

2011 New York Prevention Needs Assessment Survey



Survey Results for:
Manhasset Union Free School District

Sponsored by:
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2011 Prevention Needs Assessment Survey Profile Report

This report summarizes the findings from the Prevention Needs Assessment (PNA) Survey that was conducted during 2011. The results are presented along with comparisons to national data sources such as the Monitoring the Future Survey (only grades 8, 10, and 12 are surveyed) and the Bach Harrison Norm (BH Norm), which consists of a large, weighted, nationwide sample.

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

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

Contents:

Introduction

The Risk and Protective Factor Model of Substance Abuse Prevention

Building a Strategic Prevention Framework

Tools for Assessment and Planning

How to Read the Charts

- Substance Use,
- Antisocial Behavior and Gambling,
- Risk & Protective Factor Profiles

Risk and Protective Factor Scale Definitions

Data Tables

Drug Free Communities and Youth Perception of Substance Use Report

Contacts for Prevention

percentage of students who participated from your community. If 70% 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 70% participated, a review of who participated should be completed prior to generalizing the results to the entire community.

The Risk and Protective Factor Model of Substance Abuse Prevention

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

Risk factors are characteristics of school, community, and family environments, as well as characteristics of students and their peer groups that are known to predict increased likelihood of drug use, delinquency, school dropout, teen pregnancy, and violent behavior among youth. Dr. J. David Hawkins, Dr. Richard F. Catalano, and their colleagues at the University of Washington, Social Development Research Group have investigated the relationship between risk and protective factors and youth problem behavior. For example, they have found that children who live in families with high levels of conflict are

Table 1. Characteristics of Participants

Student Totals				
Total Students	Manhasset Union Free School District			
	2009		2011	
	Number	Percent	Number	Percent
	344	100	910	100
Grade				
6	125	36.3	269	29.6
8	112	32.6	222	24.4
10	107	31.1	222	24.4
12	0	0.0	197	21.6
Gender				
Male	170	49.4	448	49.7
Female	174	50.6	454	50.3
Ethnicity				
Native American	3	0.9	8	0.9
Asian	44	13.0	111	12.2
African American	11	3.3	11	1.2
Pacific Islander	0	0.0	2	0.2
Hispanic	13	3.8	21	2.3
White	251	74.3	671	74.0
Multi-racial or Other	16	4.7	83	9.2

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

more likely to become involved in problem behaviors such as delinquency and drug use than children who live in families with low levels of family conflict.

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

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

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

The chart to the right shows the links between the 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.

Risk Factors	Problem Behaviors				
	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence
Community					
1. Community Laws and Norms Favorable Toward Drug Use, Firearms and Crime	✓	✓			✓
2. Availability of Drugs & Firearms	✓	✓			✓
3. Transitions and Mobility *	✓	✓		✓	
4. Low Neighborhood Attachment	✓	✓			✓
5. Community Disorganization	✓	✓			✓
6. Extreme Economic Deprivation *	✓	✓	✓	✓	✓
Family					
7. Family History of the Problem Behavior	✓	✓	✓	✓	✓
8. Family Conflict	✓	✓	✓	✓	✓
9. Family Management Problems	✓	✓	✓	✓	✓
10. Parental Attitudes Favorable Towards Drugs / Other Problem Behavior	✓	✓			✓
School					
11. Academic Failure	✓	✓	✓	✓	✓
12. Lack of Commitment to School	✓	✓	✓	✓	✓
Peer / Individual					
13. Early Initiation of Drug Use & Other Problem Behaviors	✓	✓	✓	✓	✓
14. Early & Persistent Antisocial Behavior	✓	✓	✓	✓	✓
15. Alienation & Rebelliousness	✓	✓		✓	
16. Friends Who Use Drugs & Engage in Problem Behaviors	✓	✓	✓	✓	✓
17. Favorable Attitudes Toward Drug Use & Other Problem Behaviors	✓	✓	✓	✓	
18. Gang Involvement	✓	✓			✓
19. Constitutional Factors	✓	✓			✓

Building a Strategic Prevention Framework

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

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

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

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



Implementation: Implement Evidence-based Prevention Programs and Infrastructure Development Activities. By measuring and identifying the risk factors and other causal factors that contribute to the targeted problems specified in your strategic plan, programs can be implemented that will reduce the prioritized substance abuse problems. After completing Steps 1, 2, and 3, communities will be able to choose prevention strategies that have been shown to be effective, are appropriate for the population served, can be implemented with fidelity, are culturally appropriate, and can be sustained over time. The Western Center for the Application of Prevention Technology has developed an internet tool located at <http://casat.unr.edu/bestpractices/search.php> for identifying Best Practice Programs. Another resource for evidence-based prevention practices is SAMHSA's National Registry of Evidence-based Programs and Practices www.nrepp.samhsa.gov.

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

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

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

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

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

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

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

What are the numbers telling you?

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

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

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

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

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

How to identify high priority problem areas

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

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

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

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

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

Use these data for planning.

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

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

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

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

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

How to Read the Charts

There are four types of charts presented in this report:

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

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

Understanding the Format of the Charts

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

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

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

The diamonds represent national data from either the Monitoring the Future (MTF) Survey or the Bach Harrison Norm (BH Norm). The BH Norm was developed by Bach Harrison L.L.C. to provide states and communities with the ability to compare their results on risk, protection, and antisocial measures with more national measures. Survey participants from eight statewide surveys and five large regional surveys across the nation were combined into a database of approximately 460,000 students. The results were weighted to make the contribution of each state and region proportional

to its share of the national population. Bach Harrison analysts then calculated rates for antisocial behavior and for students at risk and with protection. The results appear on the charts as BH Norm. In order to keep the BH Norm relevant, it is updated approximately every two years as new data become available.

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

Lifetime, 30 Day & Heavy ATOD Use Charts

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

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

30-day use is a measure of the percentage of students who used the substance at least once in the 30 days prior to taking the survey and is a more sensitive indicator of the level of current use of the substance.

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

ASB and Gambling Charts

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

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

How to Read the Charts and Tables

Risk and Protective Factor Charts

Risk and protective factor scales measure specific aspects of a youth's life experience that predict whether he/she will engage in problem behaviors. The scales, defined in Table 2, are grouped into four domains: community, family, school, and peer/individual. The risk and protective factor charts show the percentage of students at risk and with protection for each of the scales. Along with the scales, there are bars that show the percentage of High Risk Youth and percentage of High Protection Youth. High Risk Youth is defined as the percentage of students who have more than a specified number of risk factors operating in their lives. For 6th grade students, it is the percentage of students who have 6 or more risk factors, for 7th to 9th grade it is 7 or more risk factors, and for 10th to 12th grade, it is 8 or more risk factors. High Protection Youth is defined as the percentage of students in grades 6 and 7 who have 3 or more protective factors operating in their lives and 4 or more for all other grades.

Additional Tables in this Report

Table 11 presents the percentages of how and where students obtained and used alcohol during the past year. The data focus on a the subgroup of students who indicated at least one means of obtaining or using alcohol. (Students reporting no alcohol use are not

represented.) It is important to note that the table represent a subgroup of users and not the entire survey population. Additionally, the smaller the sample, the more dramatic the influence of a student's responses. For example, if only one student in a particular grade reported where he/she obtained alcohol, each category would show up as either 0% or 100%. The table indicates the sample size for each grade surveyed to help clarify the value of the data.

After the Student Alcohol Tables are tables containing information required by communities with Drug Free Communities Grants, such as the perception of the risks of ATOD use, perception of parent and peer disapproval of ATOD use, past 30-day use, and average age of first use.

Alternating with the DFC Tables are the Youth Perception Tables. Youth often overestimate the percentage of their peers who are using substances. Youth perceptions of the percentage of their peers who use cigarettes, alcohol, marijuana, and other illegal drugs are shown in these tables.

No Child Left Behind

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

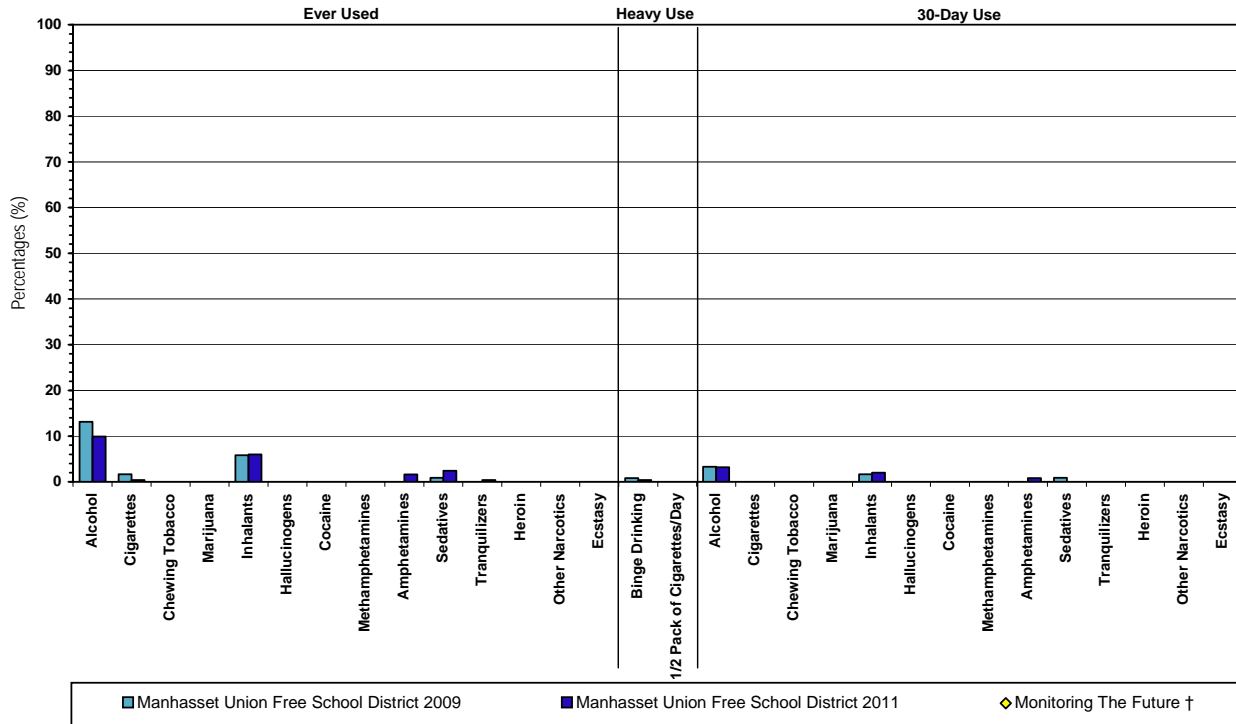
1. Programs must be chosen based on objective data about problem behaviors in the communities served. The OPNA reports these data in the substance use and antisocial behavior charts and tables presented on the following pages.

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 youth 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 to compare past and present substance use and ASB data.

