Louisiana Caring Communities Youth Survey Results for 2008

Results for

Zachary Community School District

The Louisiana Caring Communities Youth Survey and this report are sponsored by:

Louisiana Department of Health and Hospitals, Office for Addictive Disorders, Prevention Services

Louisiana Department of Education

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Contents

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Introduction

2008 Louisiana Caring Communities Youth Survey

Summary for Zachary Community School District

This report summarizes the findings from the 2008 Louisiana Caring Communities Youth Survey (CCYS), a survey of 6th, 8th, 10th, and 12th grade students conducted in the fall of 2008 and January of 2009. The results for your district are presented along with comparisons to the results for the State of Louisiana. In addition, the report contains important information about the content of the survey, and suggestions and guidelines on how to interpret and use the data for prevention planning.

The Louisiana CCYS was originally designed to assess students' involvement in a specific set of problem behaviors, as well as their exposure to a set of scientifically validated risk and protective factors identified in the Risk and Protective Factor Model of adolescent problem behaviors. These risk and protective factors have been shown to predict the likelihood of academic success, school dropout, substance abuse, violence, and delinquency among youth. As the substance abuse prevention field has evolved, the CCYS has been modified to measure additional substance abuse and other problem behavior variables to provide prevention professionals in Louisiana with important information for understanding their communities. Some examples of these additional variables include the percentage of youth who are in need for alcohol or drug treatment, measures of community norms around alcohol use, and bullying.

Table 1 contains the characteristics of the students who completed the survey from your district and the State of Louisiana. A total of 769 schools across Louisiana participated in the survey. Because not all students answer all of the questions, the number of students in the gender and ethnicity categories in Table 1 will often be less than the total number of students in grades 6, 8, 10, and 12.

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

When using the information in this report, please pay attention to the number of students who participated from your community. If 60% or more of the students participated, the report is a good indicator of the levels of substance use, risk, protection, and antisocial behavior. If fewer than 60% participated, a review of who participated should be completed prior to generalizing the results to the entire community.

Coordination and administration of the Louisiana CCYS was a collaborative effort of Department of Health and Hospitals, Office for Addictive Disorders, Prevention Services; Regional Prevention Coordinators; Department of Education; Cecil J. Picard Center for Child Development and Lifelong Learning, University of Louisiana at Lafayette; and Bach Harrison, L.L.C. For more information about the CCYS or prevention services in Louisiana, please refer to the *Contacts for Prevention* section at the end of this report.

Table 1. Characteristics of Participants

Student Totals	District 2004		District 2006		District 2008		State 2008	
Total Students	Number	Percent	Number	Percent	Number	Percent	Number	Percent
	308	100	601	100	730	100	76,685	100
Grade								
8	n/a	n/a	242	40.3	296	40.5	32,998	43.0
10	143	46.4	196	32.6	260	35.6	24,156	31.5
12	165	53.6	163	27.1	174	23.8	19,531	25.5
Gender								
Male	130	42.8	260	44.2	339	47.3	34,193	45.7
Female	174	57.2	328	55.8	377	52.7	40,709	54.3
Ethnicity*								
African American	95	29.1	221	36.7	305	39.0	28,368	34.8
Asian	0	0.0	5	0.8	11	1.4	2,003	2.5
Hispanic	14	4.3	3	0.5	18	2.3	3,386	4.2
Native American	6	1.8	12	2.0	16	2.0	2,171	2.7
Pacific Islander	2	0.6	0	0.0	11	1.4	1,176	1.4
White	201	61.7	342	56.9	398	50.9	41,432	50.8
Other	8	2.5	18	3.0	23	2.9	3,053	3.7

* For 2004 and 2008, students could select one or more ethnic/racial categories.

Table 2. Survey Completion Rate

	District 2008			State 2008		
	Number Surveyed	Number Enrolled	Percent	Number Surveyed	Number Enrolled	Percent
Grade						
8	296	356	83.1	32,998	54,108	61.0
10	260	309	84.1	24,156	46,821	51.6
12	174	241	72.2	19,531	40,287	48.5
Total	730	906	80.6	76,685	141,216	54.3

Table 1 provides demographic information for the survey participants in your community.

Table 2 provides enrollment and completion information for your community. Please note that reports are only produced for grades in which 20 or more students completed the survey. Data are presented in Table 2 for only the grades that meet the 20-student-cutoff, and not grades surveyed that did not meet minimum cutoff criteria.

Risk and Protective Factors

The Caring Communities Youth Survey was originally developed as a means for measuring risk and protective factors that predict youth problem behaviors. Many states and local agencies have adopted the Risk and Protective Factor Model to guide their prevention efforts. The Risk and Protective Factor Model of Prevention is based on the simple premise that to prevent a problem from happening, we need to identify the factors that increase the risk of that problem developing and then find ways to reduce the risks. Just as medical researchers have found risk factors for heart disease such as diets high in fat, lack of exercise, and smoking; a team of researchers at the University of Washington have defined a set of risk factors for youth problem behaviors.[1].

Risk factors are characteristics of school, community, and family environments, and characteristics of students and their peer groups, that are known to predict increased likelihood of drug use, delinquency, school dropout, and violent behaviors among youth. For example, children who live in disorganized, crime-ridden neighborhoods are more likely to become involved in crime and drug use than children who live in safe neighborhoods.

Protective factors exert a positive influence and buffer against the negative influence of risk, thus reducing the likelihood that adolescents will engage in problem behaviors. Protective factors identified through research include:

1. **strong bonding to family, school, community and peers,**
2. **healthy beliefs, and**
3. **clear standards for behavior.**

Brief definitions of the protective factor scales can be seen in Table 13.

Three conditions must be present in communities, neighborhoods, schools, families, and peer groups for young people to develop strong bonds to these social units. These conditions are a) **Opportunities** for young people to actively contribute; b) **Skills** to be able to successfully contribute; and c) **Consistent recognition** or reinforcement for their efforts and accomplishments. For bonding to serve as a protective influence, it must occur through involvement with peers and adults who communicate healthy values and set clear standards for behavior.

Research on risk and protective factors has important implications for children's academic success, positive youth development, and prevention of health and behavior problems. In order to promote academic success and positive youth development and to prevent problem behaviors, **it is necessary to address the factors that influence these outcomes**. By measuring risk and protective factors in a population, specific risk factors that are elevated and widespread can be identified and targeted by programs, policies, and practices shown to reduce those risk factors and to promote protective factors.

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

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

Risk Factors	Community						Family				School		Peer / Individual						
	Community Laws & Norms Favorable Toward Drug Use, Firearms & Crime	Availability of Drugs & Firearms	Transitions & Mobility	Low Neighborhood Attachment	Community Disorganization	Extreme Economic & Social Deprivation	Family History of the Problem Behavior	Family Conflict	Family Management Problems	Favorable Parent Attitudes & Involvement in the Problem Behavior	Academic Failure	Lack of Commitment to School	Early Initiation of Drug Use & Other Problem Behavior	Early & Persistent Antisocial Behavior	Alienation & Rebelliousness	Friends Who Use Drugs & Engage in Problem Behaviors	Favorable Attitudes Toward Drug Use & Other Problem Behaviors	Gang Involvement	Constitutional Factors
Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Delinquency	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Teen Pregnancy						✓	✓	✓	✓		✓	✓	✓	✓		✓	✓		
School Drop-Out			✓			✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓		
Violence	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓		✓	✓

SOURCE: COMMUNITIES THAT CARE (CTC) PREVENTION MODEL, CENTER FOR SUBSTANCE ABUSE PREVENTION (CSAP), SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (SAMSHA)

Data-Driven Strategic Planning

Why conduct the Louisiana Caring Communities Youth Survey? Data from the CCYS are important for building an understanding of the substance use priorities in your community, and can help your community develop a data driven strategic prevention plan to address the areas of greatest need. The Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Prevention (CSAP) has emphasized data driven strategic planning guidelines using the Risk and Protective Factor Model, and more recently, the Strategic Prevention Framework (SPF) Model through incentive grants provided to states. These two planning models share much in common and utilize many of the same planning steps and tasks. Specifically, both planning models advocate the collection and use of data to identify needs, resources and community capacity. Based on these data, communities can establish substance abuse prevention priorities to be addressed. Next, both models encourage the implementation of strategically chosen evidence-based programs and interventions to address the identified priorities. Finally, the two models promote the collection of evaluation data to ensure the desired outcomes are achieved. An overview of the basic planning steps and tasks for both the Risk and Protective Factor Model and SPF Model is provided below[1].

Step 1: Profile Population Needs, Resources, and Readiness to Address the Problems and Gaps in Service Delivery

- **Community Needs Assessment:** While planning prevention services, communities need to understand the factors that cause substance use and abuse in their community. Communities are urged to collect and use multiple data sources, including archival and social indicators, assessment of existing resources, key informant interviews, as well as survey data in order to establish prevention priorities for their community. CSAP encourages states to consider administering a survey to assess adolescent substance use, anti-social behavior, and many of the risk and protective factors that predict adolescent problem behaviors. The results of the CCYS (presented in this Profile Report and in results reported at the State level) are particularly useful in helping to identify the prevention needs in your community.
- **Community Resource Assessment:** It is likely that existing agencies and programs are already addressing some of the prioritized risk and protective factors. It is important to identify the assets and resources already available in the community and the gaps in services and capacity.
- **Community Readiness Assessment:** It is very important for states and communities to have the commitment and support of their members and ample resources to implement effective prevention efforts. Therefore, the readiness and capacity of communities and resources to act should also be assessed.

Step 2: Mobilize and/or Build Capacity to Address Needs: Engagement of key stakeholders at the State and community levels is critical to plan and implement successful prevention activities that will be sustained over time. Some of the key tasks to mobilize the state and communities are to work with leaders and stakeholders to build coalitions, provide training, leverage resources, and help sustain prevention activities.

Step 3: Develop a Comprehensive Strategic Plan: States and communities should develop a strategic plan that articulates not only a vision for the prevention activities, but also strategies for organizing and implementing prevention efforts. The strategic plan should be based on documented needs, build on identified resources/strengths, set measurable objectives, and identify how progress will be monitored. Plans should be adjusted with ongoing needs assessment and monitoring activities. The issue of sustainability should be kept in mind throughout each step of planning and implementation.

[1]Adapted from CSAP's Strategic Prevention Framework State Incentive Grants Request for Application (2008)

Data-Driven Strategic Planning, Cont.

Step 4: Implement Evidence-based Prevention Programs and Infrastructure Development Activities: By understanding risk and protective factors in a population, as well as other causal factors at work in the community, prevention programs can be implemented that will reduce the most influential causes of substance abuse in your community. For example, if academic failure is identified as a prioritized risk factor in a community, then mentoring, tutoring, and increased opportunities and rewards for classroom participation can be provided to improve academic performance. After completing Steps 1, 2, and 3, communities will be able to choose prevention programs that fit the Strategic Framework of the community, match the population served, and are scientifically proven to work.

Step 5: Monitor Process, Evaluate Effectiveness, Sustain Effective Programs/Activities, and Improve or Replace Those That Fail: Finally, ongoing monitoring and evaluation are essential to determine if the outcomes desired are achieved and to assess program effectiveness, assess service delivery quality, identify successes, encourage needed improvement, and promote sustainability of effective policies, programs, and practices.

Using CCYS Data for Prevention Planning

What are the numbers telling you? The data within this profile report provide an excellent opportunity to gain a better understanding of the substance abuse issues within your community, especially in the youth population. As you review the charts and data tables presented in this report, you may note which risk factors are significantly higher than you would want and which protective factors are lower. You also will be able to determine which levels of 30 day drug use are increasing and those that may be on the decline. Other indicators you may want to use to target your intervention efforts include identification of specific schools or grades demonstrating unacceptable drug use rates. These variations can be determined for antisocial behaviors, as well. Some general examples for how the data can be used are provided below. In the following sections, more specific information about CCYS data and the Risk and Protective Factor Model, and the CCYS and the Strategic Prevention Framework Model are provided.

How to Review Data in the Charts

- **Look across the charts** to determine which items stand out as either much higher or much lower than the others.
- **Compare your data with statewide, and/or national data.** Generally, a difference of 5% between local and other data is probably significant.
- **Determine the standards and values held within your community.** For example: Is it acceptable in your community for a percentage of high school students to drink alcohol regularly as long as that percentage is lower than the overall state rate?
- **The data in the substance use, antisocial behavior, and gambling charts** can raise awareness about these problems and promote dialogue.
- **The CCYS data** can guide your prevention planning process. Use the resources listed on the last page of this report, *Contacts for Prevention*, for ideas about prevention programs that have proven effective in addressing the risk factors that are high in your community, and improving the protective factors that are low.

Prevention Planning: Risk and Protective Factor Model

For communities using the Risk and Protective Factor Model of prevention as their guide, the CCYS is an ideal source of information for planning purposes. Because the CCYS was specifically developed as a means for assessing the levels of risk and protective factors within the community, the data are particularly relevant to planning using this model.

When using the Risk and Protective Factor Framework for prevention planning, the focus is primarily on identifying the risk and protective factors that are the most problematic within your community and choosing evidence-based programs to address these priority risk and protective factors. In theory, by reducing areas of high risk and bolstering areas of low protection, substance abuse and other problem behaviors in youth can be reduced. An examination of the Risk Factor Profile and Protective Factor Profile charts provided in this report, will allow you to compare the relative levels of each risk (or protective) factor measured by the survey. In so doing, the data will reveal what risk and protective factors your community should pay most attention to, and which factors are relatively low priorities for prevention resources. Once problematic risk and protective factors have been identified, this information can be used in conjunction with information about the existing prevention resources, and community readiness, to identify the priority risk and priority factors that should be addressed with the prevention resources available to your community.

For more information about prevention planning using the Risk and Protective Factor Framework, contact the State Office for Addictive Disorders (see contacts section) or visit the Western Center for the Application of Prevention Technologies prevention planning resource website (http://captus.samhsa.gov/western/resources/bp/index.cfm).

Prevention Planning: Strategic Prevention Framework (SPF) Model

The SPF Model of prevention planning is the most current planning model endorsed by CSAP. The SPF planning model, while differing in focus from the Risk and Protective Factor Model, is actually quite similar in regards to process.

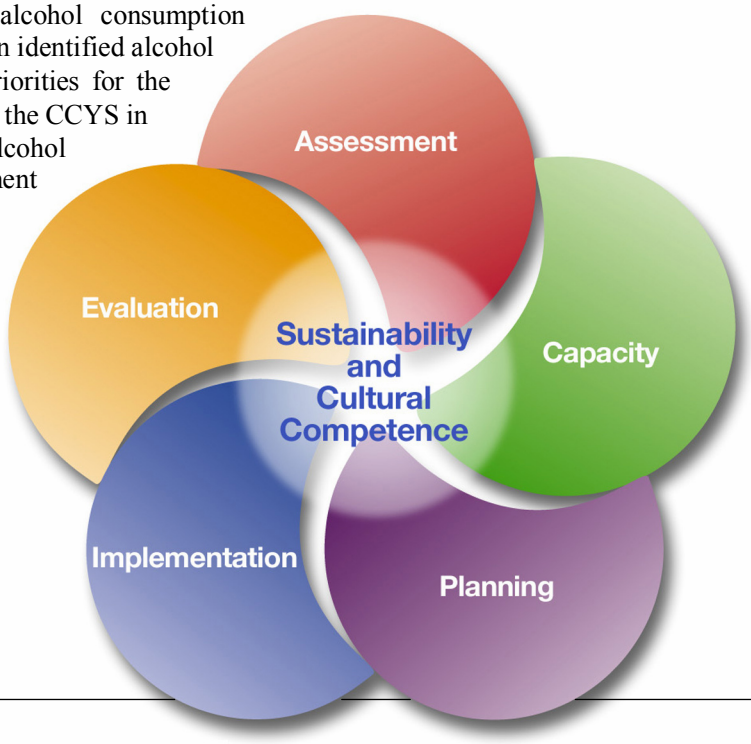
While the Risk and Protective Factor Model of prevention planning focuses on identifying prevention priorities based on areas of higher risk and lower protection as a means for ultimately reducing substance use and problem behaviors, the SPF Model has a broader focus. Within the SPF, it is important for prevention professionals to understand what substance use related consequences are problematic in the community (e.g., alcohol related motor vehicle crashes), what substance use patterns are associated with those consequences (e.g., binge drinking and drinking and driving), and what factors within the community cause these problematic substance use (consumption) patterns (e.g., community norms that accept binge drinking and/or drinking as driving as acceptable behavior). The CCYS is an important source of data for prevention professionals using the SPF Model, as it contains many pieces of information regarding substance use and the causal factors that predict substance use. However, as a result of the broad focus of the SPF, it is highly recommended that prevention professionals using the SPF Model for prevention planning obtain other sources of data in addition to the CCYS in developing a strategic plan for their community. In particular, the CCYS has limited data regarding substance use consequences within the community, therefore prevention staff are encouraged to seek consequence related data from both local (e.g., local law enforcement) and state sources (e.g., the State Epidemiological Workgroup).

(SPF Model planning information continued on next page)

Strategic Prevention Framework Model, Cont.

