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oklahoma department of mental health and substance abuse services
presents

Oklahoma Prevention Needs Assessment Survey

2019-2020

Results for
Cotton County

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Introduction

School Year 2019-20 Cotton County Prevention Needs Assessment Survey Report

This report summarizes findings from the Oklahoma Prevention Needs Assessment (OPNA) survey that was conducted during school year 2019-20 in grades 6, 8, 10, and 12. The results for this county are presented along with along with results for the state of Oklahoma. In addition, the report contains important information about the risk and protective factor framework and guidelines on how to interpret and use the data. Please note that this report does not contain data from all survey questions. For information about additional survey items, please contact the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS). Contact information for the department can be found [here](#).

The OPNA survey is 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, positive mental health, school dropout, substance abuse, violence, and delinquency among youth.

Table 1 contains the characteristics of the students who completed the survey from this county and the state of Oklahoma.

Table 2. Participation rate

	County 2019-20			State 2019-20		
	Surveyed	Enrolled*	Particip. rate	Surveyed	Enrolled*	Particip. rate
Grade						
6	n/a	n/a	n/a	24,703	53,040	46.6
8	58	68	85.3	26,319	51,042	51.6
10	33	63	52.4	22,733	51,277	44.3
12	39	71	54.9	15,137	44,736	33.8
Total	142	278	51.1	88,892	200,095	44.4

* Based on enrollment data for all public schools and participating private schools. The presence of "n/a" in above chart indicates that the grade had insufficient participation for grade-level reporting (i.e., less than 20 valid surveys were collected for the grade).

When using the information in this report, please pay attention to the number of students who participated (seen in Table 2). 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, consult with a prevention coordinator or survey professional to see if the number of participants represents an adequate basis for generalizing survey results.

Coordination and administration of the OPNA survey was a collaborative effort among ODMHSAS, Oklahoma State Department of Education (OSDE), Regional Prevention Coordinators (RPC) and participating schools. If you have questions about the report or prevention services in the state, please refer to [Contacts](#) at the end of this report.

Table 1. Characteristics of participants

	County 2015-16		County 2017-18		County 2019-20		State 2019-20	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Students by grade								
6	57	29.1	60	27.0	12	8.5	24,703	27.8
8	55	28.1	61	27.5	58	40.8	26,319	29.6
10	40	20.4	69	31.1	33	23.2	22,733	25.6
12	44	22.4	32	14.4	39	27.5	15,137	17.0
Total	196	100.0	222	100.0	142	100.0	88,892	100.0
Students by gender								
Male	105	54.4	106	49.1	63	44.4	43,969	49.8
Female	88	45.6	110	50.9	79	55.6	44,389	50.2
Students by race/ethnicity*								
American Indian or Alaskan Native	51	20.7	56	20.1	39	21.2	18,672	15.9
Asian	2	0.8	3	1.1	4	2.2	3,998	3.4
Black, or African American	11	4.5	12	4.3	7	3.8	13,607	11.6
Hispanic or Latino	22	8.9	27	9.7	23	12.5	20,460	17.4
Native Hawaiian or Pacific Islander	2	0.8	3	1.1	2	1.1	1,581	1.3
White	158	64.2	177	63.7	109	59.2	59,440	50.5

* Since students are able to select more than one race or ethnicity, the sum of students of individual categories may exceed the total number of students surveyed. Because not all students answer all of the questions, the total count of students by gender (and less frequently, students by ethnicity) may be less than the reported total students.

Understanding the charts and tables in this report

Several types of charts are presented in this report:

1. Lifetime and 30-day substance use
2. Problem use, treatment needs, and antisocial behavior (ASB)
3. Sources of alcohol and places of alcohol use
4. Sources of prescription drugs
5. Mental health
6. Risk factors
7. Protective factors
8. Communication with adults

Data from the charts are also presented in Tables [5-15](#). Additional data found in Tables [16](#) and [17](#) are explained at the end of this section. A hyperlink to the corresponding data table is below each chart.

Understanding the format of the charts

Several graphical elements are common to all charts. Understanding the format of the charts and what these elements represent is essential in interpreting the results of school year 2019-20 OPNA 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.
- **Dots, Diamonds, Triangles, and Xs.** The dots on the charts represent the percentage of all youth surveyed across the state of Oklahoma in school year 2019-20 OPNA who reported substance use, problem behavior, elevated risk, or elevated protection.

State level data gathered in the school year 2019-20 OPNA survey, represents 88,892 6th, 8th, 10th, and 12th graders participating out of 200,095 enrolled statewide, resulting in a participation rate of 44.4%.

(Enrollment is the number of 6th, 8th, 10th, and 12th grade students attending an Oklahoma public school in school year 2019-20 — regardless of whether they participated in the survey — plus the enrollment of participating private schools.)

The large sample size contributes to the statistical validity of the estimates of Oklahoma youth use rates regarding alcohol, tobacco, and other drugs (ATOD), and youth risk and protective factors levels presented

in this report. (Note: State dot represents the weighted results of all participating students. See the appendix section [Weighting procedures for the OPNA](#) for more information.)

Data for this county was based on 142 valid surveys out of 278 6th, 8th, 10th, and 12th graders enrolled, resulting in a participation rate of 51.1%.

A comparison to the state and national results provides additional information for your community in determining the relative importance of levels of ATOD use, antisocial behavior, risk, and protection. Information about other students in the state and the nation can be helpful to determine the seriousness of a given level of problem behavior. Scanning across the charts, you can easily determine which factors are most (or least) prevalent for your community. This is the first step in identifying the levels of risk and protection that are operating in your community and which factors your community may choose to address.

The Monitoring the Future (MTF) study (represented by diamonds on the charts) is a long-term epidemiological study that surveys trends in drug and alcohol use among American adolescents. Funded by research grants from the National Institute on Drug Abuse (NIDA), it features nationally representative samples of students in 8th, 10th, and 12th grades.

The Bach Harrison Norm (represented by triangles on the charts) 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. Results from 11 statewide surveys were combined into a database of approximately 657,000 students in grades 6, 8, 10, and 12. The results were weighted to make the contribution of each state 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 the Bach Harrison (BH) Norm. In order to keep the Bach Harrison Norm relevant, it is updated approximately every two years as new data become available. The most recent update of the BH Norm was completed in 2017.

The Xs represent national mental health data gathered by The Youth Risk Behavior Survey (YRBS). (This should not be confused with state-level YRBS data.) National comparison points are available for grades 10 and 12 on the topic of suicide and depression.

Understanding the charts and tables in this report

Lifetime & 30-day ATOD use charts

- **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. (Lifetime use was calculated differently for substances other than alcohol beginning in the 2017-18 OPNA.) See [Changes to ATOD questions and calculations](#) for more information.)
- **30-day use** is a measure of the percentage of students who have 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.

Problem substance use, treatment needs, and antisocial behavior charts

- **Problem substance use** is measured in several different ways: *binge drinking* (having five or more drinks in a row during the two weeks prior to the survey), use of *one-half a pack or more of cigarettes per day* and youth indicating *drinking alcohol and driving* or reporting *riding with a driver who had been drinking alcohol*.
- **Treatment needs** are estimates of youth in need of alcohol treatment, drug treatment and an estimate of students that need either alcohol OR drug treatment.

The need for treatment is defined as students who report using alcohol on 10 or more occasions in their lifetime or any drugs in their lifetime and marked at least three of the following items specific to their drug or alcohol use in the past year:

- *Spent more time using than intended*
- *Neglected some of your usual responsibilities because of use*
- *Wanted to cut down on use*
- *Others objected to your use*
- *Frequently thought about using*
- *Used alcohol or drugs to relieve feelings such as sadness, anger, or boredom*

Students could mark whether these items related to their drug use and/or their alcohol use.

- **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.

Sources of alcohol, places of alcohol use, and sources of prescription drugs charts

These charts present the percentage of students who obtained alcohol from 12 specific sources and used it in nine different places (all during the past year), and the sources of prescription drugs for students indicating they had at some point in their life used prescription drugs to get high (not for medical reasons). The data focus on a subgroup of students who indicated at least one means of obtaining alcohol, one place of consuming alcohol or having used prescription drugs to get high in their lifetime. (Students reporting no alcohol use in the past year or never getting high on prescription drugs are not represented in their respective charts.) It is important to note that the charts represent a subgroup of users and not the entire survey population. Additionally, it should be noted that 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 percent or 100 percent. Chart legends indicate the sample size for each grade surveyed to help clarify the value of the data.

Mental health charts

The mental health charts show the percentage of youth with psychological distress, the percentage exhibiting depressive symptoms, student responses to questions about suicide, and new questions about student attitudes toward the acceptability of seeking mental health treatment and their willingness to do so.

Psychological distress was estimated using the K6 Scale that was developed with support from the National Center for Health Statistics for use in the National Health Interview Survey. The tool screens for psychological distress by asking students

During the past 30 days, how often did you:

- *feel nervous?*
- *feel hopeless?*
- *feel restless or fidgety?*
- *feel so depressed that nothing could cheer you up?*
- *feel that everything was an effort?*
- *feel worthless?*

Understanding the charts and tables in this report

Answers to each were scored based on responses: *None of the time* (0 points), *A little of the time* (1 point), *Some of the time* (2 points), *Most of the time* (3 points), *All of the time* (4 points).

Students with a total score of 13 or more points were determined to have high psychological distress, while students scoring 7-12 points were classified as having moderate psychological distress, and low psychological distress was defined by a score of 0-6 points. The chart shows a combined percentage of students falling into the high and moderate categories, whereas [Table 11](#) shows all three categories separately.

Depressive symptoms scale is calculated from student responses to the following statements:

- *Sometimes I think that life is not worth it.*
- *At times I think I am no good at all.*
- *All in all, I am inclined to think that I am a failure.*
- *In the past year, have you felt depressed or sad MOST days, even if you felt OK sometimes?*

These four depressive symptoms 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.

Similar to the psychological distress scale, the chart shows a single bar representing students with both high and moderate depressive symptoms combined, whereas

the table displays individual percentages for high, moderate, and no depressive symptoms.

Suicide-related indicators are based on a series of questions about suicide. These questions provide information about suicidal ideation and attempts of suicide (e.g., “During the past 12 months, did you ever seriously consider attempting suicide?” and “During the past 12 months, how many times did you actually attempt suicide?”).

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 4](#), 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.

Communication with adults charts

These charts contain data on student answers to questions on whether they have discussed the dangers of substance use with their parents, and items on the strength and nature of positive adult relationships in students’ lives.

Additional tables in this report

[Table 16](#) contains information required by communities with Drug Free Communities Grants, such as the perception of the risks of ATOD use, perception of parent and peer disapproval of ATOD use, and rates of past 30-day use for alcohol, tobacco, marijuana, and prescription drugs.

[Table 17](#) contains additional data for prevention planning on the subjects of safety, verbal, and physical violence.

The Risk and Protective Factor Model of Prevention

The Risk and Protective Factor Model of Prevention is a proven way of reducing substance abuse and its related consequences. This model is based on the simple premise that to prevent a problem from occurring, we must 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 nineteen risk factors for youth problem behaviors.

Risk factors are characteristics of school, community, and family environments and 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.

The chart below shows the links between the risk factors and six problem behaviors. Check marks indicate where at least two well designed, published research studies have shown a link between a risk factor and a problem behavior.

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 strong bonding to family, school, community, and peers; and healthy beliefs and clear standards for behavior. Protective bonding depends on three conditions:

- Opportunities for young people to actively contribute

- Skills to be able to successfully contribute

- Consistent recognition or reinforcement for their efforts and accomplishments

Bonding confers a protective influence only when there is a positive climate in the bonded community. For example, strong bonds to antisocial peers would not be likely to reinforce positive behavior.

Peers and adults in these schools, families, and neighborhoods must communicate healthy values and set clear standards for behavior in order to ensure a protective effect.

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 these outcomes, it is necessary to address the factors that predict their development. By measuring risk and protective factors in a population, specific risk factors that are elevated can be identified and targeted by policies, programs, and actions that are shown to reduce their impact and promote protective factors.

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

In addition to helping assess current conditions and prioritize areas of greatest need, data from the OPNA survey can be a powerful tool in applying for and complying with several federal programs outlined later in this report, such as the Strategic Prevention Framework process.

Table 3. Risk factors and linked problem behaviors

	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 Behaviors	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
Problem Behaviors																			
Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Depression & Anxiety			✓				✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Delinquency	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Teen Pregnancy						✓	✓	✓	✓		✓	✓	✓	✓		✓	✓		
School Drop-Out			✓			✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓		
Violence	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓		✓	✓

Building a Strategic Prevention Framework

The OPNA 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. The Oklahoma State and Tribal Epidemiological Outcomes Workgroup (STEOW) has compiled data from several sources to aid in the needs assessment process. One of the primary sources of needs assessment data is the OPNA survey. 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 OPNA results presented in this profile report will help you to identify needs for prevention services. OPNA 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 planning and implementing 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 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.



Building a Strategic Prevention Framework (cont'd)

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.

Refer to [Contacts](#) at the end of this report to find professionals who can help you identify evidence based practices for preventing mental health and/or substance use disorders. Schools can receive help in choosing scientifically based approaches to preventing and treating mental and/or substance use disorders that can be readily disseminated to the field.

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 are at the core of the SPF model, indicating the key role they play in each of the five elements. Incorporating principles of cultural competence and sustainability throughout assessment, capacity appraisal, planning, implementation, and evaluation helps ensure successful, long lasting prevention programs.

Sustainability is accomplished by utilizing a comprehensive approach. By building adaptive and flexible programs around a variety of resources, funding, and organizations, states and communities can 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.

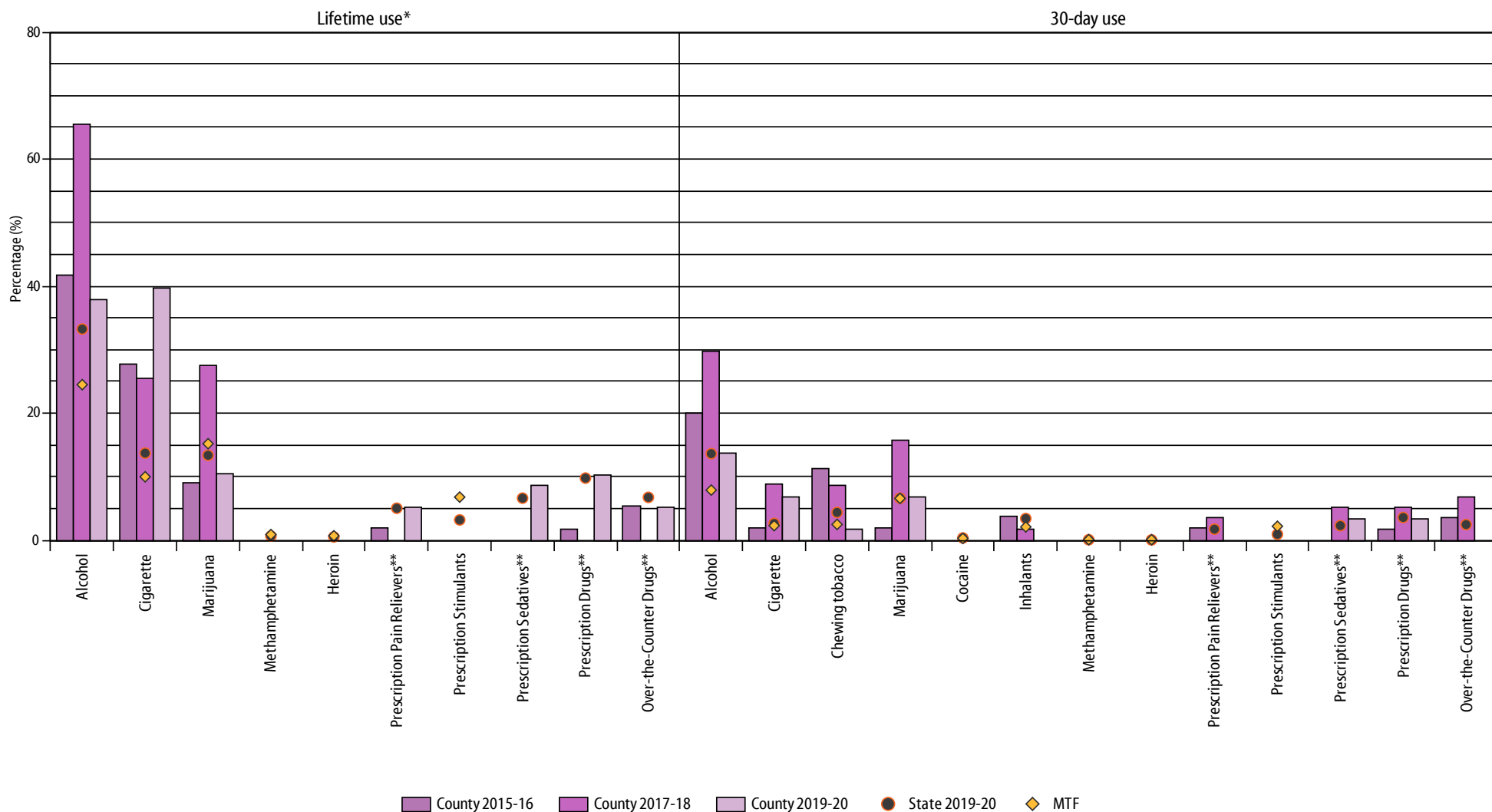
Cultural competence means recognizing the needs, styles, values, and beliefs of the recipients of prevention efforts. Culturally competent prevention strategies use interventions, evaluations, and communication strategies appropriate to their intended community. Cultural issues reflect a range of influences 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.