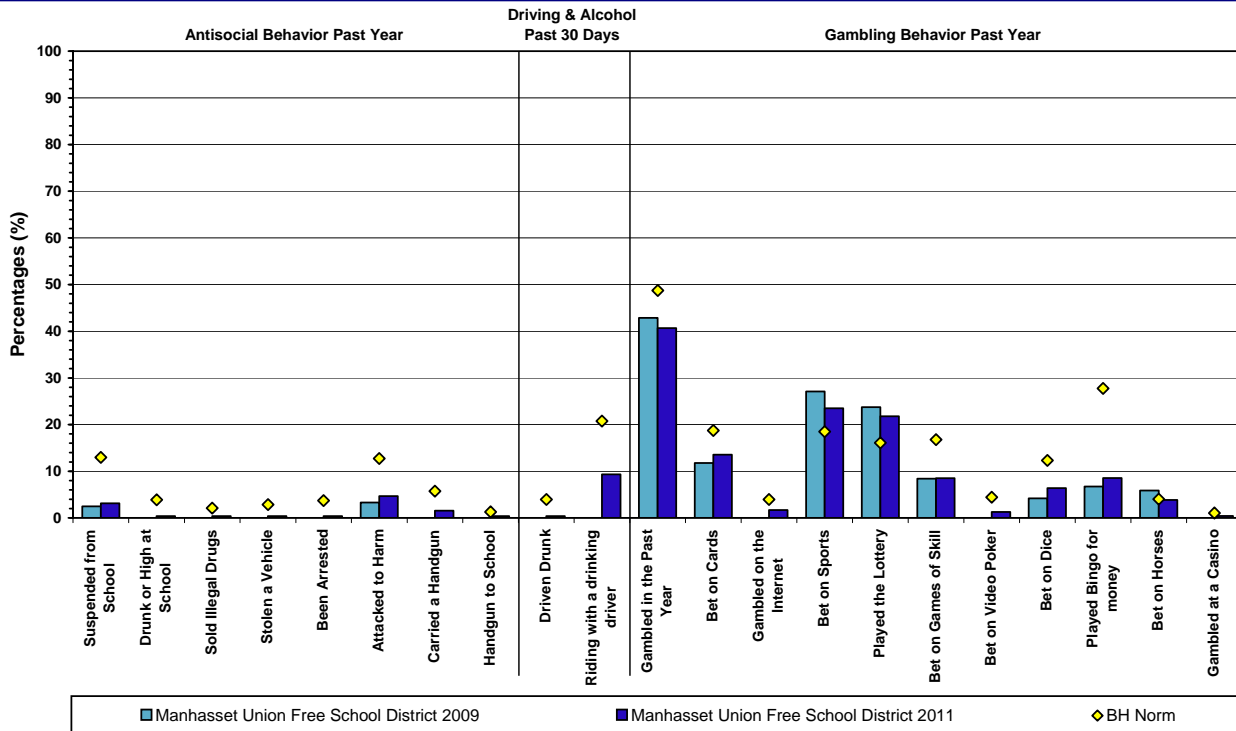
Substance Use and Antisocial Behavior

LIFETIME, 30 DAY & HEAVY ATOD USE 2011 Manhasset Union Free School District Student Survey, Grade 6



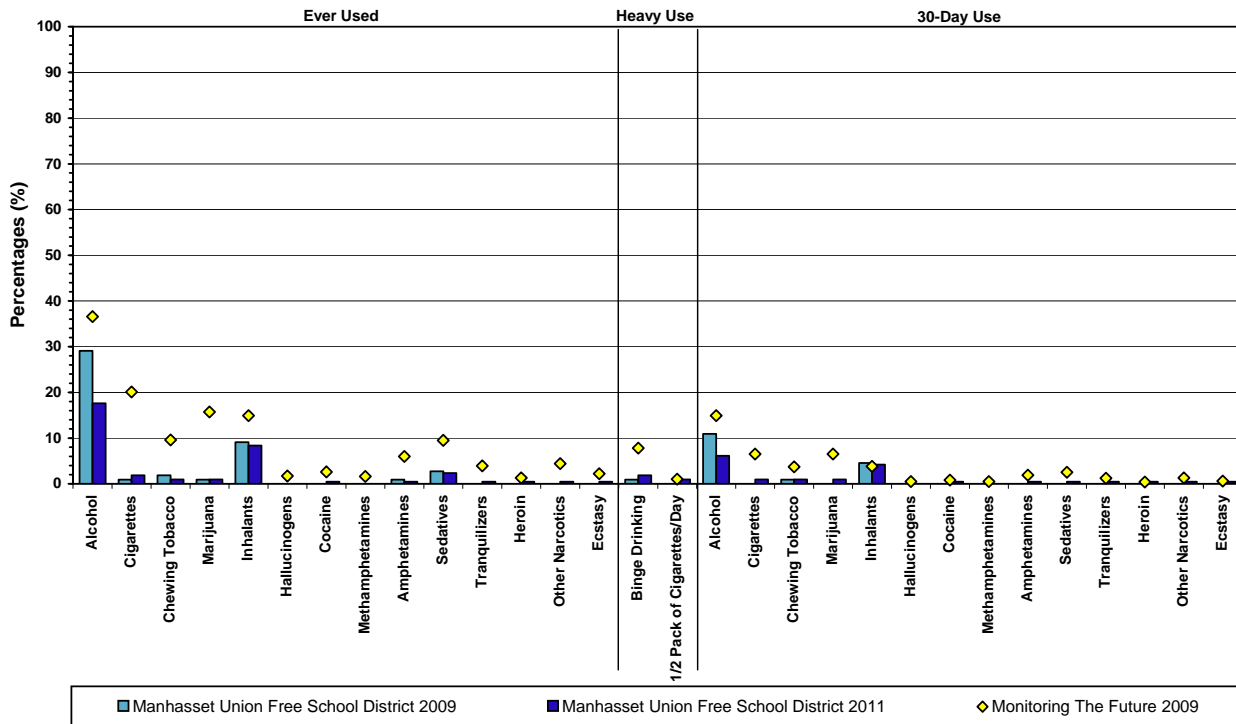
† Monitoring The Future only surveys grades 8, 10, and 12.

ANTISOCIAL BEHAVIOR AND GAMBLING 2011 Manhasset Union Free School District Student Survey, Grade 6

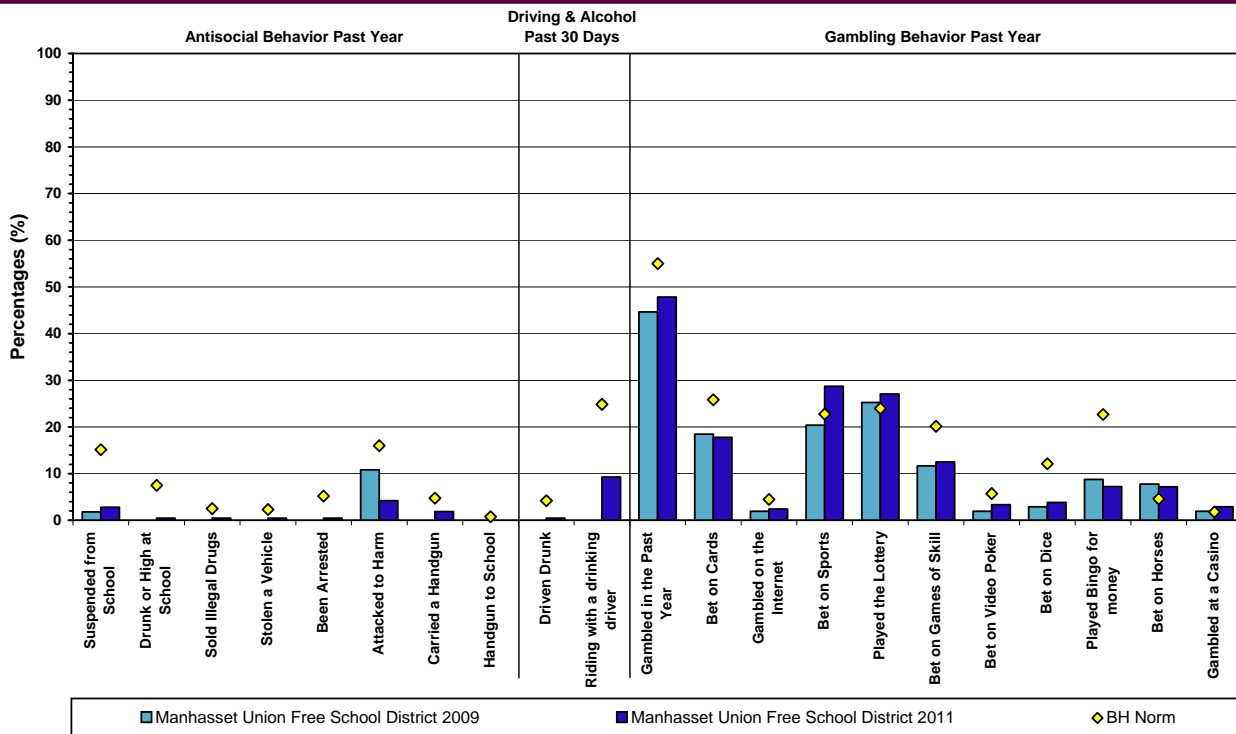


Substance Use and Antisocial Behavior

LIFETIME, 30 DAY & HEAVY ATOD USE
2011 Manhasset Union Free School District Student Survey, Grade 8

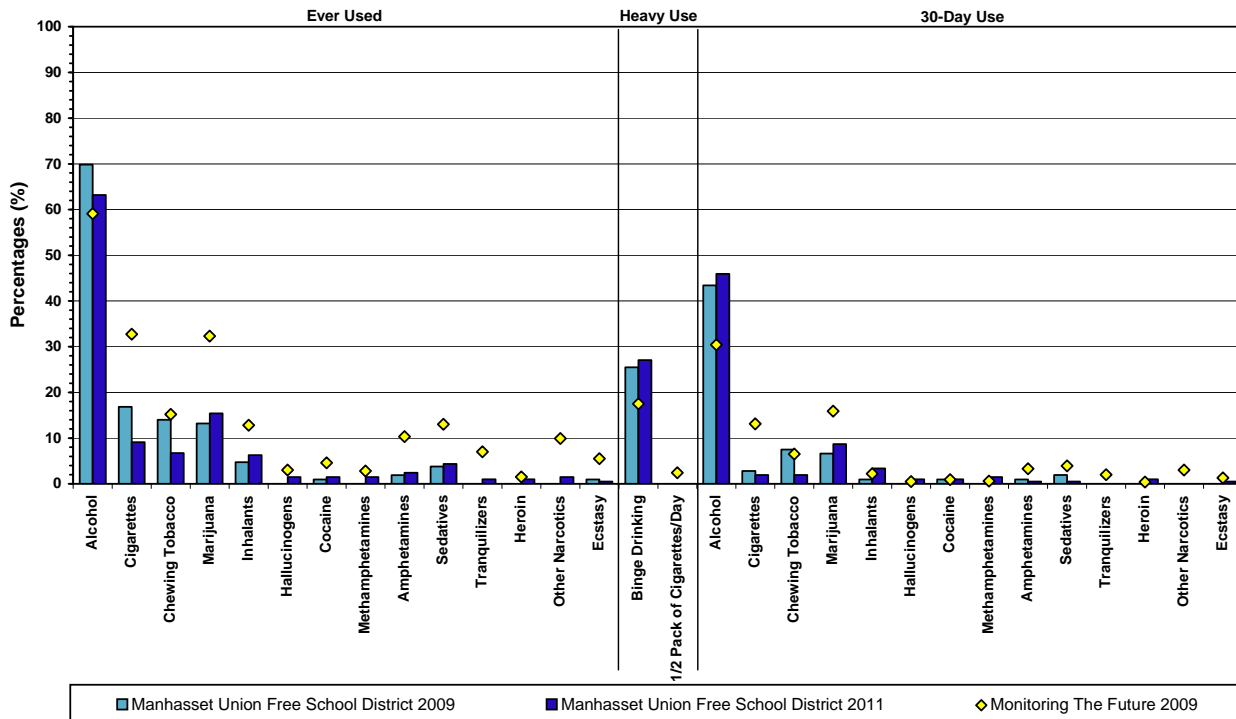


ANTISOCIAL BEHAVIOR AND GAMBLING
2011 Manhasset Union Free School District Student Survey, Grade 8