(SPF Model planning information continued from previous page)

Among the CCYS data that prevention professionals are likely to find useful in their SPF needs assessment process are substance use trends among youth, and risk and protective factor data relevant to the substance use consequences and consumption patterns identified as problematic in the community. While not all of the risk and protective factors within the Risk and Protective Factor Model are likely to be relevant to your community's substance use consumption and consequence priorities, many likely *will* be useful for planning purposes. Prevention professionals should closely examine the risk and protective factor data available through CCYS to determine which are relevant to understanding the causal influences that lead to the specific substance use consequence priorities in their community. Additionally, several items have been added to the CCYS to better identify causal factors related to problematic alcohol consumption because the Louisiana State SPF SIG Strategic Plan identified alcohol consumption and consequences as the highest priorities for the state overall. These additional items were added to the CCYS in order to aid those communities identified as alcohol problem hot spots through the state needs assessment process. However, given that alcohol is by far the most widely consumed substance across the entire state, these data should be helpful for other communities that experience high levels of alcohol use and consequences. Data for these items can be found in Table 8 of this report.



For more information about prevention planning using the Strategic Prevention Framework planning model, contact the State Office for Addictive Disorders (see contacts section).

Practical Implications of the Assessment

The Safe and Drug Free Schools and Communities section of the No Child Left Behind Act (NCLB) requires that schools and communities use guidelines in choosing and implementing federally funded prevention and intervention programs. The results of the Louisiana CCYS Survey presented in this report can help your schools and community comply with the NCLB Act in three ways:

1. Programs must be chosen based on objective data about problem behaviors in the communities served. The Louisiana CCYS reports this data in the substance use and antisocial behavior charts and tables presented on the following pages.
2. NCLB-approved prevention programs can address not only substance use and antisocial behavior (ASB) outcomes, but also behaviors and attitudes demonstrated to be predictive of the final problem behaviors. Risk and protective factor data from this report provide valuable information for choosing prevention programs.
3. Periodic evaluations of outcome measures must be conducted to evaluate the efficacy of ongoing programs. This report provides schools and communities the ability by comparing past and present substance use and ASB data.

How to Read the Charts in this Report

Types of Charts

This report contains information and data about alcohol, tobacco and other drug use (referred to as ATOD use throughout this report) and other problem behaviors of students. Additionally, data that is helpful in understanding many of the factors that predict these problem behaviors are presented in the charts and tables that follow. There are three major categories of data presented in this report, representing eight types of charts. A brief description of the categories contained in each type of chart is provided below, and more detailed descriptions of the charts are provided in later sections of the report.

Drug Use Profile Charts

- **Gateway drug use charts** – Lifetime and 30-day use rates for alcohol, tobacco, marijuana and inhalants.
- **Other illicit drug use charts** – Lifetime and 30-day use rates for a variety of illicit drugs including: cocaine, heroin, methamphetamine, etc.
- **Severe substance use indicator charts** – Estimates of youth in need of alcohol and drug treatment, the percentage of youth indicating having been drunk or high at school, youth indicating drinking alcohol and driving or reporting riding with a driver who had been drinking alcohol.

Antisocial Behavior and Gambling

- **Antisocial behavior profiles** – Percentage of youth who reported suspension from school, selling illegal drugs, attacking another person with the intention of doing them serious harm, etc.
- **Gambling profiles** – Shows the percentage of youth who gambled in the past year, and the types of gambling they engaged in.

Risk and Protective Factors and Alcohol Causal Variables

- **Risk factor charts** – Percentage of youth who are considered "higher risk" across each risk factor scale.
- **Protective factor charts** – Percentage of youth who are considered high in protection across each protective factor scale.
- **Alcohol causal variable charts** – Data pertaining to community domain causal factors related to alcohol use.

All the charts show the results of the Louisiana CCYS Survey, and the actual percentages from the charts are presented in Tables 3 through 10. Tables 11 and 12 contain additional data for prevention planning.

Chart Features

The charts contained in this report have several common features regarding how the data are presented.

- First, the **bars** on each chart represent the percentage of students in your community for a particular grade who reported the specified behavior, attitude or perception. For example, in the gateway drug use charts the bars represent the percentage of youth in your community that reported using alcohol, tobacco, marijuana and inhalants, respectively.
- The **dots** on the charts represent the percentage of all of the youth surveyed in Louisiana who reported the behavior, attitude or perception. The state data allows for a comparison of your community data with that of the state.
- Finally, the **diamonds** represent national data from either the Monitoring the Future Survey (MTF) or the 8-State Norm, where available. The MTF survey is a survey funded by the Substance Abuse and Mental Health Services Administration that is given to a national sample of youth each year in order to compute estimates of youth substance use for the U.S. as a whole.

How to Read the Charts in this Report

The 8-State Norm

The 8-State Norm was developed in 2006 by Bach Harrison to provide states and communities with the ability to compare their results on risk, protection, and antisocial measures where data is not available through the MTF Survey.

To create the 8-State Norm, the survey participants from eight surveys that were conducted in entire states or large areas of states were combined into a database of approximately 277,000 students.

(The states/regions surveyed were Arizona, Louisiana, Montana, Nebraska, Oklahoma, Arkansas, Utah, and the Mid-South Region of Michigan.)

The resulting database was then weighted so that the contribution of each state was proportional to its percentage of the national population. Bach Harrison analysts then used the database to calculate the percentage of students at risk and with protection, and the percentage who engaged in antisocial behavior.

These results appear on the charts in this report and are referred to as the 8-State Norm.

In order to confirm the validity of the 8-State Norm, the percentage of students that used alcohol, tobacco, and other drugs (ATODs) was also calculated and compared to the results from the national Monitoring the Future (MTF) Survey. The results of this comparison showed that the ATOD rates calculated from the 8-State Norm database were very similar to those reported by the MTF survey, and provide added confidence that the 8-State Norm is a good approximation of the risk and protective factor values a national survey might produce.

In order to keep the 8-State Norm relevant, it is updated approximately every 2 years as new data becomes available. Both MTF and 8-state norm data are intended to allow a comparison of your community with a national comparison. Please note that some indicators collected by the CCYS are unique to this survey, therefore national comparison data is not available for all indicators.

Drug Use Indicators and Profile Charts

The charts and tables that follow present the substance use rates for your community for 6th, 8th, 10th and 12th grade students who completed the survey. The first set of substance use charts cover the **"Gateway Drugs"** most commonly used by youth (Alcohol, Tobacco, Marijuana and Inhalants). The second set of substance use charts include a variety of important, but less commonly used **illicit drugs** such as cocaine, heroin, methamphetamine, prescription narcotics, and others. Finally, the last set of substance use charts present indicators of **severe (or extremely dangerous) substance use,** including the percentage of youth in need for alcohol or drug treatment, the percentage indicating they were drunk or high at school in the past year, and the prevalence of drinking alcohol and driving or riding with a driver who had been drinking.

The **bars** on each chart represent the percentage of students in that grade who reported the behavior or perception. The **dots** on the charts represent the percentage of all of the youth surveyed who reported substance use, problem behavior, elevated risk, or elevated protection. The **diamonds** represent national data from either the Monitoring the Future Survey or the 8-State Norm.

A comparison to state and national results provides additional information for your community in determining the relative importance of levels of ATOD use. Information about other students in the region and the nation can be helpful in determining the seriousness of a given level of problem behavior. Scanning across the charts will help you gain a better understanding of the substance use (consumption) issues affecting your community.

The following definitions and descriptions provide information for the substance use and severe substance use charts that follow.

- **Lifetime use** is a measure of the percentage of students who tried the particular substance at least once in their lifetime and is used to show the percentage of students who have had experience with a particular substance.

- **30-day use** is a measure of the percentage of students who used the substance at least once in the 30 days prior to taking the survey and is a more sensitive indicator of the level of current use of the substance. For both ever-used and 30-day use, national rates from the Monitoring the Future (MTF) survey for grades 8, 10, and 12 have been included to allow a comparison of your data to a national sample of students. (The MTF survey does not include data for grade 6.)

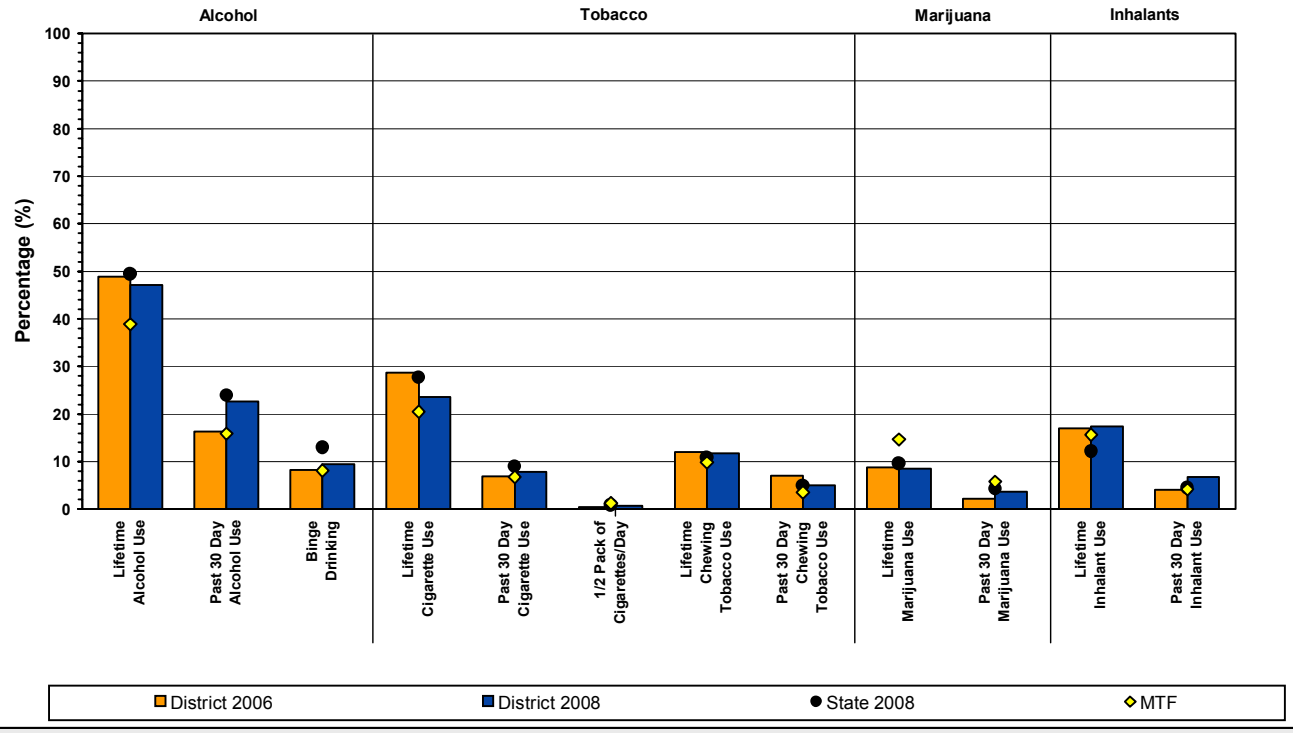
- **Heavy use** includes **binge drinking** (having five or more drinks in a row during the two weeks prior to the survey) and smoking **one-half a pack or more of cigarettes per day.**

- **Severe Substance Use** indicators include student responses regarding **drinking alcohol and driving, riding with a driver who had been drinking alcohol, being drunk or high at school,** and **the need for alcohol, drug,** and a combined scale for students that need **either alcohol OR drug treatment.** The need for treatment is defined as students who have used alcohol or drugs on ten or more occasions in their lifetime and marked three or more of the following six items related to their past year drug or alcohol use: 1) spent more time using than intended, 2) neglected some of your usual responsibilities because of use, 3) wanted to cut down on use, 4) others objected to your use, 5) frequently thought about using, 6) used alcohol or drugs to relieve feeling such as sadness, anger, or boredom. Students could mark whether these items related to their drug use and/or their alcohol use.

Drug Use Profiles

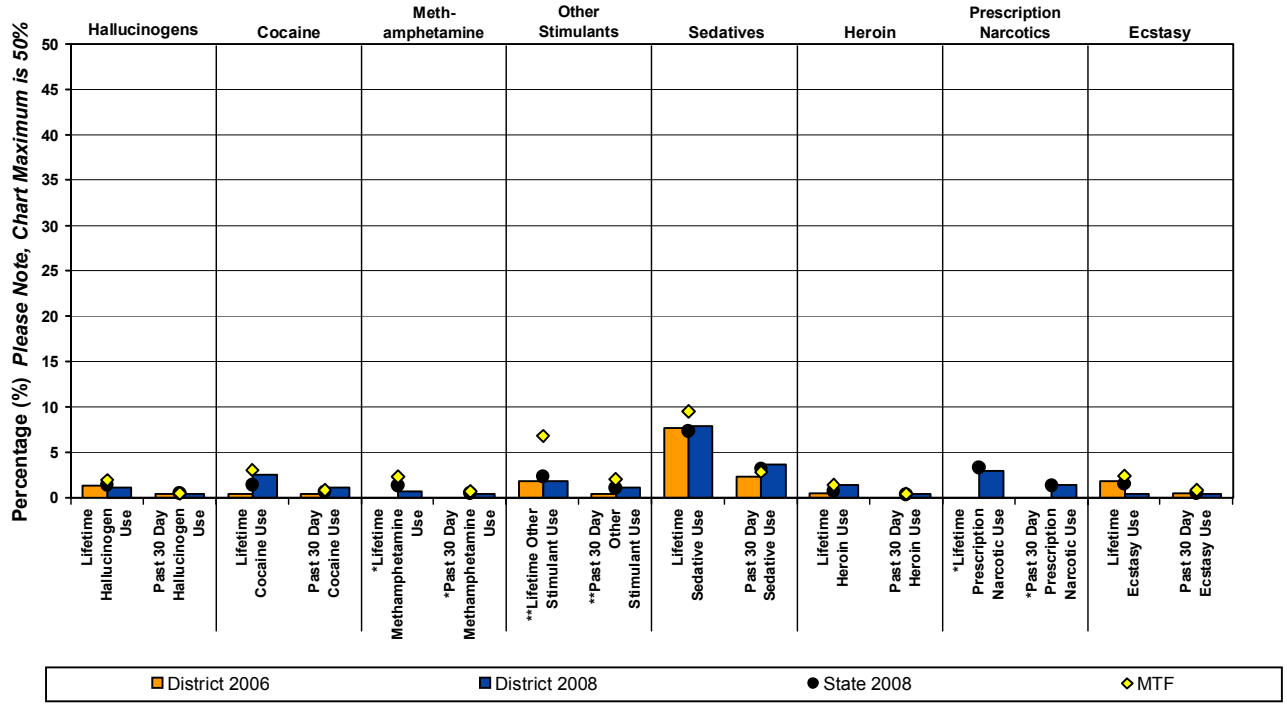
GATEWAY DRUG USE PROFILE

2008 Zachary Community School District Student Survey, Grade 8



OTHER ILLICIT DRUG USE PROFILE

2008 Zachary Community School District Student Survey, Grade 8



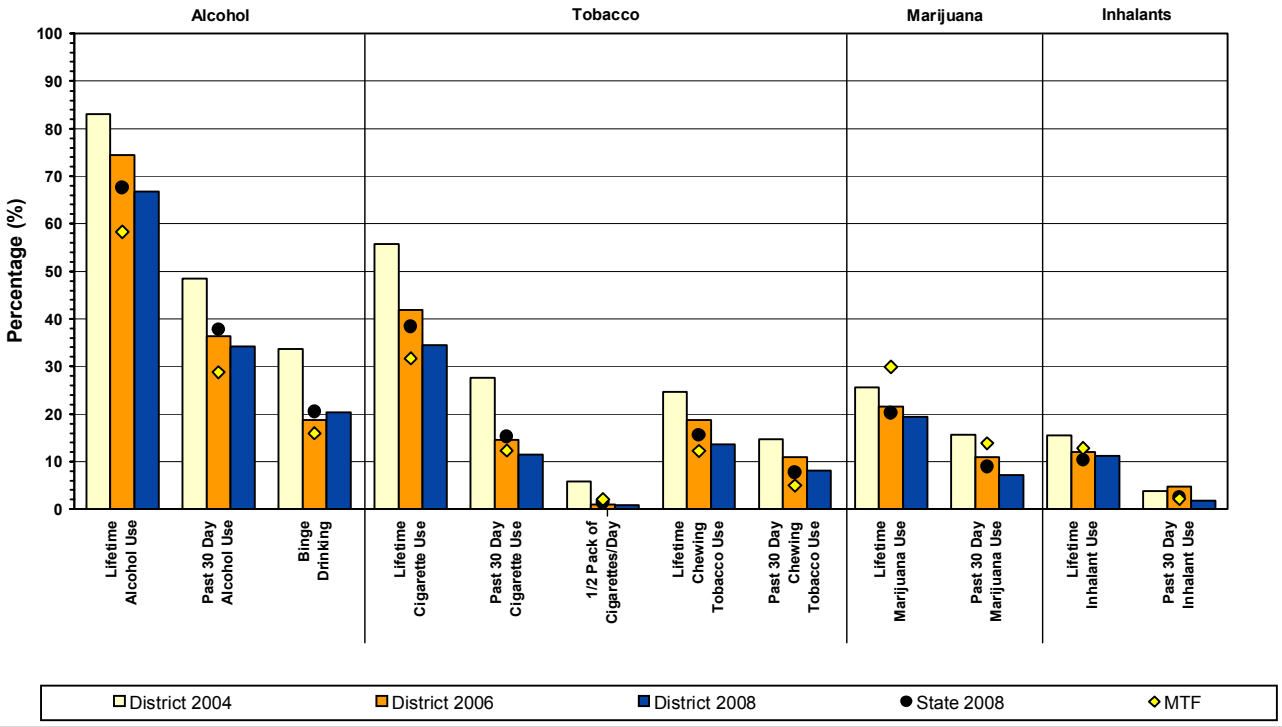
* Methamphetamines and prescription narcotics were not measured in survey administrations prior to 2008.