Lifetime and 30-day ATOD use

Cotton County, School Year 2019-20, 8th grade

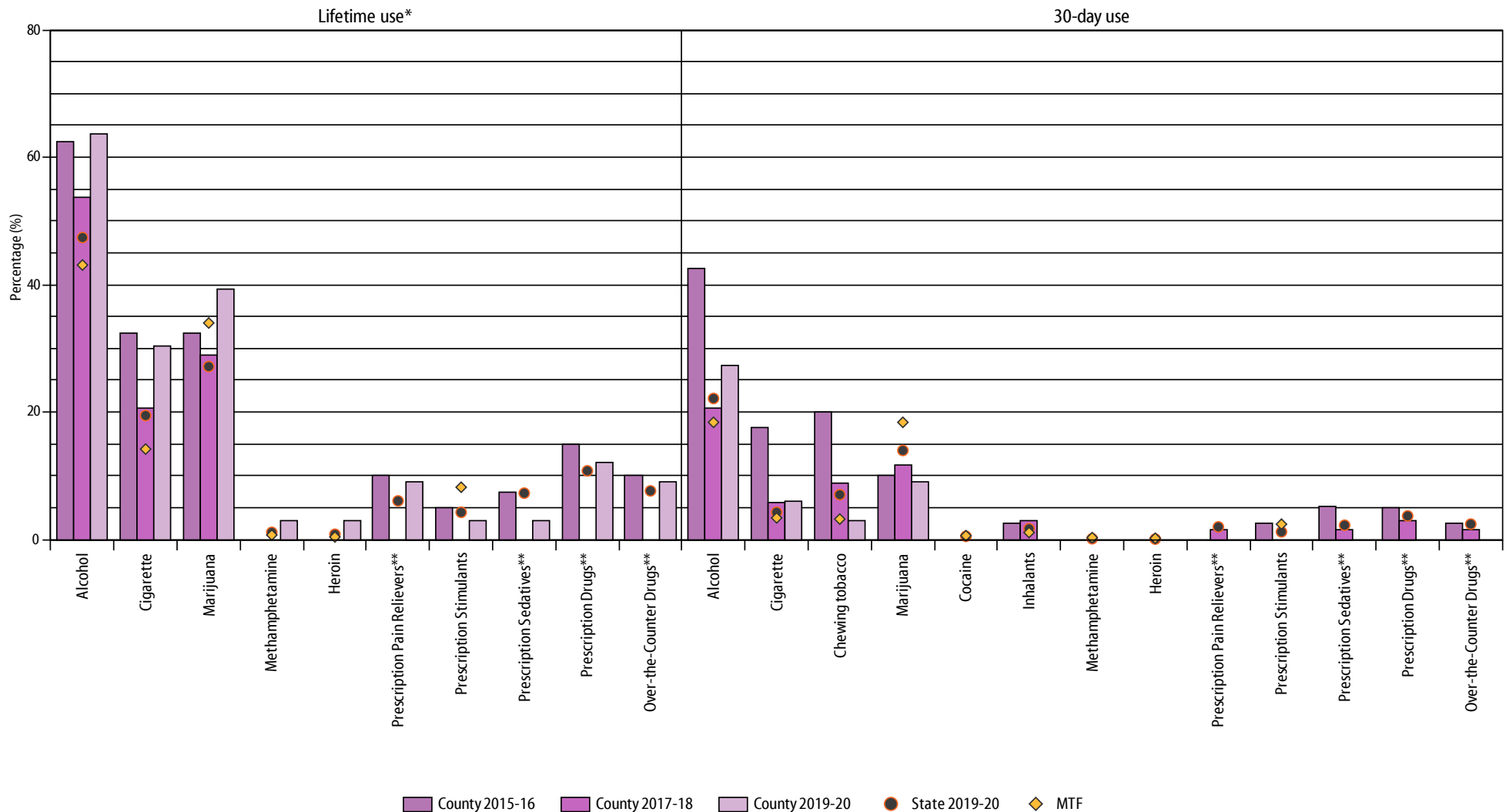


* Beginning in school year 2017-18, age of first use became the new basis for calculating lifetime use for substances other than alcohol. See text for a detailed explanation. However, during the 2017-18 administration, some schools in Cotton County used the 2015-16 OPNA Survey instrument, so lifetime use continued to be calculated using number of occasions for these schools in 2017-18.

** No equivalent category for these substances in the Monitoring the Future survey. MTF data are not available for grade 6 or all grades. MTF does not release current prescription pain reliever, sedative, or overall prescription drug data for grades 8 and 10.

Lifetime and 30-day ATOD use

Cotton County, School Year 2019-20, 10th grade

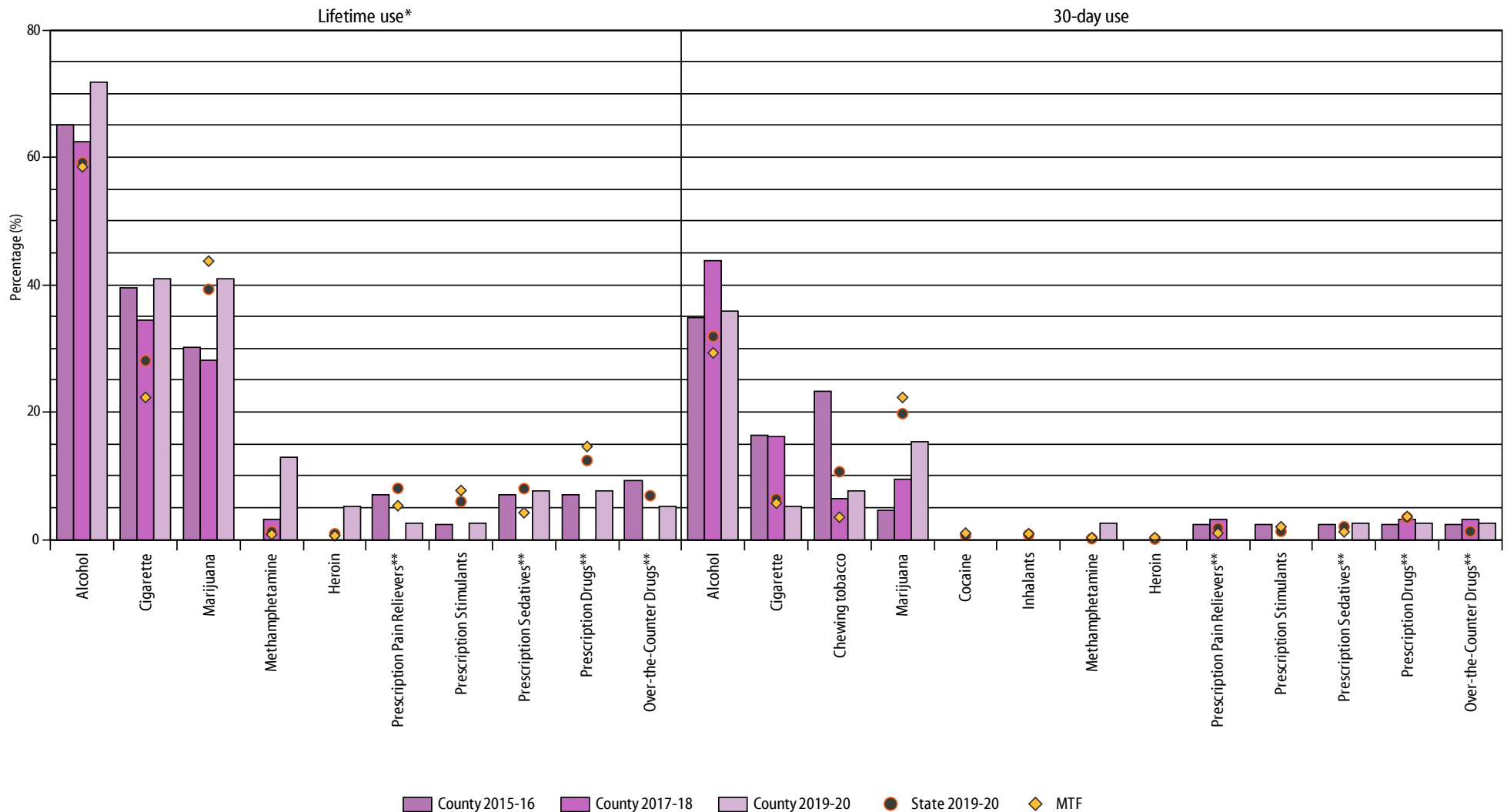


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** No equivalent category for these substances in the Monitoring the Future survey. MTF data are not available for grade 6 or all grades. MTF does not release current prescription pain reliever, sedative, or overall prescription drug data for grades 8 and 10.

Lifetime and 30-day ATOD use

Cotton County, School Year 2019-20, 12th grade

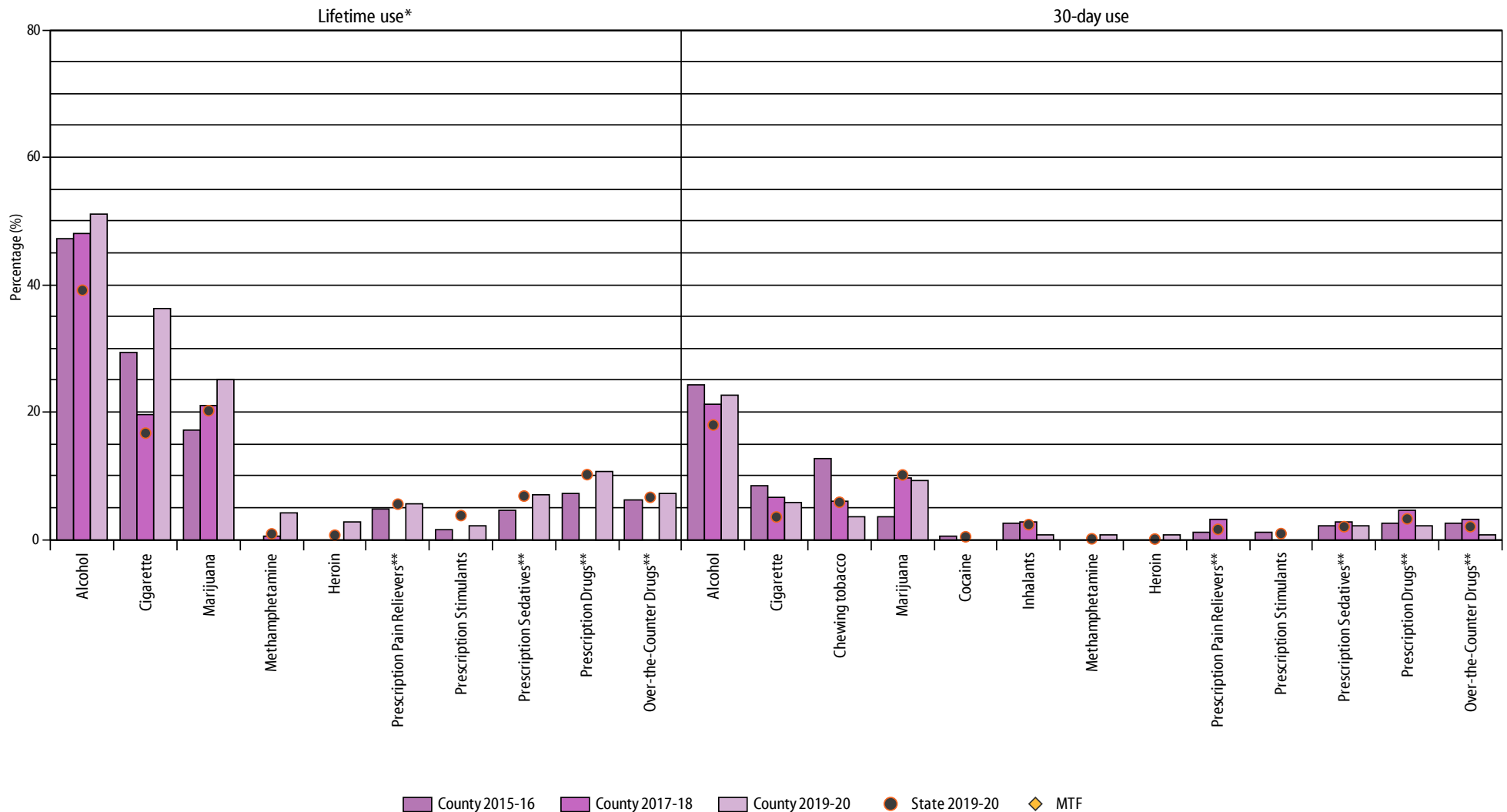


* Beginning in school year 2017-18, age of first use became the new basis for calculating lifetime use for substances other than alcohol. See text for a detailed explanation. However, during the 2017-18 survey administration, some schools in Cotton County used the 2015-16 OPNA Survey instrument, so lifetime use continued to be calculated using number of occasions for these schools in 2017-18.

** No equivalent category for these substances in the Monitoring the Future survey. MTF data are not available for grade 6 or all grades. MTF does not release current prescription pain reliever, sedative, or overall prescription drug data for grades 8 and 10.

