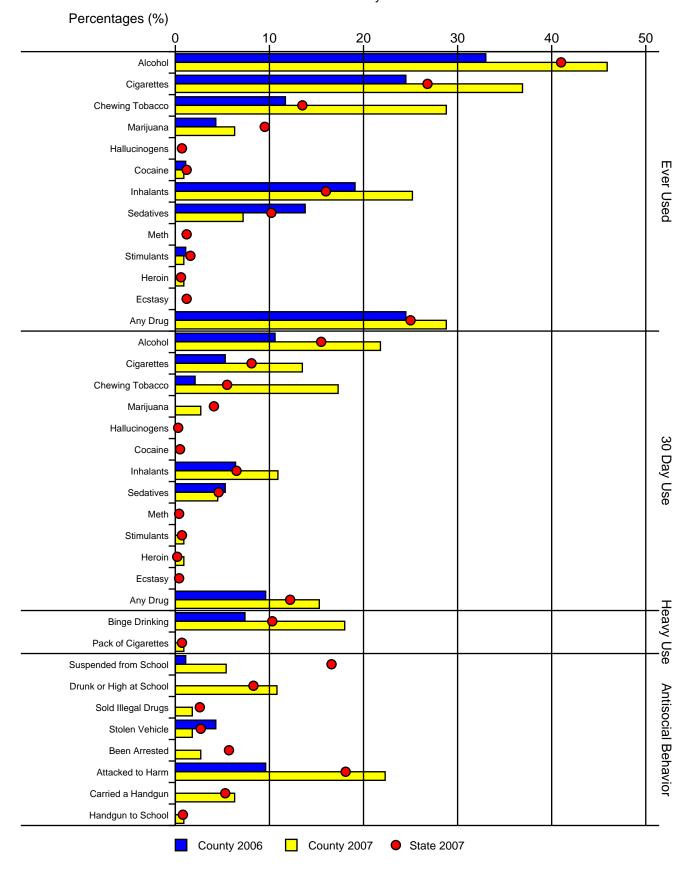


Figure 2: ATOD Use and Antisocial Behavior, Grade  $8\,$ 

## ATOD USE AND ANTISOCIAL BEHAVIOR, GRADE 10 Fulton County

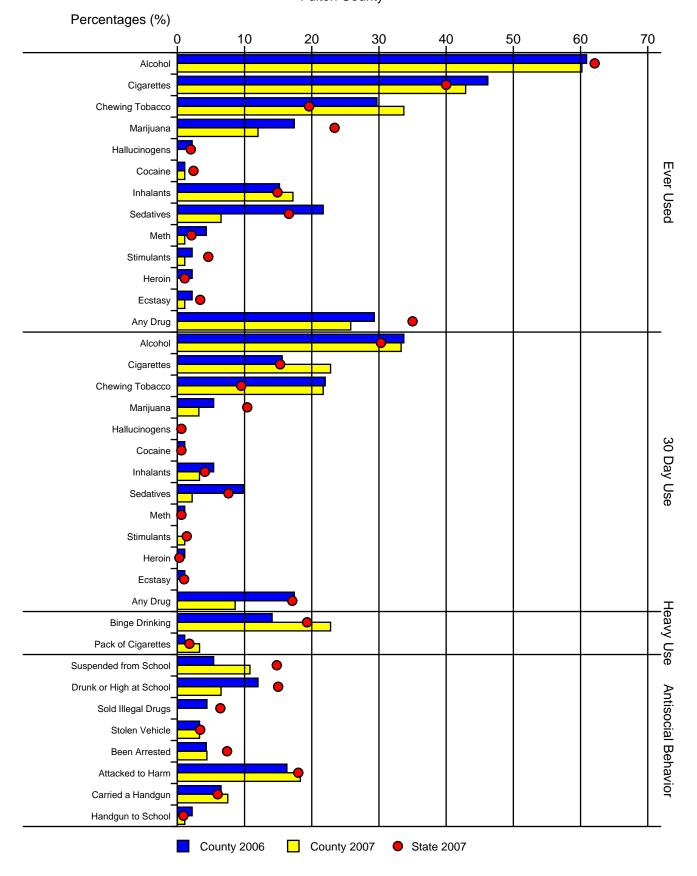


Figure 3: ATOD Use and Antisocial Behavior, Grade 10

#### ATOD USE AND ANTISOCIAL BEHAVIOR, GRADE 12 Fulton County

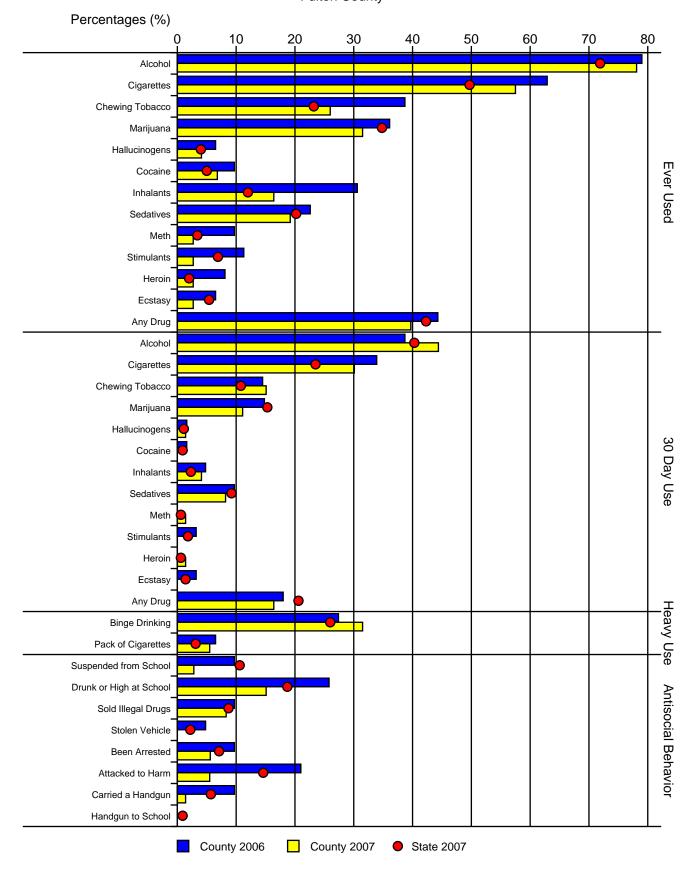


Figure 4: ATOD Use and Antisocial Behavior, Grade 12

## RISK PROFILE, GRADE 6 Fulton County

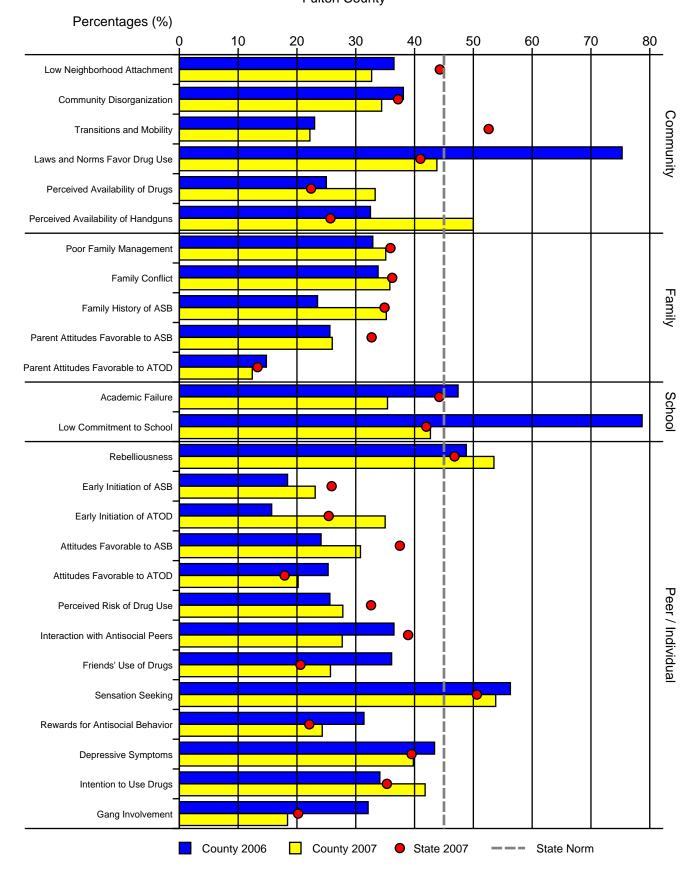


Figure 5: Risk Profile, Grade 6

## RISK PROFILE, GRADE 8 Fulton County

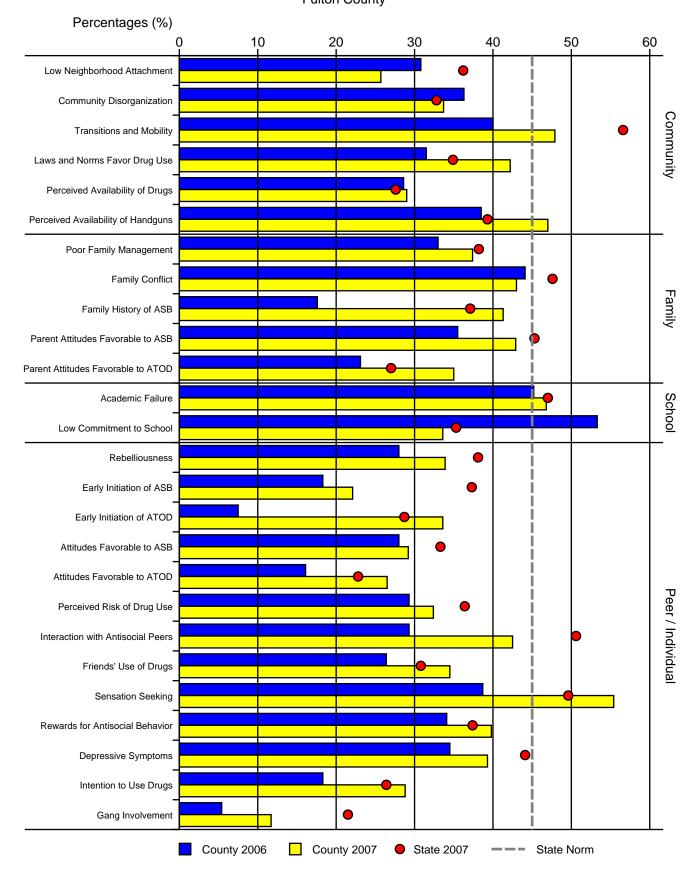


Figure 6: Risk Profile, Grade 8

#### RISK PROFILE, GRADE 10

**Fulton County** 

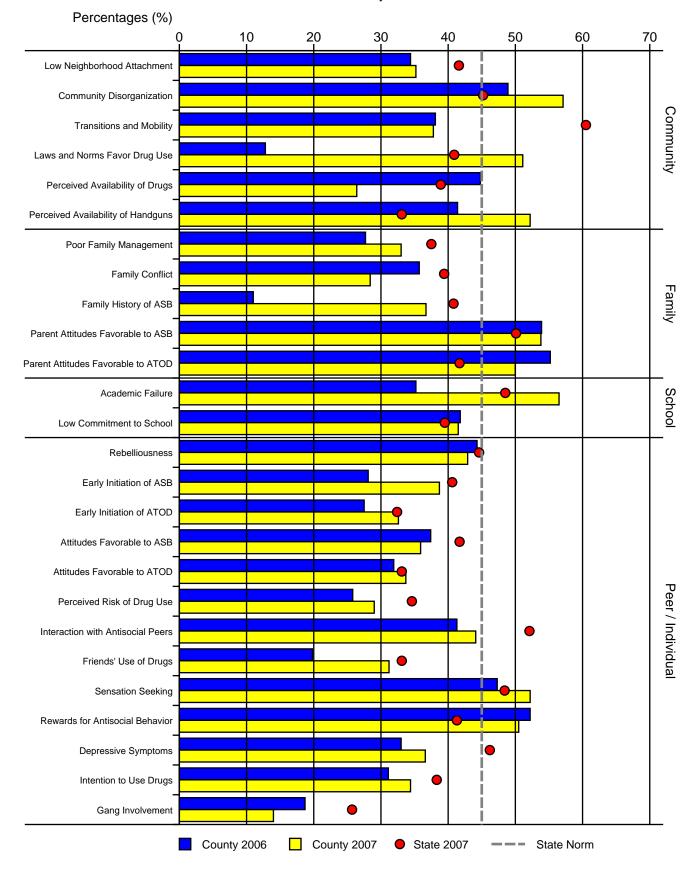
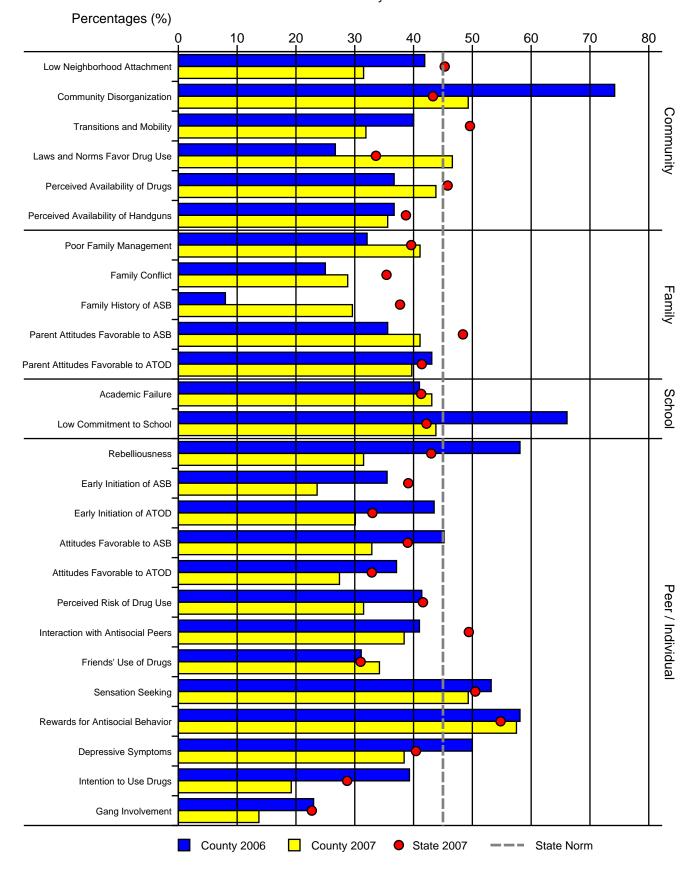