** While remaining roughly equivalent across years, there were minor changes in the wording of the Other Stimulants question between 2006 and subsequent administrations.

Drug Use Profiles

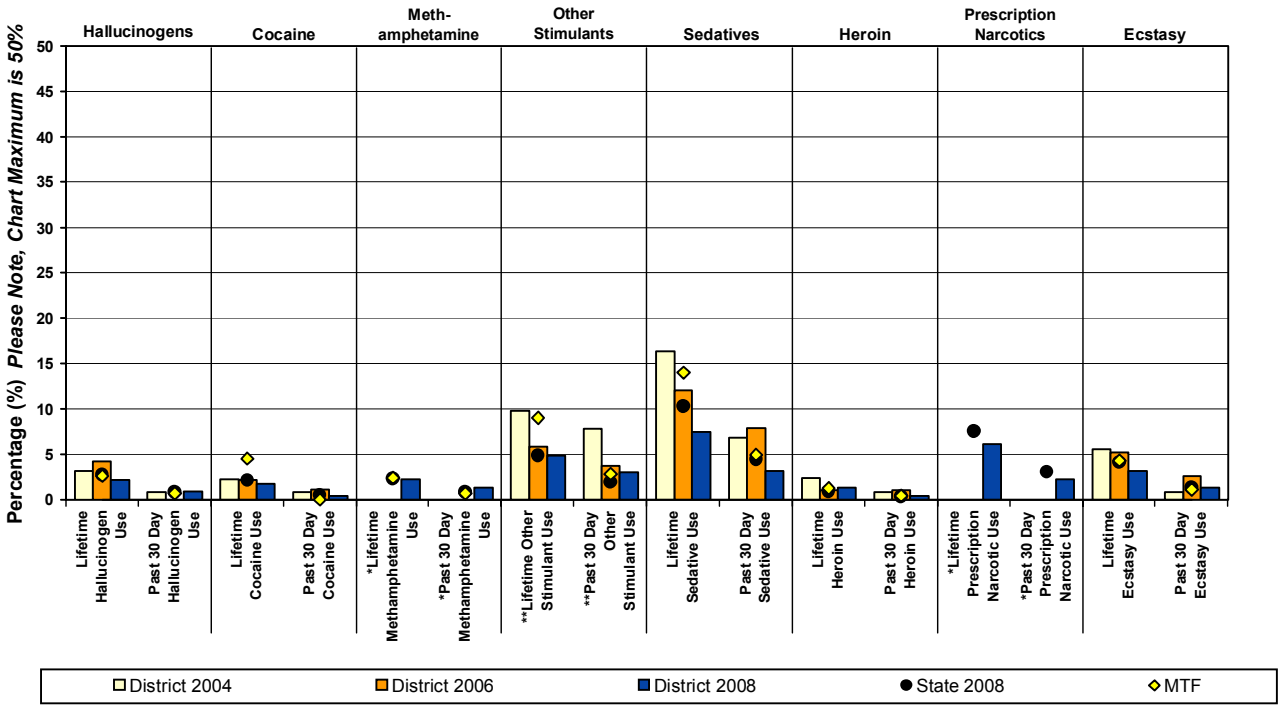
GATEWAY DRUG USE PROFILE

2008 Zachary Community School District Student Survey, Grade 10



OTHER ILLICIT DRUG USE PROFILE

2008 Zachary Community School District Student Survey, Grade 10



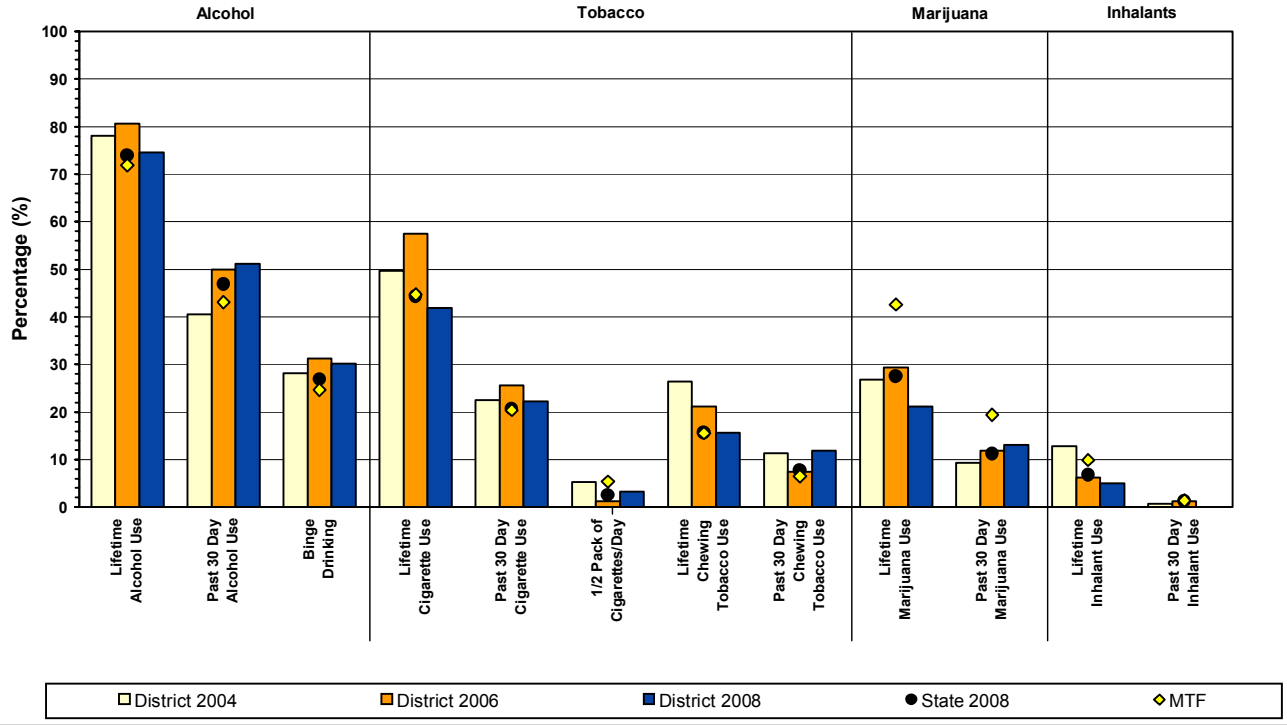
* Methamphetamines and prescription narcotics were not measured in survey administrations prior to 2008.

** While remaining roughly equivalent across years, there were minor changes in the wording of the Other Stimulants question between 2006 and subsequent administrations.

Drug Use Profiles

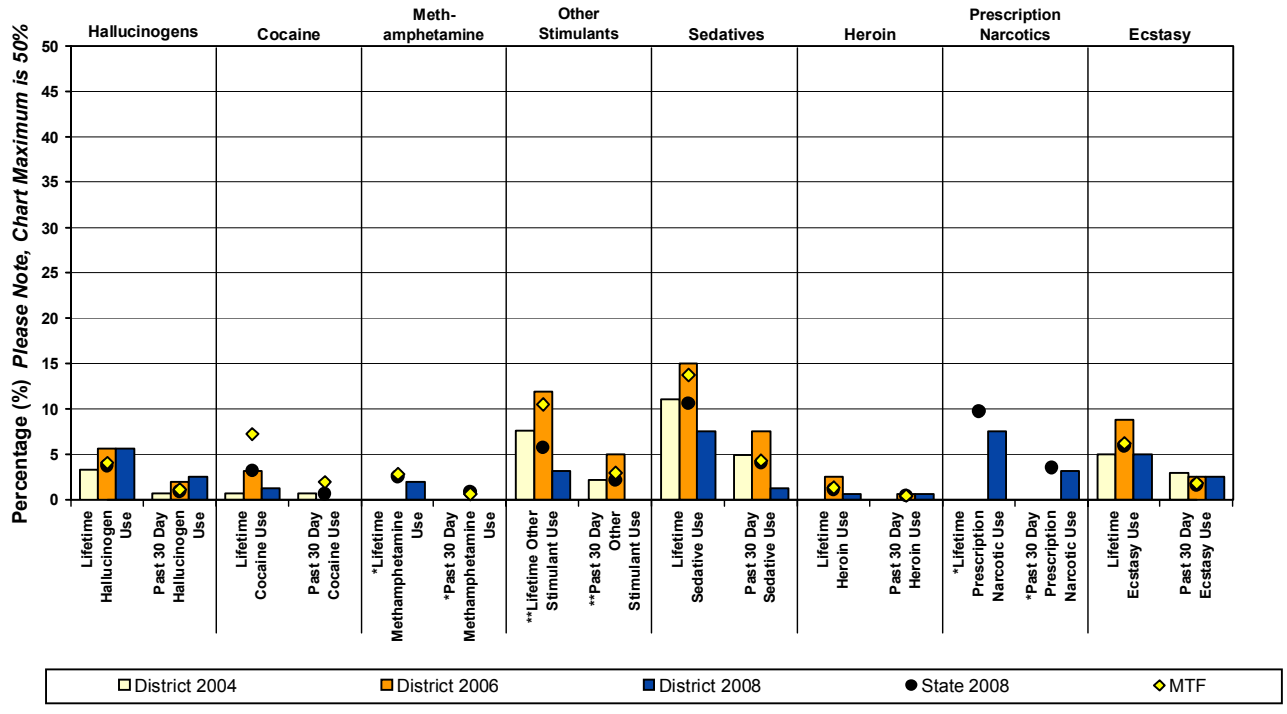
GATEWAY DRUG USE PROFILE

2008 Zachary Community School District Student Survey, Grade 12



OTHER ILLICIT DRUG USE PROFILE

2008 Zachary Community School District Student Survey, Grade 12



* Methamphetamines and prescription narcotics were not measured in survey administrations prior to 2008.

** While remaining roughly equivalent across years, there were minor changes in the wording of the Other Stimulants question between 2006 and subsequent administrations.

Drug Use Profiles

Table 3. Percentage of Students Who Used Gateway Drugs

On how many occasions (if any) have you… (One or more occasions)		Grade 8			Grade 10				Grade 12			
		District 2006	District 2008	State 2008	District 2004	District 2006	District 2008	State 2008	District 2004	District 2006	District 2008	State 2008
Lifetime Alcohol	had alcoholic beverages (beer, wine or hard liquor) to drink - more than just a few sips in your lifetime?	48.9	47.2	49.4	83.1	74.4	66.8	67.6	78.1	80.6	74.5	73.9
Past 30 Day Alcohol	had alcoholic beverages (beer, wine or hard liquor) to drink - more than just a few sips during the past 30 days?	16.4	22.6	23.9	48.5	36.4	34.2	37.8	40.5	50.0	51.2	46.9
Binge Drinking	How many times have you had 5 or more alcoholic drinks in a row in the past 2 weeks? (One or more times)	8.3	9.5	12.9	33.6	18.8	20.3	20.5	28.2	31.2	30.2	26.9
Lifetime Cigarettes	Have you ever smoked cigarettes?	28.7	23.6	27.7	55.8	41.9	34.5	38.4	49.7	57.5	41.9	44.3
Past 30 Day Cigarettes	How frequently have you smoked cigarettes during the past 30 days?	6.9	7.9	9.0	27.7	14.5	11.5	15.3	22.5	25.6	22.2	20.7
1/2 Pack of Cigarettes/Day	During the past 30 days, how many cigarettes did you smoke per day? (About one-half pack a day or more)	0.5	0.7	0.8	5.8	1.0	0.9	1.4	5.3	1.2	3.2	2.5
Lifetime Chewing Tobacco	used smokeless tobacco (chew, snuff, plug, dipping tobacco, chewing tobacco) in your lifetime?	12.0	11.7	10.8	24.6	18.8	13.6	15.6	26.4	21.2	15.7	15.7
Past 30 Day Chewing Tobacco	used smokeless tobacco (chew, snuff, plug, dipping tobacco, chewing tobacco) during the past 30 days?	7.1	5.1	5.0	14.7	10.9	8.1	7.7	11.3	7.5	11.9	7.7
Lifetime Marijuana	have you used marijuana in your lifetime?	8.8	8.5	9.6	25.6	21.6	19.4	20.2	26.8	29.4	21.1	27.5
Past 30 Day Marijuana	have you used marijuana during the past 30 days?	2.2	3.6	4.2	15.7	10.9	7.2	8.9	9.3	11.9	13.0	11.2
Lifetime Inhalants	sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high in your lifetime?	17.0	17.4	12.1	15.6	12.0	11.2	10.3	12.8	6.2	5.0	6.8
Past 30 Day Inhalants	sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high during the past 30 days?	4.0	6.8	4.4	3.8	4.7	1.7	2.5	0.7	1.3	0.0	1.2

Drug Use Profiles

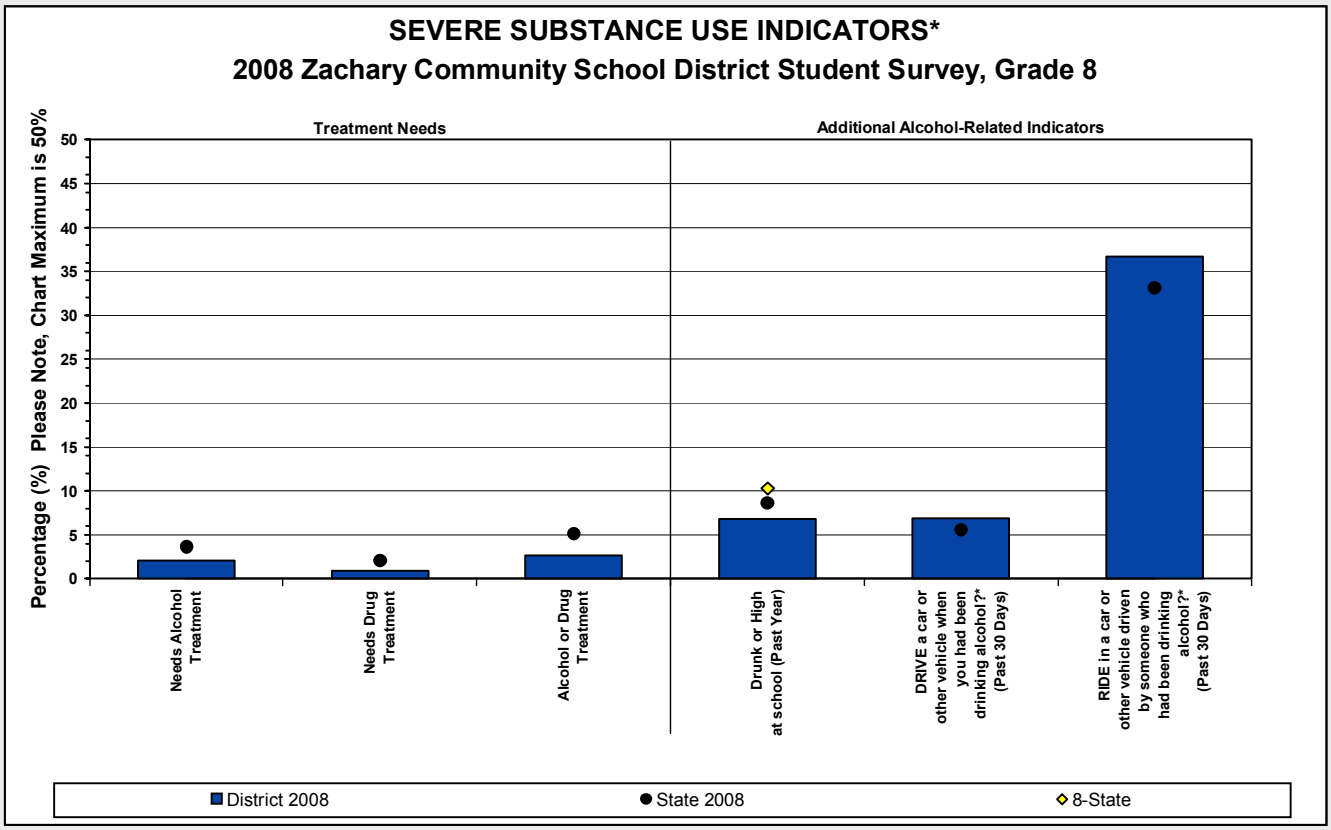
Table 4. Percentage of Students Who Used Other Illicit Drugs