Lifetime and 30-day ATOD use

Cotton County, School Year 2019-20, All grades

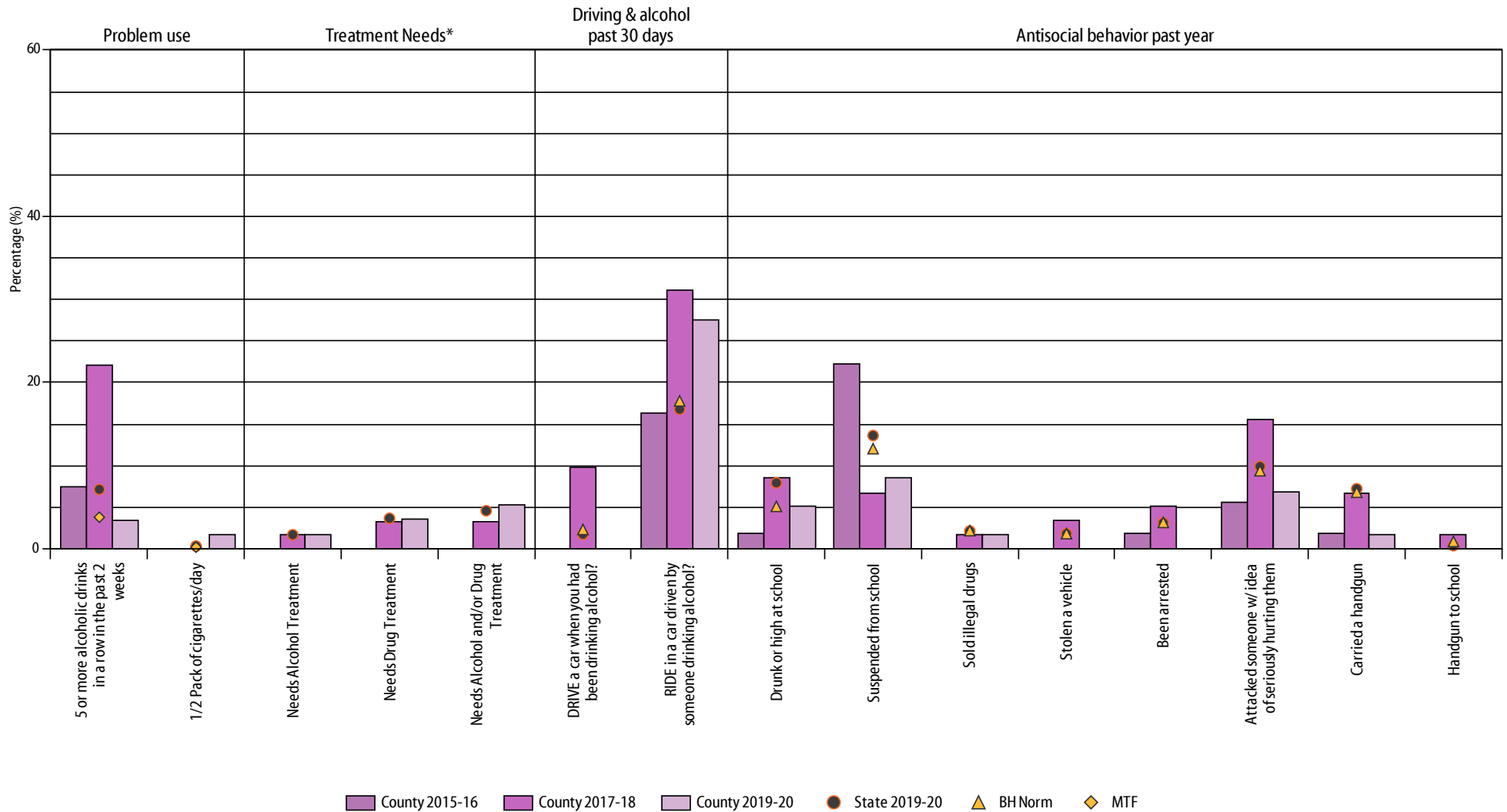


* Beginning in school year 2017-18, age of first use became the new basis for calculating lifetime use for substances other than alcohol. See text for a detailed explanation. However, during the 2017-18 administration, some schools in Cotton County used the 2015-16 OPNA Survey instrument, so lifetime use continued to be calculated using number of occasions for these schools in 2017-18.

** No equivalent category for these substances in the Monitoring the Future survey. MTF data are not available for grade 6 or all grades. MTF does not release current prescription pain reliever, sedative, or overall prescription drug data for grades 8 and 10.

Problem substance use, treatment needs, and antisocial behavior

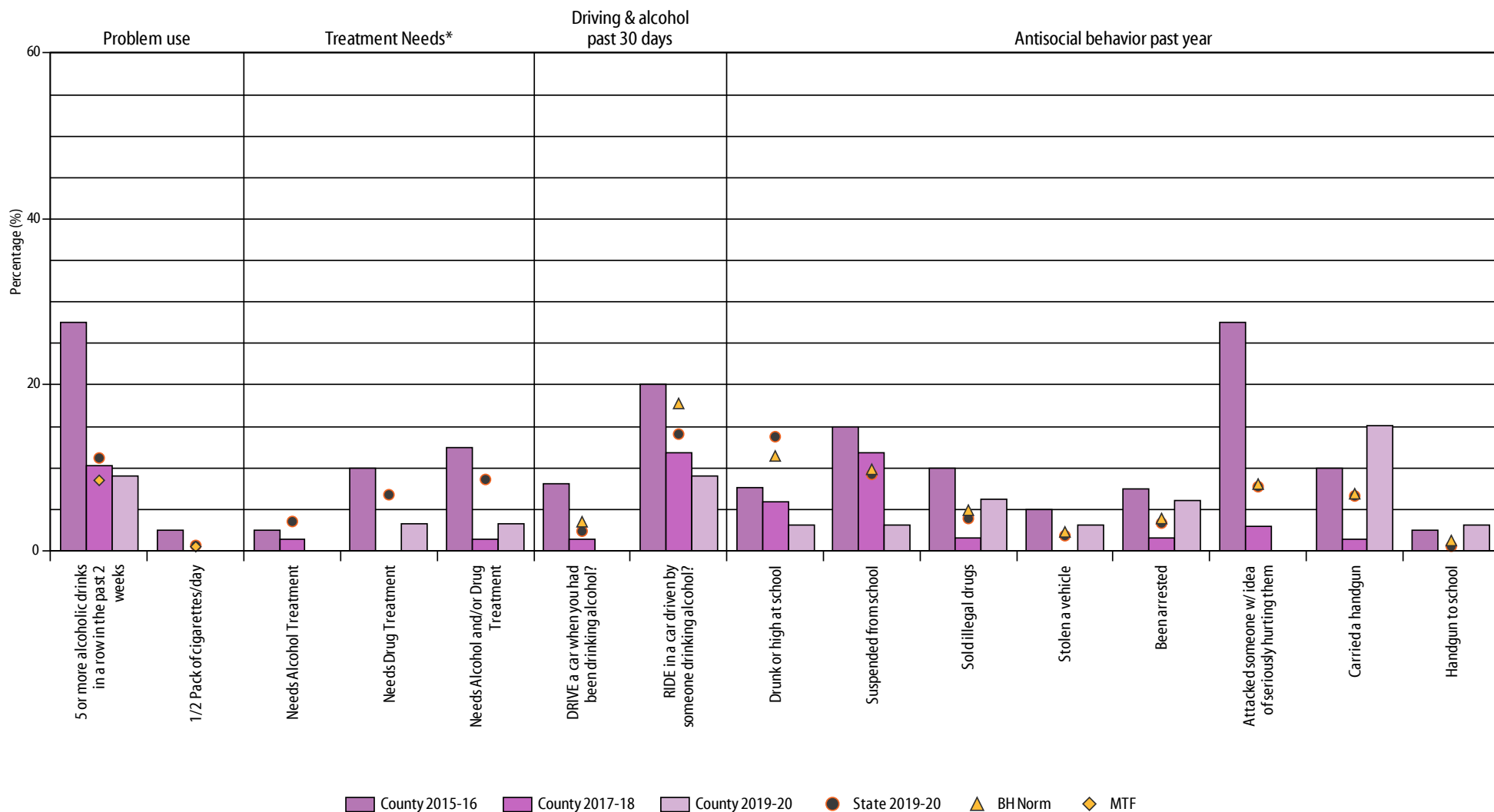
Cotton County, School Year 2019-20, 8th grade



* No equivalent category for Treatment Needs in Bach Harrison Norm or Monitoring the Future data. Monitoring the Future survey data are not available for grade 6 or all grades combined.

Problem substance use, treatment needs, and antisocial behavior

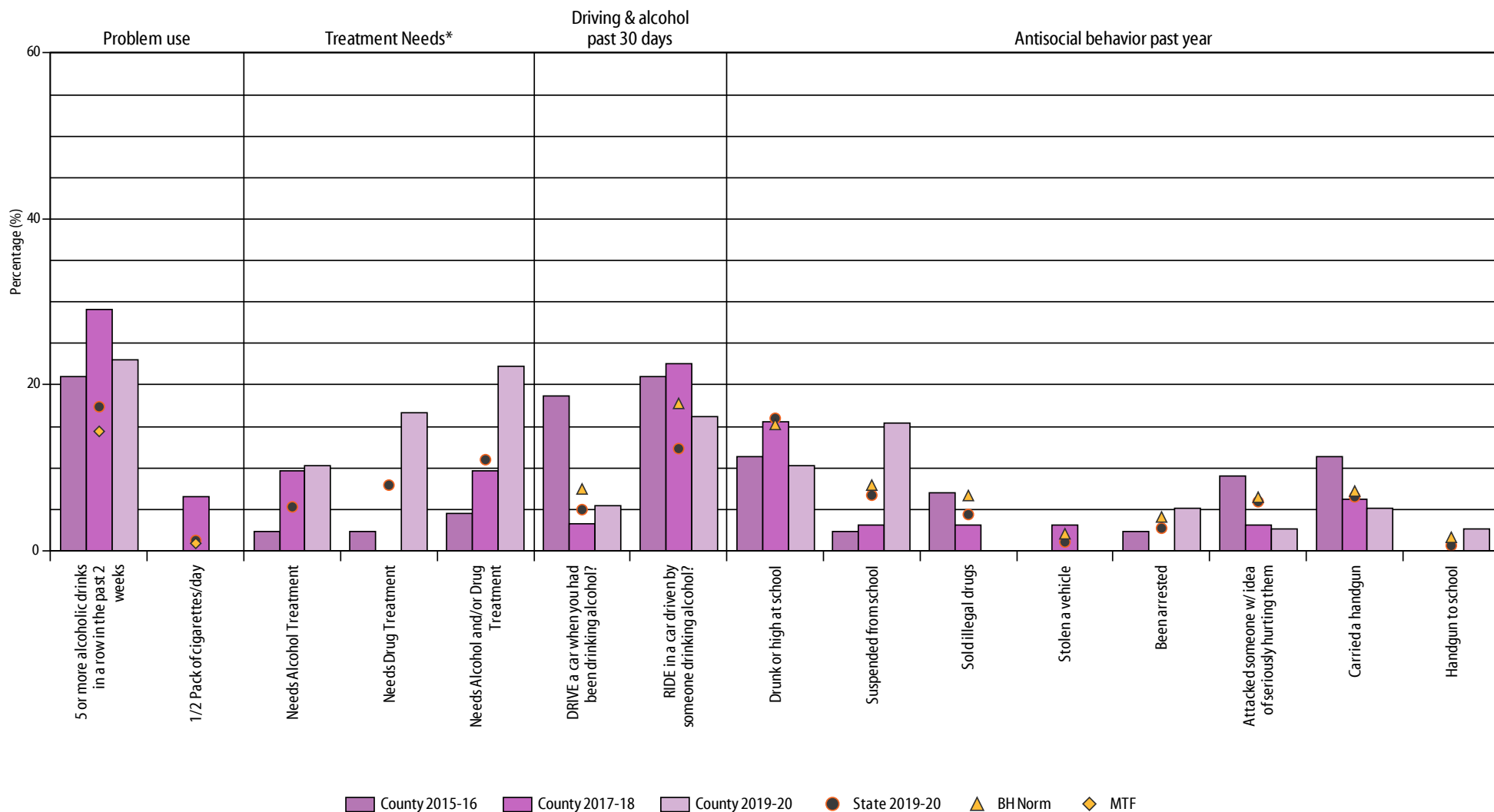
Cotton County, School Year 2019-20, 10th grade



* No equivalent category for Treatment Needs in Bach Harrison Norm or Monitoring the Future data. Monitoring the Future survey data are not available for grade 6 or all grades combined.

Problem substance use, treatment needs, and antisocial behavior

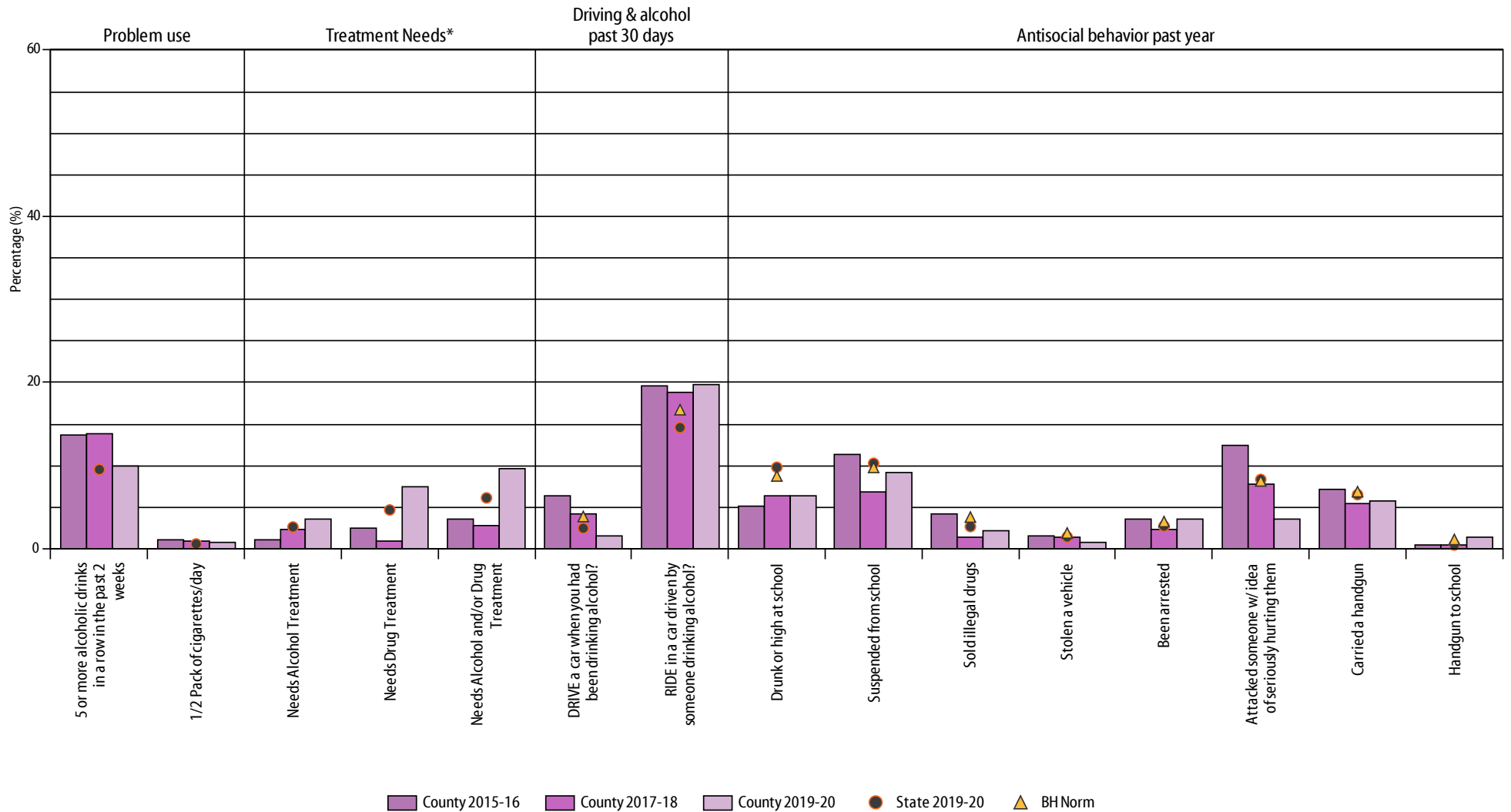
Cotton County, School Year 2019-20, 12th grade



* No equivalent category for Treatment Needs in Bach Harrison Norm or Monitoring the Future data. Monitoring the Future survey data are not available for grade 6 or all grades combined.