Figure 7: Risk Profile, Grade 10

#### RISK PROFILE, GRADE 12

**Fulton County** 



## PROTECTIVE PROFILE, GRADE 6 Fulton County

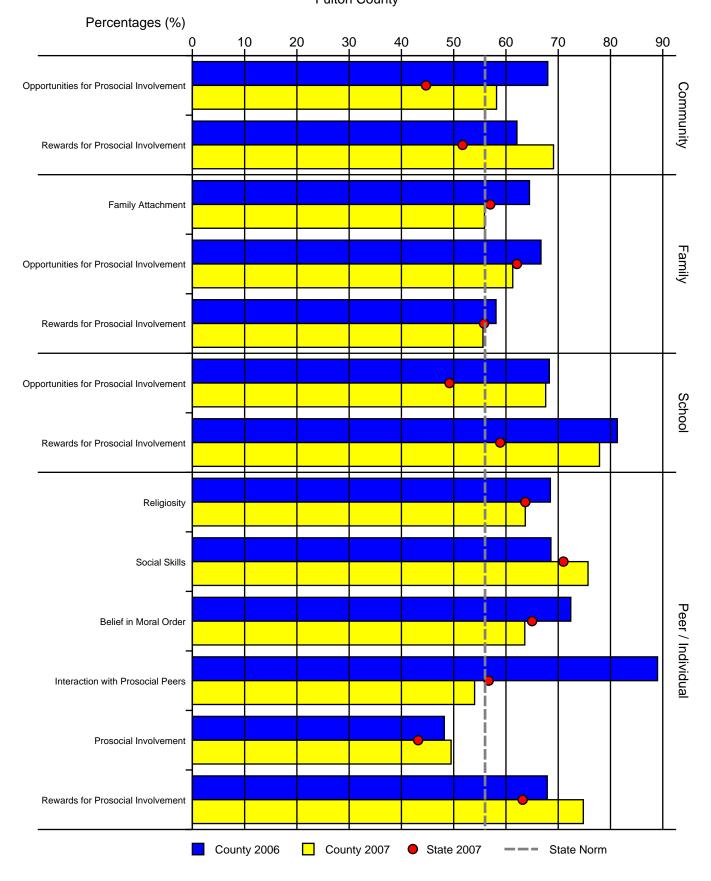


Figure 9: Protective Profile, Grade 6

## PROTECTIVE PROFILE, GRADE 8 Fulton County

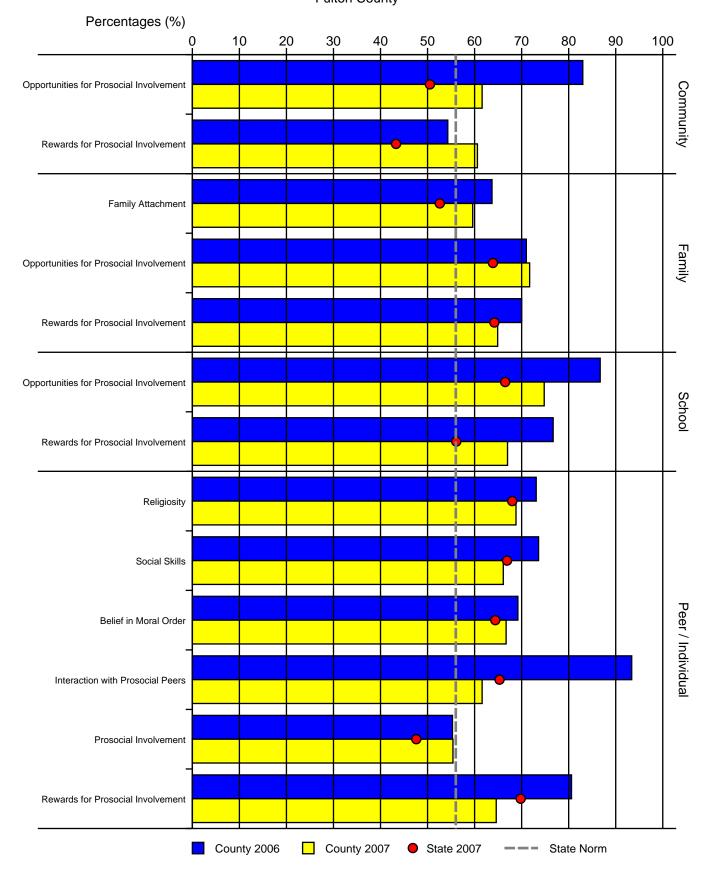


Figure 10: Protective Profile, Grade 8

#### PROTECTIVE PROFILE, GRADE 10

**Fulton County** 

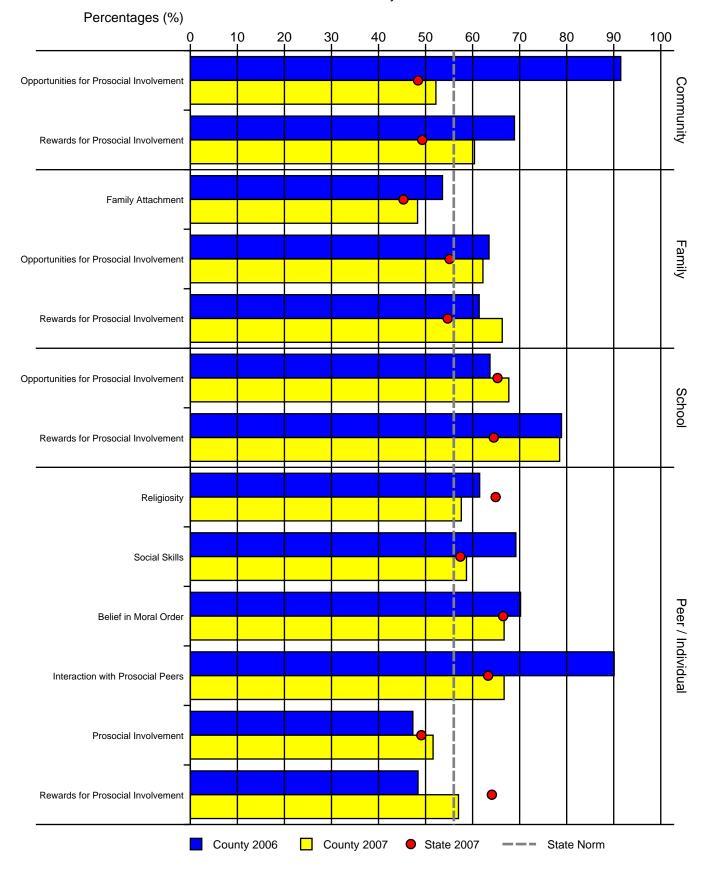


Figure 11: Protective Profile, Grade 10

#### PROTECTIVE PROFILE, GRADE 12

**Fulton County** 

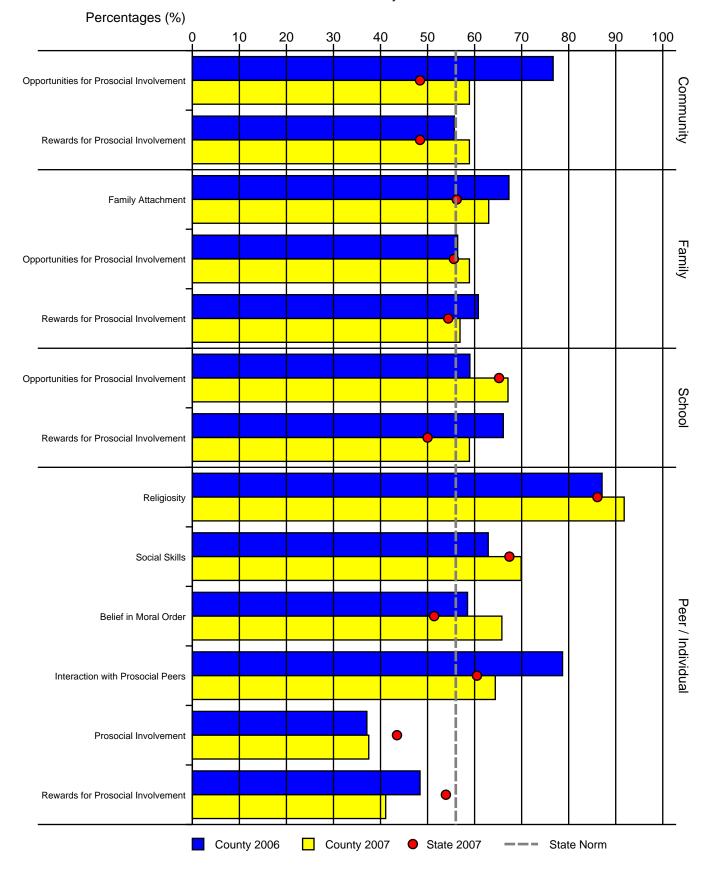


Figure 12: Protective Profile, Grade 12

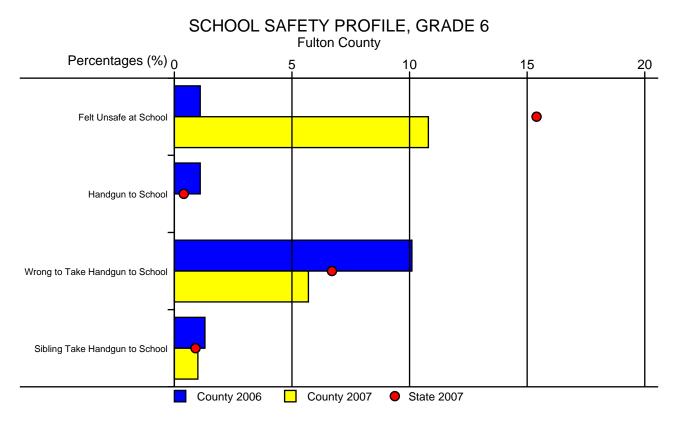


Figure 13: School Safety Profile, Grade 6

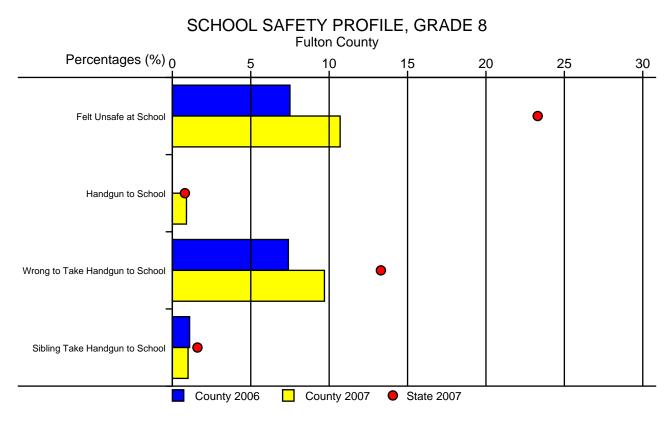


Figure 14: School Safety Profile, Grade 8

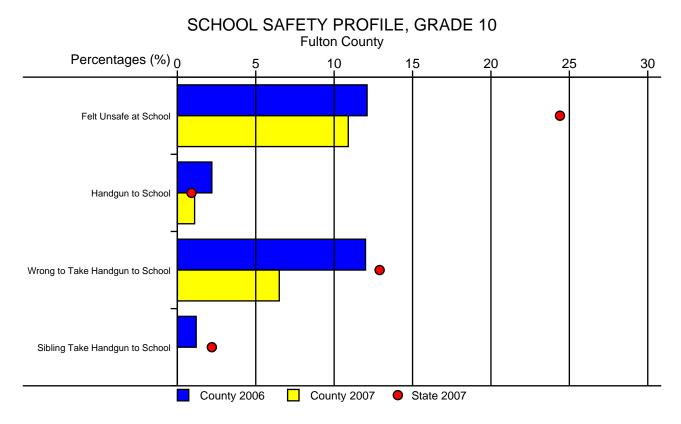


Figure 15: School Safety Profile, Grade 10

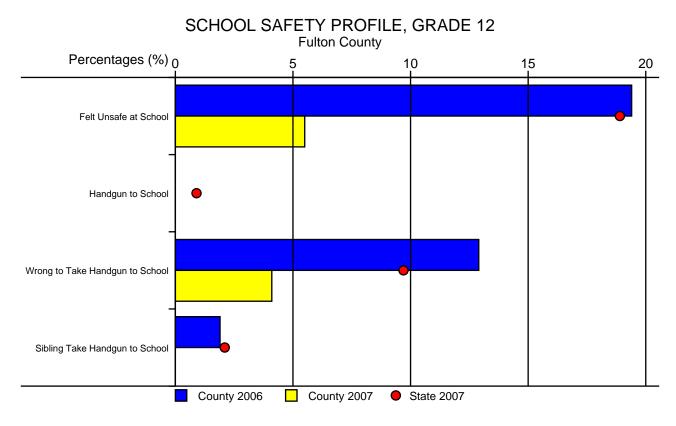


Figure 16: School Safety Profile, Grade 12

# NO CHILD LEFT BEHIND PROFILE, GRADE 6 Fulton County

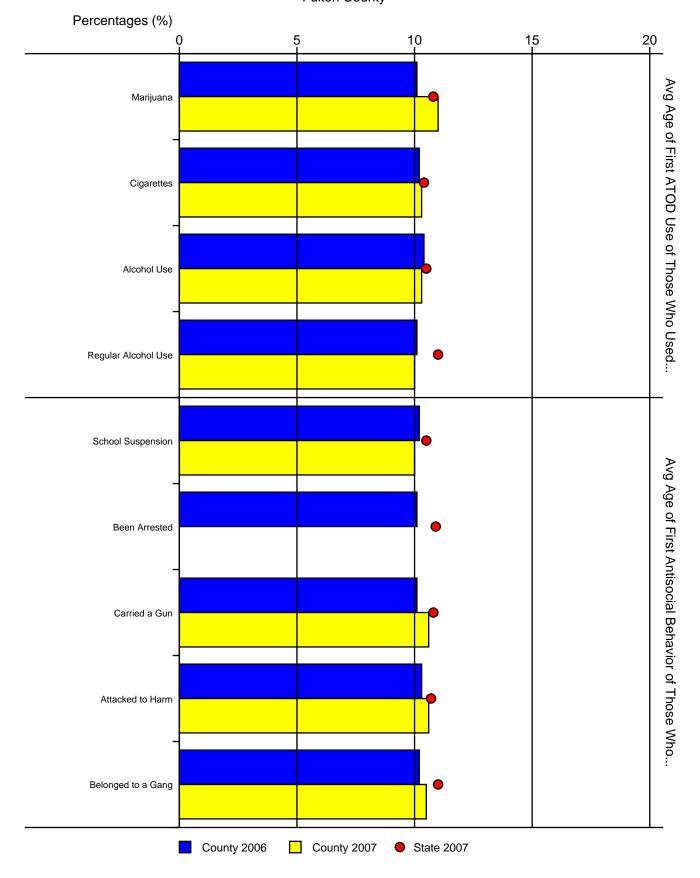


Figure 17: No Child Left Behind Profile, Grade  $6\,$ 

# NO CHILD LEFT BEHIND PROFILE, GRADE 8 Fulton County

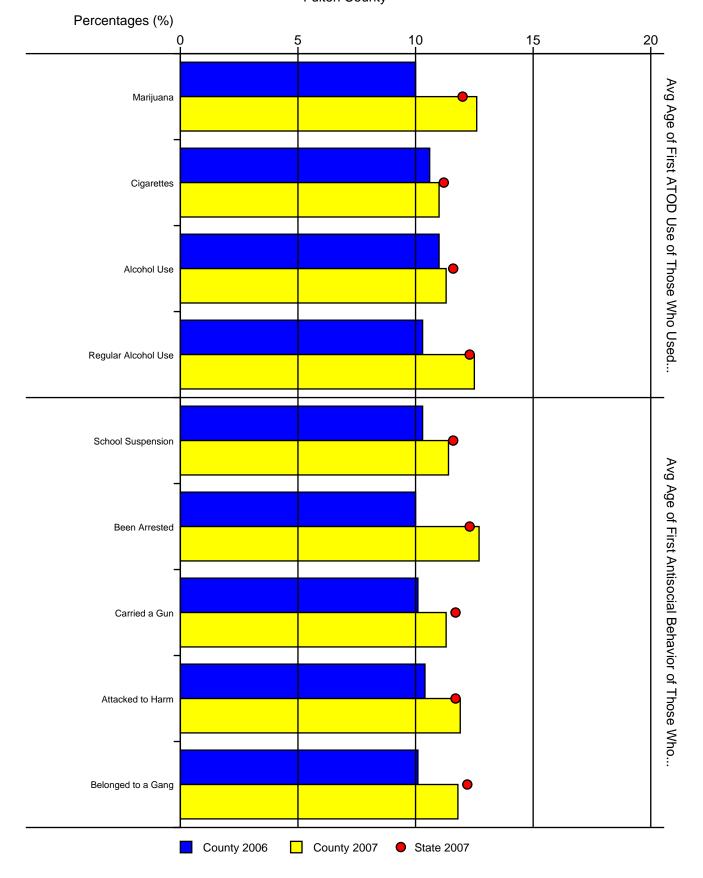


Figure 18: No Child Left Behind Profile, Grade  $8\,$ 

# NO CHILD LEFT BEHIND PROFILE, GRADE 10 Fulton County

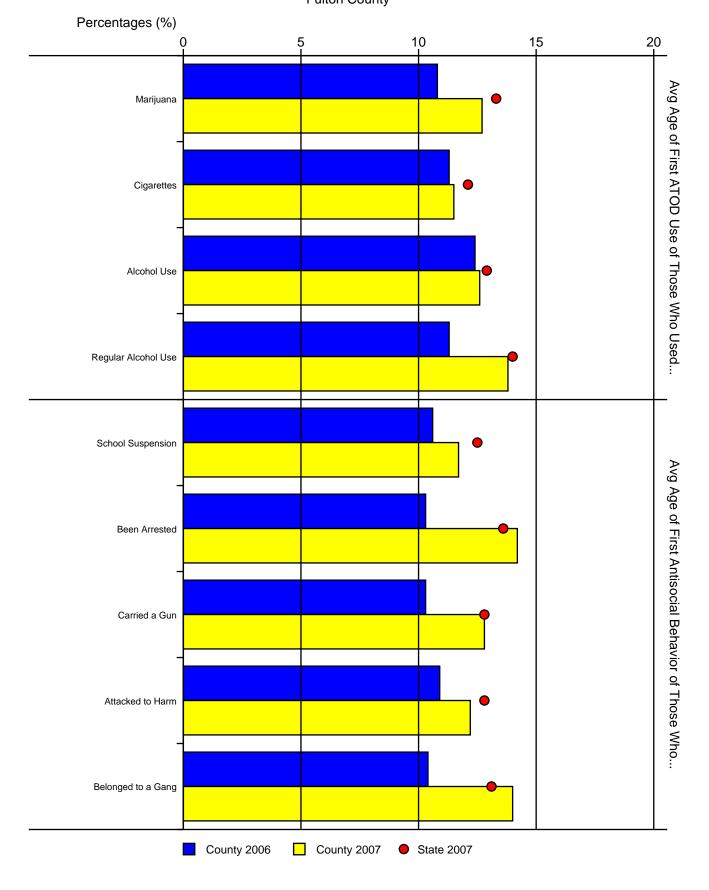


Figure 19: No Child Left Behind Profile, Grade  $10\,$ 

# NO CHILD LEFT BEHIND PROFILE, GRADE 12 Fulton County

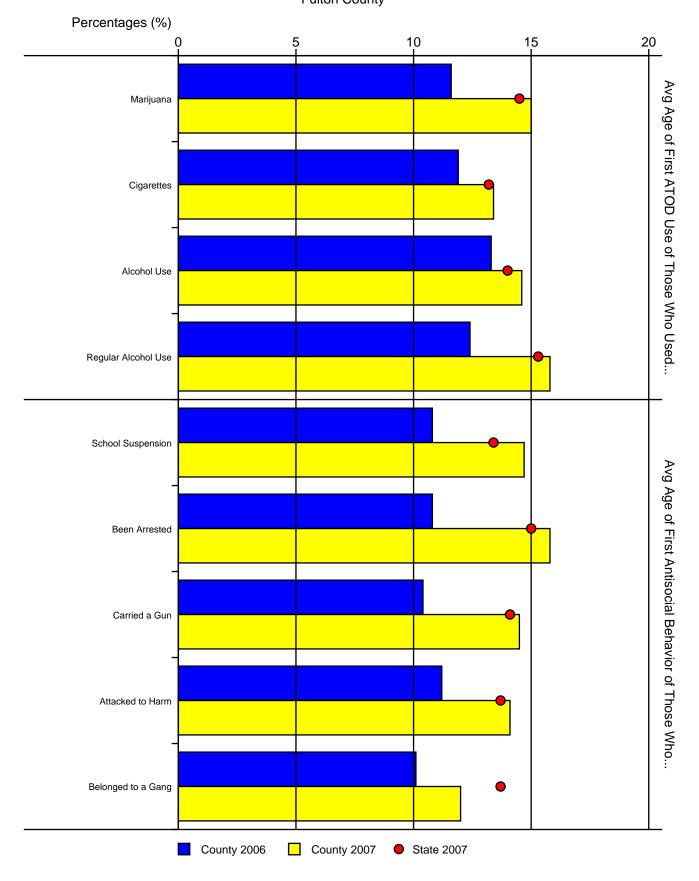


Figure 20: No Child Left Behind Profile, Grade 12

## SOURCES AND PLACES OF ALCOHOL USE, GRADE 6 Fulton County

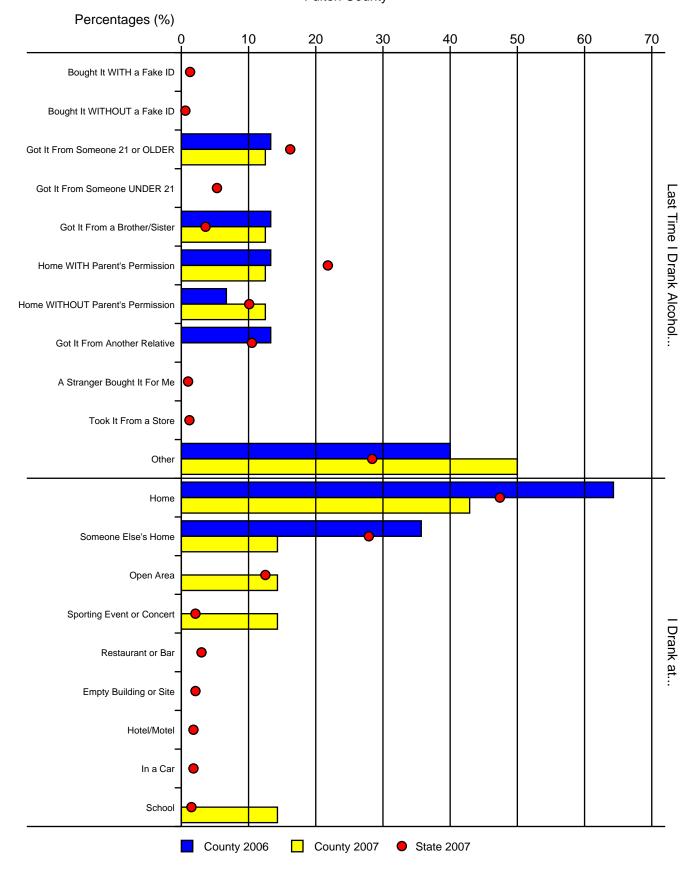


Figure 21: Sources and Places of Alcohol Use, Grade 6

## SOURCES AND PLACES OF ALCOHOL USE, GRADE 8 Fulton County

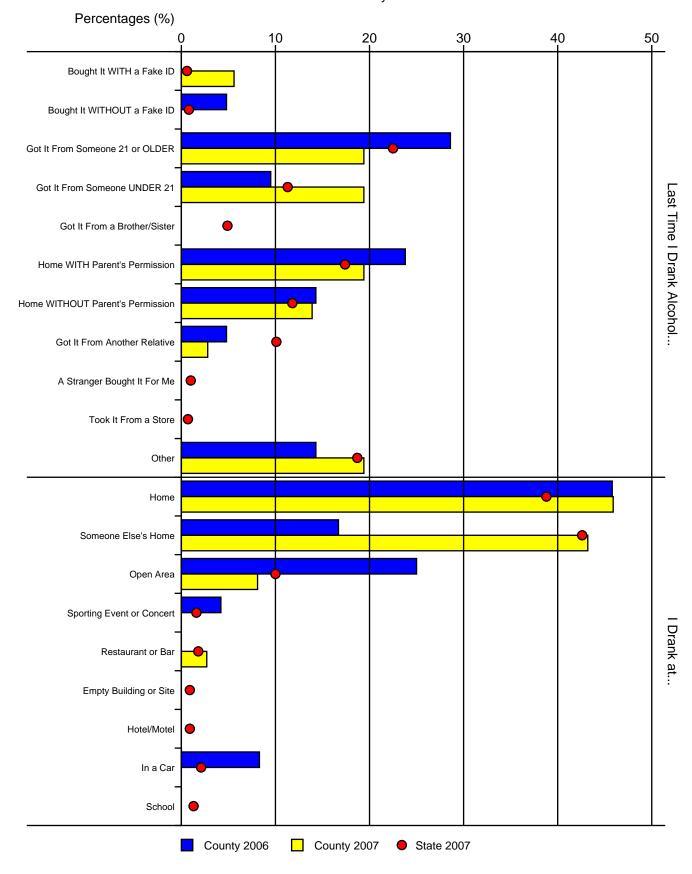


Figure 22: Sources and Places of Alcohol Use, Grade 8

## SOURCES AND PLACES OF ALCOHOL USE, GRADE 10 Fulton County

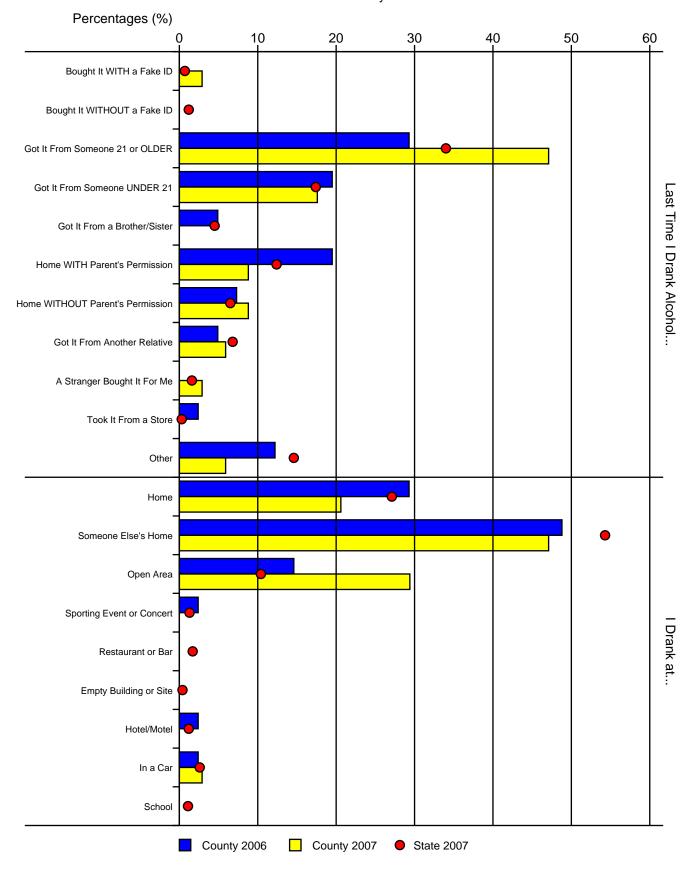


Figure 23: Sources and Places of Alcohol Use, Grade  $10\,$ 

## SOURCES AND PLACES OF ALCOHOL USE, GRADE 12 Fulton County

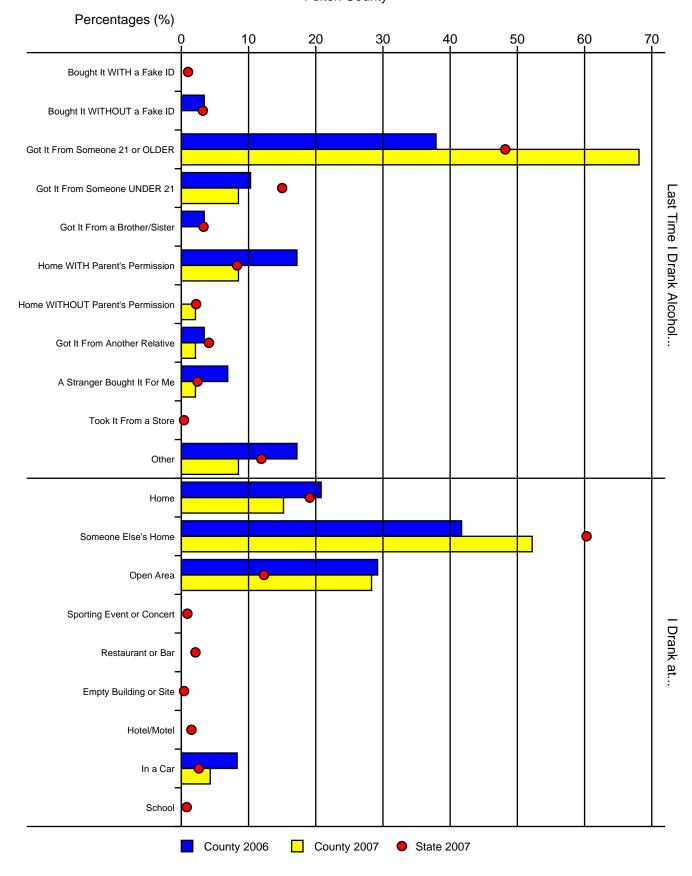


Figure 24: Sources and Places of Alcohol Use, Grade 12

## SOURCES AND PLACES OF CIGARETTE USE, GRADE 6 Fulton County

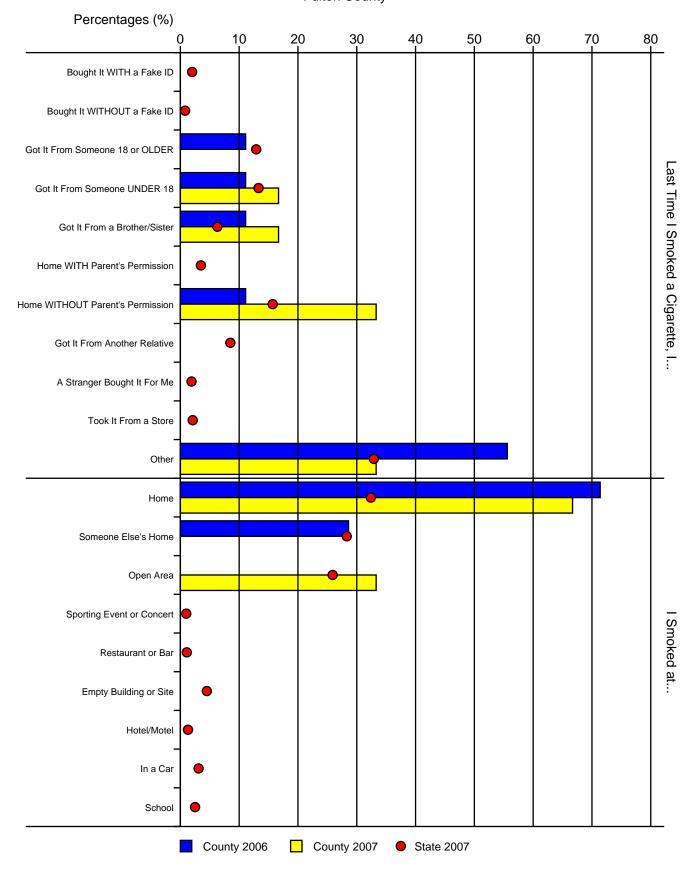


Figure 25: Sources and Places of Cigarette Use, Grade 6

## SOURCES AND PLACES OF CIGARETTE USE, GRADE 8 Fulton County

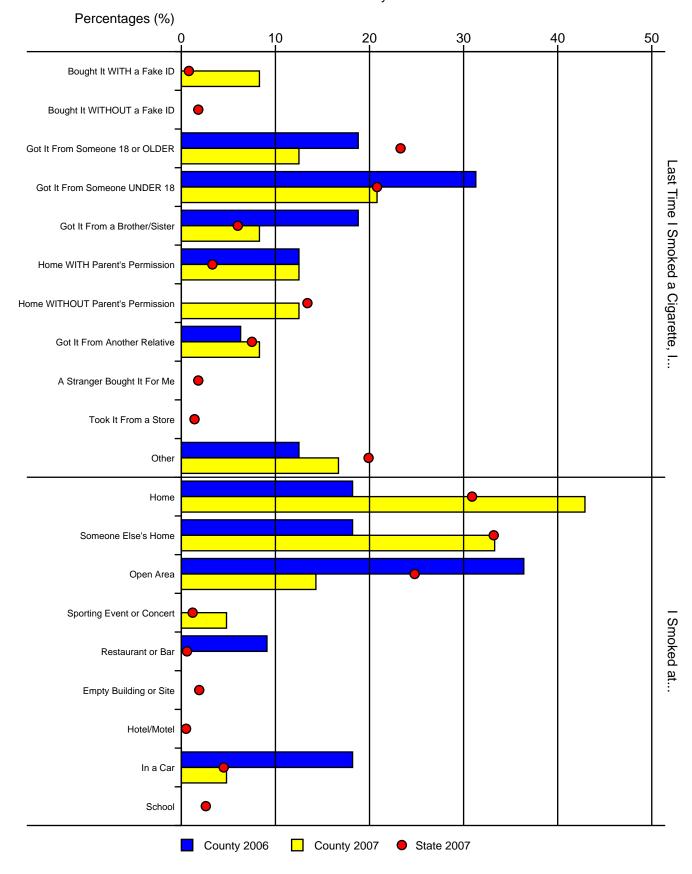


Figure 26: Sources and Places of Cigarette Use, Grade  $8\,$ 

## SOURCES AND PLACES OF CIGARETTE USE, GRADE 10 Fulton County

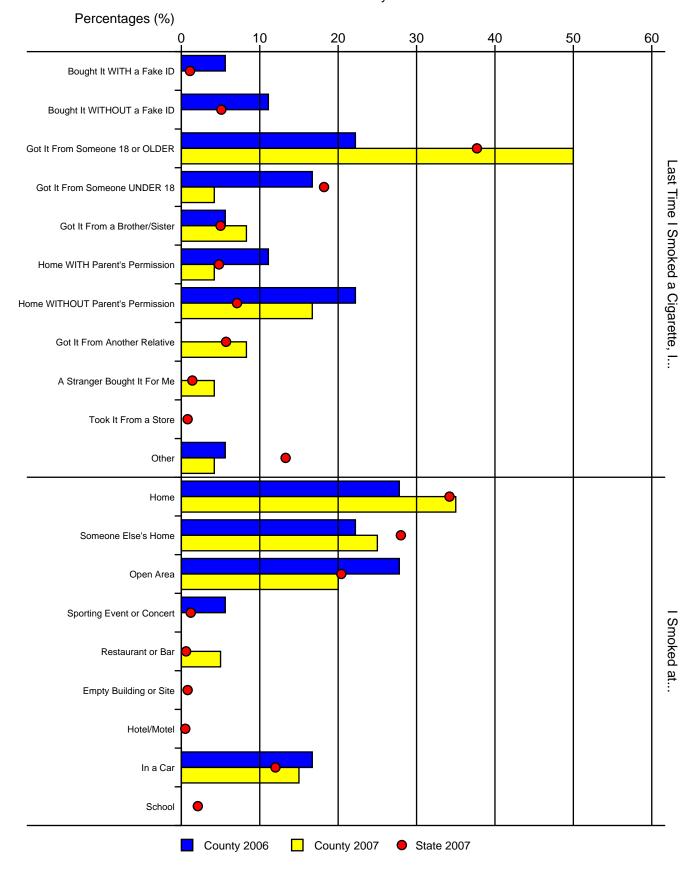


Figure 27: Sources and Places of Cigarette Use, Grade 10

## SOURCES AND PLACES OF CIGARETTE USE, GRADE 12 Fulton County

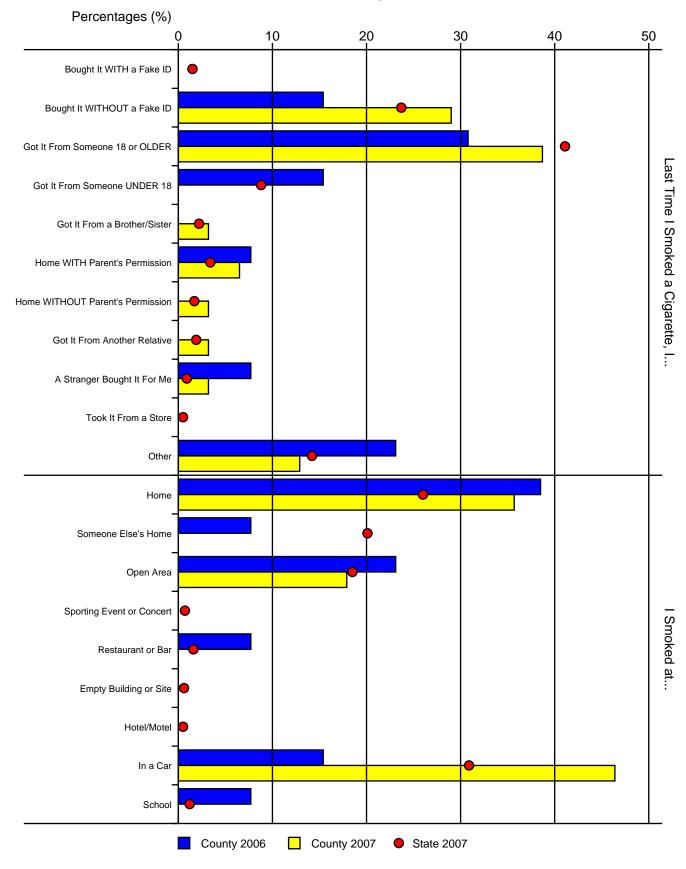


Figure 28: Sources and Places of Cigarette Use, Grade 12

Table 3: Risk and Protective Factor Scale Definition

Table 3: Risk and Protective Factor Scale Definition  Community Domain Risk Factors									
Community and Danson al									
Community and Personal	Neighborhoods with high rates of residential mobility have been shown to have higher rates of								
Transitions & Mobility	juvenile crime and drug selling, while children who experience frequent residential moves and								
stressful life transitions have been shown to have higher risk for school failure, delinquency, and									
~	drug use.  Community  Research has shown that neighborhoods with high population density, lack of natural survaillance								
Community	Research has shown that neighborhoods with high population density, lack of natural surveillance								
Disorganization	of public places, physical deterioration, and high rates of adult crime also have higher rates of								
	juvenile crime and drug selling.								
Low Neighborhood	A low level of bonding to the neighborhood is related to higher levels of juvenile crime and drug								
Attachment	selling.								
Laws and Norms	Research has shown that legal restrictions on alcohol and tobacco use, such as raising the legal								
Favorable Toward	drinking age, restricting smoking in public places, and increased taxation have been followed by								
Drug Use	decreases in consumption. Moreover, national surveys of high school seniors have shown that shifts								
	in normative attitudes toward drug use have preceded changes in prevalence of use.								
Perceived Availability of	The availability of cigarettes, alcohol, marijuana, and other illegal drugs has been related to the								
Drugs and Handguns	use of these substances by adolescents. The availability of handguns is also related to a higher risk								
	of crime and substance use by adolescents.								
	Community Domain Protective Factors								
Opportunities for	When opportunities are available in a community for positive participation, children are less likely								
Positive Involvement	to engage in substance use and other problem behaviors.								
Rewards for Positive	Rewards for positive participation in activities help children bond to the community, thus lowering								