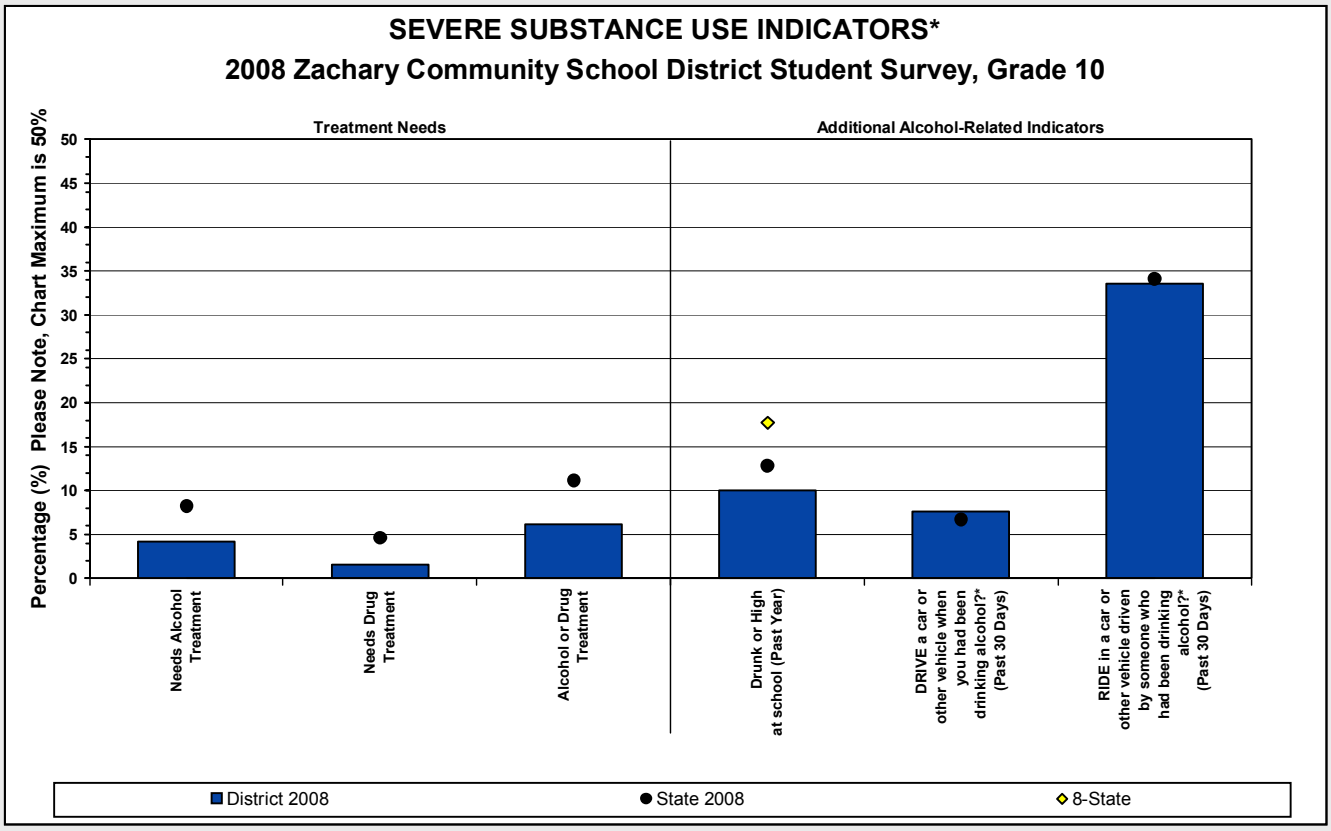
On how many occasions (if any) have you… (One or more occasions)		Grade 8			Grade 10				Grade 12			
		District 2006	District 2008	State 2008	District 2004	District 2006	District 2008	State 2008	District 2004	District 2006	District 2008	State 2008
Lifetime Hallucinogens	used LSD or other hallucinogens in your lifetime?	1.3	1.1	1.4	3.1	4.2	2.1	2.7	3.3	5.6	5.6	3.7
Past 30 Day Hallucinogens	used LSD or other hallucinogens during the past 30 days?	0.4	0.4	0.5	0.8	0.0	0.9	0.8	0.7	1.9	2.5	0.9
Lifetime Cocaine	used cocaine or crack in your lifetime?	0.4	2.5	1.4	2.2	2.1	1.7	2.1	0.7	3.1	1.2	3.2
Past 30 Day Cocaine	used cocaine or crack during the past 30 days?	0.4	1.1	0.6	0.8	1.1	0.4	0.5	0.7	0.0	0.0	0.6
Lifetime Methamphetamines*	used methamphetamines (meth, crystal, crank) in your lifetime?	n/a	0.7	1.3	n/a	n/a	2.2	2.3	n/a	n/a	1.9	2.5
Past 30 Day Methamphetamines*	used methamphetamines (meth, crystal, crank) during the past 30 days?	n/a	0.4	0.5	n/a	n/a	1.3	0.8	n/a	n/a	0.0	0.8
Lifetime Other Stimulants**	used stimulants other than methamphetamines (such as Ritalin, Adderall, or Dexedrine) without a doctor telling you to take them in your lifetime?	1.8	1.8	2.3	9.8	5.8	4.8	4.8	7.6	11.9	3.1	5.7
Past 30 Day Other Stimulants**	used stimulants other than methamphetamines (such as Ritalin, Adderall, or Dexedrine) without a doctor telling you to take them during the past 30 days?	0.4	1.1	1.0	7.8	3.7	3.0	1.9	2.1	5.0	0.0	2.1
Lifetime Sedatives	used sedatives (tranquilizers, such as Valium or Xanax, barbiturates, or sleeping pills) without a doctor telling you to take them in your lifetime?	7.7	7.9	7.3	16.3	12.0	7.4	10.3	11.0	15.0	7.5	10.6
Past 30 Day Sedatives	used sedatives (tranquilizers, such as Valium or Xanax, barbiturates, or sleeping pills) without a doctor telling you to take them during the past 30 days?	2.3	3.6	3.2	6.8	7.9	3.1	4.4	4.9	7.5	1.2	4.0
Lifetime Heroin	used heroin or other opiates in your lifetime?	0.5	1.4	0.7	2.4	1.0	1.3	0.9	0.0	2.5	0.6	1.1
Past 30 Day Heroin	used heroin or other opiates during the past 30 days?	0.0	0.4	0.3	0.8	1.0	0.4	0.3	0.0	0.6	0.6	0.4
Lifetime Prescription Narcotics*	used narcotic drugs (such as OxyContin, methadone, morphine, codine, Demerol, Vicodin, Percocet) without a doctor telling you to take them in your lifetime?	n/a	2.9	3.3	n/a	n/a	6.1	7.5	n/a	n/a	7.5	9.7
Past 30 Day Prescription Narcotics*	used narcotic drugs (such as OxyContin, methadone, morphine, codine, Demerol, Vicodin, Percocet) without a doctor telling you to take them during the past 30 days?	n/a	1.4	1.3	n/a	n/a	2.2	3.0	n/a	n/a	3.1	3.5
Lifetime Ecstasy	used Ecstasy ('X', 'E', or MDMA) in your lifetime?	1.8	0.4	1.5	5.5	5.2	3.1	4.1	5.0	8.8	5.0	5.9
Past 30 Day Ecstasy	used Ecstasy ('X', 'E', or MDMA) during the past 30 days?	0.5	0.4	0.5	0.8	2.6	1.3	1.3	2.9	2.5	2.5	1.6

* Methamphetamines and prescription narcotics were not measured in survey administrations prior to 2008 (also denoted by 'n/a' in the data column).

** While remaining roughly equivalent across years, there were minor changes in the wording of the Other Stimulants question between 2006 and subsequent administrations.

Severe Substance Use





* 2008 rates for the *Drunk or High as School* variable are presented here for comparison with other severe substance use variables. Please note that 2004 and 2006 data for that question are available in the Antisocial Behavior charts and tables in the following section.

Severe Substance Use

Table 5. Severe Substance Use Indicators

		Grade 8		Grade 10		Grade 12	
		District 2008	State 2008	District 2008	State 2008	District 2008	State 2008
Needs Alcohol Treatment	Answered "Yes" to at least 3 alcohol treatment questions and has used alcohol on 10 or more occasions	2.1	3.6	4.2	8.2	5.8	10.1
Needs Drug Treatment	Answered "Yes" to at least 3 drug treatment questions and has used alcohol on 10 or more occasions	0.9	2.0	1.6	4.6	2.4	5.2
Needs Alcohol or Drug Treatment	Needs alcohol and/or drug treatment	2.7	5.1	6.2	11.1	7.9	13.5
Drunk or High At School	How many times in the past year have you been drunk or high at school?	6.8	8.6	10.0	12.8	12.6	14.0
Drinking and Driving	During the past 30 days, how many times did you DRIVE a car or other vehicle when you had been drinking alcohol?	6.9	5.5	7.6	6.7	17.6	17.2
Riding with a Drinking Driver	During the past 30 days, how many times did you RIDE in a car or other vehicle driven by someone who had been drinking alcohol?	36.7	33.1	33.6	34.1	27.9	32.3

* 2008 rates for the *Drunk or High at School* variable are presented here for comparison with other severe substance use variables. Please note that 2004 and 2006 data for that question are available in the Antisocial Behavior charts and tables in the following section.

Antisocial Behavior and Gambling Indicators and Profile Charts

The charts and tables that follow present the rates of a variety of antisocial behaviors, as well as gambling behavior among youth in your community who completed the survey. The first set of charts in this section present the percentage of youth who reported engaging in several forms of **antisocial behavior** (e.g., attacked someone to harm, stolen a vehicle) or related consequences (e.g., been suspended, been arrested). The second set of charts in this section highlight the percentage of youth who indicated engaging in a variety of **gambling behaviors**. Rates of both antisocial behavior and gambling reflect reported behavior in the past year.

As with the substance use profile charts presented earlier, the **bars** on the following charts represent the percentage of students in that grade who reported the behavior, while the **dots** on the charts represent the percentage of all of the youth surveyed in Louisiana who reported the problem behavior. While national comparison data from the 8-state norm is available for the antisocial behavior profile charts, (represented by **diamonds** on the charts**)** no national comparison data is available for the gambling data at the current time.

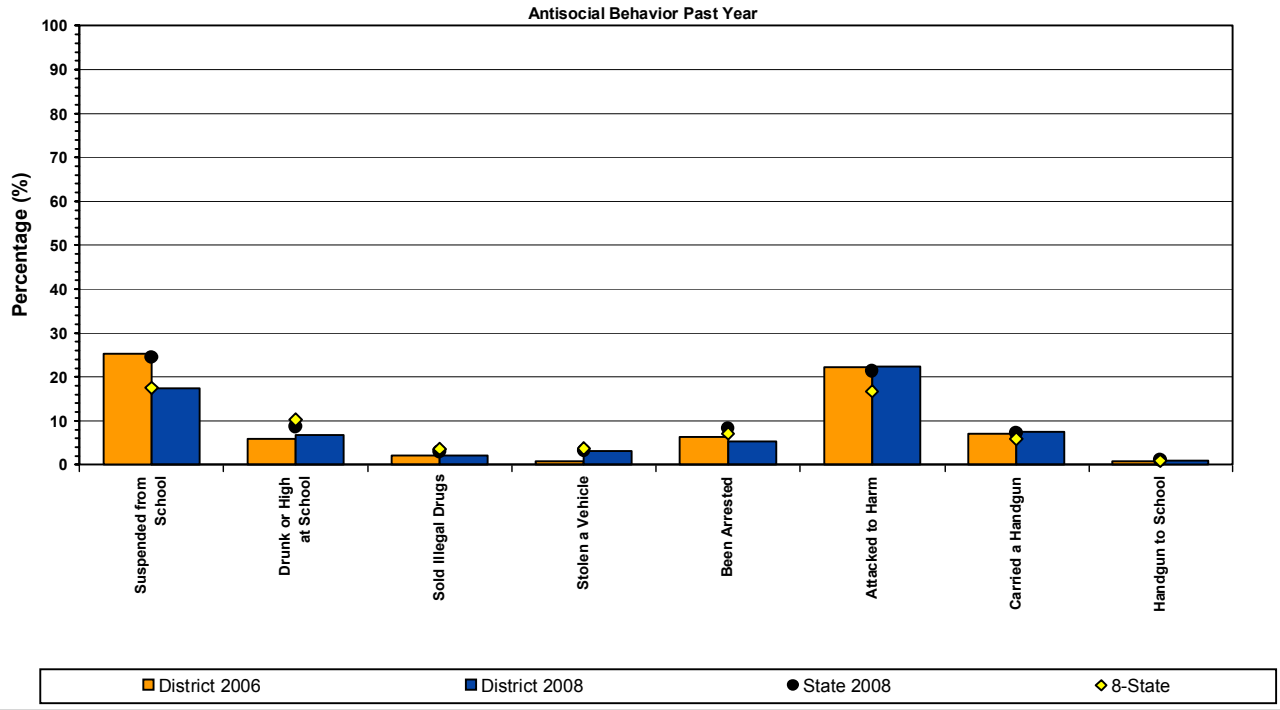
The following definitions and descriptions provide information about the antisocial behavior and gambling charts that follow.

- **Antisocial behavior (ASB)** is a measure of the percentage of students who report **any involvement** with the eight antisocial behaviors listed in the charts **during the past year.** In the charts, antisocial behavior is referred to as ASB.

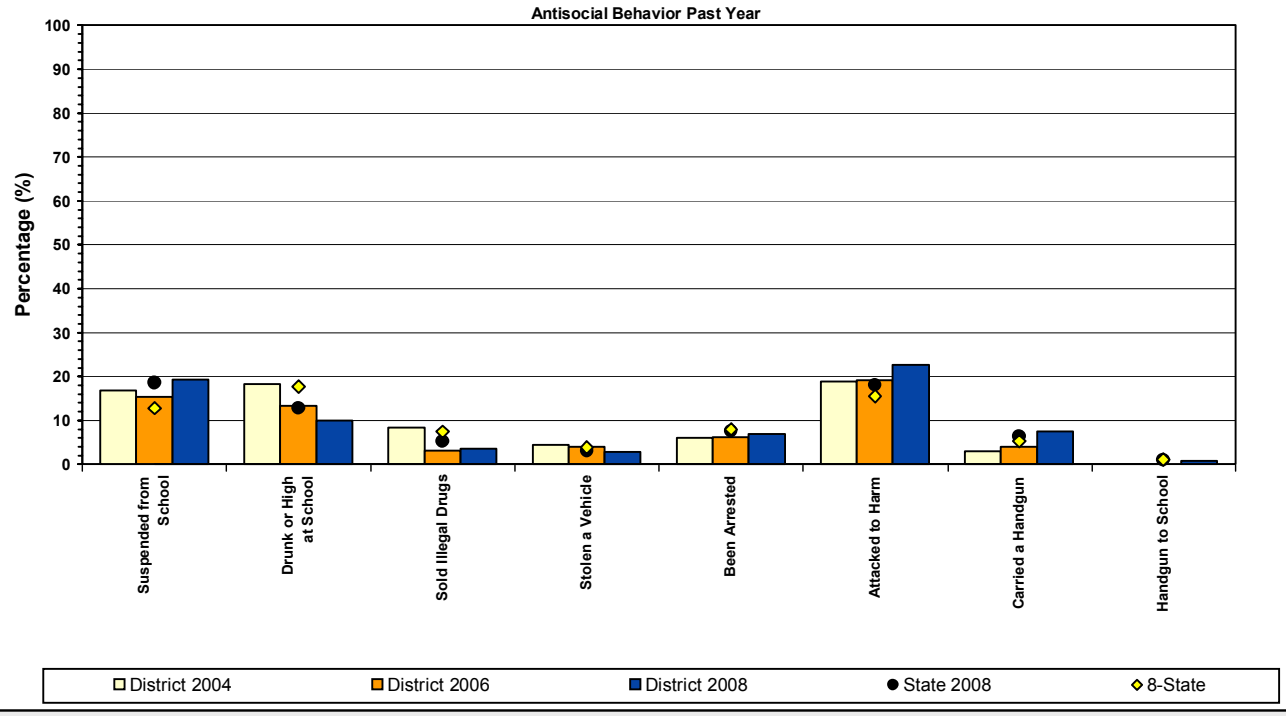
- **Gambling behavior** charts show the percentage of students who engaged in each of the 10 types of gambling along with the percentage for *any* gambling behavior during the past year.