Problem substance use, treatment needs, and antisocial behavior

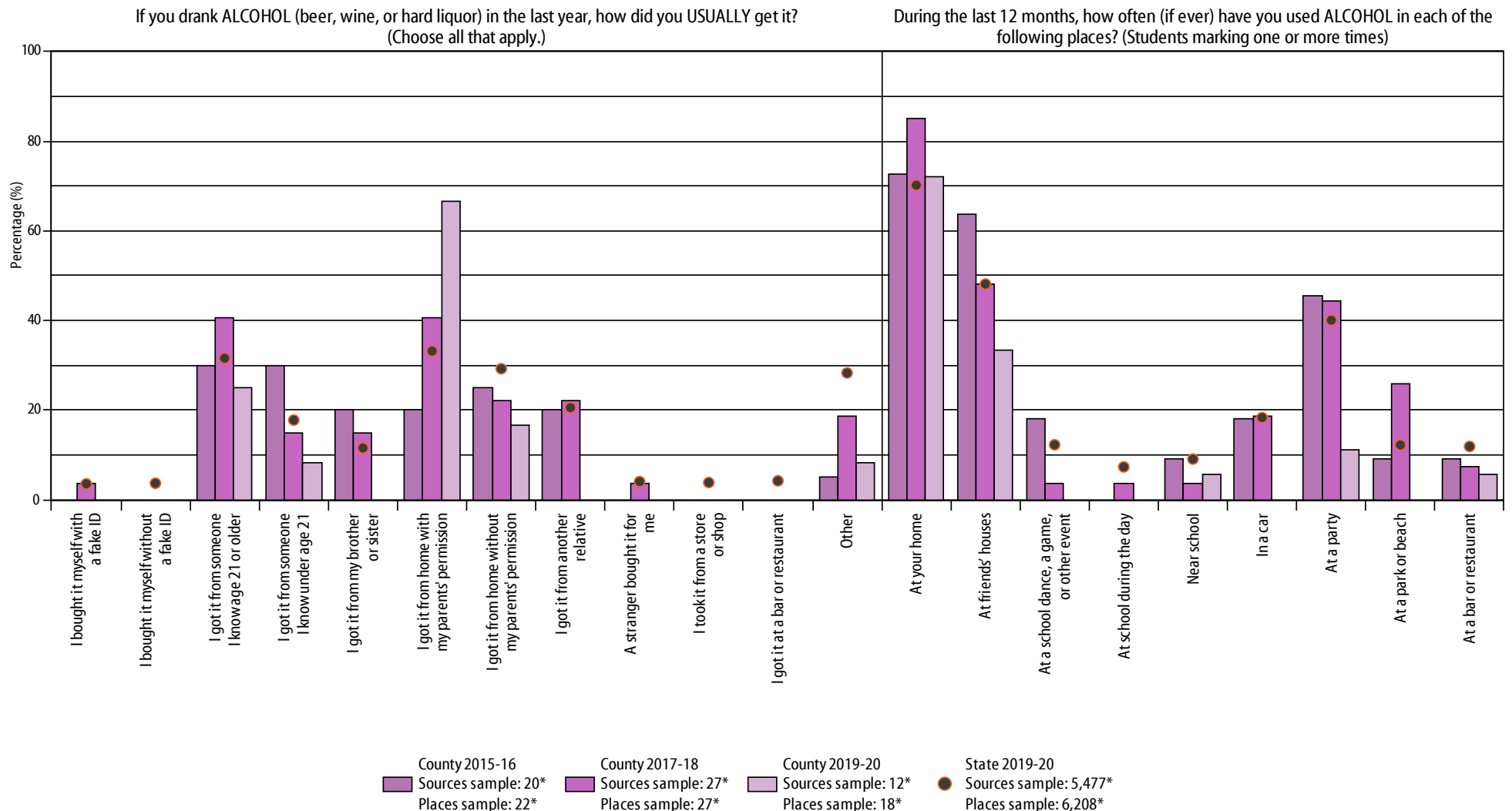
Cotton County, School Year 2019-20, All grades



* No equivalent category for Treatment Needs in Bach Harrison Norm or Monitoring the Future data. Monitoring the Future survey data are not available for grade 6 or all grades combined.

Sources of alcohol/Places of alcohol use

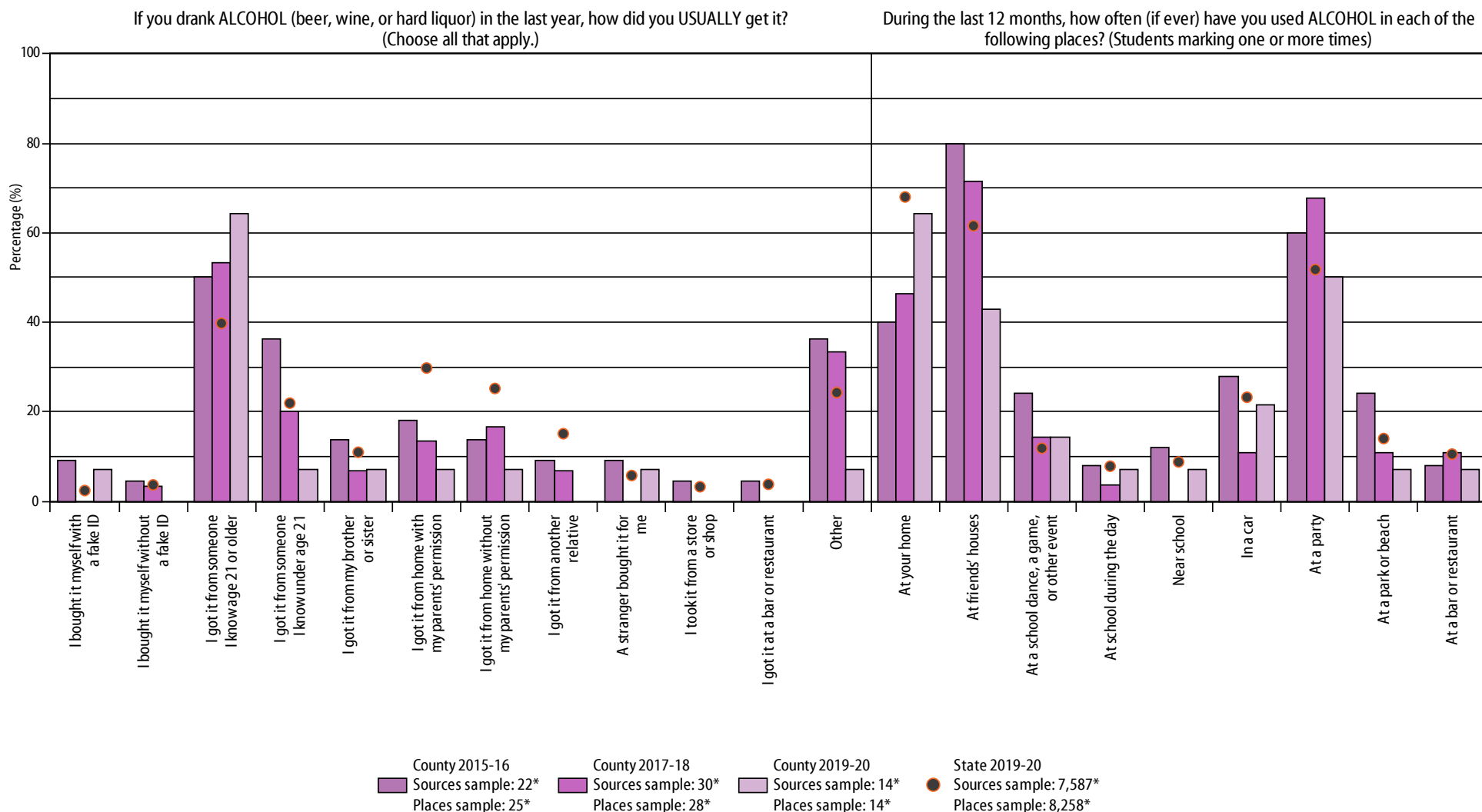
Cotton County, School Year 2019-20, 8th grade



* Sample size represents the number of youth who obtained alcohol from at least one source or reported alcohol use one or more times in a selected place. Students indicating they did not drink 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.

Sources of alcohol/Places of alcohol use

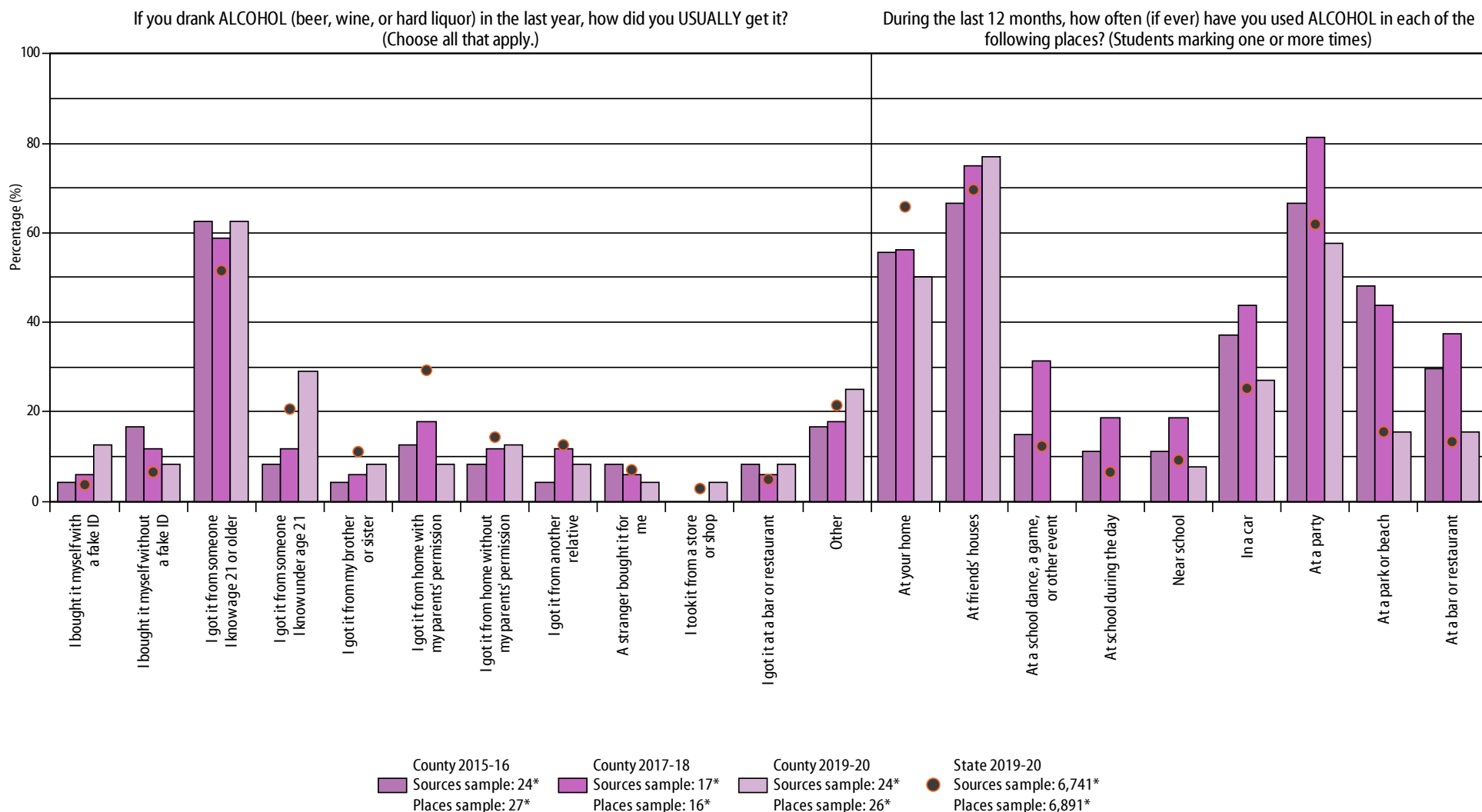
Cotton County, School Year 2019-20, 10th grade



* Sample size represents the number of youth who obtained alcohol from at least one source or reported alcohol use one or more times in a selected place. Students indicating they did not drink 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.

Sources of alcohol/Places of alcohol use

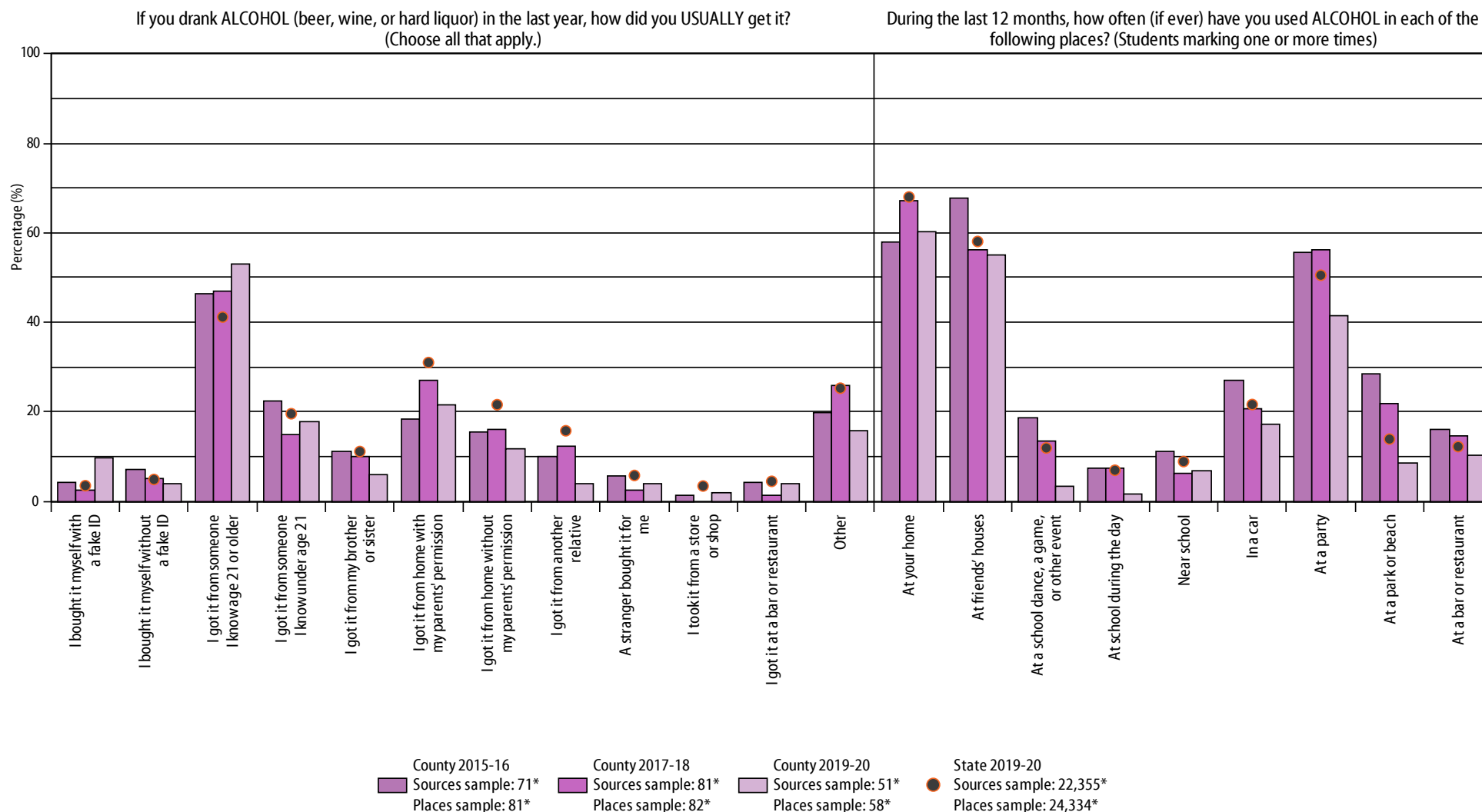
Cotton County, School Year 2019-20, 12th grade



* Sample size represents the number of youth who obtained alcohol from at least one source or reported alcohol use one or more times in a selected place. Students indicating they did not drink 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.