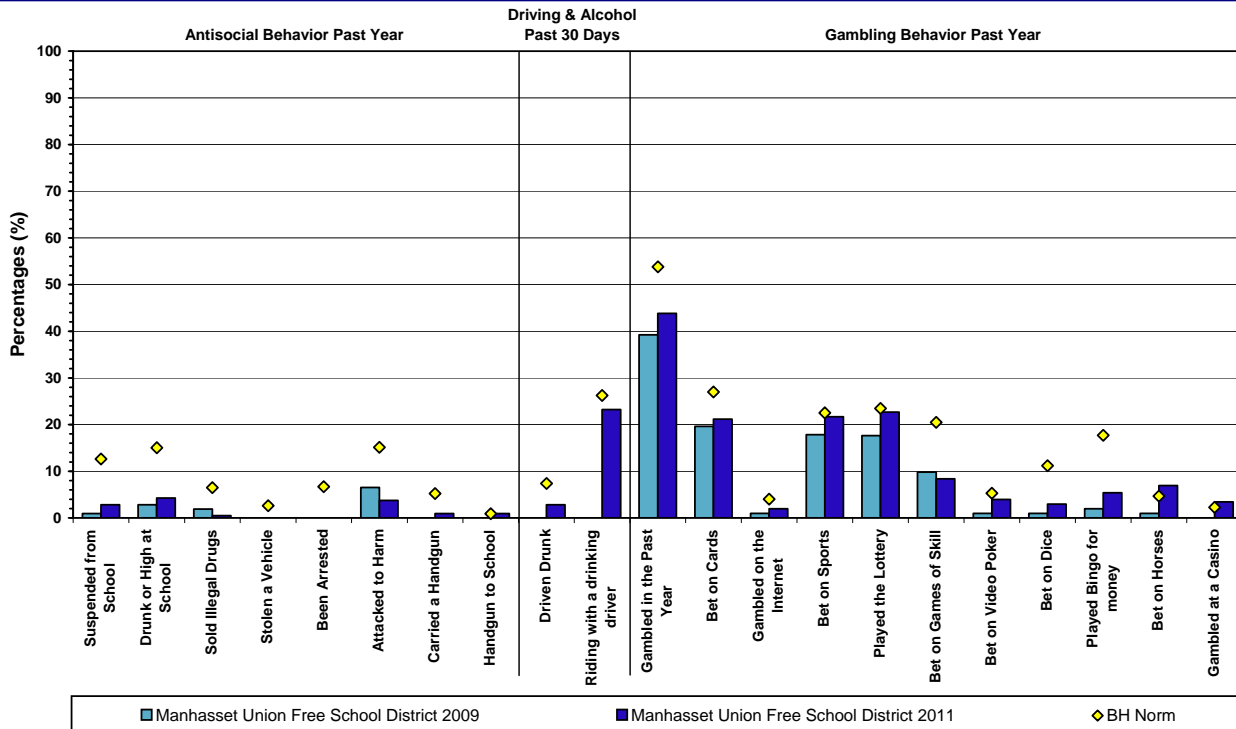


Substance Use and Antisocial Behavior

LIFETIME, 30 DAY & HEAVY ATOD USE
2011 Manhasset Union Free School District Student Survey, Grade 10

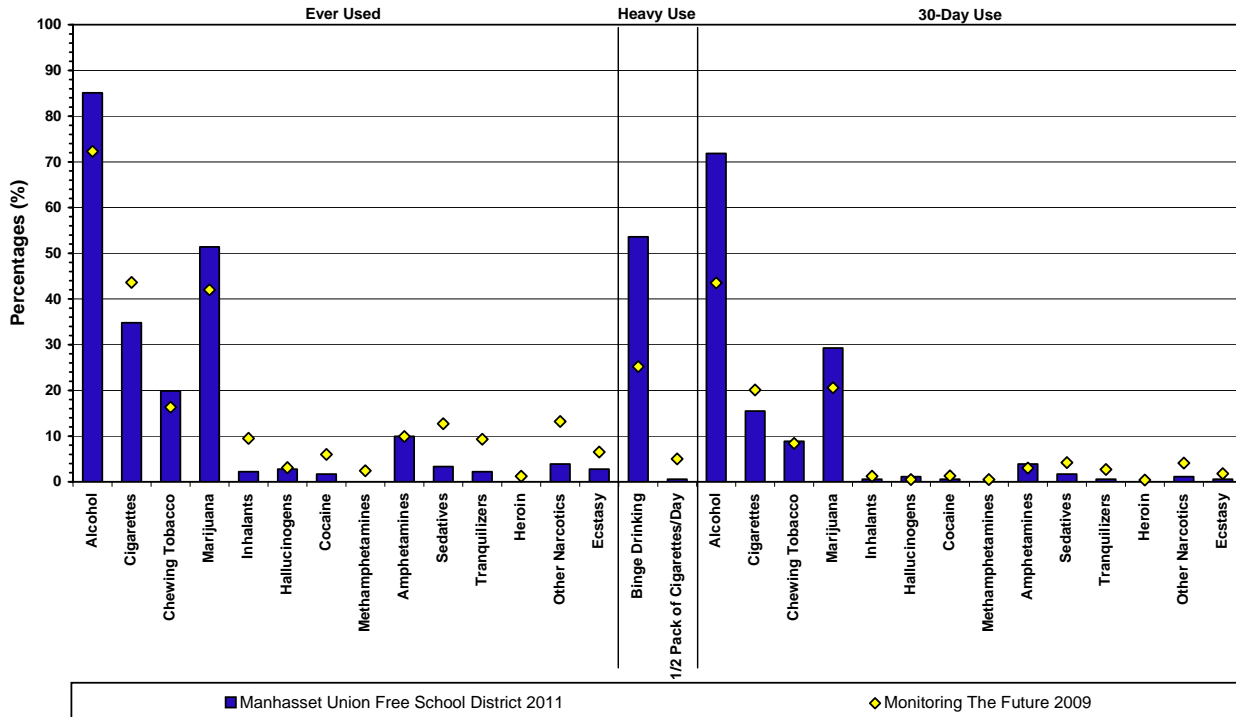


ANTISOCIAL BEHAVIOR AND GAMBLING
2011 Manhasset Union Free School District Student Survey, Grade 10

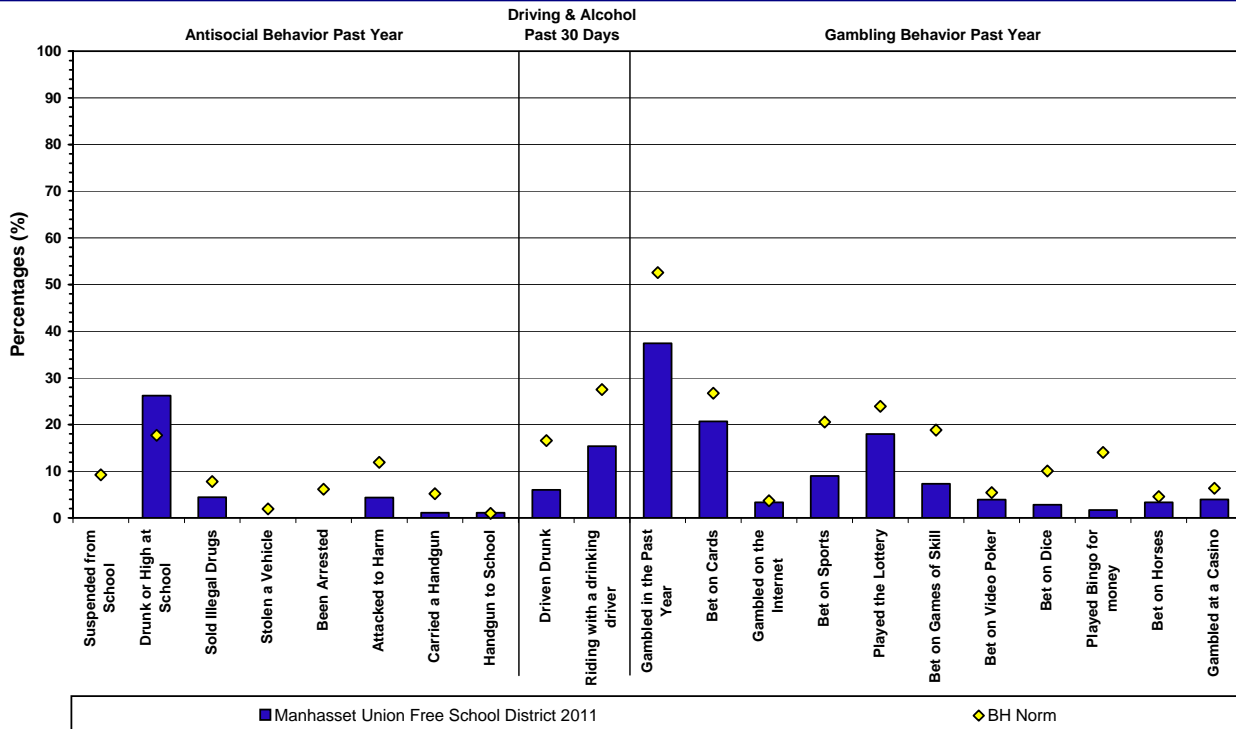


Substance Use and Antisocial Behavior

LIFETIME, 30 DAY & HEAVY ATOD USE
2011 Manhasset Union Free School District Student Survey, Grade 12