Antisocial Behavior Profiles

ANTISOCIAL BEHAVIOR PROFILE
2008 Zachary Community School District Student Survey, Grade 8



ANTISOCIAL BEHAVIOR PROFILE
2008 Zachary Community School District Student Survey, Grade 10



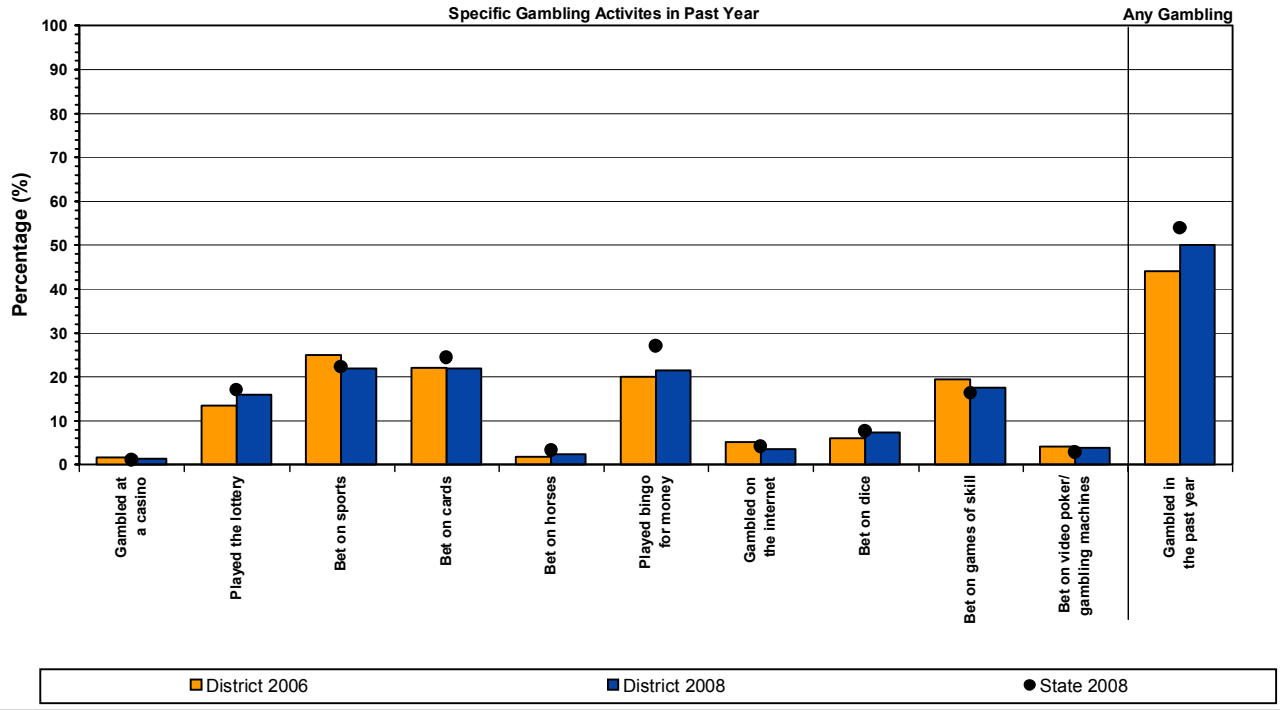
Antisocial Behavior Profiles

Table 6. Percentage of Students With Antisocial Behavior

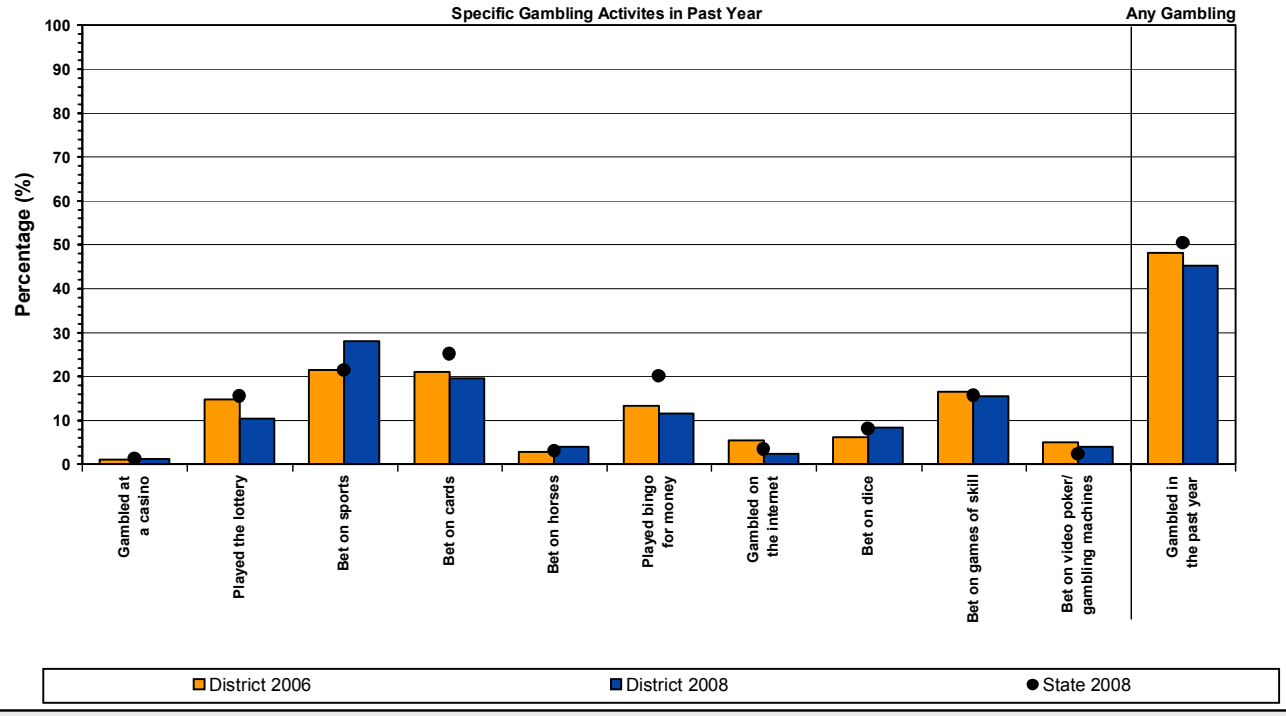
How many times in the past year (12 months) have you: (One or more times)	Grade 8			Grade 10				Grade 12			
	District 2006	District 2008	State 2008	District 2004	District 2006	District 2008	State 2008	District 2004	District 2006	District 2008	State 2008
Been Suspended from School	25.3	17.4	24.5	16.8	15.3	19.4	18.6	15.5	13.0	16.1	14.7
Been Drunk or High at School	5.9	6.8	8.6	18.3	13.4	10.0	12.8	13.3	15.5	12.6	14.0
Sold Illegal Drugs	2.1	2.1	3.0	8.3	3.1	3.6	5.3	4.4	5.6	6.0	6.3
Stolen or Tried to Steal a Motor Vehicle	0.8	3.1	3.2	4.4	4.1	2.8	3.1	2.5	3.7	3.6	2.2
Been Arrested	6.3	5.2	8.3	6.0	6.2	6.9	7.5	4.4	6.2	6.7	6.5
Attacked Someone with the Idea of Seriously Hurting Them	22.2	22.3	21.3	18.8	19.1	22.7	18.0	11.0	14.3	17.3	14.2
Carried a Handgun	7.1	7.6	7.2	3.0	4.1	7.5	6.3	3.8	3.1	7.1	6.6
Carried a Handgun to School	0.8	1.0	1.1	0.0	0.0	0.8	1.0	0.0	1.2	3.0	1.3

Gambling Profiles

GAMBLING PROFILE*
2008 Zachary Community School District Student Survey, Grade 8



GAMBLING PROFILE*
2008 Zachary Community School District Student Survey, Grade 10



* Gambling data were not gathered prior to 2006.

Gambling Profiles

Table 7. Gambling Behavior*

How often have you done the following for money, posessions or anything of value:	Grade 8			Grade 10			Grade 12		
	District 2006	District 2008	State 2008	District 2006	District 2008	State 2008	District 2006	District 2008	State 2008
gambled at a casino?	1.6	1.4	1.1	1.1	1.2	1.3	0.0	1.8	1.6
played the lottery or lottery scratch-off tickets?	13.5	16.0	17.1	14.8	10.4	15.5	7.7	12.5	12.7
bet on sporting events?	25.0	21.9	22.3	21.5	28.0	21.4	16.8	18.0	19.1
played cards for money?	22.1	21.9	24.4	21.1	19.6	25.2	20.6	23.2	23.7
bet money on horse races?	1.7	2.4	3.3	2.8	4.0	3.1	1.3	4.2	2.9
played bingo for money or prizes?	20.0	21.5	27.0	13.3	11.6	20.1	7.1	15.5	16.1
gambled on the internet?	5.1	3.5	4.2	5.5	2.4	3.4	2.6	3.6	3.1
bet on dice games such as craps?	6.0	7.3	7.7	6.1	8.4	8.1	5.8	7.2	7.2
bet on games of personal skill such as pool, darts or bowling?	19.5	17.5	16.3	16.5	15.5	15.7	10.3	14.5	13.4
bet on video poker or other gambling machines?	4.2	3.8	2.8	5.0	4.0	2.3	1.3	4.2	2.2
Total Gambling									
Any gambing in the past year	44.1	50.0	53.9	48.1	45.2	50.4	40.0	41.7	45.3

* Gambling data were not gathered prior to 2006.

Risk and Protective Profiles and Alcohol Causal Variables

The charts and tables that follow are intended to provide prevention professionals with data that are helpful in understanding the predictors and causes of substance use in your community. Data in the risk and protective factor profiles will provide you with an overview of the levels of risk and protection in your community. The alcohol causal variables charts present data relevant to several community domain variables associated with increased alcohol consumption.

Risk and Protective Factor Charts

The risk and protective factor charts show the percentage of students at risk and with protection for each of the risk and protective factor scales. The risk and protective factor scales measure specific aspects of a youth's life experience that predict whether he/she will engage in problem behaviors. Higher risk and lower protection predict a greater likelihood that a youth with engage in problem behaviors, while lower risk and higher protection predict a greater likelihood that youth will not engage in problem behaviors.

The factors are grouped into four domains: community, family, school, and peer/individual. Brief definitions of the risk and protective factors scales are provided in Table 13 at the end of this report. For more information about risk and protective factors, please refer to the resources listed on the last page of this report under *Contacts for Prevention.*

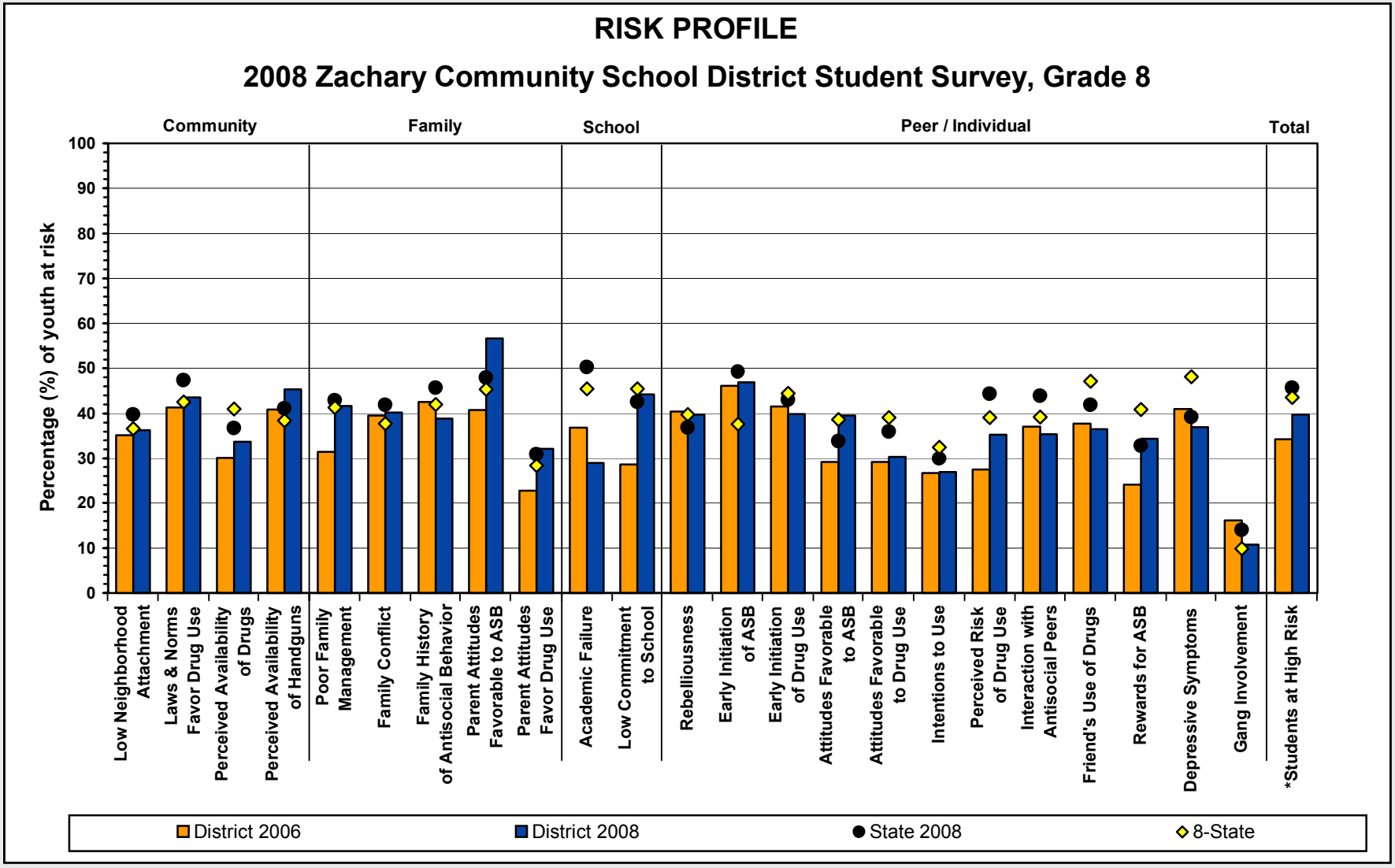
Consistent with the other charts in this report **the bars** represent your community's levels of risk and protection, **the dots** represent the Louisiana state average, and **the diamonds** represent a national comparison through the 8-state norm, where available. In looking at the risk profile charts, higher bars indicate areas of concern (areas of higher risk) for your community, while for the protective profile charts lower bars indicate areas of greater concern (areas of lower protection). By looking at the percentage of youth at risk and with protection over time, it is possible to determine whether the percentage of students at risk or with protection is increasing, decreasing, or staying the same. This information is important when deciding which risk and protective factors warrant attention.

Along with the risk and protective factor scales, there is a bar for each chart that shows **total risk** for each risk factor chart and **total protection** for each protective factor chart. The percentage of youth at high risk (Total Risk) is defined as the percentage of students who have more than a specified number of risk factors operating in their lives. For 6th grade students, it is the percentage of students who have 8 or more risk factors, for 8th grade it is 10 or more risk factors, and for 10th and 12th grades it is 11 or more risk factors. The percentage of youth with high protection (Total Protection) is defined as the percentage of students in grades 6 through 12 who have 6 or more protective factors operating in their lives.

Alcohol Causal Variables Charts

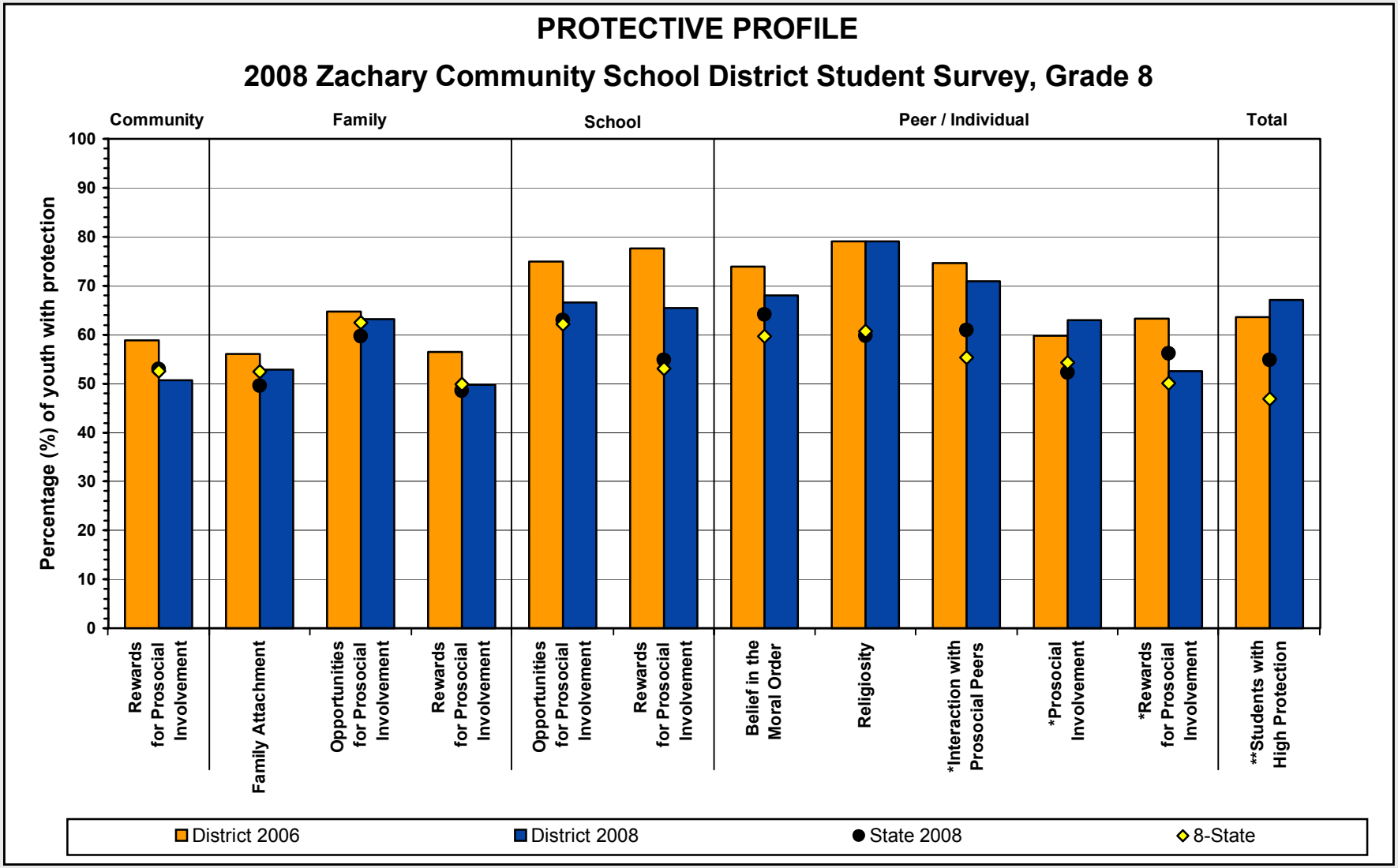
The Alcohol Causal Variables Charts include the percentage of students who obtained alcohol from specific sources, the percentage who used alcohol in specific places in the past year, and survey data gathered to shed light on the community norms about alcohol use. Percentages for the sources of alcohol and places of use are based upon only those students who reported having used alcohol in the past year, whereas student perceptions of community norms are drawn from all students surveyed, regardless of whether they reported any alcohol use.

Risk and Protective Factor Profiles



* *High Risk* youth are defined as the percentage of students who have more than a specified number of risk factors operating in their lives.
(6th grade: 7 or more risk factors, 8th grade: 8 or more risk factors, 10th & 12th grades: 9 or more risk factors.)