Sources of alcohol/Places of alcohol use

Cotton County, School Year 2019-20, All grades

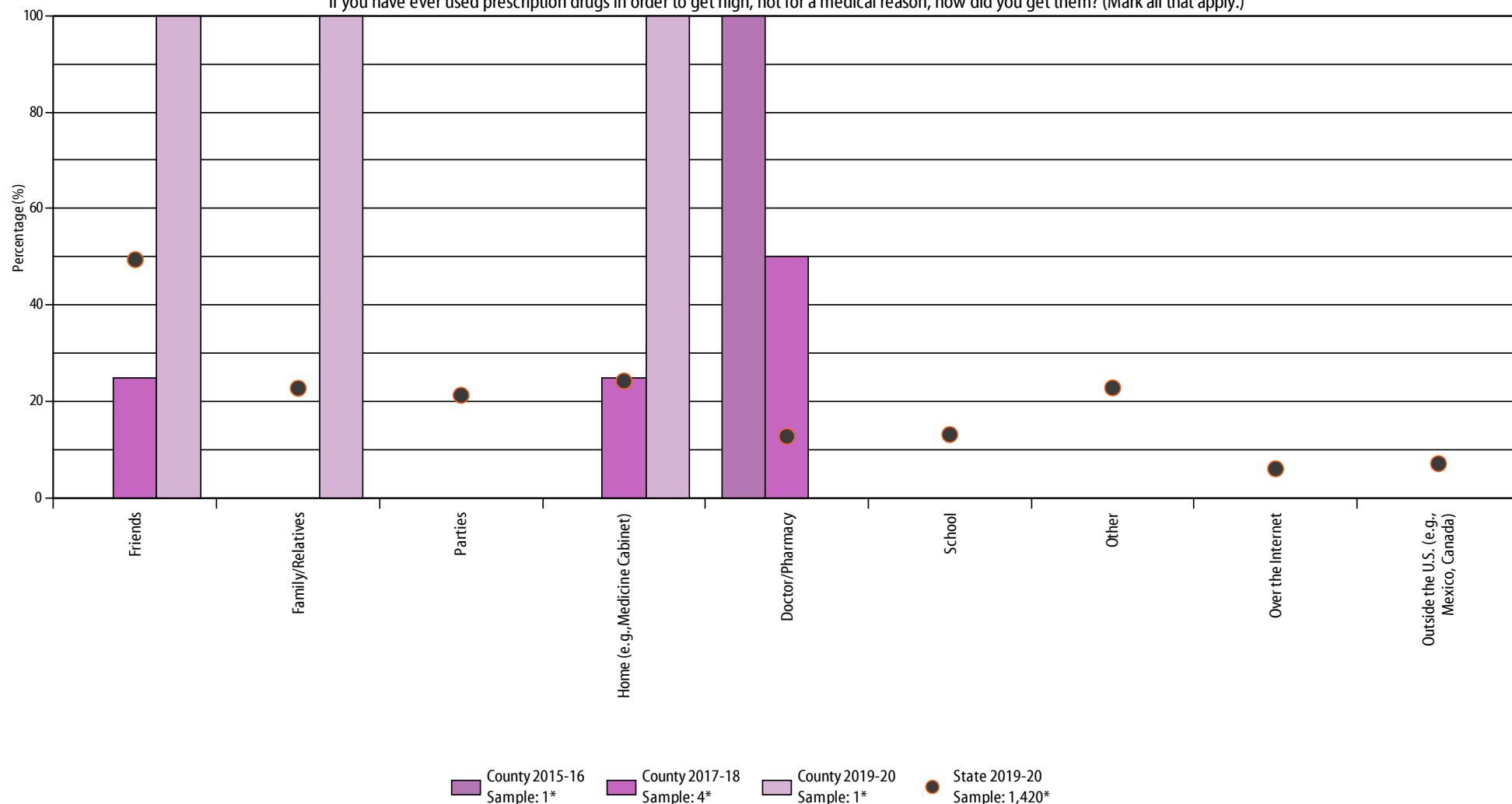


* Sample size represents the number of youth who obtained alcohol from at least one source or reported alcohol use one or more times in a selected place. Students indicating they did not drink alcohol in the past year are not included in the sample. In the case of smaller sample sizes, caution should be exercised before generalizing results to the entire community.

Student prescription drug sources

Cotton County, School Year 2019-20, 8th grade

If you have ever used prescription drugs in order to get high, not for a medical reason, how did you get them? (Mark all that apply.)

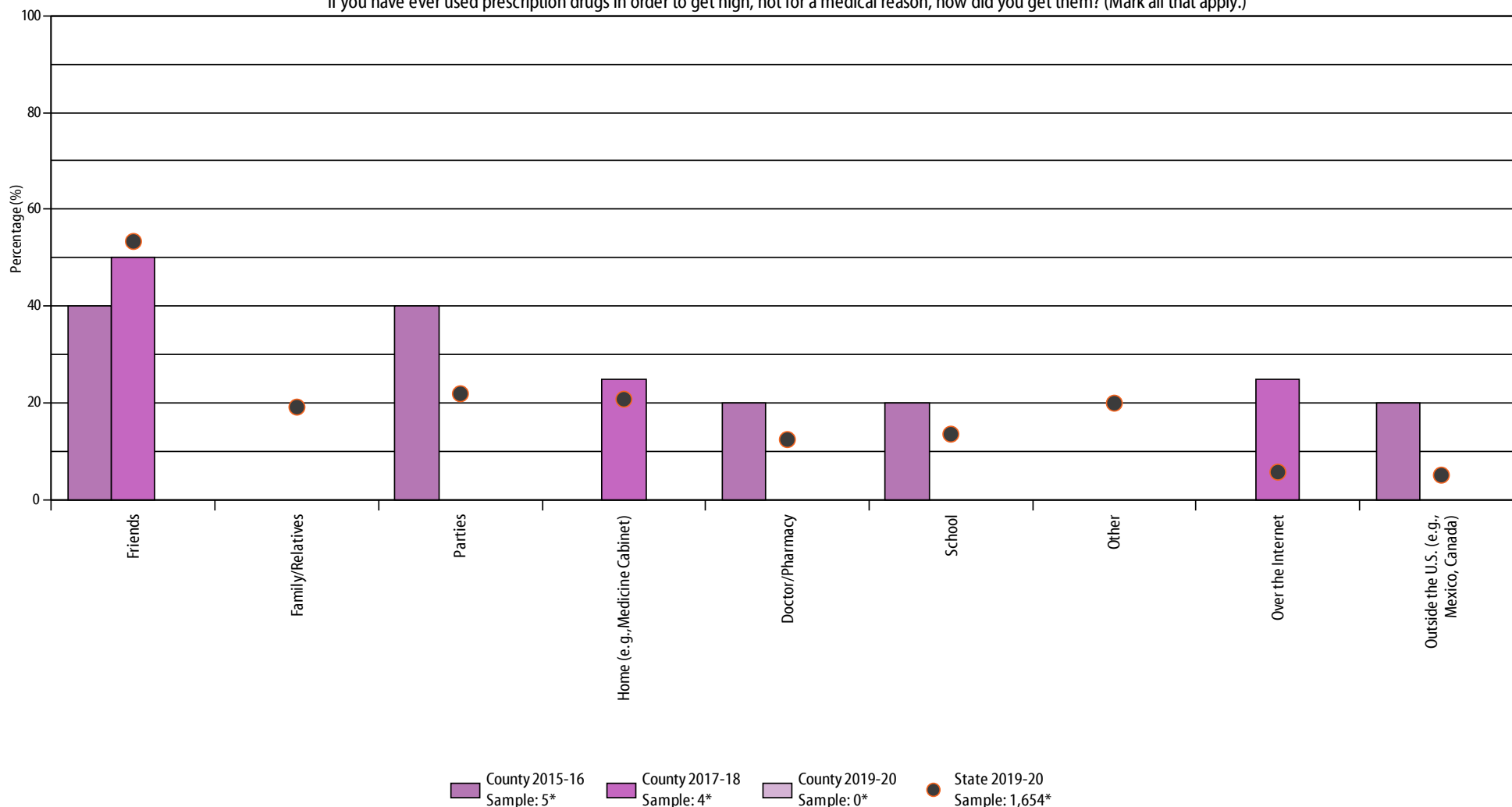


* Sample size represents the number of youth who obtained prescription drugs from at least one source. Students indicating they have never used prescription drugs to get high are not included in the sample. In the case of smaller sample sizes, caution should be exercised before generalizing results to the entire community.

Student prescription drug sources

Cotton County, School Year 2019-20, 10th grade

If you have ever used prescription drugs in order to get high, not for a medical reason, how did you get them? (Mark all that apply.)

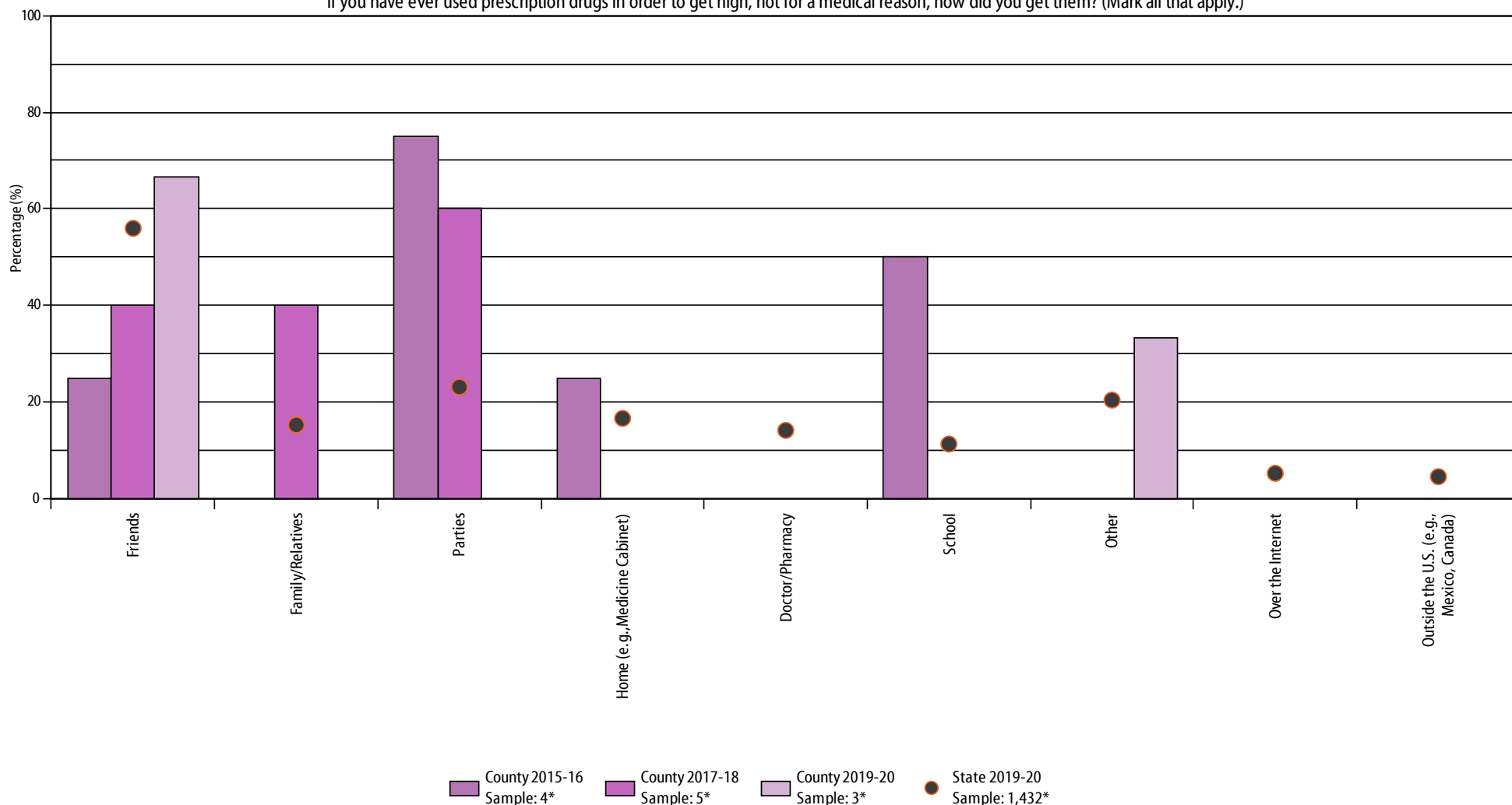


* Sample size represents the number of youth who obtained prescription drugs from at least one source. Students indicating they have never used prescription drugs to get high are not included in the sample. In the case of smaller sample sizes, caution should be exercised before generalizing results to the entire community.

Student prescription drug sources

Cotton County, School Year 2019-20, 12th grade

If you have ever used prescription drugs in order to get high, not for a medical reason, how did you get them? (Mark all that apply.)

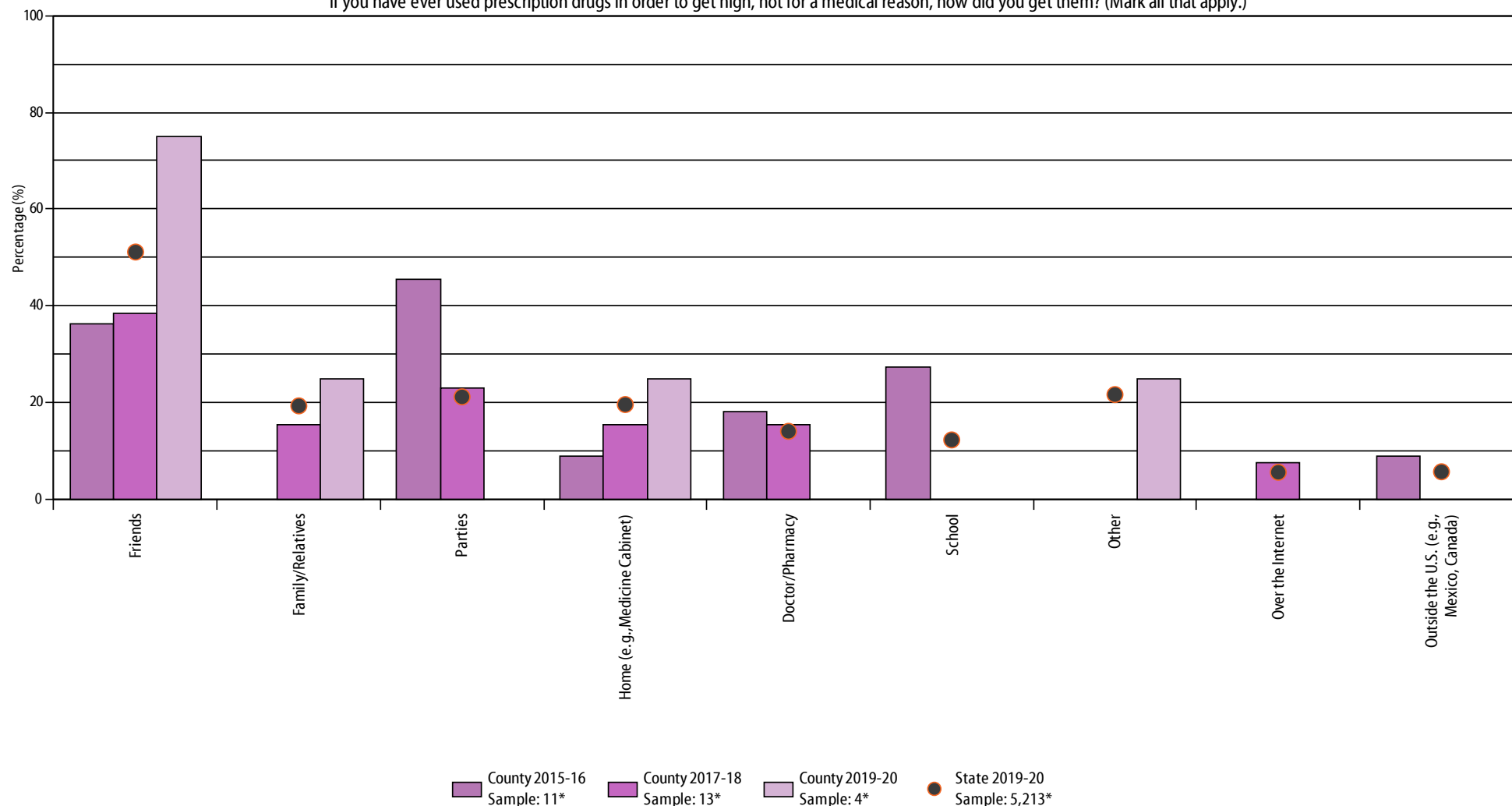


* Sample size represents the number of youth who obtained prescription drugs from at least one source. Students indicating they have never used prescription drugs to get high are not included in the sample. In the case of smaller sample sizes, caution should be exercised before generalizing results to the entire community.