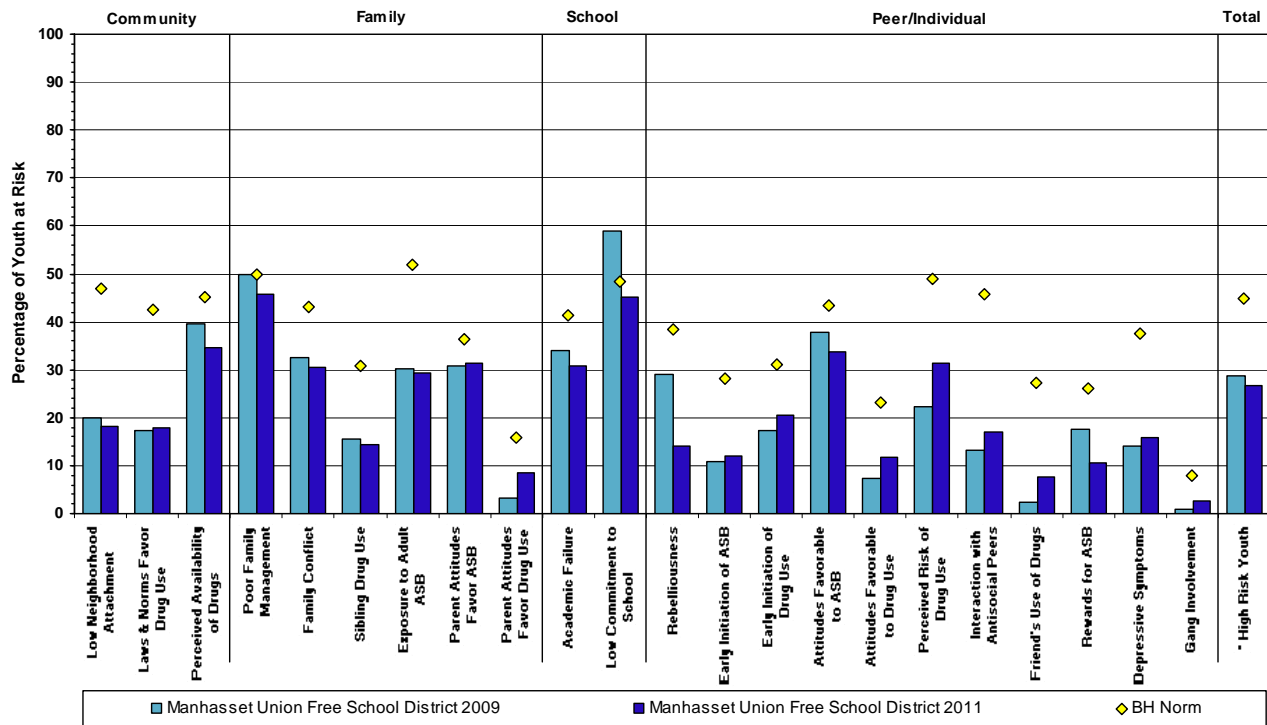
ANTISOCIAL BEHAVIOR AND GAMBLING
2011 Manhasset Union Free School District Student Survey, Grade 12



Risk and Protective Factor Profiles

RISK PROFILE

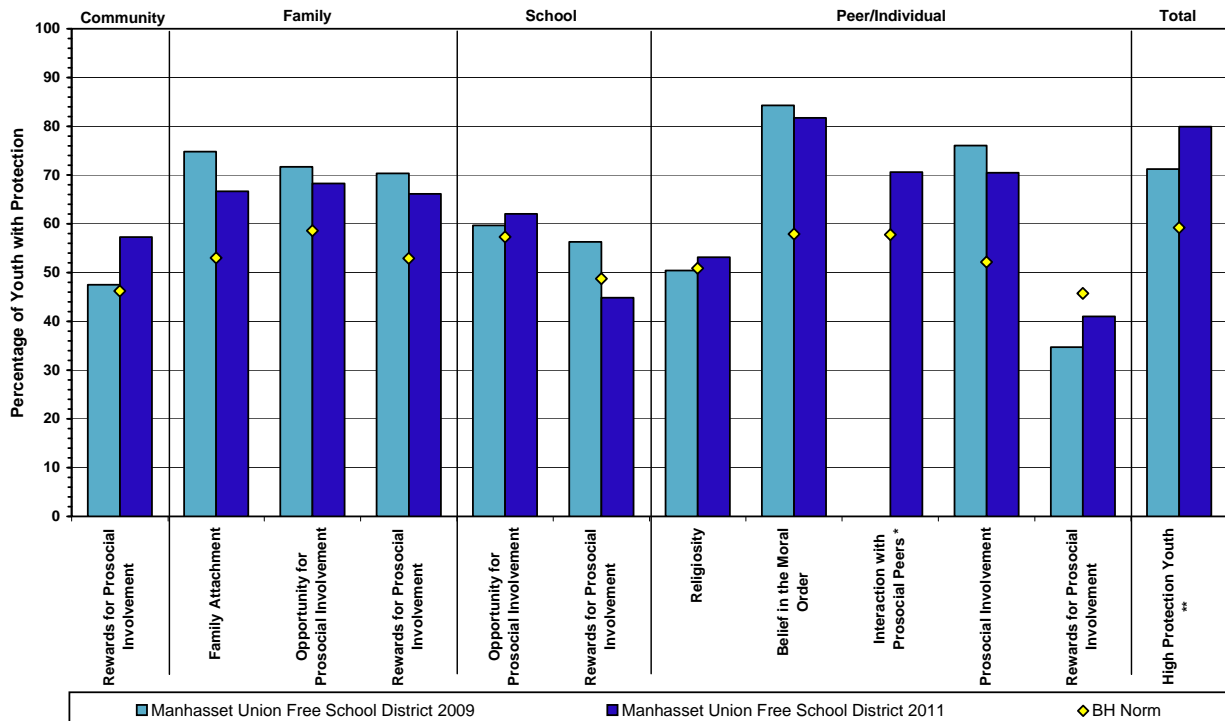
2011 Manhasset Union Free School District Student Survey, Grade 6



* 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: 6 or more risk factors, 7th-9th grades: 7 or more factors, 10th-12th grades: 8 or more factors)

PROTECTIVE PROFILE

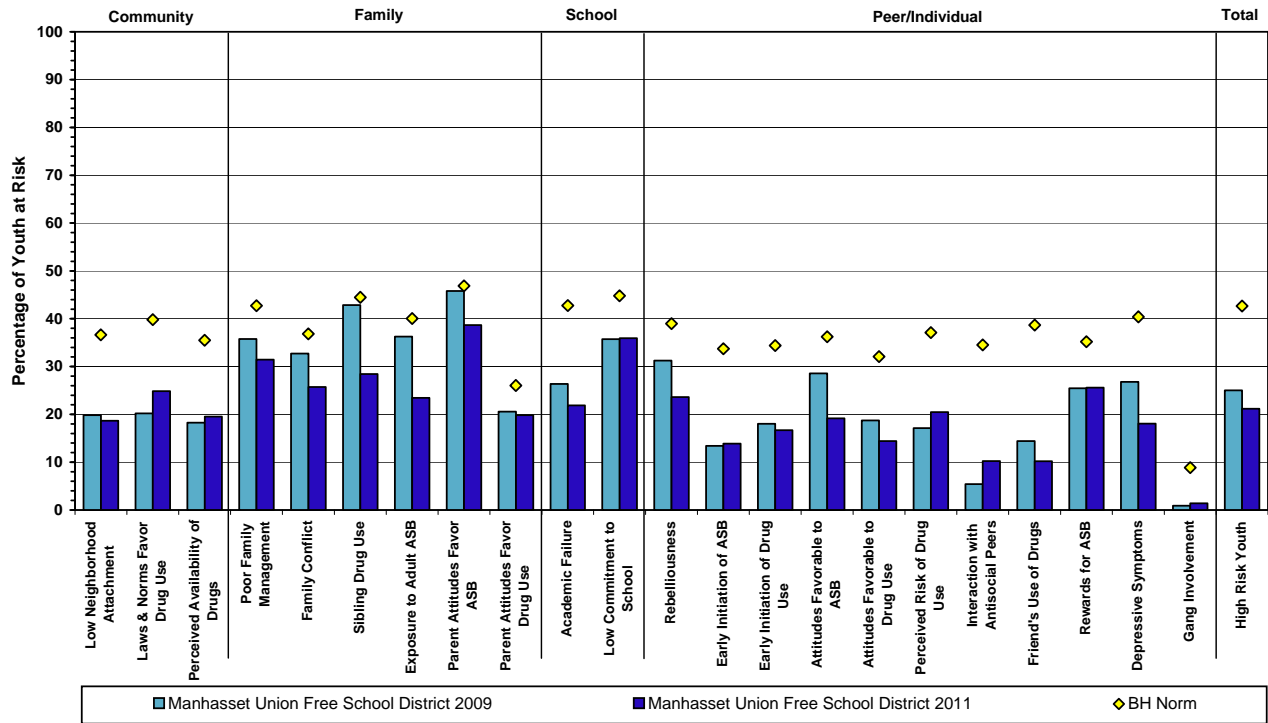
2011 Manhasset Union Free School District Student Survey, Grade 6



** High Protection youth are defined as the percentage of students who have more than a specified number of protective factors operating in their lives. (6th and 7th grades: 3 or more protective factors, 8th-12th grades: 4 or more factors). Prior to 2010, original values are reported.

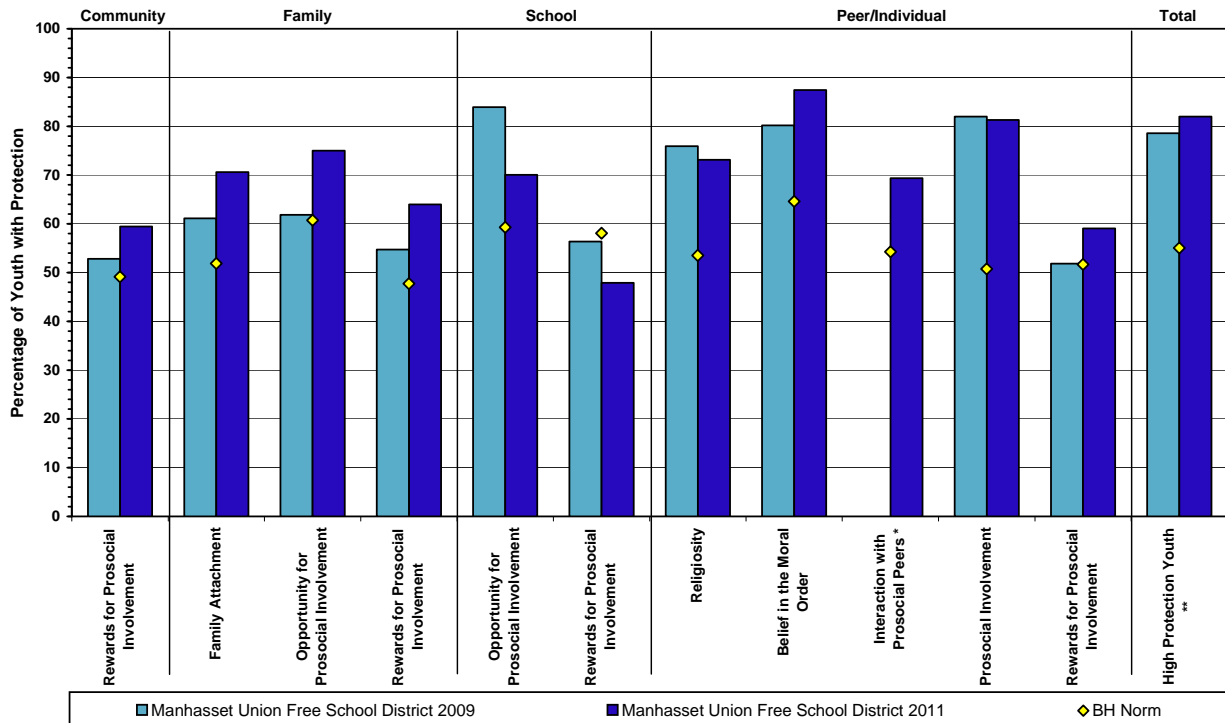
Risk and Protective Factor Profiles

RISK PROFILE 2011 Manhasset Union Free School District Student Survey, Grade 8



* 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: 6 or more risk factors, 7th-9th grades: 7 or more factors, 10th-12th grades: 8 or more factors)