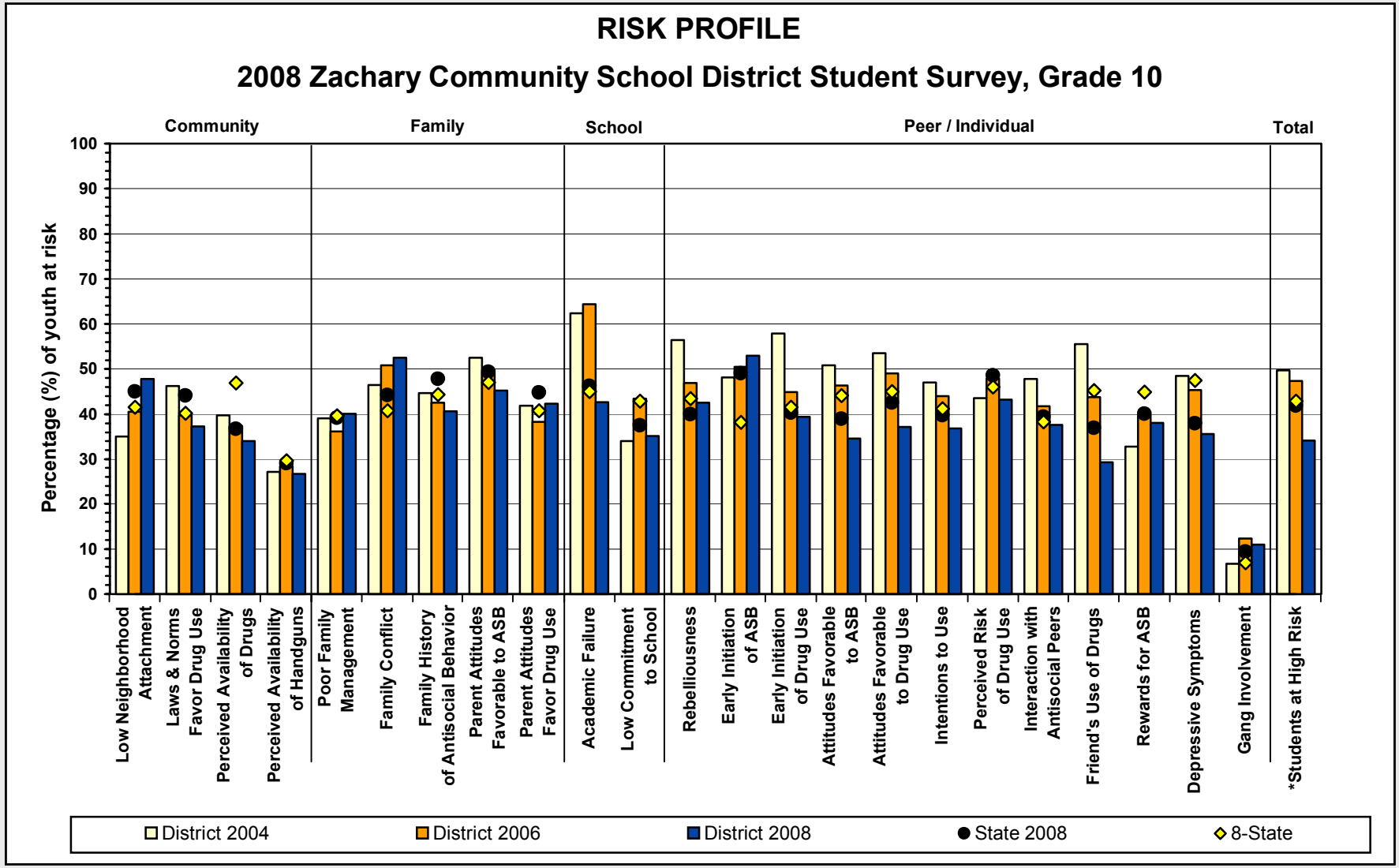
Risk and Protective Factor Profiles



* The *Peer/Individual* scales *Interaction with Prosocial Peers*, *Prosocial Involvement* and *Rewards for Prosocial Involvement* were not measured in survey administrations prior to 2006. Because of this, *Students with High Protection* is omitted for 2004.

** *High Protection* youth are defined as the percentage of students who have more than a specified number of protective factors operating in their lives. (6th grade: 4 or more protective factors, 8th, 10th & 12th grades: 5 or more protective factors.)

Risk and Protective Factor Profiles



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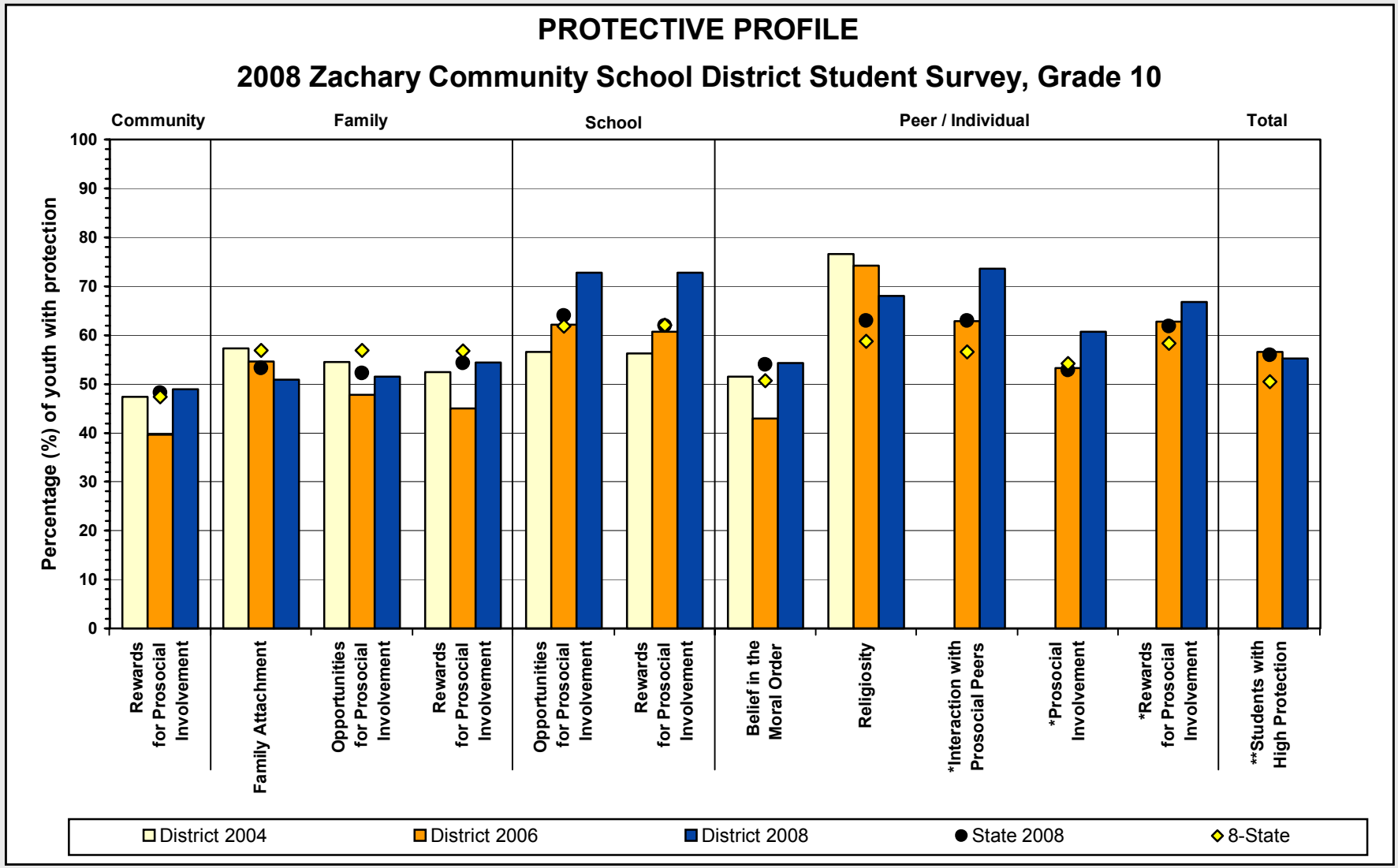
Risk and Protective Factor Profiles



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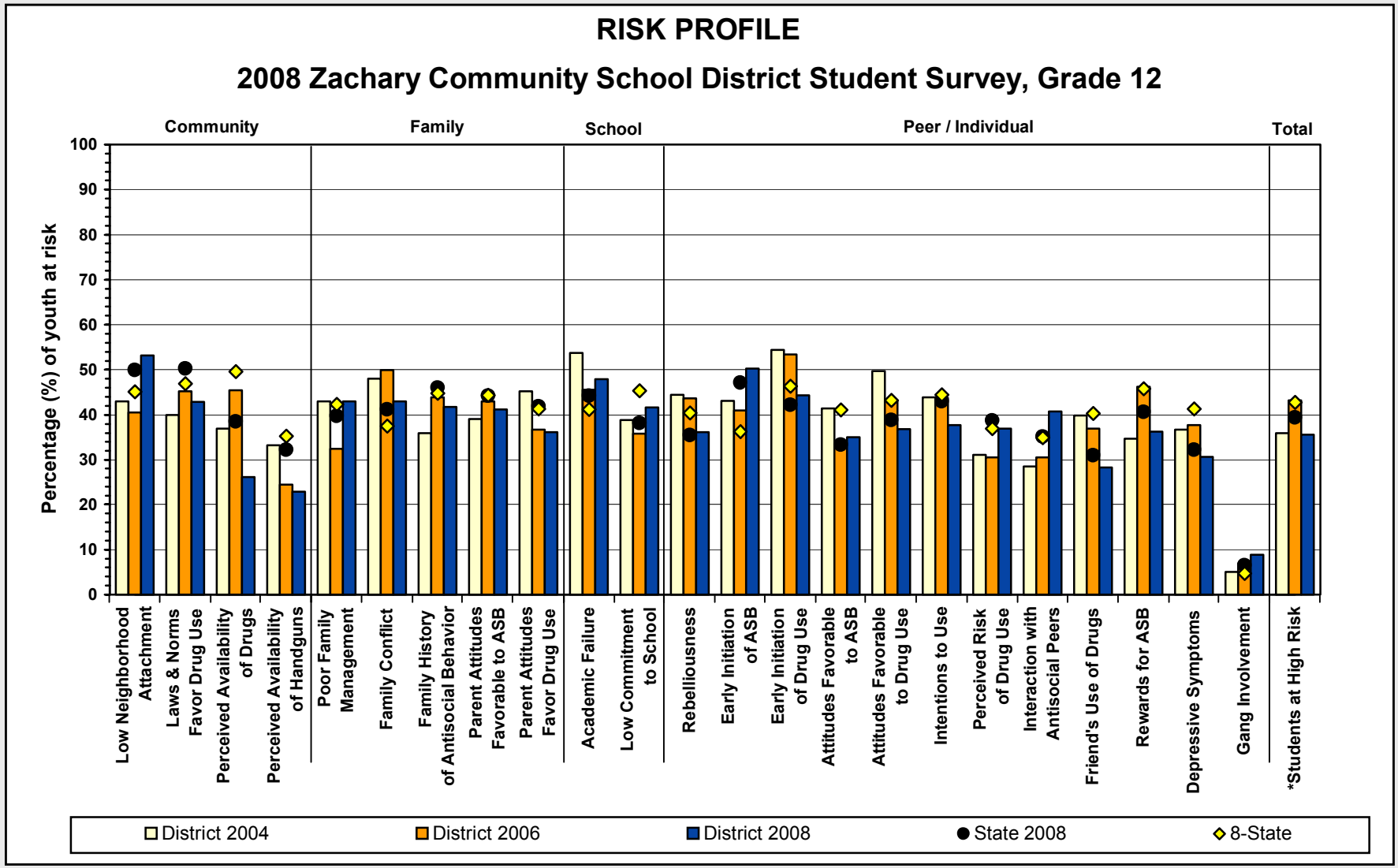
Risk and Protective Factor Profiles



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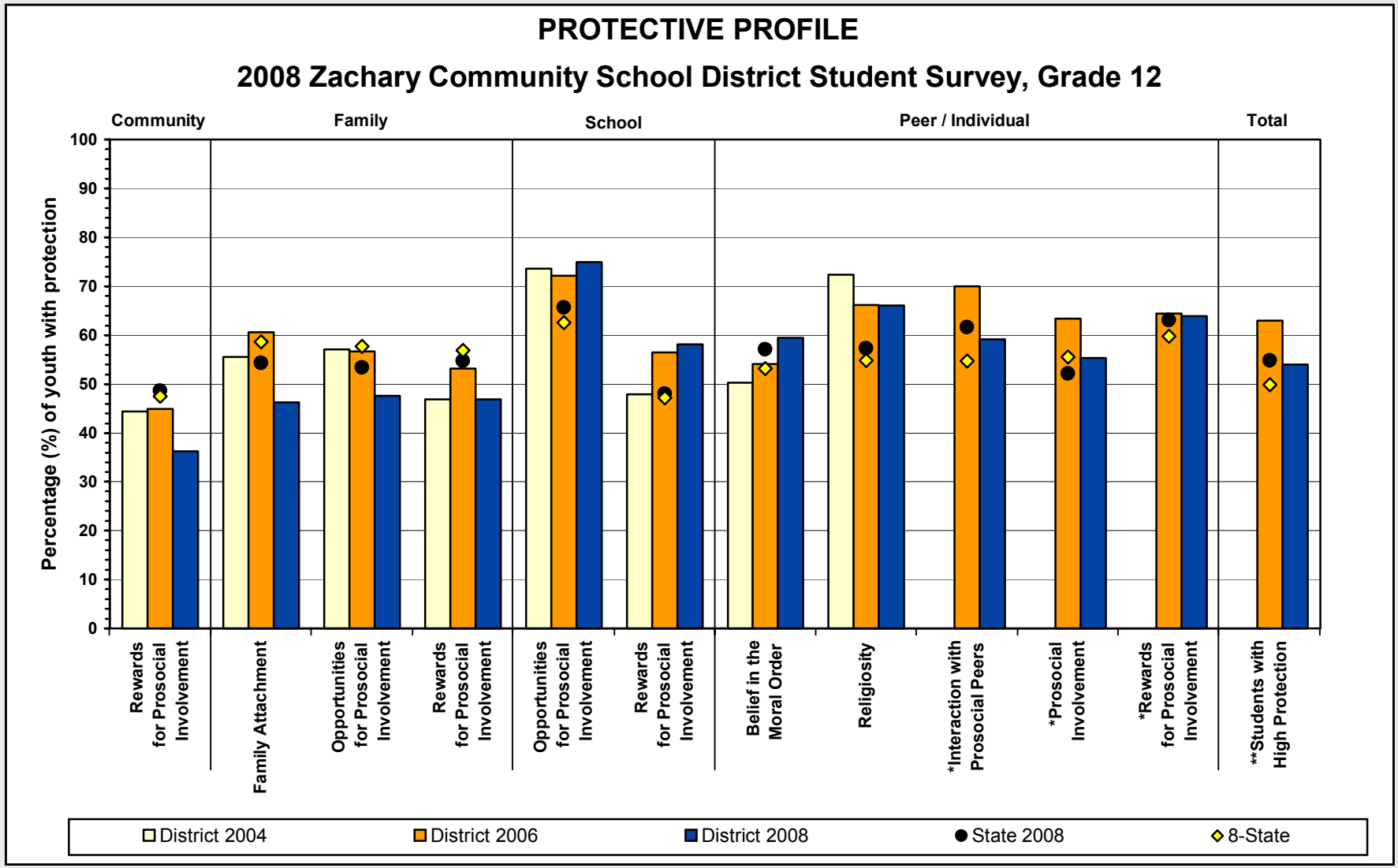
(6th grade: 7 or more risk factors, 8th grade: 8 or more risk factors, 10th & 12th grades: 9 or more risk factors.)

Risk and Protective Factor Profiles



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** *High Protection* youth are defined as the percentage of students who have more than a specified number of protective factors operating in their lives. (6th grade: 4 or more protective factors, 8th, 10th & 12th grades: 5 or more protective factors.)