Student prescription drug sources

Cotton County, School Year 2019-20, All grades

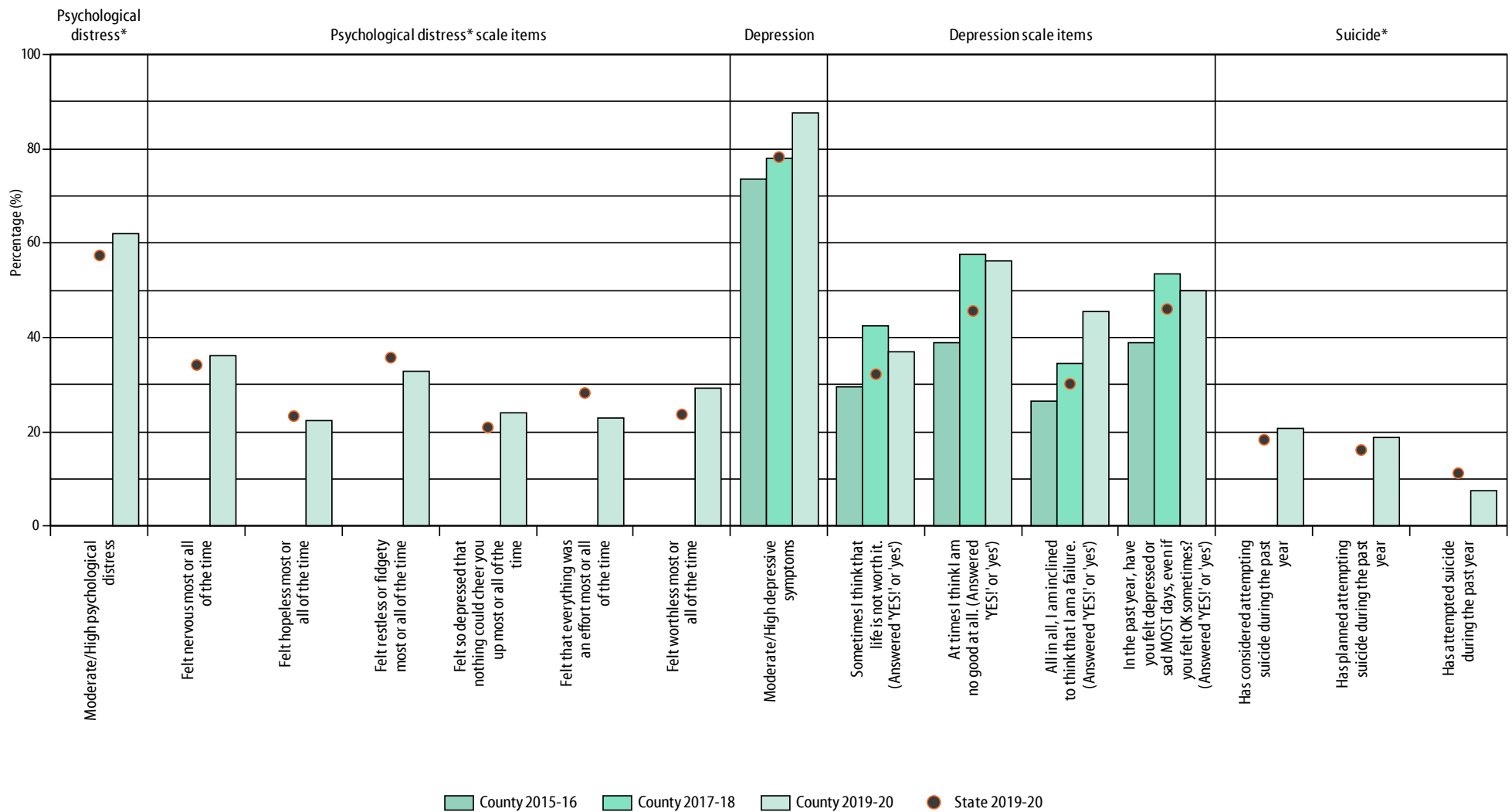
If you have ever used prescription drugs in order to get high, not for a medical reason, how did you get them? (Mark all that apply.)



* Sample size represents the number of youth who obtained prescription drugs from at least one source. Students indicating they have never used prescription drugs to get high are not included in the sample. In the case of smaller sample sizes, caution should be exercised before generalizing results to the entire community.

Mental health

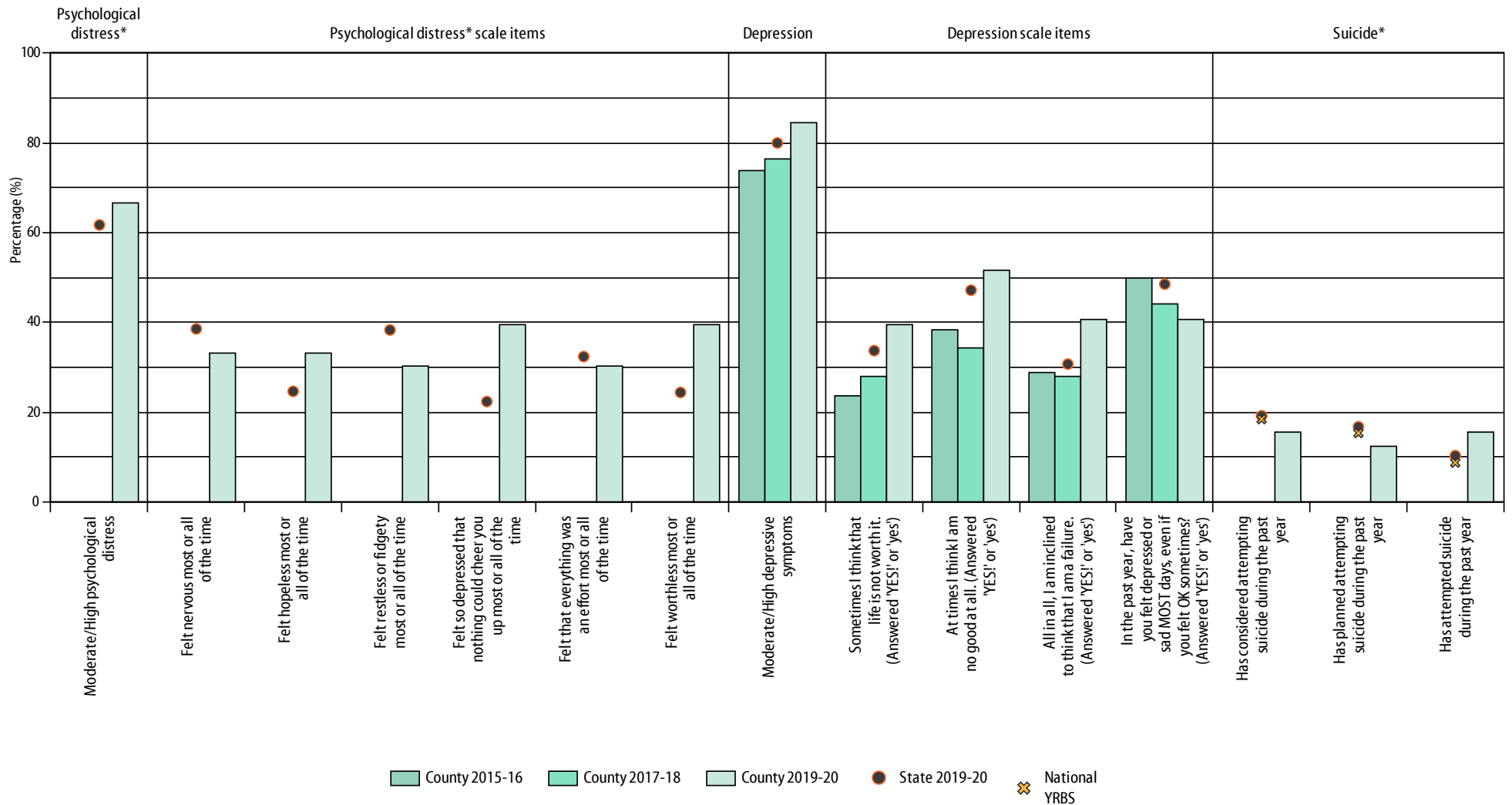
Cotton County, School Year 2019-20, 8th grade



* Psychological distress and suicide items were introduced in the school year 2017-2018 OPNA. During the 2017-2018 OPNA administration, some schools used the 2016 OPNA Survey instrument. As such, data from questions new to 2017-18 are unavailable for Cotton County for 2017-2018 administration reporting.

Mental health

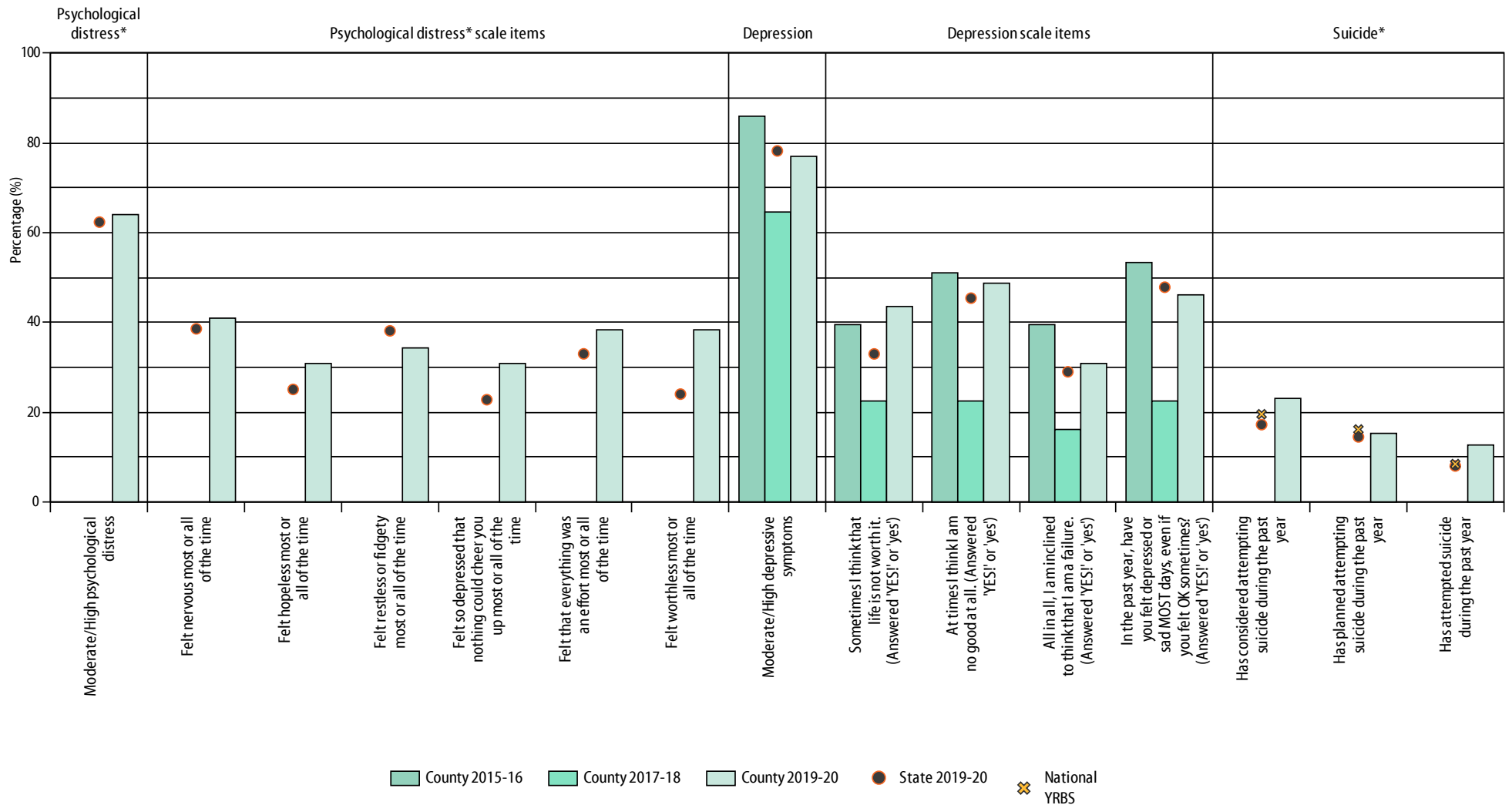
Cotton County, School Year 2019-20, 10th grade



* Psychological distress and suicide items were introduced in the school year 2017-2018 OPNA. During the 2017-2018 OPNA administration, some schools used the 2016 OPNA Survey instrument. As such, data from questions new to 2017-18 are unavailable for Cotton County for 2017-2018 administration reporting.

Mental health

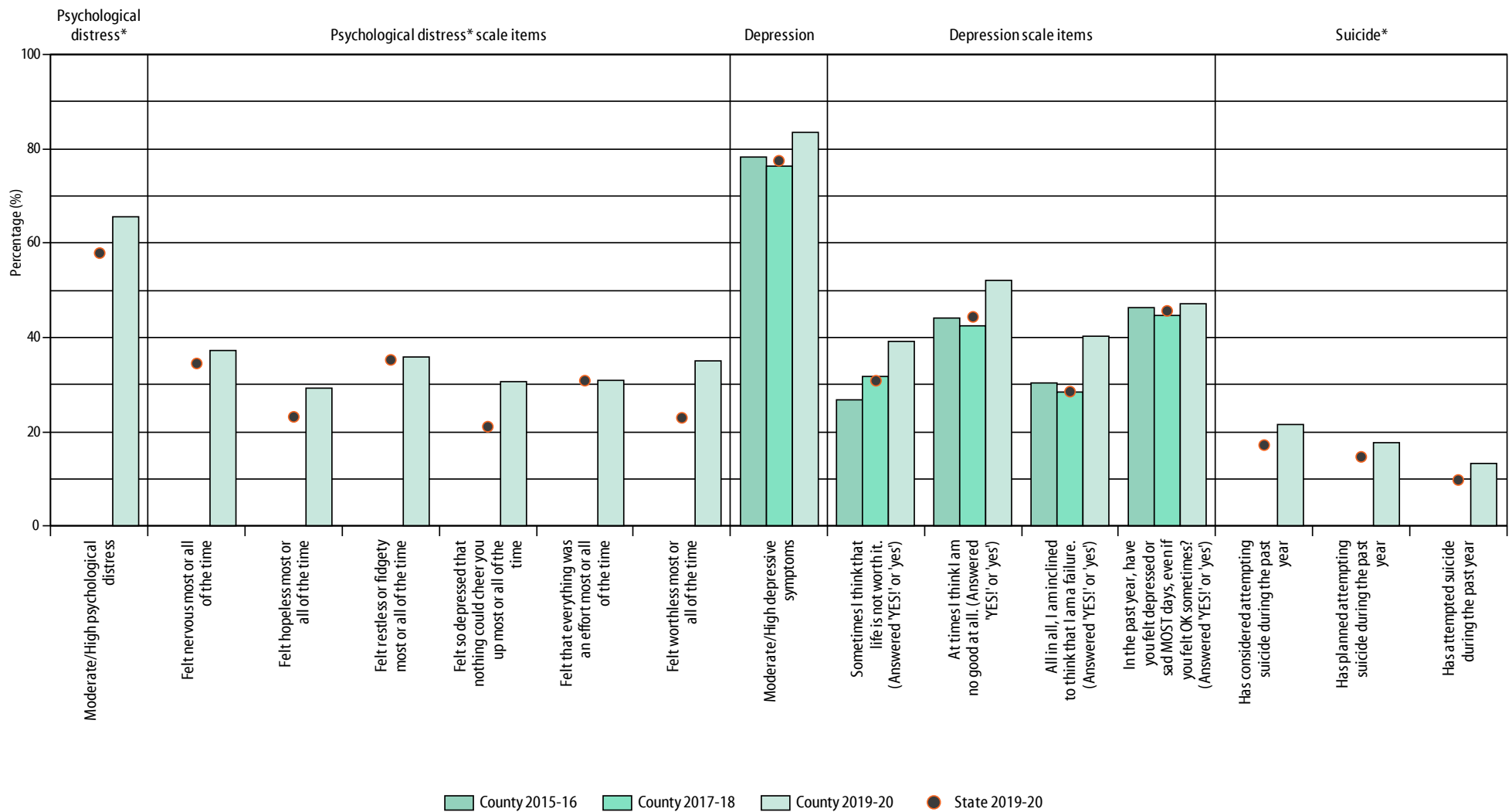
Cotton County, School Year 2019-20, 12th grade



* Psychological distress and suicide items were introduced in the school year 2017-2018 OPNA. During the 2017-2018 OPNA administration, some schools used the 2016 OPNA Survey instrument. As such, data from questions new to 2017-18 are unavailable for Cotton County for 2017-2018 administration reporting.