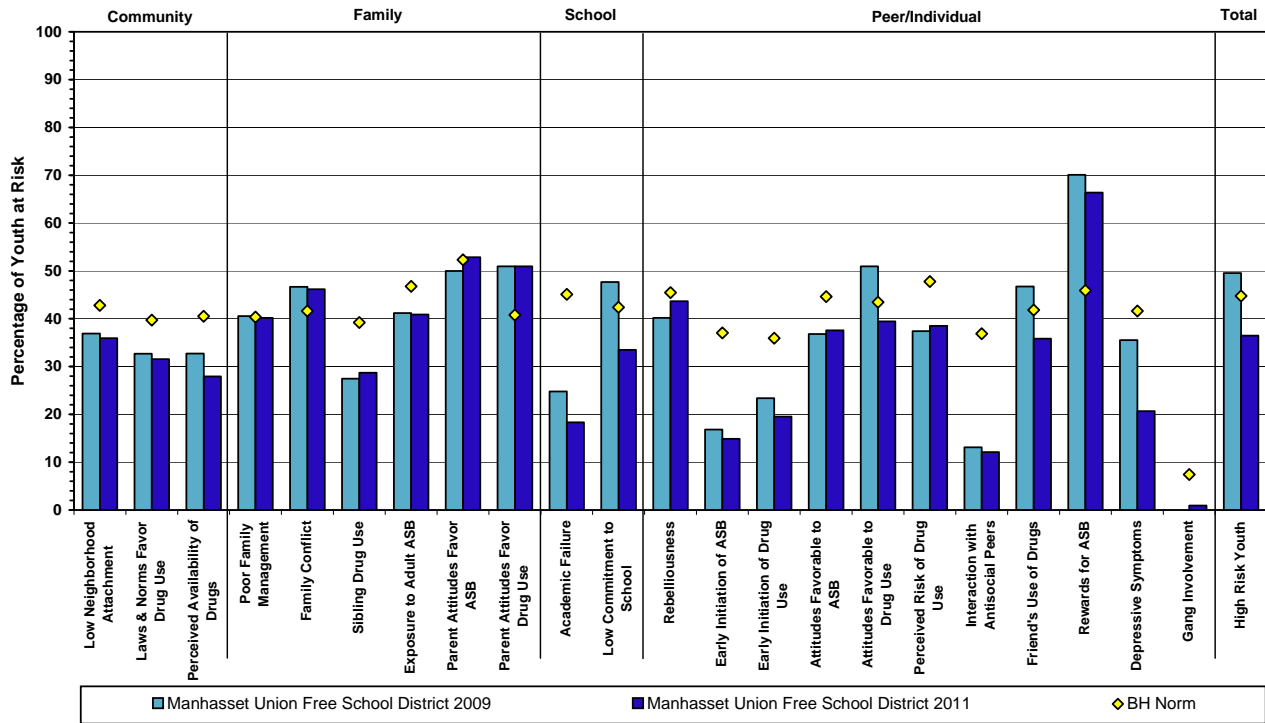
PROTECTIVE PROFILE 2011 Manhasset Union Free School District Student Survey, Grade 8



** High Protection youth are defined as the percentage of students who have more than a specified number of protective factors operating in their lives. (6th and 7th grades: 3 or more protective factors, 8th-12th grades: 4 or more factors). Prior to 2010, original values are reported.

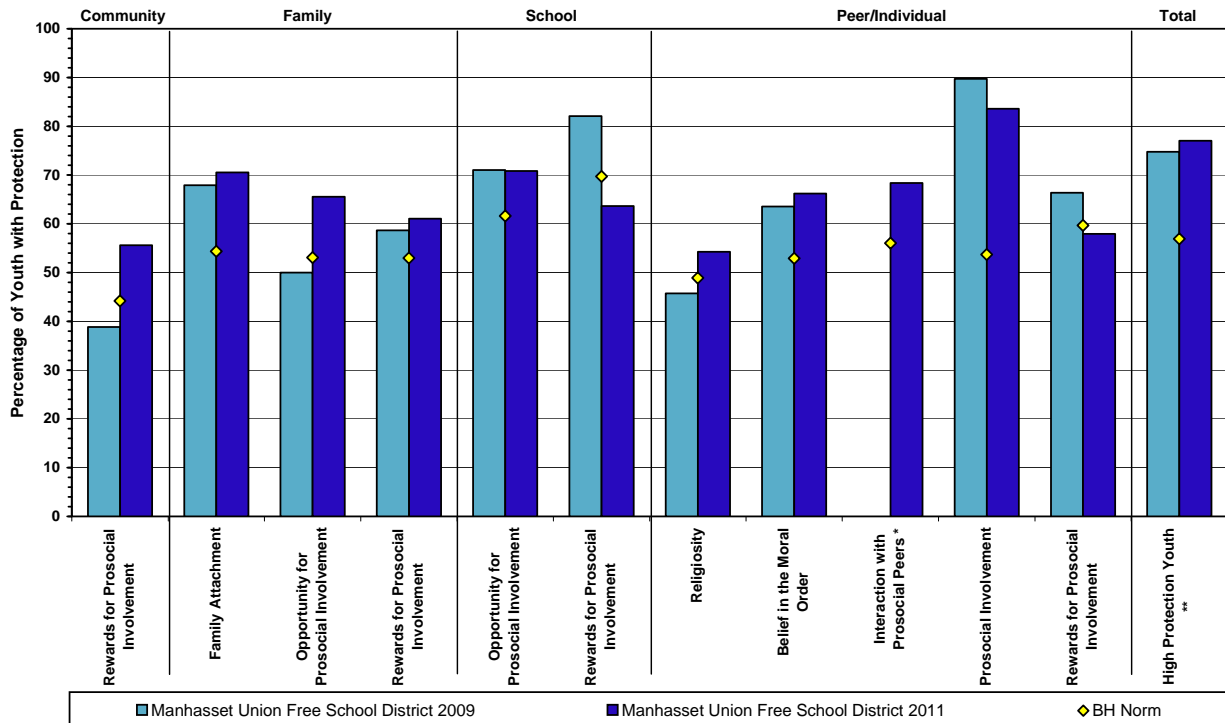
Risk and Protective Factor Profiles

RISK PROFILE 2011 Manhasset Union Free School District Student Survey, Grade 10



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

PROTECTIVE PROFILE 2011 Manhasset Union Free School District Student Survey, Grade 10

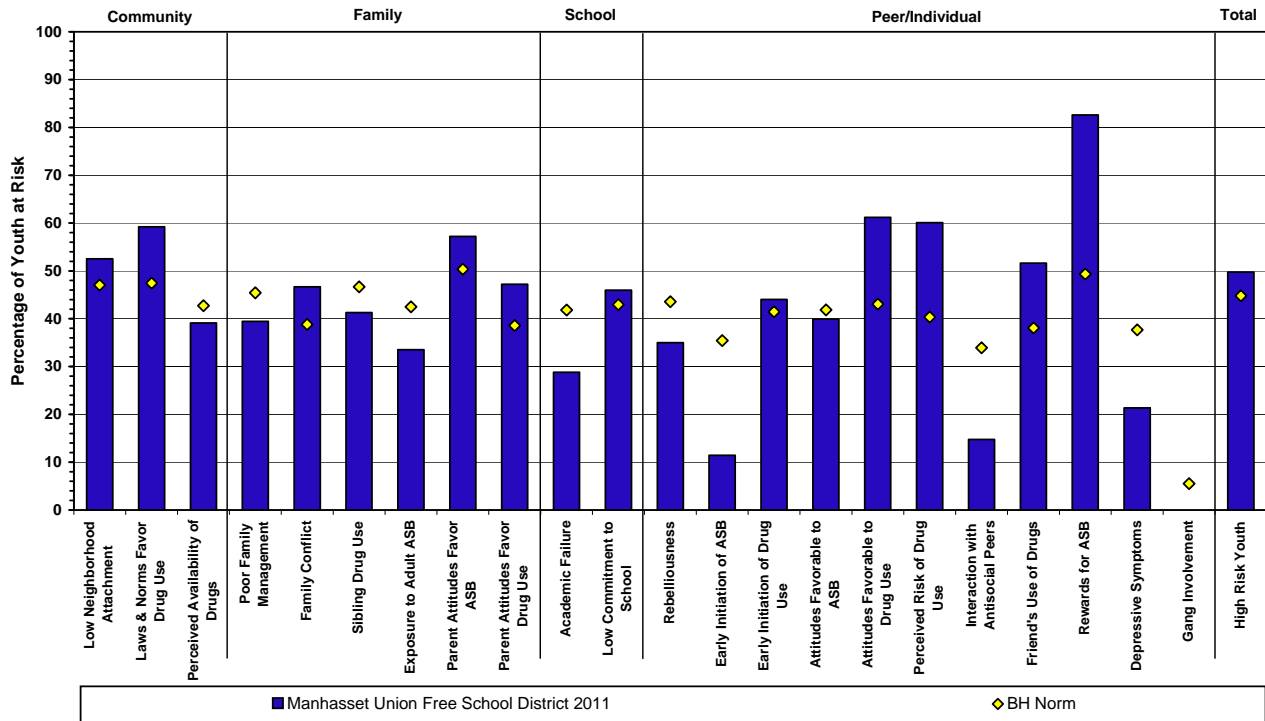


** High Protection youth are defined as the percentage of students who have more than a specified number of protective factors operating in their lives. (6th and 7th grades: 3 or more protective factors, 8th-12th grades: 4 or more factors). Prior to 2010, original values are reported.