Involvement	their risk for substance use.								
	Family Domain Risk Factors								
Family History of	When children are raised in a family with a history of problem behaviors (e.g., violence or ATOD								
Antisocial Behavior	use), the children are more likely to engage in these behaviors.								
Family Conflict	Children raised in families high in conflict, whether or not the child is directly involved in the								
	conflict, appear at risk for both delinquency and drug use.								
Parental Attitudes	In families where parents use illegal drugs, are heavy users of alcohol, or are tolerant of children's								
Favorable Toward	use, children are more likely to become drug abusers during adolescence. The risk is further								
Antisocial Behavior &	increased if parents involve children in their own drug (or alcohol) using behavior, for example,								
Drugs	asking the child to light the parent's cigarette or get the parent a beer from the refrigerator.								
Poor Family	Parents' use of inconsistent and/or unusually harsh or severe punishment with their children								
Management	places them at higher risk for substance use and other problem behaviors. Also, parents' failure								
	to provide clear expectations and to monitor their children's behavior makes it more likely that								
	they will engage in drug abuse whether or not there are family drug problems								
Family Domain Protective Factors									
Family Attachment	Young people who feel that they are a valued part of their family are less likely to engage in								
	substance use and other problem behaviors.								
Opportunities for	Young people who are exposed to more opportunities to participate meaningfully in the respon-								
Positive Involvement	sibilities and activities of the family are less likely to engage in drug use and other problem								
	behaviors.								
Rewards for Positive	When parents, siblings, and other family members praise, encourage, and attend to things done								
Involvement	well by their child, children are less likely to engage in substance use and problem behaviors.								
School Domain Risk Factors									
Academic Failure	Beginning in the late elementary grades (grades 4-6) academic failure increases the risk of both								
	drug abuse and delinquency. It appears that the experience of failure itself, for whatever reasons,								
	increases the risk of problem behaviors.								
Low Commitment	Surveys of high school seniors have shown that the use of hallucinogens, cocaine, heroin, stimulants,								
to School	and sedatives or non-medically prescribed tranquilizers is significantly lower among students who								
to School	and sedatives or non-medically prescribed tranquilizers is significantly lower among students who expect to attend college than among those who do not. Factors such as liking school, spending								
to School									
to School	expect to attend college than among those who do not. Factors such as liking school, spending								

Table 4: Risk and Protective Factor Scale Definition (Continued)

School Domain Protective Factors  Opportunities for Positive Involvement	e less eater or to
Positive Involvement ities at school, they are less likely to engage in drug use and other problem behaviors.  When young people are recognized and rewarded for their contributions at school, they are likely to be involved in substance use and other problem behaviors.  Peer-Individual Risk Factors  Early Initiation of Antisocial Behavior and Drug Use the age of 15 is a consistent predictor of drug abuse, and a later age of onset of drug use has shown to predict lower drug involvement and a greater probability of discontinuation of use.  Attitudes Favorable Toward Antisocial Behavior and However, in middle school, as more youth are exposed to others who use drugs and engage in drug use and other problem behaviors.  When young people are recognized and rewarded for their contributions at school, they are less likely to engage in drug use and other problem behaviors.  Peer-Individual Risk Factors  Early Initiation of drug use, the greater frequency of use. Onset of drug use prid the involvement in other drug use and the greater frequency of use. Onset of drug use has shown to predict lower drug involvement and a greater probability of discontinuation of use.  Attitudes Favorable During the elementary school years, most children express anti-drug, anti-crime, and prospective for the problem behaviors.	e less eater or to