Mental health

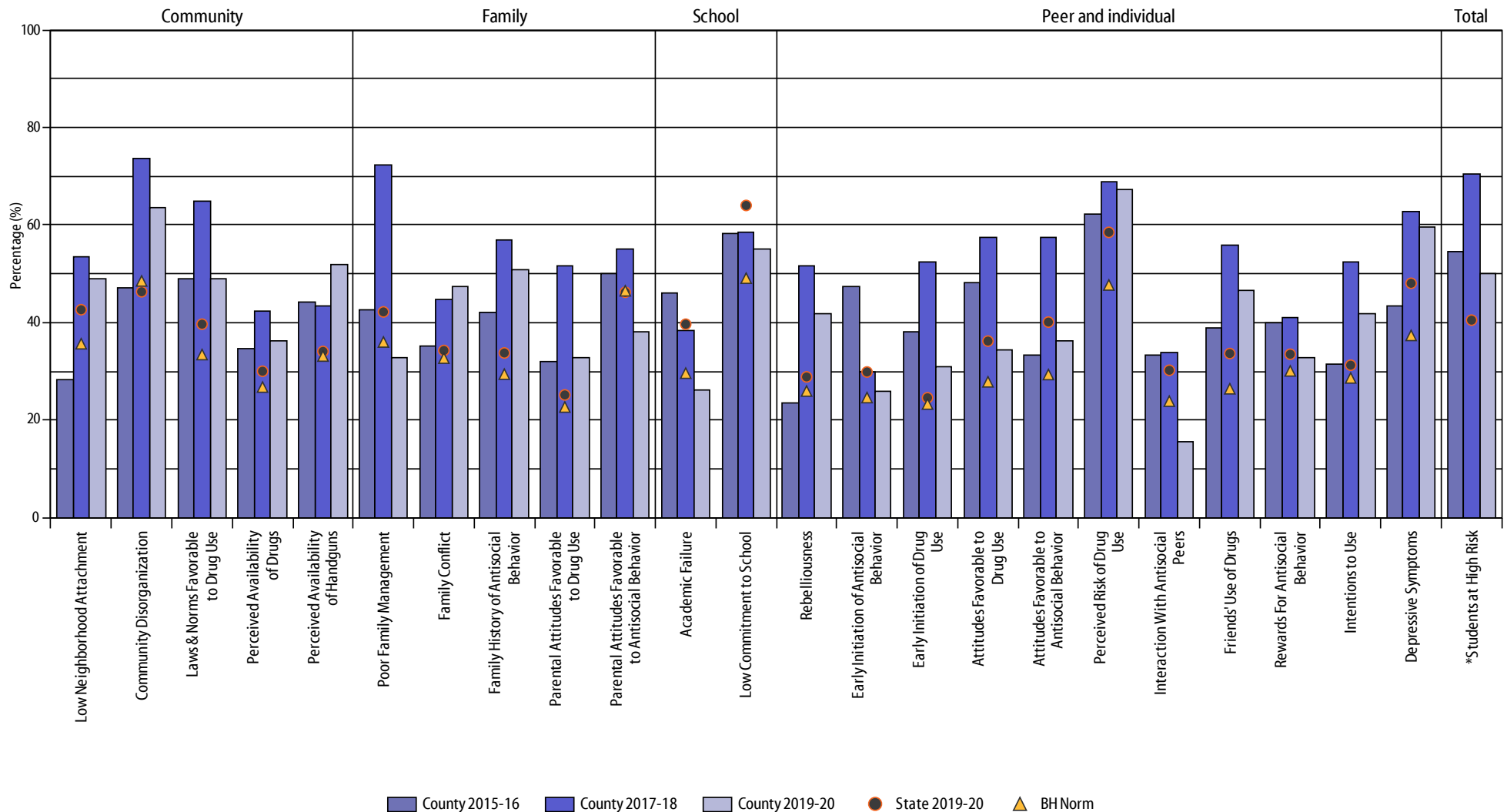
Cotton County, School Year 2019-20, All grades



* Psychological distress and suicide items were introduced in the school year 2017-2018 OPNA. During the 2017-2018 OPNA administration, some schools used the 2016 OPNA Survey instrument. As such, data from questions new to 2017-18 are unavailable for Cotton County for 2017-2018 administration reporting.

Student risk profile

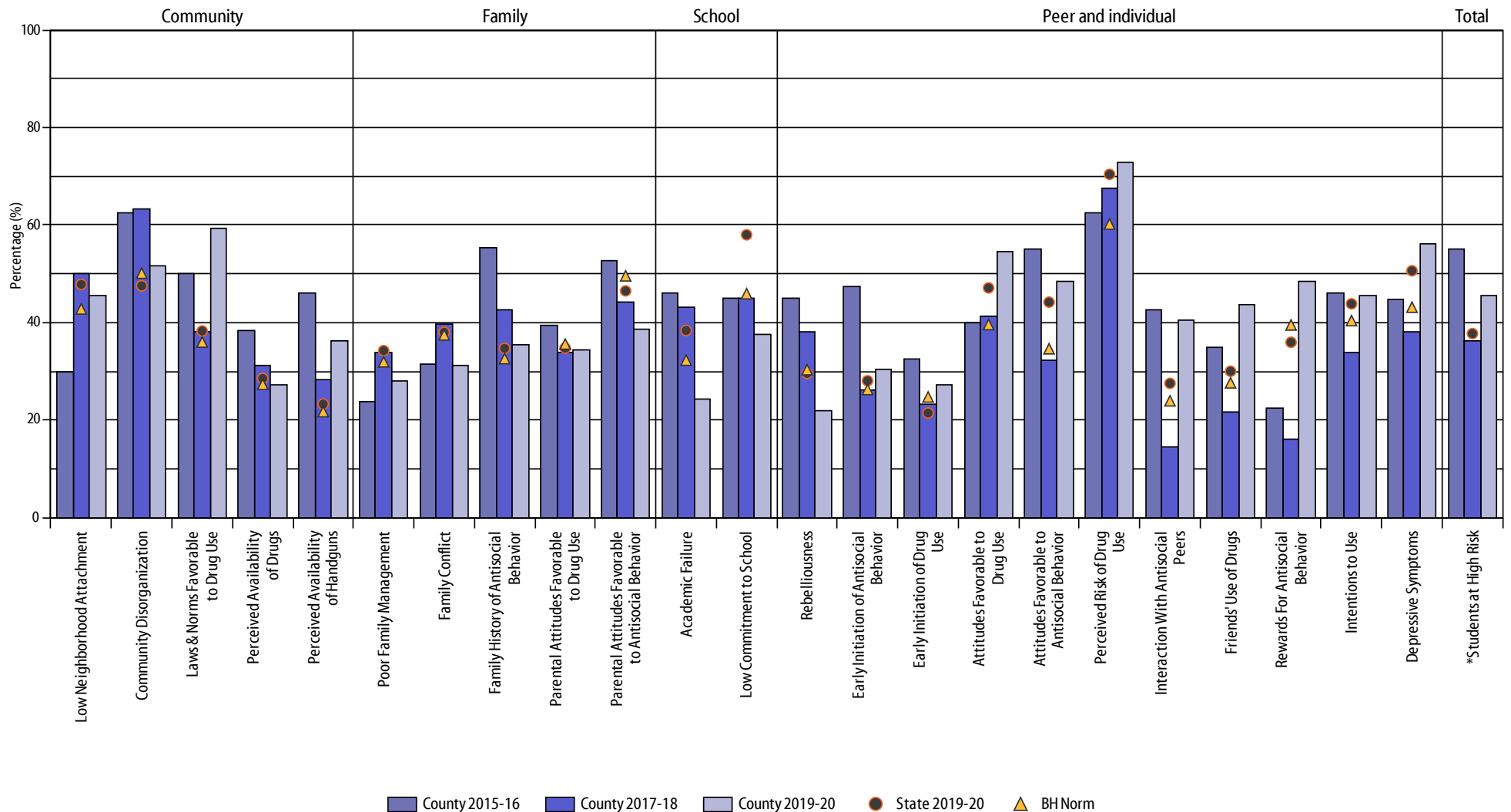
Cotton County, School Year 2019-20, 8th grade



* 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.) BH Norm data on High Risk youth are not available due to state-by-state differences in calculation methodology.

Student risk profile

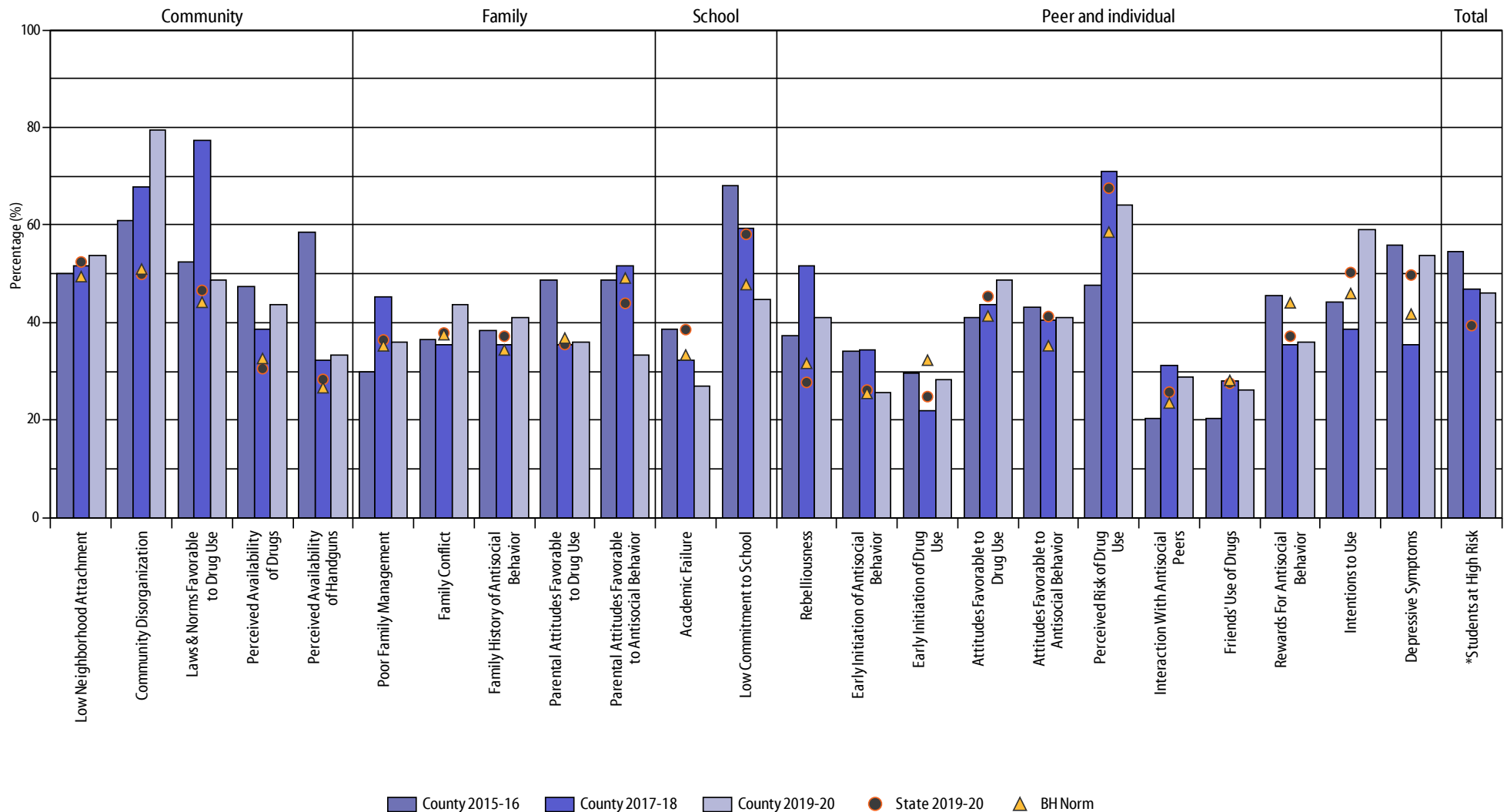
Cotton County, School Year 2019-20, 10th grade



* 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.) BH Norm data on High Risk youth are not available due to state-by-state differences in calculation methodology.

Student risk profile

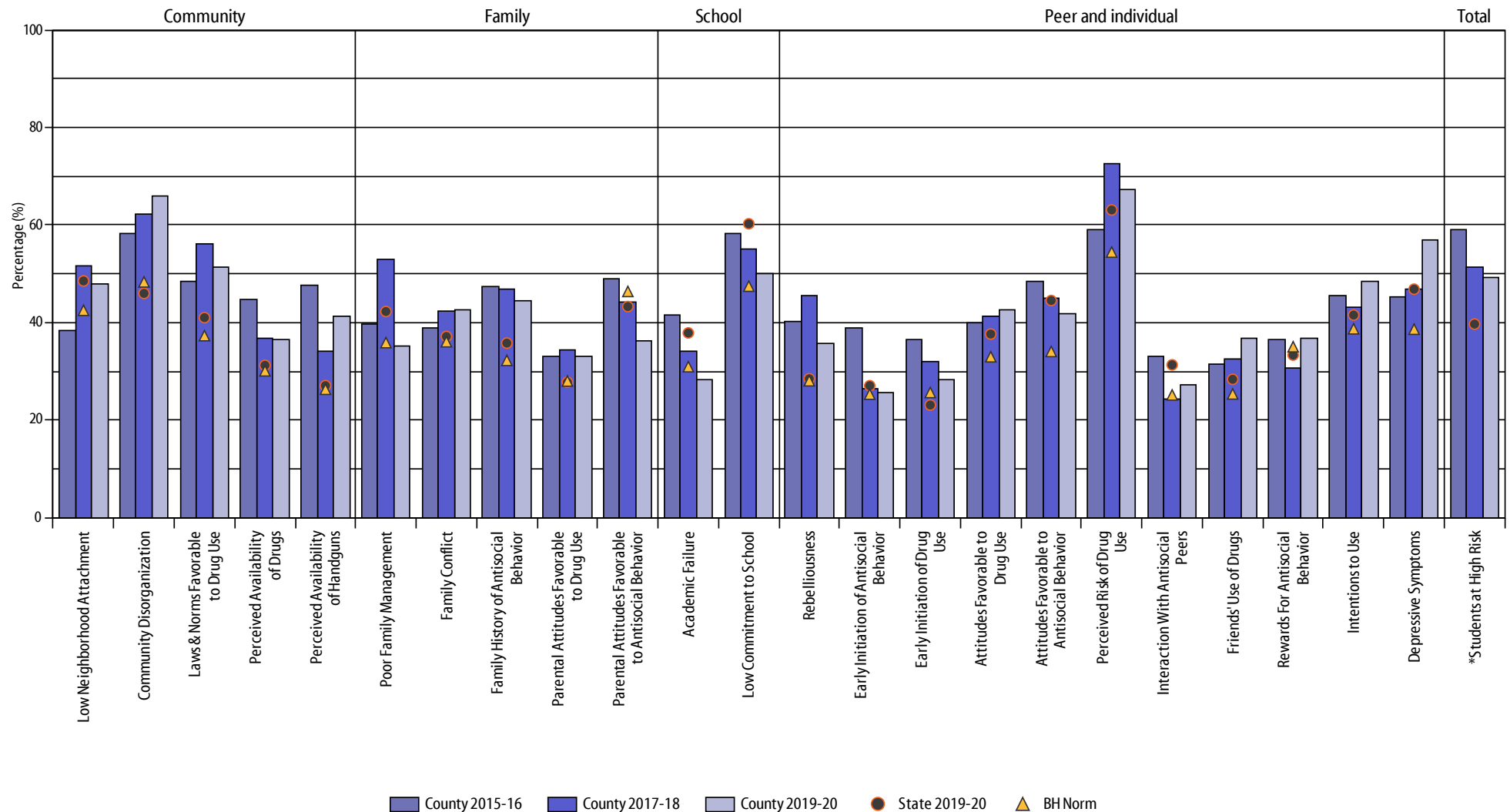
Cotton County, School Year 2019-20, 12th grade



* 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.) BH Norm data on High Risk youth are not available due to state-by-state differences in calculation methodology.