Risk and Protective Factor Profiles

RISK PROFILE

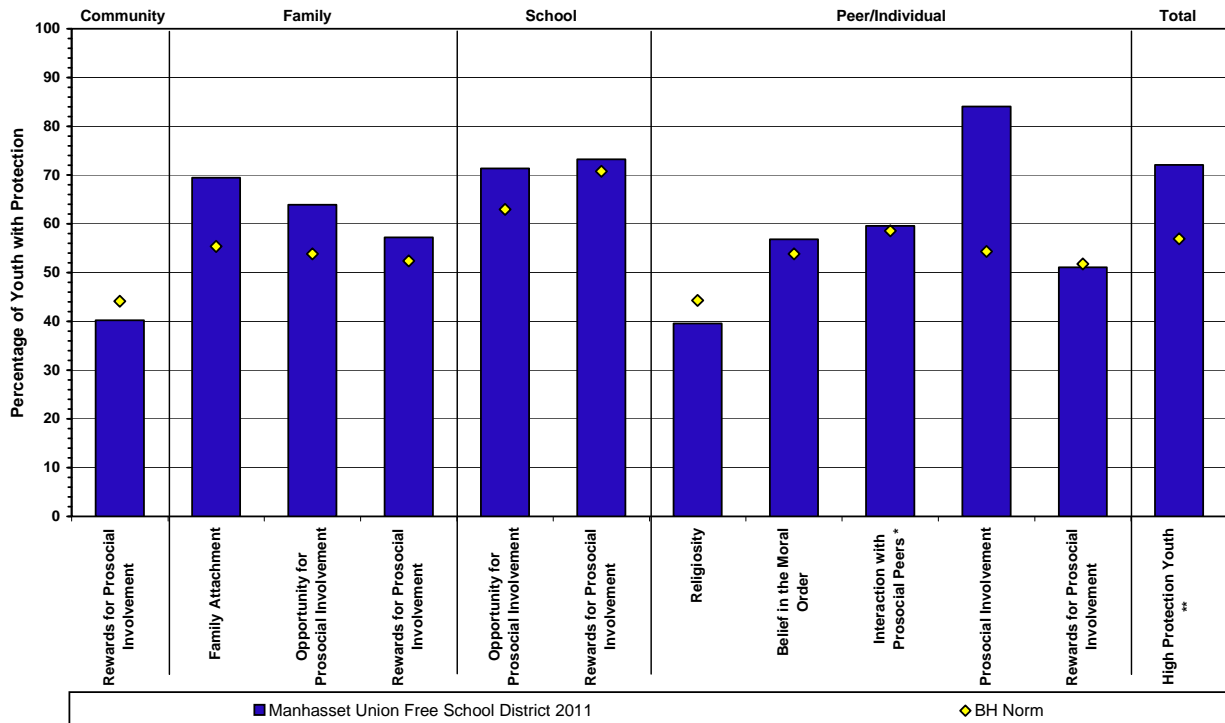
2011 Manhasset Union Free School District Student Survey, Grade 12



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

PROTECTIVE PROFILE

2011 Manhasset Union Free School District Student Survey, Grade 12



** High Protection youth are defined as the percentage of students who have more than a specified number of protective factors operating in their lives. (6th and 7th grades: 3 or more protective factors, 8th-12th grades: 4 or more factors). Prior to 2010, original values are reported.

Risk and Protective Scale Definitions

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

Community Domain Risk Factors	
Low Neighborhood Attachment	Research has shown that youth who don't like the neighborhoods in which they live are more likely to become involved in 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
Perceived Availability of Drugs	The availability of cigarettes, alcohol, marijuana, and other illegal drugs has been related to the use of these substances by adolescents.
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 beh
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.
Sibling Drug Use and Exposure to Adult Antisocial Behavior	When children are raised in a family with a history of problem behaviors (e.g., violence or ATOD use), the children are more likely to engage in these behaviors.
Parental Attitudes Favorable Toward Antisocial Behavior and Parental Attitudes Favorable Toward Drugs	In families where parents use illegal drugs, are heavy users of alcohol, or are tolerant of children's use, children are more likely to become drug abusers during adolescence. The risk is further increased if parents involve children in their own drug (o
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 rel

Risk and Protective Scale Definitions

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

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.
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 dev
Early Initiation of Antisocial Behavior and Early Initiation of Drug Use	Early onset of drug use predicts misuse of drugs. The earlier the onset of any drug use, the greater the involvement in other drug use and the greater frequency of use. Onset of drug use prior to the age of 15 is a consistent predictor of drug abuse, an
Attitudes Favorable Toward Antisocial Behavior and Attitudes Favorable Toward Drug Use	During the elementary school years, most children express anti-drug, anti-crime, and pro-social attitudes and have difficulty imagining why people use drugs or engage in antisocial behaviors. However, in middle school, as more youth are exposed to others
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 youn
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 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 behaviors.
Belief in the Moral Order	Young people who have a belief in what is "right" or "wrong" are less likely to use drugs.
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.

Data Tables

Table 3. Number of Students Who Completed the Survey

Number of Youth	Grade 6		Grade 8			Grade 10			Grade 12	
	2009	2011	2009	2011	MTF 2009	2009	2011	MTF 2009	2011	MTF 2009
	125	269	112	222	†	107	222	†	197	†

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

In your lifetime, on how many occasions (if any) have you (One or more occasions)		Grade 6		Grade 8			Grade 10			Grade 12	
		2009	2011	2009	2011	MTF 2009	2009	2011	MTF 2009	2011	MTF 2009
Alcohol	had alcoholic beverages (beer, wine or hard liquor) to drink - more than just a few sips?	13.1	9.9	29.1	17.6	36.6	69.8	63.2	59.1	85.1	72.3
Cigarettes	smoked cigarettes?	1.6	0.4	0.9	1.9	20.1	16.8	9.1	32.7	34.8	43.6
Chewing Tobacco	used smokeless tobacco (chew, snuff, plug, dipping tobacco, chewing tobacco)?	0.0	0.0	1.8	0.9	9.6	14.0	6.7	15.2	19.9	16.3
Marijuana	used marijuana (grass, pot) or hashish (hash, hash oil)?	0.0	0.0	0.9	0.9	15.7	13.2	15.4	32.3	51.4	42.0
Inhalants	sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high?	5.8	6.0	9.1	8.3	14.9	4.7	6.3	12.8	2.2	9.5
Hallucinogens	used LSD (acid) or other hallucinogens (like PCP, mescaline, peyote, "shrooms" or psilocybin)?	0.0	0.0	0.0	0.0	1.7	0.0	1.4	3.0	2.8	3.1
Cocaine	used cocaine (like cocaine powder) or "crack" (cocaine in chunk or rock form)?	0.0	0.0	0.0	0.5	2.6	0.9	1.4	4.6	1.7	6.0
Methamphetamines	used methamphetamines (meth, speed, crank, crystal meth)?	0.0	0.0	0.0	0.0	1.6	0.0	1.4	2.8	0.0	2.4
Amphetamines	used prescription stimulants or amphetamines (such as Adderall, Ritalin, or Dexedrine) without a doctor telling you to take them?	0.0	1.6	0.9	0.5	6.0	1.9	2.4	10.3	9.9	9.9
Sedatives	used prescription sedatives including barbiturates or sleeping pills (such as phenobarbital, Tuinal, Seconal, Ambien, Lunesta, or Sonata) without a doctor telling you to take them?	0.8	2.4	2.7	2.3	9.5	3.8	4.3	13.0	3.3	12.7
Tranquilizers	used prescription tranquilizers (such as Librium, Valium, Xanax, Ativan, Soma, or Klonopin) without a doctor telling you to take them?	0.0	0.4	0.0	0.5	3.9	0.0	1.0	7.0	2.2	9.3
Heroin	used heroin?	0.0	0.0	0.0	0.5	1.3	0.0	1.0	1.5	0.0	1.2
Other Narcotics	used narcotic prescription drugs (such as OxyContin, methadone, morphine, codeine, Demerol, Vicodin, Percocet) without a doctor telling you to take them?	0.0	0.0	0.0	0.5	4.4	0.0	1.4	9.9	3.9	13.2
Ecstasy	used MDMA ('X', 'E', or ecstasy)?	0.0	0.0	0.0	0.5	2.2	0.9	0.5	5.5	2.8	6.5

† See the Monitoring The Future website (www.monitoringthefuture.org)

Data Tables

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

In the past 30 days, on how many occasions (if any) have you (One or more occasions)		Grade 6		Grade 8			Grade 10			Grade 12	
		2009	2011	2009	2011	MTF 2009	2009	2011	MTF 2009	2011	MTF 2009
Alcohol	had alcoholic beverages (beer, wine or hard liquor) to drink - more than just a few sips?	3.3	3.2	10.9	6.1	14.9	43.4	45.9	30.4	71.8	43.5
Cigarettes	smoked cigarettes?	0.0	0.0	0.0	0.9	6.5	2.8	1.9	13.1	15.5	20.1
Chewing Tobacco	used smokeless tobacco (chew, snuff, plug, dipping tobacco, chewing tobacco)?	0.0	0.0	0.9	0.9	3.7	7.5	1.9	6.5	8.8	8.4
Marijuana	used marijuana (grass, pot) or hashish (hash, hash oil)?	0.0	0.0	0.0	0.9	6.5	6.6	8.7	15.9	29.3	20.6
Inhalants	sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high?	1.7	2.0	4.5	4.2	3.8	0.9	3.4	2.2	0.6	1.2
Hallucinogens	used LSD (acid) or other hallucinogens (like PCP, mescaline, peyote, "shrooms" or psilocybin)?	0.0	0.0	0.0	0.0	0.5	0.0	1.0	0.5	1.1	0.5
Cocaine	used cocaine (like cocaine powder) or "crack" (cocaine in chunk or rock form)?	0.0	0.0	0.0	0.5	0.8	0.9	1.0	0.9	0.6	1.3
Methamphetamines	used methamphetamines (meth, speed, crank, crystal meth)?	0.0	0.0	0.0	0.0	0.5	0.0	1.5	0.6	0.0	0.5
Amphetamines	used prescription stimulants or amphetamines (such as Adderall, Ritalin, or Dexedrine) without a doctor telling you to take them?	0.0	0.8	0.0	0.5	1.9	0.9	0.5	3.3	3.9	3.0
Sedatives	used prescription sedatives including barbiturates or sleeping pills (such as phenobarbital, Tuinal, Seconal, Ambien, Lunesta, or Sonata) without a doctor telling you to take them?	0.8	0.0	0.0	0.5	2.5	1.9	0.5	3.9	1.7	4.2
Tranquilizers	used prescription tranquilizers (such as Librium, Valium, Xanax, Ativan, Soma, or Klonopin) without a doctor telling you to take them?	0.0	0.0	0.0	0.5	1.2	0.0	0.0	2.0	0.6	2.7
Heroin	used heroin?	0.0	0.0	0.0	0.5	0.4	0.0	1.0	0.4	0.0	0.4
Other Narcotics	used narcotic prescription drugs (such as OxyContin, methadone, morphine, codeine, Demerol, Vicodin, Percocet) without a doctor telling you to take them?	0.0	0.0	0.0	0.5	1.3	0.0	0.0	3.0	1.1	4.1
Ecstasy	used MDMA ('X', 'E', or ecstasy)?	0.0	0.0	0.0	0.5	0.6	0.0	0.5	1.3	0.6	1.8

Data Tables

Table 6. Percentage of Students With Problem ATOD Use

		Grade 6		Grade 8			Grade 10			Grade 12	
		2009	2011	2009	2011	MTF 2009	2009	2011	MTF 2009	2011	MTF 2009
Problem Use											
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)	0.8	0.4	0.9	1.9	7.8	25.5	27.1	17.5	53.6	25.2
1/2 Pack of Cigarettes/Day	During the past 30 days, how many cigarettes did you smoke per day? (11 to 20 cigarettes, More than 20 cigarettes)	0.0	0.0	0.0	0.9	1.0	0.0	0.0	2.4	0.6	5.0
Alcohol and Driving											
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?	n/a	0.4	n/a	0.5	4.2	n/a	2.8	7.4	6.0	16.6
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?	n/a	9.3	n/a	9.3	24.9	n/a	23.2	26.3	15.4	27.5

* Questions not asked prior to 2010.