Rewards for Positive Involvement When young people are recognized and rewarded for their contributions at school, they are likely to be involved in substance use and other problem behaviors.  Peer-Individual Risk Factors  Early Initiation of Antisocial Behavior and Drug Use the involvement in other drug use and the greater frequency of use. Onset of drug use pri the age of 15 is a consistent predictor of drug abuse, and a later age of onset of drug use has shown to predict lower drug involvement and a greater probability of discontinuation of use.  Attitudes Favorable Toward Antisocial Behavior and However, in middle school, as more youth are exposed to others who use drugs and engage in antisocial behavior and the probability of the probability of the age of 15 is a consistent predictor of drug abuse, and a later age of onset of drug use has shown to predict lower drug involvement and a greater probability of discontinuation of use.  Attitudes Favorable During the elementary school years, most children express anti-drug, anti-crime, and prosecuted to the probability of the proba	eater or to
Positive Involvement likely to be involved in substance use and other problem behaviors.  Peer-Individual Risk Factors  Early Initiation of Antisocial Behavior and Drug Use the age of 15 is a consistent predictor of drug abuse, and a later age of onset of drug use has shown to predict lower drug involvement and a greater probability of discontinuation of use.  Attitudes Favorable Toward Antisocial Behavior and However, in middle school, as more youth are exposed to others who use drugs and engage in antisocial behavior and substance use and other problem behaviors.  Peer-Individual Risk Factors  Early Initiation of trug use of drugs. The earlier the onset of any drug use, the greater frequency of use. Onset of drug use prid the involvement in other drug use and a later age of onset of drug use has shown to predict lower drug involvement and a greater probability of discontinuation of use.  Attitudes Favorable During the elementary school years, most children express anti-drug, anti-crime, and prosecuted attitudes and have difficulty imagining why people use drugs or engage in antisocial behavior and However, in middle school, as more youth are exposed to others who use drugs and engage in the involvement in other drug use and the greater frequency of use. Onset of drug use, the greater frequency of use. Onset of drug use, the greater frequency of use. Onset of drug use, the greater frequency of use. Onset of drug use, the greater frequency of use. Onset of drug use, the greater frequency of use. Onset of drug use, the greater frequency of use. Onset of drug use, the greater frequency of use. Onset of drug use, the greater frequency of use. Onset of drug use, the greater frequency of use. Onset of drug use, the greater frequency of use. Onset of drug use, the greater frequency of use. Onset of drug use, the greater frequency of use. Onset of drug use, the greater frequency of use. Onset of drug use, the greater frequency of use. Onset of drug use, the greater frequency of use. Onset of drug use, the greater freq	eater or to
Peer-Individual Risk Factors  Early Initiation of Antisocial Behavior and Drug Use  Attitudes Favorable Toward Antisocial Behavior and  Peer-Individual Risk Factors  Early onset of drug use predicts misuse of drugs. The earlier the onset of any drug use, the greater frequency of use. Onset of drug use pri the age of 15 is a consistent predictor of drug abuse, and a later age of onset of drug use has shown to predict lower drug involvement and a greater probability of discontinuation of use.  Attitudes Favorable Toward Antisocial Behavior and  However, in middle school, as more youth are exposed to others who use drugs and engage in antisocial behave the control of the properties of the p	or to
Early Initiation of Antisocial Behavior and Drug Use  Early onset of drug use predicts misuse of drugs. The earlier the onset of any drug use, the greater frequency of use. Onset of drug use pri the age of 15 is a consistent predictor of drug abuse, and a later age of onset of drug use has shown to predict lower drug involvement and a greater probability of discontinuation of use.  Attitudes Favorable Toward Antisocial Behavior and  Early onset of drug use predicts misuse of drugs. The earlier the onset of any drug use, the greater frequency of use. Onset of drug use has shown to predict lower drug involvement and a greater probability of discontinuation of use.  During the elementary school years, most children express anti-drug, anti-crime, and prostatiudes and have difficulty imagining why people use drugs or engage in antisocial behave.  However, in middle school, as more youth are exposed to others who use drugs and engage.	or to
of Antisocial Behavior and Drug Use the involvement in other drug use and the greater frequency of use. Onset of drug use pri the age of 15 is a consistent predictor of drug abuse, and a later age of onset of drug use has shown to predict lower drug involvement and a greater probability of discontinuation of use.  Attitudes Favorable Toward Antisocial Behavior and  Toward Antisocial	or to
and Drug Use the age of 15 is a consistent predictor of drug abuse, and a later age of onset of drug use has shown to predict lower drug involvement and a greater probability of discontinuation of use.  Attitudes Favorable During the elementary school years, most children express anti-drug, anti-crime, and prosecuted attitudes and have difficulty imagining why people use drugs or engage in antisocial behavior and However, in middle school, as more youth are exposed to others who use drugs and engage in an exposed to others who use drugs and engage in an exposed to others who use drugs and engage in an exposed to other who use drugs are exposed to other who are exposed to other who.	