Risk and Protective Factor Profiles

Table 8. Percentage of Students Reporting Risk

Risk Factor	Grade 8			Grade 10				Grade 12			
	District 2006	District 2008	State 2008	District 2004	District 2006	District 2008	State 2008	District 2004	District 2006	District 2008	State 2008
Community Domain											
Low Neighborhood Attachment	35.2	36.3	39.7	35.0	40.5	47.8	45.0	43.0	40.5	53.2	50.0
Laws & Norms Favor Drug Use	41.3	43.6	47.4	46.3	39.7	37.3	44.1	40.0	45.2	42.9	50.3
Perceived Availability of Drugs	30.1	33.7	36.7	39.7	37.4	34.0	36.7	36.9	45.5	26.1	38.5
Perceived Availability of Handguns	40.9	45.3	41.1	27.1	28.3	26.7	29.0	33.3	24.4	22.9	32.2
Family Domain											
Poor Family Management	31.5	41.7	42.9	39.1	36.2	40.1	39.2	43.0	32.5	43.0	39.8
Family Conflict	39.5	40.2	41.9	46.5	50.8	52.5	44.2	48.0	50.0	43.0	41.2
Family History of Antisocial Behavior	42.5	38.9	45.7	44.7	42.5	40.6	47.8	36.0	43.9	41.8	46.0
Parent Attitudes Favorable to ASB	40.8	56.7	47.9	52.5	49.2	45.2	49.4	39.1	43.0	41.2	44.2
Parent Attitudes Favor Drug Use	22.7	32.1	30.9	41.9	38.3	42.3	44.8	45.2	36.7	36.2	41.9
School Domain											
Academic Failure	36.8	28.9	50.3	62.4	64.4	42.7	46.2	53.7	45.6	47.9	44.2
Low Commitment to School	28.5	44.2	42.5	34.0	43.4	35.2	37.5	38.9	35.8	41.7	38.2
Peer-Individual Domain											
Rebelliousness	40.4	39.7	36.8	56.4	46.9	42.5	40.0	44.5	43.7	36.2	35.5
Early Initiation of ASB	46.1	46.9	49.3	48.1	50.5	53.0	49.0	43.1	41.0	50.3	47.2
Early Initiation of Drug Use	41.5	39.9	43.0	57.9	44.9	39.4	40.3	54.4	53.4	44.4	42.2
Attitudes Favorable to ASB	29.1	39.5	33.8	50.8	46.4	34.6	39.0	41.4	33.8	35.1	33.4
Attitudes Favorable to Drug Use	29.1	30.4	35.9	53.5	49.0	37.2	42.6	49.7	43.1	36.8	38.9
Intentions to Use	26.6	26.9	29.9	47.0	44.0	36.8	39.8	43.9	43.8	37.7	43.0
Perceived Risk of Drug Use	27.4	35.3	44.3	43.6	47.9	43.2	48.6	31.1	30.6	36.9	38.8
Interaction with Antisocial Peers	37.1	35.4	43.9	47.8	41.8	37.6	39.4	28.4	30.6	40.8	35.2
Friend's Use of Drugs	37.7	36.5	41.9	55.5	43.8	29.2	37.0	39.9	36.9	28.2	31.0
Rewards for ASB	24.1	34.4	32.8	32.8	39.8	38.1	40.1	34.7	46.2	36.3	40.6
Depressive Symptoms	41.0	37.0	39.2	48.5	45.4	35.6	38.0	36.7	37.7	30.7	32.3
Gang Involvement	16.1	10.7	14.0	6.7	12.3	11.0	9.4	5.0	6.9	8.9	6.5
Total Risk											
Students at High Risk*	34.3	39.7	45.7	49.7	47.4	34.2	41.9	36.0	43.2	35.6	39.4

* *High Risk* youth are defined as the percentage of students who have more than a specified number of risk factors operating in their lives.
(6th grade: 7 or more risk factors, 8th grade: 8 or more risk factors, 10th & 12th grades: 9 or more risk factors.)

Risk and Protective Factor Profiles

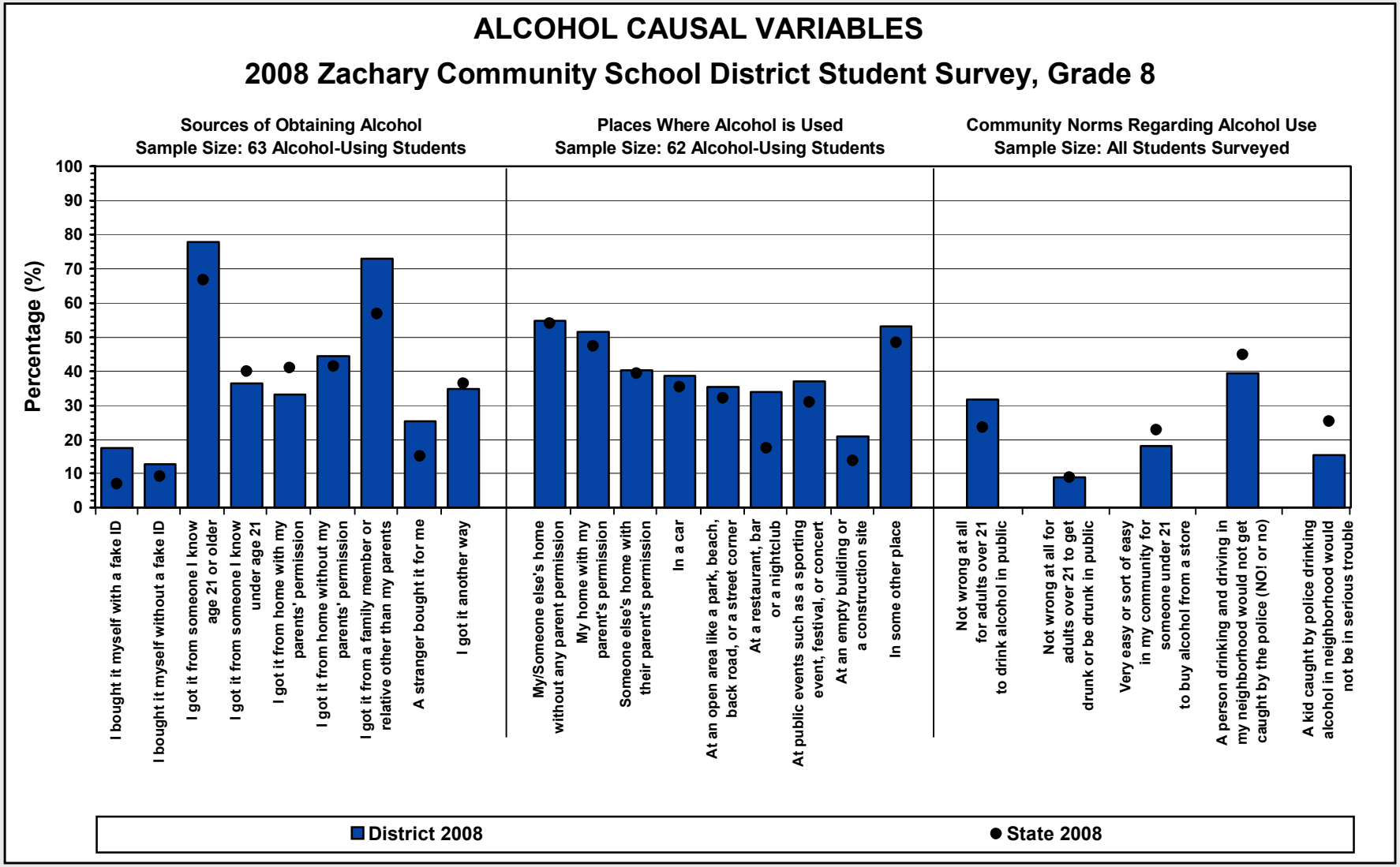
Table 9. Percentage of Students Reporting Protection

Protective Factor	Grade 8			Grade 10				Grade 12			
	District 2006	District 2008	State 2008	District 2004	District 2006	District 2008	State 2008	District 2004	District 2006	District 2008	State 2008
Community Domain											
Rewards for Prosocial Involvement	58.9	50.7	53.0	47.4	39.7	49.0	48.2	44.4	44.9	36.3	48.7
Family Domain											
Family Attachment	56.1	52.9	49.6	57.3	54.6	50.9	53.3	55.6	60.6	46.3	54.3
Opportunities for Prosocial Involvement	64.7	63.2	59.7	54.5	47.8	51.5	52.3	57.1	56.7	47.6	53.4
Rewards for Prosocial Involvement	56.5	49.8	48.6	52.5	45.1	54.4	54.3	46.9	53.2	46.9	54.7
School Domain											
Opportunities for Prosocial Involvement	74.9	66.6	63.0	56.6	62.2	72.8	64.0	73.6	72.2	74.9	65.7
Rewards for Prosocial Involvement	77.6	65.5	54.8	56.3	60.7	72.8	62.0	47.9	56.5	58.1	48.0
Peer-Individual Domain											
Belief in the Moral Order	73.9	68.0	64.1	51.5	43.0	54.3	54.0	50.3	54.1	59.5	57.1
Religiosity	79.1	79.1	59.8	76.6	74.2	68.0	63.0	72.4	66.2	66.1	57.3
Interaction with Prosocial Peers*	74.6	70.9	60.9	n/a	62.9	73.6	63.0	n/a	70.0	59.2	61.7
Prosocial Involvement*	59.8	63.0	52.3	n/a	53.3	60.7	52.9	n/a	63.4	55.4	52.2
Rewards for Prosocial Involvement*	63.3	52.6	56.2	n/a	62.8	66.8	61.9	n/a	64.4	63.9	63.1
Total Protection											
Students with High Protection**	63.6	67.1	54.8	n/a	56.6	55.3	56.0	n/a	63.0	54.0	54.8

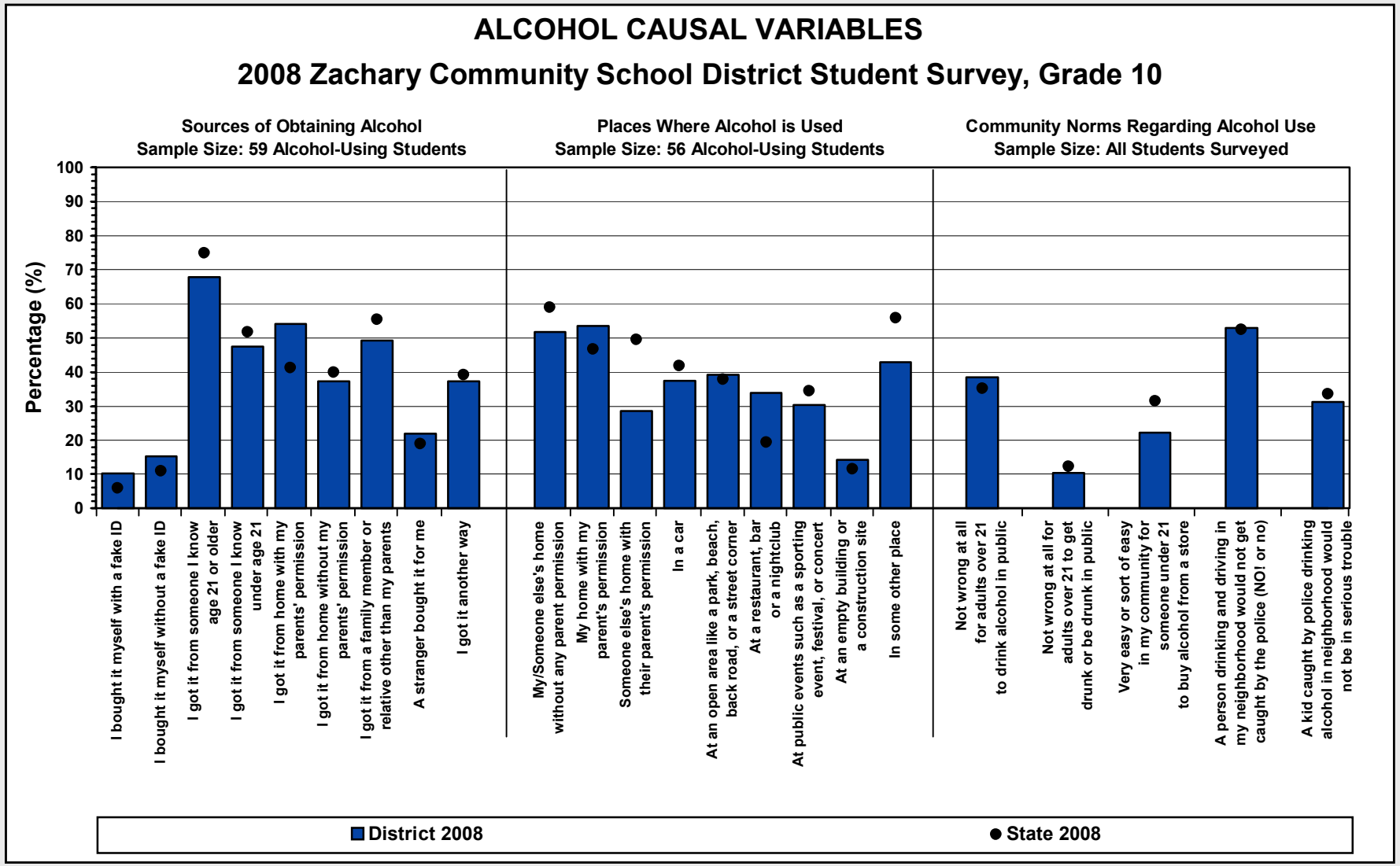
* The *Peer/Individual* scales *Interaction with Prosocial Peers, Prosocial Involvement* and *Rewards for Prosocial Involvement* were not measured in survey administrations prior to 2006. Because of this, *Students with High Protection* is omitted for 2004.

** *High Protection* youth are defined as the percentage of students who have more than a specified number of protective factors operating in their lives. (6th grade: 4 or more protective factors, 8th, 10th & 12th grades: 5 or more protective factors.)

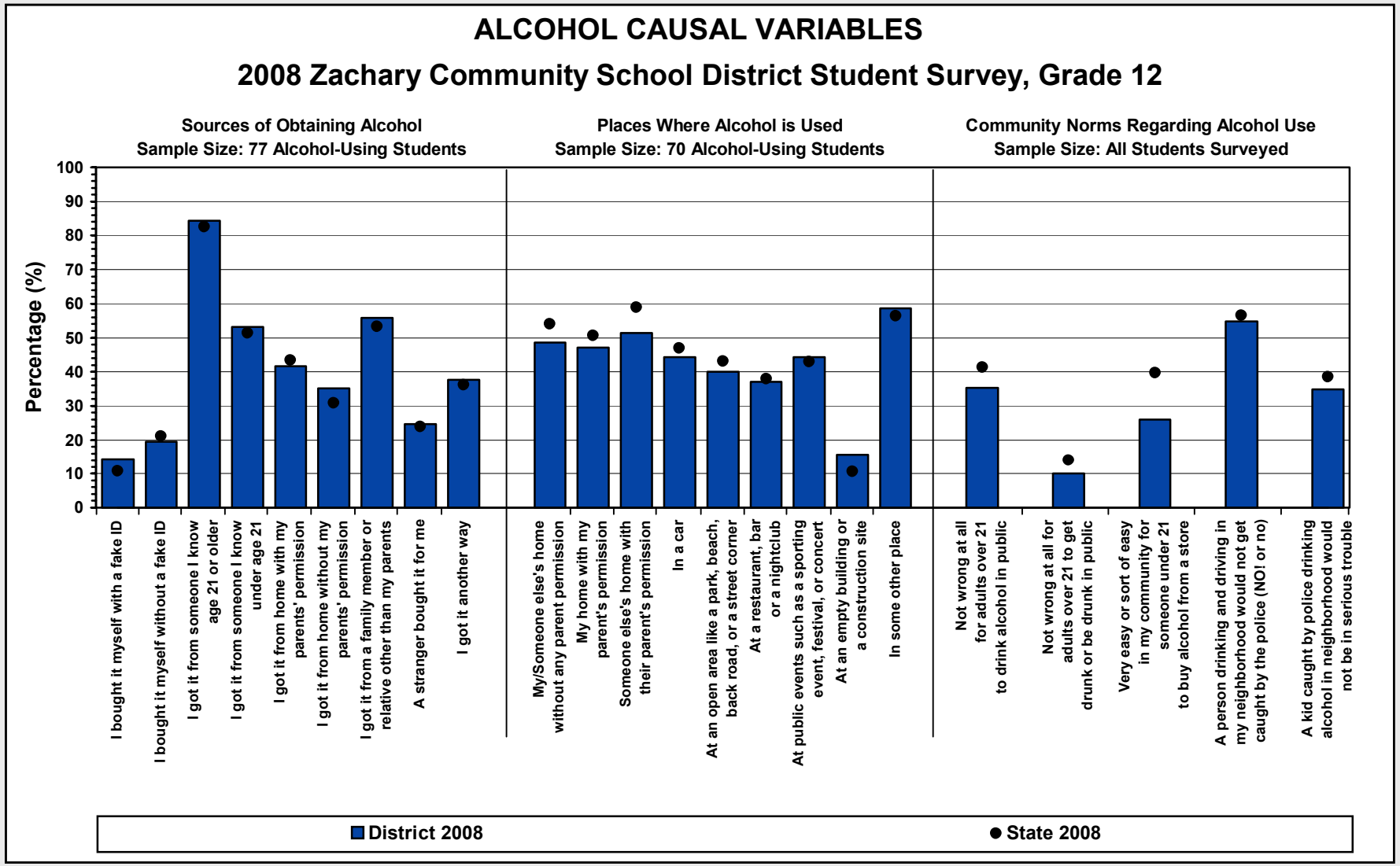
Alcohol Causal Variables



Alcohol Causal Variables



Alcohol Causal Variables



Alcohol Causal Variables

Table 10. Alcohol Causal Variables*

Sources of Obtaining Alcohol: If you drank alcohol (not just a sip or taste) in the past year, how did you get it?	Grade 8		Grade 10		Grade 12	
	District 2008	State 2008	District 2008	State 2008	District 2008	State 2008
*Sample size***	*63*	*7,530*	*59*	*9,676*	*77*	*9,680*
I bought it myself with a fake ID	17.5	7.0	10.2	5.9	14.3	10.8
I bought it myself without a fake ID	12.7	9.2	15.3	10.9	19.5	21.1
I got it from someone I know age 21 or older	77.8	66.8	67.8	75.0	84.4	82.6
I got it from someone I know under age 21	36.5	40.1	47.5	51.8	53.2	51.4
I got it from home with my parents' permission	33.3	41.0	54.2	41.3	41.6	43.5
I got it from home without my parents' permission	44.4	41.5	37.3	40.0	35.1	30.8
I got it from a family member or relative other than my parents	73.0	56.8	49.2	55.4	55.8	53.3
A stranger bought it for me	25.4	15.0	22.0	19.0	24.7	24.0
I got it another way	34.9	36.5	37.3	39.3	37.7	36.2
Places Where Alcohol is Used: During the past year, did you drink alcohol at any of the following places?	Grade 8		Grade 10		Grade 12	
	District 2008	State 2008	District 2008	State 2008	District 2008	State 2008
*Sample size***	*62*	*7,680*	*56*	*9,428*	*70*	*9,391*
At my home or someone else's home without any parent permission	54.8	54.0	51.8	59.0	48.6	54.0
At my home with my parent's permission	51.6	47.4	53.6	46.8	47.1	50.7
At someone else's home with their parent's permission	40.3	39.5	28.6	49.6	51.4	59.0
At an open area like a park, beach, back road, or a street corner	35.5	32.2	39.3	37.9	40.0	43.1
At public events such as a sporting event, festival, or concert	37.1	31.0	30.4	34.5	44.3	43.0
At a restaurant, bar, or a nightclub	33.9	17.4	33.9	19.5	37.1	38.0
At an empty building or a construction site	21.0	13.7	14.3	11.5	15.7	10.7
In a car	38.7	35.5	37.5	41.9	44.3	47.0
In some other place	53.2	48.5	42.9	55.9	58.6	56.4
Community Norms Regarding Alcohol Use: Student Perceptions†	Grade 8		Grade 10		Grade 12	
	District 2008	State 2008	District 2008	State 2008	District 2008	State 2008
Not wrong at all for adults over 21 to drink alcohol in public	31.8	23.6	38.5	35.3	35.3	41.3
Not wrong at all for adults over 21 to get drunk or be drunk in public	8.8	8.8	10.3	12.3	10.1	14.1
Very easy or sort of easy in my community for someone under 21 to buy alcohol from a store	18.0	22.9	22.3	31.5	26.0	39.7
Students answering "NO!" or "no" to the following question: A person drinking and driving in my neighborhood would get caught by the police.	39.4	44.9	53.0	52.5	54.8	56.6
Students answering "NO!" or "no" to the following question: A kid caught by police drinking alcohol in neighborhood would be in serious trouble.	15.3	25.4	31.2	33.7	34.8	38.5

* Alcohol sources, alcohol places, and community norms regarding alcohol use data were not gathered prior to 2008.