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

How many times in the past year (12 months) have you: (One or more times)	Grade 6			Grade 8			Grade 10			Grade 12	
	2009	2011	BH Norm	2009	2011	BH Norm	2009	2011	BH Norm	2011	BH Norm
Been Suspended from School	2.5	3.1	13.0	1.8	2.8	15.1	0.9	2.8	12.6	0.0	9.2
Been Drunk or High at School	0.0	0.4	3.9	0.0	0.5	7.5	2.8	4.2	15.0	26.2	17.7
Sold Illegal Drugs	0.0	0.4	2.1	0.0	0.5	2.5	1.9	0.5	6.5	4.4	7.8
Stolen or Tried to Steal a Motor Vehicle	0.0	0.4	2.9	0.0	0.5	2.3	0.0	0.0	2.6	0.0	1.9
Been Arrested	0.0	0.4	3.7	0.0	0.5	5.2	0.0	0.0	6.7	0.0	6.1
Attacked Someone with the Idea of Seriously Hurting Them	3.3	4.7	12.7	10.8	4.2	16.0	6.5	3.8	15.1	4.4	11.9
Carried a Handgun	0.0	1.6	5.7	0.0	1.9	4.8	0.0	0.9	5.2	1.1	5.2
Carried a Handgun to School	0.0	0.4	1.3	0.0	0.0	0.8	0.0	0.9	0.9	1.1	1.0

Data Tables

Table 8. Percentage of Students Gambling in the Past Year

How many times in the past year (12 months) have you: (<i>'A few times' or more</i>)	Grade 6			Grade 8			Grade 10			Grade 12	
	2009	2011	BH Norm	2009	2011	BH Norm	2009	2011	BH Norm	2011	BH Norm
Gambled in the Past Year	42.9	40.7	48.7	44.7	47.8	55.0	39.2	43.8	53.8	37.4	52.6
Bet on Cards	11.8	13.6	18.7	18.4	17.8	25.8	19.6	21.2	27.0	20.7	26.7
Gambled on the Internet	0.0	1.7	4.0	1.9	2.4	4.5	1.0	2.0	4.0	3.4	3.7
Bet on Sports	27.1	23.5	18.5	20.4	28.7	22.8	17.8	21.7	22.5	9.0	20.5
Played the Lottery	23.7	21.8	16.1	25.2	27.1	24.0	17.6	22.7	23.5	18.0	23.9
Bet on Games of Skill	8.4	8.5	16.8	11.7	12.5	20.1	9.8	8.4	20.5	7.3	18.8
Bet on Video Poker	0.0	1.3	4.4	1.9	3.3	5.7	1.0	3.9	5.3	3.9	5.4
Bet on Dice	4.2	6.4	12.3	2.9	3.8	12.1	1.0	3.0	11.2	2.8	10.0
Played Bingo for money	6.7	8.5	27.7	8.7	7.2	22.7	2.0	5.4	17.7	1.7	14.0
Bet on Horses	5.9	3.8	4.0	7.8	7.2	4.6	1.0	6.9	4.7	3.4	4.6
Gambled at a Casino	0.0	0.4	1.0	1.9	2.9	1.8	0.0	3.4	2.3	3.9	6.3

Table 9. Percentage of Students Reporting Protection

Protective Factors	Grade 6			Grade 8			Grade 10			Grade 12	
	2009	2011	BH Norm	2009	2011	BH Norm	2009	2011	BH Norm	2011	BH Norm
Community Domain											
Rewards for Prosocial Involvement	47.5	57.3	46.2	52.8	59.4	49.2	38.8	55.6	44.2	40.2	44.1
Family Domain											
Family Attachment	74.8	66.7	53.0	61.1	70.6	51.9	67.9	70.5	54.3	69.4	55.4
Opportunity for Prosocial Involvement	71.7	68.3	58.6	61.8	75.0	60.7	50.0	65.6	53.1	63.9	53.8
Rewards for Prosocial Involvement	70.3	66.1	52.9	54.7	64.0	47.7	58.7	61.1	53.0	57.2	52.4
School Domain											
Opportunity for Prosocial Involvement	59.7	62.0	57.3	83.9	70.0	59.3	71.0	70.8	61.6	71.4	62.9
Rewards for Prosocial Involvement	56.3	44.8	48.7	56.4	47.9	58.1	82.1	63.6	69.7	73.2	70.8
Peer-Individual Domain											
Religiosity	50.4	53.1	50.9	75.9	73.1	53.5	45.7	54.2	48.9	39.6	44.3
Belief in the Moral Order	84.3	81.7	57.9	80.2	87.4	64.6	63.6	66.2	52.9	56.8	53.8
Interaction with Prosocial Peers *	n/a	70.6	57.8	n/a	69.3	54.3	n/a	68.4	56.0	59.6	58.5
Prosocial Involvement	76.0	70.5	52.2	82.0	81.3	50.7	89.7	83.6	53.7	84.1	54.3
Rewards for Prosocial Involvement	34.7	41.0	45.7	51.8	59.1	51.7	66.4	57.9	59.7	51.1	51.8
High Protection											
High Protection Youth **	71.2	79.9	59.2	78.6	82.0	55.1	74.8	77.0	56.9	72.1	56.9

* Interaction with Prosocial Peers was not included prior to 2010.

** High Protection youth are defined as the percentage of students who have more than a specified number of protective factors operating in their lives. (6th and 7th grades: 3 or more protective factors, 8th-12th grades: 4 or more factors). Because the High Protection score is based on all current Protective Factors, no value can be calculated for 2008. What is reported is the original 2008 value.

Data Tables

Table 10. Percentage of Students Reporting Risk

Risk Factors	Grade 6			Grade 8			Grade 10			Grade 12	
	2009	2011	BH Norm	2009	2011	BH Norm	2009	2011	BH Norm	2011	BH Norm
Community Domain											
Low Neighborhood Attachment	20.0	18.2	47.0	19.8	18.7	36.6	36.9	35.9	42.8	52.5	47.0
Laws & Norms Favor Drug Use	17.2	17.9	42.4	20.2	24.9	39.8	32.7	31.5	39.7	59.2	47.4
Perceived Availability of Drugs	39.5	34.5	45.1	18.3	19.5	35.5	32.7	27.9	40.5	39.1	42.7
Family Domain											
Poor Family Management	50.0	45.8	49.8	35.8	31.5	42.7	40.6	40.2	40.3	39.4	45.4
Family Conflict	32.5	30.6	43.2	32.7	25.7	36.8	46.7	46.2	41.6	46.7	38.8
Sibling Drug Use	15.7	14.4	30.8	42.9	28.4	44.5	27.5	28.7	39.2	41.3	46.6
Exposure to Adult ASB	30.2	29.4	52.0	36.3	23.4	40.0	41.2	40.9	46.8	33.5	42.5
Parent Attitudes Favor ASB	30.8	31.3	36.3	45.8	38.7	46.9	50.0	52.9	52.3	57.2	50.3
Parent Attitudes Favor Drug Use	3.3	8.4	15.8	20.6	19.8	26.0	50.9	51.0	40.8	47.2	38.6
School Domain											
Academic Failure	33.9	30.9	41.3	26.4	21.9	42.8	24.8	18.3	45.1	28.8	41.8
Low Commitment to School	58.9	45.1	48.5	35.7	35.9	44.8	47.7	33.5	42.4	45.9	42.9
Peer-Individual Domain											
Rebelliousness	28.9	14.1	38.4	31.3	23.6	39.0	40.2	43.7	45.5	35.0	43.6
Early Initiation of ASB	10.7	11.9	28.1	13.4	13.9	33.7	16.8	14.9	37.0	11.4	35.4
Early Initiation of Drug Use	17.4	20.4	31.0	18.0	16.7	34.4	23.4	19.5	35.9	44.0	41.4
Attitudes Favorable to ASB	37.7	33.9	43.5	28.6	19.2	36.2	36.8	37.6	44.6	39.9	41.9
Attitudes Favorable to Drug Use	7.4	11.7	23.1	18.8	14.4	32.1	50.9	39.4	43.5	61.2	43.1
Perceived Risk of Drug Use	22.3	31.4	49.1	17.1	20.5	37.1	37.4	38.5	47.8	60.1	40.3
Interaction with Antisocial Peers	13.1	17.1	45.7	5.4	10.2	34.5	13.1	12.1	36.8	14.8	33.9
Friend's Use of Drugs	2.5	7.7	27.4	14.4	10.2	38.7	46.7	35.8	41.8	51.6	38.1
Rewards for ASB	17.5	10.7	26.2	25.5	25.6	35.2	70.1	66.4	45.9	82.6	49.3
Depressive Symptoms	13.9	16.0	37.6	26.8	18.1	40.4	35.5	20.7	41.6	21.3	37.7
Gang Involvement	0.8	2.7	7.8	0.9	1.4	8.9	0.0	0.9	7.4	0.0	5.5
High Risk											
High Risk Youth *	28.8	26.8	44.9	25.0	21.2	42.6	49.5	36.5	44.7	49.7	44.8

* 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: 6 or more risk factors, 7th-9th grades: 7 or more factors, 10th-12th grades: 8 or more factors).

Student Alcohol Table

Table 11. Sources and Places of Student Alcohol Use

If you drank alcohol (not just a sip or taste) in the past year (12 months), how did you get it?	Grade 6	Grade 8	Grade 10	Grade 12
	2011	2011	2011	2011
Sample size *	18	34	136	151
I bought it myself from a store.	5.6	5.9	8.8	43.7
I got it at a party.	16.7	41.2	80.1	91.4
I gave someone else money to buy it for me.	5.6	2.9	50.0	76.8
I got it from someone I know age 21 or older	22.2	17.6	42.6	51.7
I got it from someone I know under age 21.	11.1	5.9	61.8	77.5
I got it from a family member or relative other than my parents.	33.3	23.5	36.0	33.8
I got it from home with my parents' permission.	83.3	41.2	28.7	27.2
I got it from home without my parents' permission.	11.1	14.7	41.9	51.7
I got it in another way.	16.7	8.8	12.5	9.3

During the past year (12 months) did you drink alcohol at any of the following places?	Grade 6	Grade 8	Grade 10	Grade 12
	2011	2011	2011	2011
Sample size *	30	41	128	152
At my home or someone else's home without any parent permission.	10.0	22.0	74.2	76.3
At my home with my parent's permission.	90.0	65.9	33.6	50.7
At someone else's home with their parent's permission.	10.0	9.8	35.9	57.9
At an open area like a park, beach, or back road.	6.7	4.9	39.1	52.6
At public events such as a sporting event, festival, or concert.	16.7	12.2	44.5	69.1
At a restaurant, bar, or a nightclub.	20.0	17.1	26.6	65.8
In a car	3.3	2.4	29.7	38.2
At a school dance, a game, or other event.	6.7	4.9	25.0	34.9
At school during the day.	3.3	2.4	3.9	13.2
Near school.	3.3	2.4	10.9	18.4
In another place.	20.0	12.2	23.4	17.8