shown to predict lower drug involvement and a greater probability of discontinuation of use.  Attitudes Favorable  Toward Antisocial  Behavior and  During the elementary school years, most children express anti-drug, anti-crime, and prosatitudes and have difficulty imagining why people use drugs or engage in antisocial behavior and  However, in middle school, as more youth are exposed to others who use drugs and engage in antisocial behavior and the school of	
Attitudes Favorable Toward Antisocial Behavior and During the elementary school years, most children express anti-drug, anti-crime, and prosatitudes and have difficulty imagining why people use drugs or engage in antisocial behavior and However, in middle school, as more youth are exposed to others who use drugs and engage.	been
Toward Antisocial attitudes and have difficulty imagining why people use drugs or engage in antisocial behavior and However, in middle school, as more youth are exposed to others who use drugs and engage in antisocial behavior and the school are exposed to others who use drugs and engage in antisocial behavior and the school are exposed to other who use drugs and engage in antisocial behavior and the school are exposed to other who use drugs and engage in antisocial behavior and the school are exposed to other who use drugs are exposed to other who are exposed to other who.	
Behavior and However, in middle school, as more youth are exposed to others who use drugs and enga	ocial
, , , , , , , , , , , , , , , , , , , ,	iors.
Drug Use antisocial behavior their attitudes often shift toward greater accentance of these behaviors. Y	ge in
anonocial behavior, onen accidence onten anni toward greater acceptance of these behaviors.	outh
who express positive attitudes toward drug use and antisocial behavior are more likely to en	
in a variety of problem behaviors, including drug use.	0.0.
Friends' Use of Drugs  Young people who associate with peers who engage in alcohol or substance abuse are much	more
likely to engage in the same behavior. Peer drug use has consistently been found to be as	
the strongest predictors of substance use among youth. Even when young people come from	
managed families and do not experience other risk factors, spending time with friends wh	
drugs greatly increases the risk of that problem developing.	, abc
Interaction with Young people who associate with peers who engage in problem behaviors are at higher ris	k for
Antisocial Peers engaging in antisocial behavior themselves.	101
Perceived Risk of Young people who do not perceive drug use to be risky are far more likely to engage in drug	1100
Drug Use	use.
Rewards for Young people who receive rewards for their antisocial behavior are at higher risk for eng	
Antisocial Behavior further in antisocial behavior and substance use.	ıgıng
Rebelliousness Young people who do not feel part of society, are not bound by rules, don't believe in trying	to bo
successful or responsible, or who take an active rebellious stance toward society, are at highe	
of abusing drugs. In addition, high tolerance for deviance, a strong need for independence	
normlessness have all been linked with drug use.	and
Sensation Seeking  Young people who seek out opportunities for dangerous, risky behavior in general are at h	ighon
risk for participating in drug use and other problem behaviors.	gner
Intention to Use ATODs   Many prevention programs focus on reducing the intention of participants to use ATODs lat	er in
life. Reduction of intention to use ATODs often follows successful prevention interventions.	
Depressive Symptoms Young people who are depressed are overrepresented in the criminal justice system and are	
likely to use drugs. Survey research and other studies have shown a link between depression	and
other youth problem behaviors.	
Gang Involvement Youth who belong to gangs are more at risk for antisocial behavior and drug use.	
Peer-Individual Protective Factors	
Religiosity Young people who regularly attend religious services are less likely to engage in problem behavior	
Social Skills Young people who are socially competent and engage in positive interpersonal relations with	their
peers are less likely to use drugs and engage in other problem behaviors.	
Belief in the Moral Order Young people who have a belief in what is "right" or "wrong" are less likely to use drugs.	
Opportunities for Participation in positive school and community activities helps provide protection for youth	
Prosocial Involvement	
Rewards for Young people who are rewarded for working hard in school and volunteering in the communit	y are
Prosocial Involvement less likely to engage in problem behavior.	
	from
Interaction with Young people who associate with peers who engage in prosocial behavior are more protected	