** Students were initially asked if they drank alcohol in the past year. Students marking "no" were instructed to skip the two questions regarding sources of obtaining alcohol and places of alcohol consumption. *Sample size* represents the number of youth who chose at least one source of obtaining alcohol or at least one place of alcohol consumption. Students who indicated they had not drank alcohol in the past year are not included in the sample. In the case of smaller sample sizes, caution should be exercised before generalizing results to the entire community.

† Community norms data represents the perceptions of all students surveyed, regardless of whether they indicated any alcohol use in the past year.

Additional Data for Prevention Planning

Table 11. Percent of Students Responding to Violence, Bullying, and Mental Health Prevention Indicators

		Grade 8			Grade 10				Grade 12			
		District 2006	District 2008	State 2008	District 2004	District 2006	District 2008	State 2008	District 2004	District 2006	District 2008	State 2008
Violence on School Grounds (Answered "no" or "NO!" to statement…)	I feel safe at my school.	10.5	19.1	27.8	23.8	17.3	15.0	24.9	10.5	8.6	11.0	21.8
Prevalence of Violence (Answered one or more times in the past year)	How many times in the past year have you attacked someone with the idea of seriously hurting them?	22.2	22.3	21.3	18.8	19.1	22.7	18.0	11.0	14.3	17.3	14.2
Perception of Peer Disapproval (Answered "Wrong" or "Very Wrong" to question…)	How wrong do you think it is for someone your age to attack someone with the idea of seriously hurting them?	89.8	84.4	84.6	80.0	75.9	85.0	83.6	87.0	88.1	87.1	86.8
Avoidance of School in the Past Month Due to Bullying (Answered 1 or more days to question...)	During the past 30 days, on how many days did you NOT got to school because you felt you would be unsafe at school or on the way to or from school?	n/a	7.2	9.7	n/a	n/a	7.9	7.5	n/a	n/a	9.5	7.0
Bullying in the Past Year (Answered 1 or more days to question…)	During the past 12 months, how often have you been picked on or bullied by a student ON SCHOOL PROPERTY?	n/a	24.4	21.2	n/a	n/a	8.6	13.5	n/a	n/a	8.0	8.2
Suicidal Ideation (Answered "Yes" to question…)	During the past 12 months, did you ever seriously consider attempting suicide?	n/a	15.2	12.9	n/a	n/a	13.9	13.3	n/a	n/a	10.1	10.2
Depressive Symptoms Calculation (Calculated from student responses to four depressive symptoms questions*)	High Depressive Symptoms	2.6	3.2	4.3	7.7	6.2	2.8	3.7	3.4	5.0	2.5	2.5
	Moderate Depressive Symptoms	84.6	72.5	75.5	73.1	80.9	77.7	75.4	79.6	72.3	67.5	72.1
	No Depressive Symptoms	12.8	24.3	20.1	19.2	12.9	19.4	20.9	17.0	22.6	30.1	25.4

* The four depressive symptoms that were asked on the survey questionnaire were: 1) Sometimes I think that life is not worth it, 2) At times I think I am no good at all, 3) All in all, I am inclined to think that I am a failure, and 4) In the past year, have you felt depressed or sad MOST days, even if you felt OK sometimes? The questions were scored on a scale of 1 to 4 (NO!, no, yes, YES!). The survey respondents were divided into three groups. The first group was the High Depressive Symptoms group who scored at least a mean of 3.75 on the depressive symptoms. This meant that those individuals marked "YES!" to all four items or marked "yes" to one item and "YES!" to three. The second group was the No Depressive Symptoms group who marked "NO!" to all four of the items, and the third group was a middle group who comprised the remaining respondents.

Additional Data for Prevention Planning

Table 12. Perceived Parent/Peer Disapproval, Risk Perception and Age of Initiation

Outcome	Definition	Substance	District 2008									
			Grade 8		Grade 10		Grade 12		Male†		Female†	
			Percent	Sample	Percent	Sample	Percent	Sample	Percent	Sample	Percent	Sample
Perception of Risk* ***(People are at Moderate or Great Risk of harming themselves if they...)***	drink 1 or two drinks nearly every day	Alcohol	66.2	260	63.8	221	65.4	156	56.2	292	73.1	334
	smoke 1 or more packs or cigarettes per day	Cigarettes	87.5	271	84.2	241	80.2	162	80.5	308	88.4	354
	smoke marijuana regularly	Marijuana	89.5	258	82.9	234	78.3	157	81.1	296	87.4	342
Perception of Parent Disapproval* **(*Parents feel it would be Wrong or Very Wrong to...*)**	drink beer, wine, or hard liquor regularly	Alcohol	85.1	262	77.8	189	80.0	150	83.0	264	80.1	327
	smoke cigarettes	Cigarettes	95.5	265	90.5	189	90.6	149	92.1	266	93.0	327
	smoke marijuana	Marijuana	96.6	262	95.7	187	97.3	147	95.5	266	97.2	320
Perception of Peer Disapproval* ***(I think it is Wrong or Very Wrong for someone my age to...)***	drink beer, wine, or hard liquor regularly	Alcohol	84.0	293	60.2	254	62.4	170	71.5	330	69.6	375
	smoke cigarettes	Cigarettes	88.4	292	79.1	254	67.1	170	78.5	330	81.3	375
	smoke marijuana	Marijuana	93.5	294	85.0	253	81.3	171	84.9	332	90.1	374
Past 30-Day Use*	at least one use in the Past 30 Days	Alcohol	22.6	279	34.2	240	51.2	160	33.8	314	33.5	352
		Cigarettes	7.9	278	11.5	217	22.2	158	13.7	293	11.7	349
		Marijuana	3.6	279	7.2	236	13.0	161	9.0	311	5.7	352
			Percent	Sample	Percent	Sample	Percent	Sample	Percent	Sample	Percent	Sample
Average Age of Onset** ***(How old were you when you first…)***	had more than a sip or two of beer, wine or hard liquor?	Alcohol	50.3	290	67.5	252	76.0	171	60.8	329	64.1	373
		Average age:	11.2 years		12.8 years		13.8 years		12.2 years		12.8 years	
	smoked a cigarette, even just a puff?	Cigarettes	23.9	289	40.1	252	51.5	171	37.5	328	35.1	373
		Average age:	11.6 years		12.4 years		13.4 years		12.6 years		12.5 years	
	smoked marijuana?	Marijuana	7.5	293	18.3	251	23.4	171	16.7	330	13.7	373
		Average age:	12.6 years		13.2 years		14.3 years		13.6 years		13.3 years	

* For Past 30-Day Use, Perception of Risk, and Perception of Parental/Peer Disapproval, the "Sample" column represents the sample size - the number of people who answered the question and whose responses were used to determine the percentage. The "Percent" column represents the percentage of youth in the sample answering the question as specified in the "Definition" column.

** For Average Age of Onset, the "Sample" column represents the overall sample size: the total number of people that responded to the questions about Age of Onset. This includes responses that are not used to calculate the average age of onset (i.e., youth that have never used alcohol, tobacco, and marijuana). The "Percent" column represents the percentage of youth in the sample reporting any age of first use for the specified substance. "Average age" is calculated by averaging the ages of first use of students reporting any use.

† The male and female values allow a gender comparison for youth who completed the survey. However, unless the percentage of students who participated from each grade is similar, the gender results are not necessarily representative of males and females in the community. In order to preserve confidentiality, male or female values may be omitted if the total number surveyed for that gender is under 20.

Risk and Protective Scale Definitions

Table 13. Scales that Measure the Risk and Protective Factors Shown in the Profiles

Community Domain Risk Factors	
Low Neighborhood Attachment	Low neighborhood bonding is related to higher levels of juvenile crime and drug selling.
Laws and Norms Favorable Toward Drug Use	Research has shown that legal restrictions on alcohol and tobacco use, such as raising the legal drinking age, restricting smoking in public places, and increased taxation have been followed by decreases in consumption. Moreover, national surveys of high school seniors have shown that shifts in normative attitudes toward drug use have preceded changes in prevalence of use.
Perceived Availability of Drugs and Handguns	The availability of cigarettes, alcohol, marijuana, and other illegal drugs has been related to the use of these substances by adolescents. The availability of handguns is also related to a higher risk of crime and substance use by adolescents.
Community Domain Protective Factors	
Rewards for Prosocial Involvement	Rewards for positive participation in activities helps youth bond to the community, thus lowering their risk for substance use.
Family Domain Risk Factors	
Poor Family Management	Parents' use of inconsistent and/or unusually harsh or severe punishment with their children places them at higher risk for substance use and other problem behaviors. Also, parents' failure to provide clear expectations and to monitor their children's behavior makes it more likely that they will engage in drug abuse whether or not there are family drug problems.
Family 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.
Family History of Antisocial Behavior	When children are raised in a family with a history of problem behaviors (e.g., violence or ATOD use), the children are more likely to engage in these behaviors.
Parental Attitudes Favorable Toward Antisocial Behavior & Drugs	In families where parents use illegal drugs, are heavy users of alcohol, or are tolerant of children's use, children are more likely to become drug abusers during adolescence. The risk is further increased if parents involve children in their own drug (or alcohol) using behavior, for example, asking the child to light the parent's cigarette or get the parent a beer from the refrigerator.
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 Prosocial Involvement	Young people who are exposed to more opportunities to participate meaningfully in the responsibilities and activities of the family are less likely to engage in drug use and other problem behaviors.
Rewards for Prosocial Involvement	When parents, siblings, and other family members praise, encourage, and attend to things done well by their child, children are less likely to engage in substance use and problem behaviors.
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 to School	Surveys of high school seniors have shown that the use of drugs is significantly lower among students who expect to attend college than among those who do not. Factors such as liking school, spending time on homework, and perceiving the coursework as relevant are also negatively related to drug use.
School Domain Protective Factors	
Opportunities for Prosocial Involvement	When young people are given more opportunities to participate meaningfully in important activities at school, they are less likely to engage in drug use and other problem behaviors.
Rewards for Prosocial Involvement	When young people are recognized and rewarded for their contributions at school, they are less likely to be involved in substance use and other problem behaviors.

Table 13. Scales that Measure the Risk and Protective Factors Shown in the Profiles (cont'd)

Peer-Individual Risk Factors	
Rebelliousness	Young people who do not feel part of society, are not bound by rules, don't believe in trying to be successful or responsible, or who take an active rebellious stance toward society, are at higher risk of abusing drugs. In addition, high tolerance for deviance, a strong need for independence and normlessness have all been linked with drug use.
Early Initiation of Antisocial Behavior and Drug Use	Early onset of drug use predicts misuse of drugs. The earlier the onset of any drug use, the greater the involvement in other drug use and the greater frequency of use. Onset of drug use prior to the age of 15 is a consistent predictor of drug abuse, and a later age of onset of drug use has been shown to predict lower drug involvement and a greater probability of discontinuation of use.
Attitudes Favorable Toward Antisocial Behavior and Drug Use	During the elementary school years, most children express anti-drug, anti-crime, and pro-social attitudes and have difficulty imagining why people use drugs or engage in antisocial behaviors. However, in middle school, as more youth are exposed to others who use drugs and engage in antisocial behavior, their attitudes often shift toward greater acceptance of these behaviors. Youth who express positive attitudes toward drug use and antisocial behavior are more likely to engage in a
Intention to Use ATODs	Many prevention programs focus on reducing the intention of participants to use ATODs later in life. Reduction of intention to use ATODs often follows successful prevention interventions.
Perceived Risk of Drug Use	Young people who do not perceive drug use to be risky are far more likely to engage in drug use.
Interaction with Antisocial Peers	Young people who associate with peers who engage in problem behaviors are at higher risk for engaging in antisocial behavior themselves.
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 among the strongest predictors of substance use among youth. Even when young people come from well-managed families and do not experience other risk factors, spending time with friends who use drugs greatly increases the risk of that problem developing.
Rewards for Antisocial Behavior	Young people who receive rewards for their antisocial behavior are at higher risk for engaging further in antisocial behavior and substance use.
Depressive Symptoms	Young people who are depressed are overrepresented in the criminal justice system and are more likely to use drugs. Survey research and other studies have shown a link between depression and 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	
Belief in the Moral Order	Young people who have a belief in what is "right" or "wrong" are less likely to use drugs.
Religiosity	Young people who regularly attend religious services are less likely to engage in problem behaviors.
Interaction with Prosocial Peers	Young people who associate with peers who engage in prosocial behavior are more protected from engaging in antisocial behavior and substance use.
Prosocial Involvement	Participation in positive school and community activities helps provide protection for youth.
Rewards for Prosocial Involvement	Young people who are rewarded for working hard in school and the community are less likely to engage in problem behavior.

Contacts for Prevention

Regional Prevention Contacts:

Region I
Metropolitan Human Services District
2520 Canal Street, Suite 300
New Orleans, LA 70112
(504) 568-0205
(504) 568-2698 fax

Region II
Capital Area Human Services District
4615 Government Street, Bldg. A
Baton Rouge, LA 70806
(225) 925-3827
(225) 925-1987 fax

Region III
Terrebonne Office for Addictive Disorders
521 Legion Ave.
Houma, LA 70364
(985) 857-3612
(985) 857-3707 fax

Region IV
Lafayette Office for Addictive Disorders
400 St. Julien Ave., Suite 1
Lafayette, LA 70506
(337) 262-1611
(337) 262-1105 fax

Region V
Lake Charles Office for Addictive Disorders
2300 Broad Street
Lake Charles, LA 70601
(337) 475-3100
(337) 475-3105 fax

Region VI
Pineville Office for Addictive Disorders
401 Rainbow Drive, Unit 35
P. O. Box 7118
Alexandria, LA 71306-0118
(318) 487-5191
(318) 487-5453 fax

Region VII
Northwest Regional Center for Addictive Disorders
6005 Financial Plaza, 2nd Floor
Shreveport, LA 71129-2615
(318) 632-2040
(318) 632-2038 fax

Region VIII
Office for Addictive Disorders
2513 Ferrand Street
Monroe, LA 71201
(318) 362-3270
(318) 362-3268 fax

Region IX
Florida Parishes Human Services Authority
19404 North 10th Street
Covington, LA 70433
(985) 871-1383
(985) 871-1388 fax

Region X
Jefferson Parish Human Service Authority
Division of Child & Family Services
5001 Westbank Expressway, Suite 11
Marrero, LA 70072
(504) 371-0172
(504) 349-8768 fax

Contacts for Prevention

State Contacts:

DHH/Office for Addictive Disorders
628 North 4th Street, Fourth Floor
P. O. Box 3868
Baton Rouge, LA 70802-3868
(225) 342-1079 phone
(225) 342-3931 fax
www.dhh.state.la.us/oada

Governor's Office
Office Of Community Programs
State Office Building
150 North Third Street, 1st Floor
Baton Rouge, LA 70802
(225) 342-3423 / (800) 827-5885
(225) 342-7081 fax
www.ladrugpolicy.org

Louisiana Office for Addictive Disorders
Caring Communities Youth Survey
Partners in Prevention
www.dhh.state.la.us/oada

Louisiana Department of Education
Division of School and Community Support
1201 North Third Street
Baton Rouge, LA 70802
(225) 342-3338 phone
(225) 219-1691 fax
www.louisianaschools.net

National Contacts & Resources:

Center for Substance Abuse Prevention (CSAP)
http://prevention.samhsa.gov

Office of Juvenile Justice and Delinquency Prevention (OJJDP)
http://www.ojjdp.ncjrs.org

Safe and Drug Free Schools and Communities Program
U.S. Department of Education
www.ed.gov/offices/OESE/SDFS

Substance Abuse and Mental Health Services Administration (SAMHSA) Prevention Platform
http://preventionplatform.samhsa.gov/

Social Development Research Group, University of Washington
http://depts.washington.edu/sdrg/

National Clearing House for Alcohol & Drug Information
http://www.health.org/

Southwest Center for the Application of Prevention Technology
www.swcapt.org

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