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

DFC and Youth Perception Tables

Table 12. Drug Free Communities Report *

Outcomes	Definition	Substance	Manhasset Union Free School District 2009											
			Grade 6		Grade 8		Grade 10		Total †		Male		Female	
			Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number
Perception of Risk <i>(People are at Moderate or Great Risk of harming themselves if they...)</i>	drink 1 or two drinks nearly every day	Alcohol	87.6	121	87.4	111	84.1	107	86.4	339	86.2	167	86.6	172
	smoke 1 or more packs or cigarettes per day	Cigarettes	94.2	121	93.7	111	93.5	107	93.8	339	93.4	167	94.2	172
	smoke marijuana regularly	Marijuana	96.7	120	97.3	111	84.1	107	92.9	338	92.8	166	93.0	172
Perception of Parent Disapproval <i>(Parents feel it would be Wrong or Very Wrong to...)</i>	drink beer, wine, or hard liquor regularly	Alcohol	100.0	119	95.3	106	80.2	106	92.1	331	93.8	161	90.6	170
	smoke cigarettes	Cigarettes	100.0	121	98.1	107	96.2	105	98.2	333	97.5	163	98.8	170
	smoke marijuana	Marijuana	100.0	121	98.1	107	96.2	105	98.2	333	97.5	163	98.8	170
Perception of Peer Disapproval <i>(I think it is Wrong or Very Wrong for someone my age to...)</i>	drink beer, wine, or hard liquor regularly	Alcohol	100.0	122	93.8	112	44.3	106	80.6	340	85.1	168	76.2	172
	smoke cigarettes	Cigarettes	100.0	122	100.0	112	88.7	106	96.5	340	97.6	168	95.3	172
	smoke marijuana	Marijuana	100.0	122	99.1	112	82.1	106	94.1	340	95.2	168	93.0	172
Past 30-Day Use	at least one use in the Past 30 Days	Alcohol	3.3	122	10.9	110	43.4	106	18.3	338	19.3	166	17.4	172
		Cigarettes	0.0	122	0.0	109	2.8	107	0.9	338	0.0	166	1.7	172
		Marijuana	0.0	120	0.0	110	6.6	106	2.1	336	2.4	165	1.8	171
			Age	Number	Age	Number	Age	Number	Age	Number	Age	Number	Age	Number
Average Age of Onset **	average age	Alcohol	10.4	21	11.8	36	13.6	75	12.6	132	12.2	69	12.9	63
		Cigarettes	10.5	2	11.3	4	13.7	19	13.0	25	12.1	8	13.5	17
		Marijuana	.	0	13.0	1	14.7	13	14.6	14	14.7	10	14.3	4

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

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

†The "Total" column represents responses from students in all grades surveyed.

DFC and Youth Perception Tables

Table 13. Youth Perceptions of Substance Use

Now think about all the students in your grade at school. How many of them do you think:	Substance	Manhasset Union Free School District 2009							
		Grade 6		Grade 8		Grade 10		Total	
		Number	Percent	Number	Percent	Number	Percent	Number	Percent
a. smoke one or more cigarettes a day?	None (0%)	118	96.7	74	66.1	9	8.6	201	59.3
	Few (1-10%)	3	2.5	30	26.8	67	63.8	100	29.5
	Some (11-30%)	1	0.8	4	3.6	21	20.0	26	7.7
	Half or less (31-50%)	0	0.0	3	2.7	4	3.8	7	2.1
	Half or more (51-70%)	0	0.0	1	0.9	3	2.9	4	1.2
	Most (71-90%)	0	0.0	0	0.0	0	0.0	0	0.0
	Almost All (91-100%)	0	0.0	0	0.0	1	1.0	1	0.3
b. drank alcohol sometime in the past month?	None (0%)	94	77.0	23	20.5	0	0.0	117	34.5
	Few (1-10%)	20	16.4	52	46.4	1	1.0	73	21.5
	Some (11-30%)	6	4.9	26	23.2	3	2.9	35	10.3
	Half or less (31-50%)	2	1.6	4	3.6	5	4.8	11	3.2
	Half or more (51-70%)	0	0.0	5	4.5	32	30.5	37	10.9
	Most (71-90%)	0	0.0	2	1.8	45	42.9	47	13.9
	Almost All (91-100%)	0	0.0	0	0.0	19	18.1	19	5.6
c. used marijuana sometime in the past month?	None (0%)	122	100.0	88	78.6	2	1.9	212	62.4
	Few (1-10%)	0	0.0	19	17.0	34	32.1	53	15.6
	Some (11-30%)	0	0.0	1	0.9	36	34.0	37	10.9
	Half or less (31-50%)	0	0.0	3	2.7	23	21.7	26	7.6
	Half or more (51-70%)	0	0.0	1	0.9	6	5.7	7	2.1
	Most (71-90%)	0	0.0	0	0.0	5	4.7	5	1.5
	Almost All (91-100%)	0	0.0	0	0.0	0	0.0	0	0.0
d. used an illegal drug in the past month (not including marijuana)?	None (0%)	121	100.0	86	76.8	21	19.8	228	67.3
	Few (1-10%)	0	0.0	22	19.6	56	52.8	78	23.0
	Some (11-30%)	0	0.0	2	1.8	18	17.0	20	5.9
	Half or less (31-50%)	0	0.0	1	0.9	7	6.6	8	2.4
	Half or more (51-70%)	0	0.0	1	0.9	4	3.8	5	1.5
	Most (71-90%)	0	0.0	0	0.0	0	0.0	0	0.0
	Almost All (91-100%)	0	0.0	0	0.0	0	0.0	0	0.0

DFC and Youth Perception Tables

Table 14. Drug Free Communities Report *

Outcomes	Definition	Substance	Manhasset Union Free School District 2011													
			Grade 6		Grade 8		Grade 10		Grade 12		Total †		Male		Female	
			Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number
Perception of Risk <i>(People are at Moderate or Great Risk of harming themselves if they...)</i>	drink 1 or two drinks nearly every day	Alcohol	79.9	254	80.5	215	80.8	213	68.9	180	78.0	862	69.4	422	86.1	432
	smoke 1 or more packs or cigarettes per day	Cigarettes	89.5	257	91.2	215	95.3	213	95.6	183	92.6	868	91.3	423	93.8	437
	smoke marijuana regularly	Marijuana	90.9	254	91.2	215	83.6	213	59.0	183	82.4	865	77.4	421	87.2	436
Perception of Parent Disapproval <i>(Parents feel it would be Wrong or Very Wrong to...)</i>	drink beer, wine, or hard liquor regularly	Alcohol	97.6	249	94.3	212	79.8	208	59.4	180	84.3	849	83.4	410	85.2	431
	smoke cigarettes	Cigarettes	100.0	248	98.6	212	98.1	207	94.4	180	98.0	847	98.8	410	97.2	429
	smoke marijuana	Marijuana	99.6	247	99.1	212	96.6	208	89.4	179	96.6	846	95.9	410	97.2	428
Perception of Peer Disapproval <i>(I think it is Wrong or Very Wrong for someone my age to...)</i>	drink beer, wine, or hard liquor regularly	Alcohol	96.5	257	90.7	215	55.9	213	33.0	182	71.7	867	72.4	424	70.8	435
	smoke cigarettes	Cigarettes	99.2	257	98.1	215	94.8	213	70.5	183	91.8	868	92.0	424	91.5	436
	smoke marijuana	Marijuana	98.8	253	98.6	215	84.0	213	54.4	182	85.7	863	84.0	419	87.4	436
Past 30-Day Use	at least one use in the Past 30 Days	Alcohol	3.2	251	6.1	213	45.9	209	71.8	181	28.9	854	26.0	415	32.0	431
		Cigarettes	0.0	251	0.9	214	1.9	209	15.5	181	4.0	855	2.7	415	5.1	432
		Marijuana	0.0	250	0.9	215	8.7	208	29.3	181	8.5	854	8.3	412	9.0	434
			Age	Number	Age	Number	Age	Number	Age	Number	Age	Number	Age	Number	Age	Number
Average Age of Onset **	average age	Alcohol	10.4	52	11.4	58	13.7	140	14.2	151	13.1	401	12.6	202	13.7	196
		Cigarettes	10.0	4	10.4	7	13.2	27	14.9	62	14.0	100	13.7	44	14.2	55
		Marijuana	10.0	2	10.0	1	14.4	33	15.6	96	15.2	132	15.1	67	15.2	64

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

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

†The "Total" column represents responses from students in all grades surveyed.

DFC and Youth Perception Tables

Table 15. Youth Perceptions of Substance Use

Now think about all the students in your grade at school. How many of them do you think:	Substance	Manhasset Union Free School District 2011									
		Grade 6		Grade 8		Grade 10		Grade 12		Total	
		Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
a. smoke one or more cigarettes a day?	None (0%)	258	97.0	145	67.1	38	17.5	15	8.1	456	51.6
	Few (1-10%)	3	1.1	57	26.4	116	53.5	100	54.1	276	31.2
	Some (11-30%)	2	0.8	6	2.8	37	17.1	48	25.9	93	10.5
	Half or less (31-50%)	0	0.0	4	1.9	15	6.9	8	4.3	27	3.1
	Half or more (51-70%)	0	0.0	3	1.4	9	4.1	6	3.2	18	2.0
	Most (71-90%)	0	0.0	0	0.0	2	0.9	3	1.6	5	0.6
	Almost All (91-100%)	3	1.1	1	0.5	0	0.0	5	2.7	9	1.0
b. drank alcohol sometime in the past month?	None (0%)	223	84.8	95	44.2	15	6.9	6	3.2	339	38.5
	Few (1-10%)	36	13.7	75	34.9	10	4.6	5	2.7	126	14.3
	Some (11-30%)	0	0.0	19	8.8	10	4.6	2	1.1	31	3.5
	Half or less (31-50%)	1	0.4	8	3.7	26	12.0	6	3.2	41	4.7
	Half or more (51-70%)	0	0.0	6	2.8	46	21.2	23	12.4	75	8.5
	Most (71-90%)	0	0.0	7	3.3	63	29.0	69	37.3	139	15.8
	Almost All (91-100%)	3	1.1	5	2.3	47	21.7	74	40.0	129	14.7
c. used marijuana sometime in the past month?	None (0%)	258	97.7	165	76.7	27	12.4	9	4.9	459	52.2
	Few (1-10%)	3	1.1	36	16.7	48	22.1	13	7.1	100	11.4
	Some (11-30%)	0	0.0	6	2.8	50	23.0	28	15.2	84	9.5
	Half or less (31-50%)	0	0.0	3	1.4	43	19.8	40	21.7	86	9.8
	Half or more (51-70%)	0	0.0	3	1.4	29	13.4	49	26.6	81	9.2
	Most (71-90%)	0	0.0	1	0.5	15	6.9	27	14.7	43	4.9
	Almost All (91-100%)	3	1.1	1	0.5	5	2.3	18	9.8	27	3.1
d. used an illegal drug in the past month (not including marijuana)?	None (0%)	253	96.6	176	81.5	51	23.5	24	13.0	504	57.3
	Few (1-10%)	7	2.7	34	15.7	101	46.5	73	39.5	215	24.4
	Some (11-30%)	0	0.0	3	1.4	25	11.5	40	21.6	68	7.7
	Half or less (31-50%)	0	0.0	1	0.5	16	7.4	27	14.6	44	5.0
	Half or more (51-70%)	0	0.0	0	0.0	12	5.5	7	3.8	19	2.2
	Most (71-90%)	0	0.0	1	0.5	8	3.7	7	3.8	16	1.8
	Almost All (91-100%)	2	0.8	1	0.5	4	1.8	7	3.8	14	1.6

NATIONAL RESOURCES

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

info@samhsa.hhs.org

www.samhsa.gov

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

Center for Substance Abuse Prevention (CSAP)

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

info@samhsa.hhs.org

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

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

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

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

Information@lists.nida.nih.gov

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

STATE RESOURCES

New York State
Office of Alcoholism and Substance Abuse Services (OASAS),
Division of Prevention and Treatment
prevention@oasas.state.ny.us
www.oasas.state.ny.us

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