Table 5: Number of Students Who Completed the Survey

		Grade 6			Grade 8			Grade 10			Grade 12	
Surveys Completed	County	County	State	County	County	State	County	County	State	County	County	State
	2006	2007	2007	2006	2007	2007	2006	2007	2007	2006	2007	2007
Number of Youth	89	105	22910	94	113	22082	92	94	19315	62	73	15291

Table 6: Percentage of Students Who Used ATODs During Their Lifetime

		Grade 6			Grade 8			Grade 10			Grade 12	
Drug Used	County	County	State	County	County	State	County	County	State	County	County	State
	2006	2007	2007	2006	2007	2007	2006	2007	2007	2006	2007	2007
Alcohol	22.5	23.2	17.7	33.0	45.9	41.0	60.9	60.2	62.1	79.0	78.1	71.9
Cigarettes	15.7	15.3	10.8	24.5	36.9	26.8	46.2	42.9	40.0	62.9	57.5	49.7
Chewing Tobacco	21.3	12.2	6.1	11.7	28.8	13.5	29.7	33.7	19.6	38.7	26.0	23.2
Marijuana	4.5	4.0	1.5	4.3	6.3	9.5	17.4	12.0	23.4	36.1	31.5	34.8
Hallucinogens	2.2	0	0.2	0	0	0.7	2.2	0	2.0	6.5	4.1	4.0
Cocaine	3.4	1.0	0.4	1.1	0.9	1.2	1.1	1.1	2.4	9.7	6.8	5.0
Inhalants	10.1	16.3	9.3	19.1	25.2	16.0	15.2	17.2	14.9	30.6	16.4	12.0
Sedatives	9.0	4.1	4.9	13.8	7.2	10.2	21.7	6.5	16.6	22.6	19.2	20.2
Meth	0	0	0.4	0	0	1.2	4.3	1.1	2.1	9.7	2.7	3.4
Stimulants	2.2	0	0.5	1.1	0.9	1.6	2.2	1.1	4.6	11.3	2.7	6.9
Heroin	1.1	0	0.3	0	0.9	0.6	2.2	0	1.1	8.1	2.7	2.0
Ecstasy	0	0	0.2	0	0	1.2	2.2	1.1	3.4	6.5	2.7	5.4
Any Drug	18.8	20.0	13.2	24.5	28.8	25.0	29.3	25.8	35.0	44.3	39.7	42.3

Table 7: Percentage of Students Who Used ATODs During the Past 30 Days

		Grade 6			Grade 8			Grade 10			Grade 12	
Drug Used	County	County	State	County	County	State	County	County	State	County	County	State
	2006	2007	2007	2006	2007	2007	2006	2007	2007	2006	2007	2007
Alcohol	12.4	2.0	3.6	10.6	21.8	15.5	33.7	33.3	30.3	38.7	44.4	40.3
Cigarettes	5.7	2.0	1.9	5.3	13.5	8.1	15.6	22.8	15.3	33.9	30.1	23.5
Chewing Tobacco	6.9	2.1	1.7	2.1	17.3	5.5	22.0	21.7	9.5	14.5	15.1	10.8
Marijuana	1.1	1.0	0.5	0	2.7	4.1	5.4	3.2	10.4	14.8	11.1	15.3
Hallucinogens	1.1	0	0.1	0	0	0.3	0	0	0.6	1.6	1.4	1.1
Cocaine	2.2	2.1	0.2	0	0	0.5	1.1	0	0.6	1.6	0	0.9
Inhalants	7.9	14.3	3.9	6.4	10.9	6.5	5.4	3.3	4.1	4.8	4.1	2.3
Sedatives	2.2	1.0	1.9	5.3	4.5	4.6	9.8	2.2	7.6	9.7	8.2	9.2
Meth	0	0	0.1	0	0	0.4	1.1	0	0.6	0	1.4	0.6
Stimulants	2.2	0	0.2	0	0.9	0.7	0	1.1	1.4	3.2	0	1.8
Heroin	1.1	0	0.1	0	0.9	0.2	1.1	0	0.3	0	1.4	0.6
Ecstasy	0	0	0.1	0	0	0.4	1.1	0	1.0	3.2	0	1.4
Any Drug	9.4	16.2	5.9	9.6	15.3	12.2	17.4	8.6	17.1	18.0	16.4	20.6

Table 8: Percentage of Students With Heavy Use of Alcohol and Cigarettes

		Grade 6			Grade 8			Grade 10			Grade 12	
Drug Used	County	County	State	County	County	State	County	County	State	County	County	State
	2006	2007	2007	2006	2007	2007	2006	2007	2007	2006	2007	2007
Binge Drinking	4.5	4.1	3.5	7.4	18.0	10.3	14.1	22.8	19.3	27.4	31.5	26.0
Pack of Cigarettes	0	0	0.1	0	0.9	0.7	1.1	3.3	1.8	6.5	5.5	3.1

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

		Grade 6			Grade 8			Grade 10			Grade 12	
Behavior	County	County	State	County	County	State	County	County	State	County	County	State
	2006	2007	2007	2006	2007	2007	2006	2007	2007	2006	2007	2007
Suspended from School	5.7	1.9	11.1	1.1	5.4	16.6	5.4	10.8	14.8	9.7	2.8	10.6
Drunk or High at School	7.9	2.0	2.0	0	10.8	8.3	12.0	6.5	15.0	25.8	15.1	18.7
Sold Illegal Drugs	1.1	1.0	0.4	0	1.8	2.6	4.4	0	6.4	9.7	8.3	8.7
Stolen Vehicle	2.2	0	1.3	4.3	1.8	2.7	3.3	3.3	3.4	4.8	0	2.2
Been Arrested	4.5	0	2.2	0	2.7	5.7	4.3	4.4	7.4	9.7	5.6	7.1
Attacked to Harm	16.9	16.5	13.1	9.6	22.3	18.1	16.3	18.3	18.0	21.0	5.5	14.6
Carried a Handgun	5.6	8.7	4.0	0	6.3	5.3	6.5	7.5	6.0	9.7	1.4	5.7
Handgun to School	1.1	0	0.4	0	0.9	0.8	2.2	1.1	0.9	0	0	0.9

Table 10: Percentage of Students Reporting Protection

		Grade 6			Grade 8			Grade 10			Grade 12	
Protective Factor	County	County	State	County	County	State	County	County	State	County	County	State
	2006	2007	2007	2006	2007	2007	2006	2007	2007	2006	2007	2007
Community		'					<u>'</u>			<u>'</u>		
Opportunities for												
Prosocial Involvement	68.0	58.2	44.7	83.0	61.6	50.5	91.5	52.2	48.4	76.7	58.9	48.4
Rewards for												
Prosocial Involvement	62.1	69.1	51.7	54.3	60.6	43.3	68.9	60.4	49.3	55.7	58.9	48.4
Family							•					
Family Attachment	64.5	55.9	57.0	63.7	59.6	52.6	53.6	48.3	45.3	67.3	63.0	56.2
Opportunities for												
Prosocial Involvement	66.7	61.3	62.1	71.0	71.7	63.9	63.5	62.2	55.1	56.4	58.9	55.6
Rewards for												
Prosocial Involvement	58.1	55.6	55.8	70.0	64.9	64.2	61.4	66.3	54.7	60.8	56.9	54.4
School												
Opportunities for												
Prosocial Involvement	68.3	67.6	49.2	86.7	74.8	66.5	63.7	67.7	65.3	59.0	67.1	65.2
Rewards for												
Prosocial Involvement	81.3	77.9	58.9	76.7	67.0	56.1	78.9	78.5	64.5	66.1	58.9	50.0
Peer / Individual												
Religiosity	68.5	63.7	63.7	73.1	68.8	68.0	61.5	57.6	64.9	87.1	91.8	86.1
Social Skills	68.6	75.7	71.0	73.6	66.1	66.9	69.2	58.7	57.4	62.9	69.9	67.4
Belief in Moral Order	72.4	63.6	65.0	69.2	66.7	64.4	70.2	66.7	66.5	58.5	65.8	51.4
Interaction with												
Prosocial Peers	89.0	54.0	56.7	93.4	61.6	65.3	90.1	66.7	63.3	78.7	64.4	60.5
Prosocial Involvement	48.2	49.5	43.2	55.3	55.4	47.6	47.3	51.6	49.1	37.1	37.5	43.5
Rewards for												
Prosocial Involvement	67.9	74.8	63.2	80.6	64.6	69.8	48.4	57.0	64.1	48.4	41.1	53.9

Table 11: Percentage of Students Reporting Risk

		Grade 6			Grade 8			Grade 10			Grade 12	
Risk Factor	County	County	State	County	County	State	County	County	State	County	County	State
	2006	2007	2007	2006	2007	2007	2006	2007	2007	2006	2007	2007
Community												
Low Neighborhood												
Attachment	36.5	32.7	44.3	30.8	25.7	36.2	34.4	35.2	41.6	41.9	31.5	45.3
Community												
Disorganization	38.1	34.4	37.2	36.3	33.7	32.8	48.9	57.1	45.2	74.2	49.3	43.3
Transitions and												
Mobility	23.0	22.2	52.6	40.0	47.9	56.6	38.1	37.8	60.5	40.0	31.9	49.6
Laws and Norms												
Favor Drug Use	75.3	43.8	41.0	31.5	42.2	34.9	12.8	51.1	40.9	26.7	46.6	33.6
Perceived Availability												
of Drugs	25.0	33.3	22.4	28.6	29.0	27.6	44.8	26.4	38.9	36.7	43.8	45.8
Perceived Availability												
of Handguns	32.5	50.0	25.7	38.5	47.0	39.3	41.4	52.2	33.1	36.7	35.6	38.7
Family												
Poor Family												
Management	32.9	35.1	35.9	33.0	37.4	38.2	27.7	33.0	37.5	32.1	41.1	39.6
Family Conflict	33.8	35.8	36.2	44.1	43.0	47.6	35.7	28.4	39.4	25.0	28.8	35.4
Family History of												
ASB	23.5	35.2	34.9	17.6	41.3	37.1	11.0	36.7	40.8	8.0	29.6	37.7
Parent Attitudes												
Favorable to ASB	25.6	26.0	32.7	35.5	42.9	45.3	53.9	53.8	50.1	35.6	41.1	48.4
Parent Attitudes												
Favorable to ATOD	14.8	12.4	13.3	23.1	35.0	27.0	55.2	50.0	41.7	43.1	39.7	41.4
School												
Academic Failure	47.4	35.4	44.2	45.2	46.8	47.0	35.2	56.5	48.5	41.0	43.1	41.3
Low Commitment												
to School	78.7	42.7	42.0	53.3	33.6	35.3	41.8	41.5	39.5	66.1	43.8	42.2
Peer / Individual		-					_					
Rebelliousness	48.8	53.5	46.8	28.0	33.9	38.1	44.3	42.9	44.6	58.1	31.5	43.0
Early Initiation										_		
of ASB	18.4	23.1	25.9	18.3	22.1	37.3	28.1	38.7	40.6	35.5	23.6	39.1
Early Initiation												
of ATOD	15.7	35.0	25.4	7.5	33.6	28.7	27.5	32.6	32.4	43.5	30.1	33.0
Attitudes Favorable	04.1	20.0	27.5	20.0	20.0	22.2	27.4	25.0	44 7	45.0	20.0	20.0
to ASB	24.1	30.8	37.5	28.0	29.2	33.3	37.4	35.9	41.7	45.2	32.9	39.0
Attitudes Favorable	25.2	20.2	17.0	16.1	26.5	22.0	21.0	22.7	22.1	27.1	27.4	22.0
to ATOD	25.3	20.2	17.9	16.1	26.5	22.8	31.9	33.7	33.1	37.1	27.4	32.9
Perceived Risk of	25.6	07.0	20.6	20.2	20.4	26.4	25.0	20.0	24.6	41 4	21 5	41.6
Drug Use	25.6	27.8	32.6	29.3	32.4	36.4	25.8	29.0	34.6	41.4	31.5	41.6
Interaction with Antisocial Peers	26 5	27.7	38.9	20.2	40 E	E0 6	/11 O	441	EO 1	41.0	20.4	40.4
Friends' Use of Drugs	36.5	27.7		29.3	42.5	50.6	41.3	44.1	52.1	41.0	38.4	49.4
Sensation Seeking	36.1 56.3	25.7 53.8	20.6	26.4 38.7	34.5 55.4	30.8 49.6	19.8 47.3	31.2 52.2	33.1 48.4	31.1 53.2	34.2 49.3	31.0 50.5
Rewards for	30.3	33.0	50.0	30.1	35.4	49.0	41.3	32.2	40.4	33.∠	49.3	50.5
Antisocial Behavior	31.4	24.3	22.1	2/1	39.8	27 /	52.2	50.5	/1 2	FO 1	F7 5	54.8
				34.1		37.4			41.3	58.1	57.5	
Depressive Symptoms Intention to	43.4	39.8	39.5	34.5	39.3	44.1	33.0	36.6	46.2	50.0	38.4	40.4
Use Drugs	34.1	41.8	35.3	18.3	28.8	26.4	31.1	34.4	38.3	39.3	19.2	28.7
Gang Involvement	32.1	18.4	20.2	5.4	11.7	21.5	18.7	14.0	25.7	23.0	13.7	22.7

Table 12: Percentage of Students Reporting School Safety Issues

		Grade 6			Grade 8			Grade 10			Grade 12	
Response	County	County	State	County	County	State	County	County	State	County	County	State
	2006	2007	2007	2006	2007	2007	2006	2007	2007	2006	2007	2007
I feel safe at my sch	iool.											
NO!	1.1	4.9	6.2	1.1	5.4	8.2	3.3	2.2	9.4	6.5	1.4	6.8
no	0	5.9	9.2	6.5	5.4	15.1	8.8	8.7	15.0	12.9	4.1	12.0
yes	29.2	31.4	37.4	51.6	52.7	49.3	46.2	53.3	54.3	40.3	50.7	55.6
YES!	69.7	57.8	47.1	40.9	36.6	27.4	41.8	35.9	21.3	40.3	43.8	25.5
How many times in	the past h	ave you ta	ken a hai	ndgun to s	chool?							
Never	98.9	100.0	99.6	100.0	99.1	99.2	97.8	98.9	99.1	100.0	100.0	99.1
1-2 times	1.1	0	0.2	0	0	0.3	1.1	0	0.4	0	0	0.3
3-5 times	0	0	0.1	0	0	0.1	0	0	0.2	0	0	0.1
6-9 times	0	0	0.0	0	0	0.1	0	1.1	0.1	0	0	0.1
10-19 times	0	0	0.0	0	0	0.1	0	0	0.1	0	0	0.1
20-29 times	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
30-39 times	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
40+ times	0	0	0.0	0	0.9	0.1	1.1	0	0.2	0	0	0.2
How wrong do you	think it is	for someor	e your ag	ge to take	a handgun	to schoo	1?					
Very Wrong	89.9	94.3	93.3	92.6	90.3	86.7	88.0	93.5	87.1	87.1	95.9	90.3
Wrong	6.7	2.9	5.3	6.4	7.1	9.8	7.6	5.4	9.2	8.1	2.7	6.8
A Little Bit Wrong	1.1	1.9	0.9	0	0.9	2.6	3.3	0	2.6	1.6	0	2.0
Not Wrong at All	2.2	1.0	0.5	1.1	1.8	0.9	1.1	1.1	1.0	3.2	1.4	1.0
Have any of your br	others or s	sisters ever	taken a	handgun t	o school?							
No	94.9	96.9	95.0	95.7	96.9	94.0	95.5	93.3	93.2	89.7	97.2	92.9
Yes	1.3	1.0	0.9	1.1	1.0	1.6	1.1	0	2.2	1.7	0	2.1
I don't have any												
brothers or sisters	3.8	2.1	4.1	3.2	2.1	4.4	3.4	6.7	4.7	8.6	2.8	5.0

Table 13: Average Age of First ATOD Use and Antisocial Behavior

		Grade 6			Grade 8			Grade 10			Grade 12	
	County	County	State	County	County	State	County	County	State	County	County	State
	2006	2007	2007	2006	2007	2007	2006	2007	2007	2006	2007	2007
Avg Age of First ATO	DD Use of	Those Wh	o Used									
Marijuana	10.1	11.0	10.8	10.0	12.6	12.0	10.8	12.7	13.3	11.6	15.0	14.5
Cigarettes	10.2	10.3	10.4	10.6	11.0	11.2	11.3	11.5	12.1	11.9	13.4	13.2
Alcohol Use	10.4	10.3	10.5	11.0	11.3	11.6	12.4	12.6	12.9	13.3	14.6	14.0
Regular Alcohol Use	10.1	10.0	11.0	10.3	12.5	12.3	11.3	13.8	14.0	12.4	15.8	15.3
Avg Age of First Ant	isocial Bel	navior of T	hose Who	D								
School Suspension	10.2	10.0	10.5	10.3	11.4	11.6	10.6	11.7	12.5	10.8	14.7	13.4
Been Arrested	10.1	0.0	10.9	10.0	12.7	12.3	10.3	14.2	13.6	10.8	15.8	15.0
Carried a Gun	10.1	10.6	10.8	10.1	11.3	11.7	10.3	12.8	12.8	10.4	14.5	14.1
Attacked to Harm	10.3	10.6	10.7	10.4	11.9	11.7	10.9	12.2	12.8	11.2	14.1	13.7
Belonged to a Gang	10.2	10.5	11.0	10.1	11.8	12.2	10.4	14.0	13.1	10.1	12.0	13.7

Table 14: Average Age of First ATOD Use and Antisocial Behavior - Total

		Total Aver	age
	County	County	State
	2006	2007	2007
Avg Age of First ATC	OD Use of	Those Wh	no Used
Marijuana	10.5	13.9	13.6
Cigarettes	10.9	11.8	12.0
Alcohol Use	11.6	12.5	12.6
Regular Alcohol Use	10.9	14.5	14.1
Avg Age of First Ant	isocial Bel	navior of T	hose Who
School Suspension	10.4	12.0	12.0
Been Arrested	10.2	14.6	13.5
Carried a Gun	10.2	11.9	12.4
Attacked to Harm	10.6	11.9	12.2
Belonged to a Gang	10.2	11.8	12.4

Table 15: Percentage of Students Reporting Alcohol Use

		Grade 6			Grade 8			Grade 10			Grade 12	
Risk Factor	County	County	State	County	County	State	County	County	State	County	County	State
	2006	2007	2007	2006	2007	2007	2006	2007	2007	2006	2007	2007
Last Time I Drank Alcol	ıol											
Bought It												
WITH a Fake ID	0	0	1.3	0	5.6	0.6	0	2.9	0.7	0	0	1.0
Bought It												
WITHOUT a Fake ID	0	0	0.6	4.8	0	0.8	0	0	1.2	3.4	0	3.2
Got It From												
Someone 21 or OLDER	13.3	12.5	16.2	28.6	19.4	22.5	29.3	47.1	34.0	37.9	68.1	48.2
Got It From												
Someone UNDER 21	0	0	5.3	9.5	19.4	11.3	19.5	17.6	17.4	10.3	8.5	15.0
Got It From												
a Brother/Sister	13.3	12.5	3.6	0	0	4.9	4.9	0	4.5	3.4	0	3.3
Home WITH												
Parent's Permission	13.3	12.5	21.8	23.8	19.4	17.4	19.5	8.8	12.4	17.2	8.5	8.3
Home WITHOUT												
Parent's Permission	6.7	12.5	10.1	14.3	13.9	11.8	7.3	8.8	6.5	0	2.1	2.2
Got It From												
Another Relative	13.3	0	10.5	4.8	2.8	10.1	4.9	5.9	6.8	3.4	2.1	4.1
A Stranger												
Bought It For Me	0	0	1.0	0	0	1.0	0	2.9	1.6	6.9	2.1	2.4
Took It												
From a Store	0	0	1.2	0	0	0.7	2.4	0	0.3	0	0	0.4
Other	40.0	50.0	28.4	14.3	19.4	18.7	12.2	5.9	14.6	17.2	8.5	11.9
I Drank at												
Home	64.3	42.9	47.4	45.8	45.9	38.8	29.3	20.6	27.1	20.8	15.2	19.1
Someone Else's Home	35.7	14.3	27.9	16.7	43.2	42.6	48.8	47.1	54.3	41.7	52.2	60.3
Open Area	0	14.3	12.5	25.0	8.1	10.0	14.6	29.4	10.4	29.2	28.3	12.3
Sporting Event												
or Concert	0	14.3	2.1	4.2	0	1.6	2.4	0	1.3	0	0	0.9
Restaurant or Bar	0	0	3.0	0	2.7	1.8	0	0	1.7	0	0	2.1
Empty Building												
or Site	0	0	2.1	0	0	0.9	0	0	0.4	0	0	0.4
Hotel/Motel	0	0	1.8	0	0	0.9	2.4	0	1.2	0	0	1.5
In a Car	0	0	1.8	8.3	0	2.1	2.4	2.9	2.6	8.3	4.3	2.6
School	0	14.3	1.5	0	0	1.3	0	0	1.1	0	0	8.0

Table 16: Percentage of Students Reporting Cigarette Use

		Grade 6			Grade 8			Grade 10			Grade 12	
Risk Factor	County	County	State	County	County	State	County	County	State	County	County	State
	2006	2007	2007	2006	2007	2007	2006	2007	2007	2006	2007	2007
Last Time I Smoked a C	ligarette, I									1		
Bought It												
WITH a Fake ID	0	0	2.0	0	8.3	0.8	5.6	0	1.1	0	0	1.5
Bought It												
WITHOUT a Fake ID	0	0	0.8	0	0	1.8	11.1	0	5.1	15.4	29.0	23.7
Got It From												
Someone 18 or OLDER	11.1	0	12.9	18.8	12.5	23.3	22.2	50.0	37.7	30.8	38.7	41.1
Got It From												
Someone UNDER 18	11.1	16.7	13.3	31.3	20.8	20.8	16.7	4.2	18.2	15.4	0	8.8
Got It From												
a Brother/Sister	11.1	16.7	6.3	18.8	8.3	6.0	5.6	8.3	5.0	0	3.2	2.2
Home WITH												
Parent's Permission	0	0	3.5	12.5	12.5	3.3	11.1	4.2	4.8	7.7	6.5	3.4
Home WITHOUT												
Parent's Permission	11.1	33.3	15.7	0	12.5	13.4	22.2	16.7	7.1	0	3.2	1.7
Got It From												
Another Relative	0	0	8.5	6.3	8.3	7.5	0	8.3	5.7	0	3.2	1.9
A Stranger												
Bought It For Me	0	0	1.9	0	0	1.8	0	4.2	1.4	7.7	3.2	0.9
Took It												
From a Store	0	0	2.1	0	0	1.4	0	0	0.8	0	0	0.5
Other	55.6	33.3	32.9	12.5	16.7	19.9	5.6	4.2	13.3	23.1	12.9	14.2
I Smoked at												
Home	71.4	66.7	32.4	18.2	42.9	30.9	27.8	35.0	34.2	38.5	35.7	26.0
Someone Else's Home	28.6	0	28.3	18.2	33.3	33.2	22.2	25.0	28.0	7.7	0	20.1
Open Area	0	33.3	25.9	36.4	14.3	24.8	27.8	20.0	20.4	23.1	17.9	18.5
Sporting Event												
or Concert	0	0	1.0	0	4.8	1.2	5.6	0	1.2	0	0	0.7
Restaurant or Bar	0	0	1.1	9.1	0	0.6	0	5.0	0.6	7.7	0	1.6
Empty Building												
or Site	0	0	4.5	0	0	1.9	0	0	0.8	0	0	0.6
Hotel/Motel	0	0	1.3	0	0	0.5	0	0	0.5	0	0	0.5
In a Car	0	0	3.1	18.2	4.8	4.5	16.7	15.0	12.0	15.4	46.4	30.9
School	0	0	2.5	0	0	2.6	0	0	2.1	7.7	0	1.2

# 5 DRUG-FREE COMMUNITIES SUPPORT PROGRAM CORE MEASURES

The Drug-Free Communities Support Program, administered by the Center for Substance Abuse Prevention, requests specific data which is typically referred to as the Core Measures. The drug categories measured are tobacco, alcohol and marijuana and the table is broken down by grade level. A *Combined* drug category has been created for all of these areas.

Past 30-Day Use The question On how many occasions have you used ... in the past 30 days? is used to measure this statistic by reporting the percentage of students who report using 1-2 times or more often.

**Perception of Risk** The question *How much do you think people risk harming themselves if they ...?* is used to measure this statistic by reporting the percentage of students who report that using the drug is a *Moderate Risk* or a *Great Risk* to their health.

**Perception of Disapproval** The question *How wrong do your parents feel it would be for you to ...?* is used to measure this statistic by reporting the percentage of students who report that parents would feel it is *Wrong* or *Very Wrong* to use tobacco, alcohol and marijuana.

Age of Onset The question How old were you when you first...? is used to measure this statistic. The possible responses to this question range from 10 or Under to 17 or Older. The table shows the average age of onset of use of those students who answered the question with a response other than Never Used.

Table 17: Core Measures by Grade

	Grade 6		Grade 8		Grade 10		Grade 12		Combined	
	n	pct	n	pct	n	pct	n	pct	n	pct
Doot 20 Do		pet	"	pct		pct		pct	- "	pct
Past 30 Day Use										
Alcohol	99	2.0	110	21.8	90	33.3	72	44.4	371	23.7
Cigarettes	99	2.0	111	13.5	92	22.8	73	30.1	375	16.0
Marijuana	98	1.0	111	2.7	93	3.2	72	11.1	374	4.0
Combined	101	4.0	111	25.2	93	38.7	73	57.5	378	29.1
Perceived Risk										
Alcohol	97	68.0	110	60.0	93	53.8	73	61.6	373	60.9
Cigarettes	99	90.9	110	89.1	92	87.0	73	91.8	374	89.6
Marijuana	97	69.1	110	68.2	93	61.3	73	54.8	373	64.1
Combined	99	92.9	111	93.7	93	92.5	73	97.3	376	93.9
Parental Disapproval										
Alcohol	96	94.8	100	85.0	92	84.8	73	76.7	361	85.9
Cigarettes	97	95.9	99	90.9	91	89.0	73	79.5	360	89.4
Marijuana	95	97.9	100	99.0	92	95.7	73	91.8	360	96.4
Combined	98	96.9	101	99.0	92	98.9	73	94.5	364	97.5
Avg Age of First Use										
Alcohol	29	10.3	56	11.3	62	12.6	58	14.6	205	12.5
Cigarettes	15	10.3	48	11.0	43	11.5	45	13.4	151	11.8
Marijuana	2	11.0	8	12.6	9	12.7	24	15.0	43	13.9
Combined	36	10.3	65	10.9	67	12.1	59	13.7	227	11.9

# 6 PREVENTION CONTACTS

### 6.1 Prevention Resource Centers

# $\frac{\text{Region 1 PREVENTION RESOURCE CENTER}}{\text{Operated by } \textit{Decision Point}}$

#### Springdale

JTL Shop Building 614 East Emma Street, Suite M426 Springdale, AR 72764

Ms. Laurie Reh, PRC Coordinator

(479) 927-2655 Fax: (479) 927-2752

 $E\text{-}MAIL: \verb|lreh@jtlshop.jonesnet.org||$ 

Counties: Benton, Carroll, Madison, Washington

# Region 2 PREVENTION RESOURCE CENTER Operated by North Arkansas Partnership for Health Education

#### Harrison

1515 Pioneer Drive Harrison, AR 72601

Ms. Shelly McCall, PRC Coordinator

(870) 391-3178 Fax: (870) 391-3507

 $E\text{-}MAIL: \verb§smccall@northark.edu|$ 

Counties: Boone, Baxter, Newton, Marion,

Searcy

# Region 3 PREVENTION RESOURCE CENTER Operated by *Health Resources of Arkansas*, *Inc.*

### Augusta

 $893~\mathrm{Hwy}~64~\mathrm{East}$  Augusta, AR 72006

Ms. Pat Huckeby, PRC Coordinator

(870) 347-5903 Fax: (870) 347-1457

 $E\text{-}MAIL: \verb"pat_huckeby@yahoo.com""$ 

Counties: Fulton, Izard, Sharp, Stone, Jackson, Cleburne, Van Buren, White, Woodruff,

Independence

# Region 4 PREVENTION RESOURCE CENTER Operated by Crowley's Ridge Development Council

#### Jonesboro

P.O. Box 16720 (520 West Monroe Street) Jonesboro, AR 72403

Ms. Dorothy Newsom, PRC Coordinator

(870) 933-0033 Fax: (870) 933-0048

E-MAIL: dnewsom@ritternet.com

Counties: Randolph, Clay, Lawrence, Greene,

Craighead, Mississippi, Poinsett

# Region 5 PREVENTION RESOURCE CENTER Operated by *Harbor House*, *Inc.*

### Fort Smith

P.O. Box 4207

(615 North 19th Street) Fort Smith, AR 72914

Ms. Cindy Stokes, PRC Coordinator

(479) 783-1916 Fax: (479) 783-1914 E-MAIL: hhiprc@aol.com

Counties: Crawford, Franklin, Logan, Scott,

Sebastian, Polk

# Region 6 PREVENTION RESOURCE CENTER Operated by Community Service, Inc.

#### Morrilton

P.O. Box 679 (100 South Cherokee Street) Morrilton, AR 72110

Mr. Terrence Love, PRC Coordinator

(501) 354-4589 Fax: (501) 354-5410

E-MAIL: tlove@communityserviceinc.com Counties: Johnson, Pope, Conway, Yell, Perry,

Faulkner

# Region 7 PREVENTION RESOURCE CENTER Operated by Crowley's Ridge Development

Council

**Brinkley** 

P.O. Box 344 1116 North Main Brinkley, AR 72021

Mr. Kendon Gray, PRC Coordinator

(870) 734-1554 Fax: (870) 734-2423

E-MAIL: KendonGray@sbcglobal.net Counties: Cross, Crittenden, St. Francis,

Phillips, Lee, Monroe

# Region 8 PREVENTION RESOURCE CENTER

Operated by Family Service Agency

**Hot Springs** 

1401 Malvern Avenue, Suite 100 Hot Springs, AR 71901

Ms. Michelle Moore-Rather, PRC Coordinator

(501) 318-2648 Fax: (501) 624-5636

E-MAIL: mmoore-rather@fsainc.org Counties: Clark, Garland, Hot Spring,

Montgomery, Pike

### Region 9 PREVENTION RESOURCE CENTER

Operated by Family Service Agency

North Little Rock

628 West Broadway, Suite 300 North Little Rock, AR 72114

Mr. Hayse Miller, PRC Coordinator

(501) 372-4242 Ext. 328 Fax: (501) 372-6565

E-MAIL: hmiller@fsainc.org

Counties: Pulaski, Saline, Lonoke, Praire

#### Region 10 PREVENTION RESOURCE CENTER

Operated by Southwest Arkansas

Counseling & Mental Health Center, Inc.

Texarkana

601 Hazel Street Texarkana, AR 71854

Ms. Trena Goings, PRC Coordinator

(870) 774-2435 Fax: (870) 774-4216

E-MAIL: tgoings@swacmhc.com

Counties: Howard, Sevier, Hempstead, Little

River, Lafayette, Miller

### Region 11 PREVENTION RESOURCE CENTER

Operated by Health Sciences Education Foundation-South Arkansas

El Dorado

 $460~\mathrm{W.~Oak}$ 

El Dorado, AR 71730

Ms. Susan Rumph, PRC Coordinator (870) 862-2489, Exts. 151 & 152

Fax: (870) 863-9341

E-MAIL: srumph@ahecsa.uams.edu

Counties: Dallas, Calhoun, Union, Columbia,

Ouachita, Nevada

## Region 12 PREVENTION RESOURCE CENTER

Operated by Southeast Arkansas Economic Development District

Pine Bluff

P.O. Box 6806 8th & Walnut Streets Pine Bluff, AR 71611

Mrs. Judith Smith, PRC Coordinator

(870) 536-1971 Fax: (870) 536-7718

E-MAIL: jsmithprc120gmail.com

Counties: Grant, Jefferson, Lincoln, Arkansas,

Cleveland

## Region 13 PREVENTION RESOURCE CENTER

Operated by Phoenix Youth & Family

Services

 ${\bf Crossett}$ 

P.O. Box 654 310 N. Alabama Street Crossett, AR 71635

Mr. Clifford Hawkins, PRC Coordinator

(870) 364-1676 Fax: (870) 364-1779

E-MAIL: chawkins@phoenixyouth.com Counties: Desha, Drew, Bradley, Ashley,

Chicot

### 6.2 State and National Contacts

## Alcohol and Drug Abuse Prevention Division of Behavioral Health Services Arkansas Department of Human Services

 $4313~\mathrm{West}$  Markham - 3rd Floor Administration

Little Rock, AR 72205 Telephone: (501) 686-9866 FAX: (501) 686-9396

Website: http://www.arkansas.gov/dhhs/dmhs

Tommie Johnson Waters, Director Prevention Services

Alcohol and Drug Abuse Prevention E-MAIL: Tommie.Waters@arkansas.gov

Joe M. Hill, Director

Alcohol and Drug Abuse Prevention E-MAIL: Joe.Hill@arkansas.gov

### Arkansas Department of Education Federal Programs Liaison Safe and Drug-Free Schools Program Officer Learning Services/School Improvement

Room 304B Little Rock, AR 72201 Telephone: (501) 683-5425 FAX: (501) 683-5409

Website: http://www.arkansased.org

Otistene Smith

#4 Capitol Mall

Federal Program Liaison

Safe and Drug-Free Schools Program Officer E-MAIL: otistene.smith@arkansas.gov

### International Survey Associates dba Pride Surveys

160 Vanderbilt Court Bowling Green, KY 42103 Telephone: (800) 279-6361 FAX: (270) 746-9598

Website: http://www.pridesurveys.com

# Safe and Drug Free Schools and Communities

U.S. Department of Education

Website: http://www.ed.gov/offices/OESE/SDFS

# Southwest Center for the Application of Prevention Technology

Website: http://captus.samhsa.gov/southwest

# Southwest Prevention Center/ The University of Oklahoma

Website: http://swpc.ou.edu/

Substance Abuse and Mental Health Services Administration (SAMSHA)

Website: http://www.samhsa.gov

Electronic copies of reports can be found at http://www.arkansas.gov/dhs/dmhs/adap\_survey.htm. Some reports require passwords.