Student risk profile

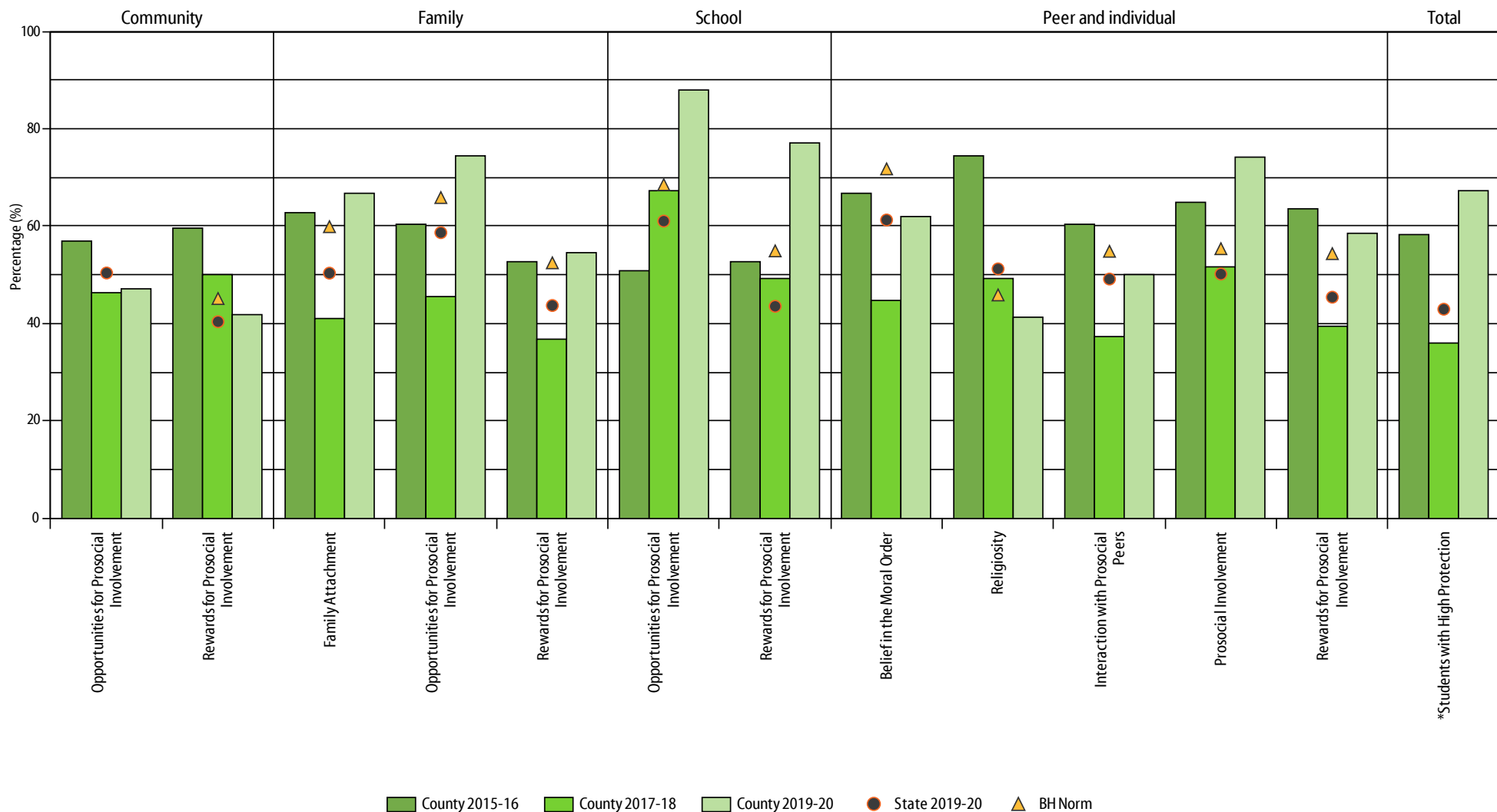
Cotton County, School Year 2019-20, All grades



* 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.) BH Norm data on High Risk youth are not available due to state-by-state differences in calculation methodology.

Student protective profile

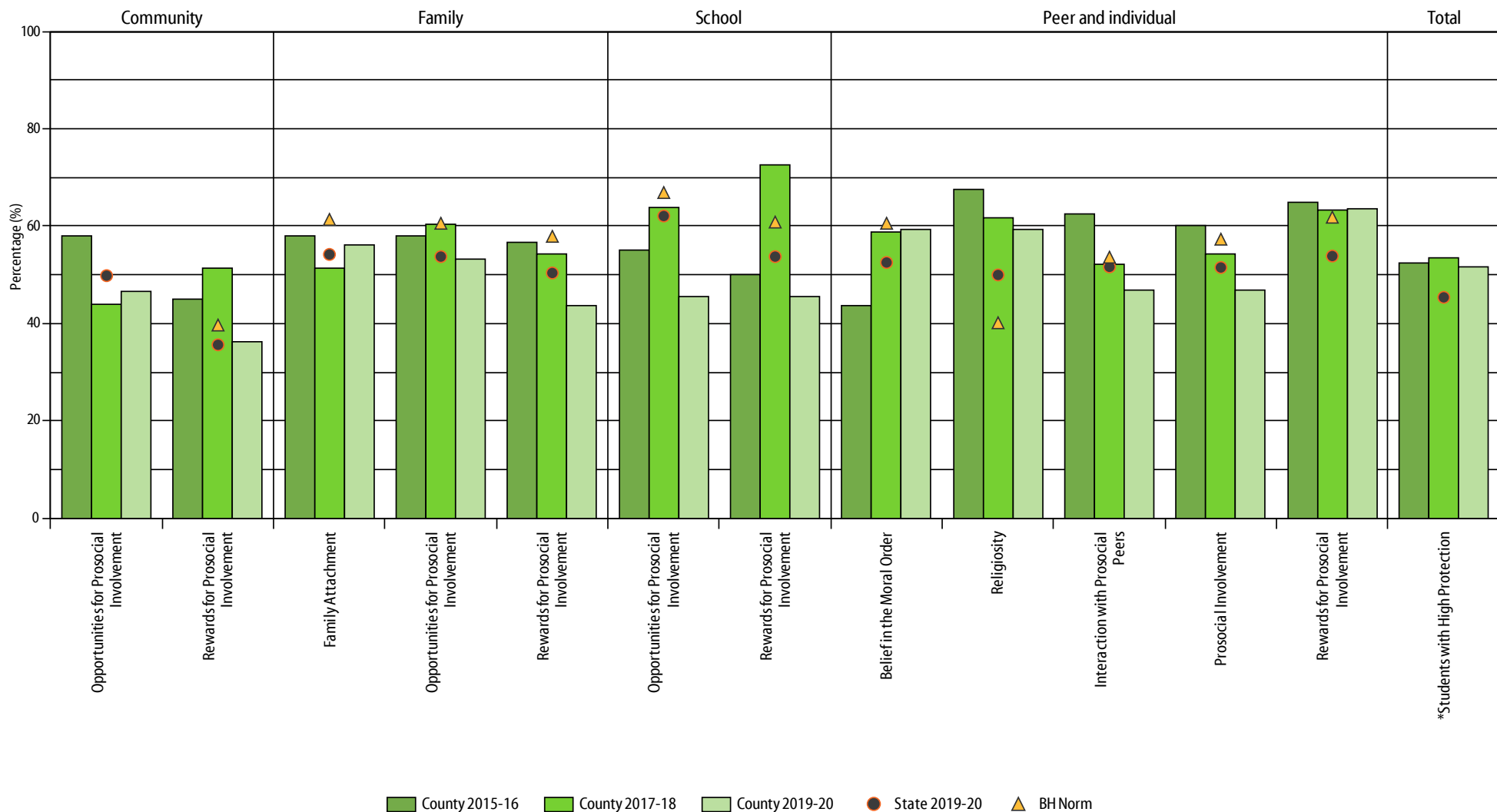
Cotton County, School Year 2019-20, 8th grade



* 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 and 12th grades: 5 or more protective factors.) BH Norm data on High Protection youth are not available due to state-by-state differences in calculation methodology.

Student protective profile

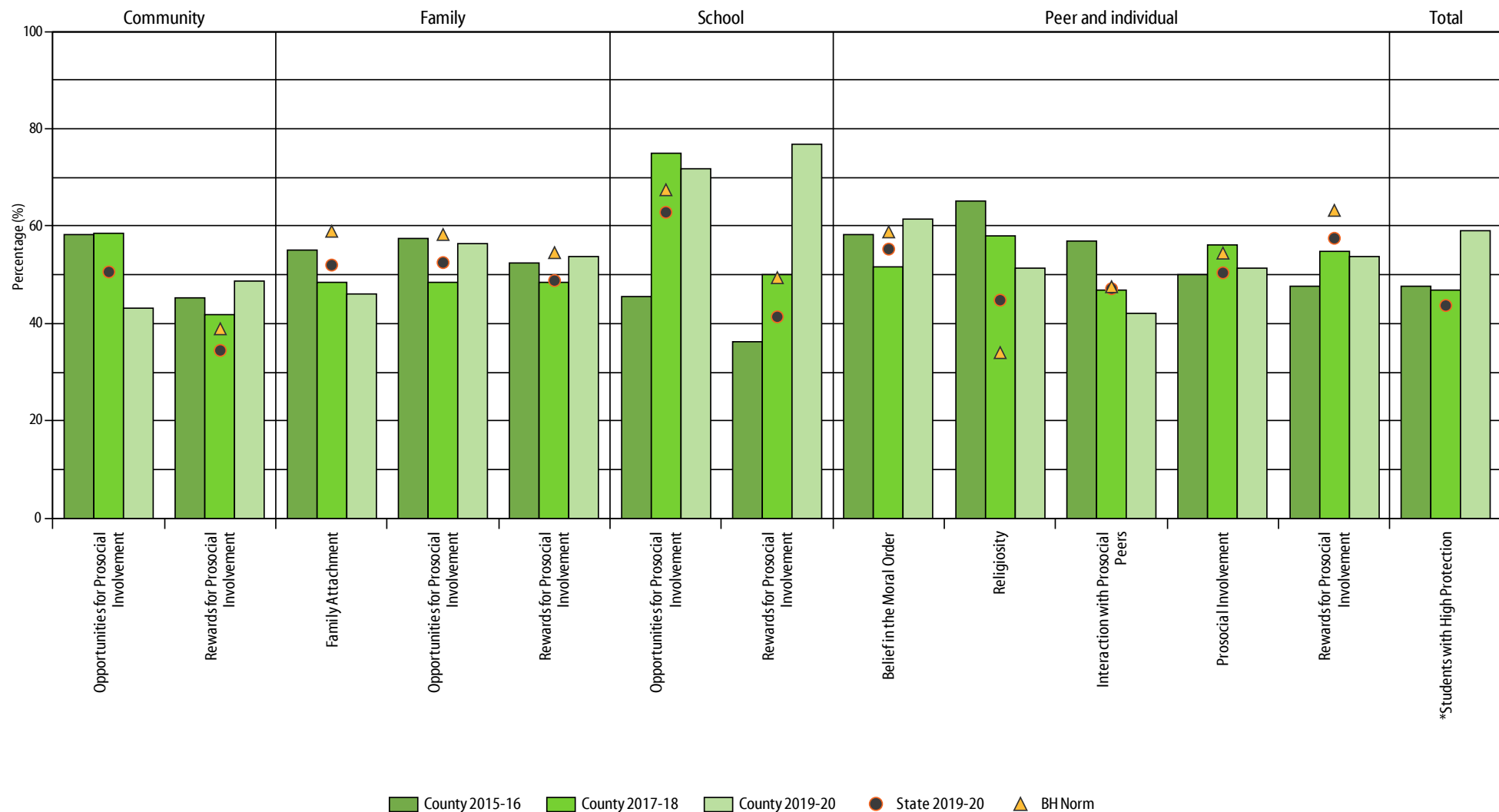
Cotton County, School Year 2019-20, 10th grade



* 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 and 12th grades: 5 or more protective factors.) BH Norm data on High Protection youth are not available due to state-by-state differences in calculation methodology.

Student protective profile

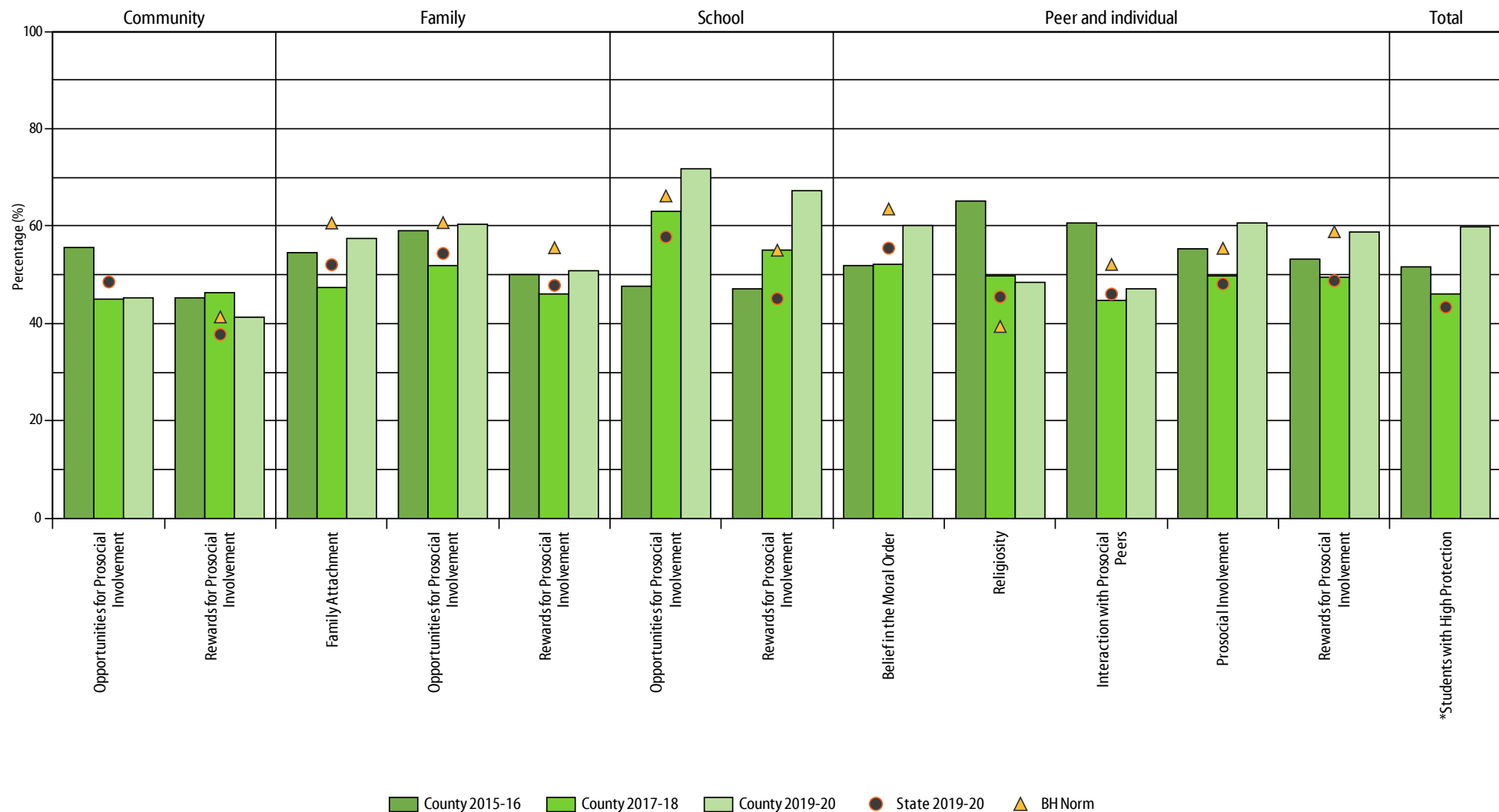
Cotton County, School Year 2019-20, 12th grade



* 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 and 12th grades: 5 or more protective factors.) BH Norm data on High Protection youth are not available due to state-by-state differences in calculation methodology.

Student protective profile

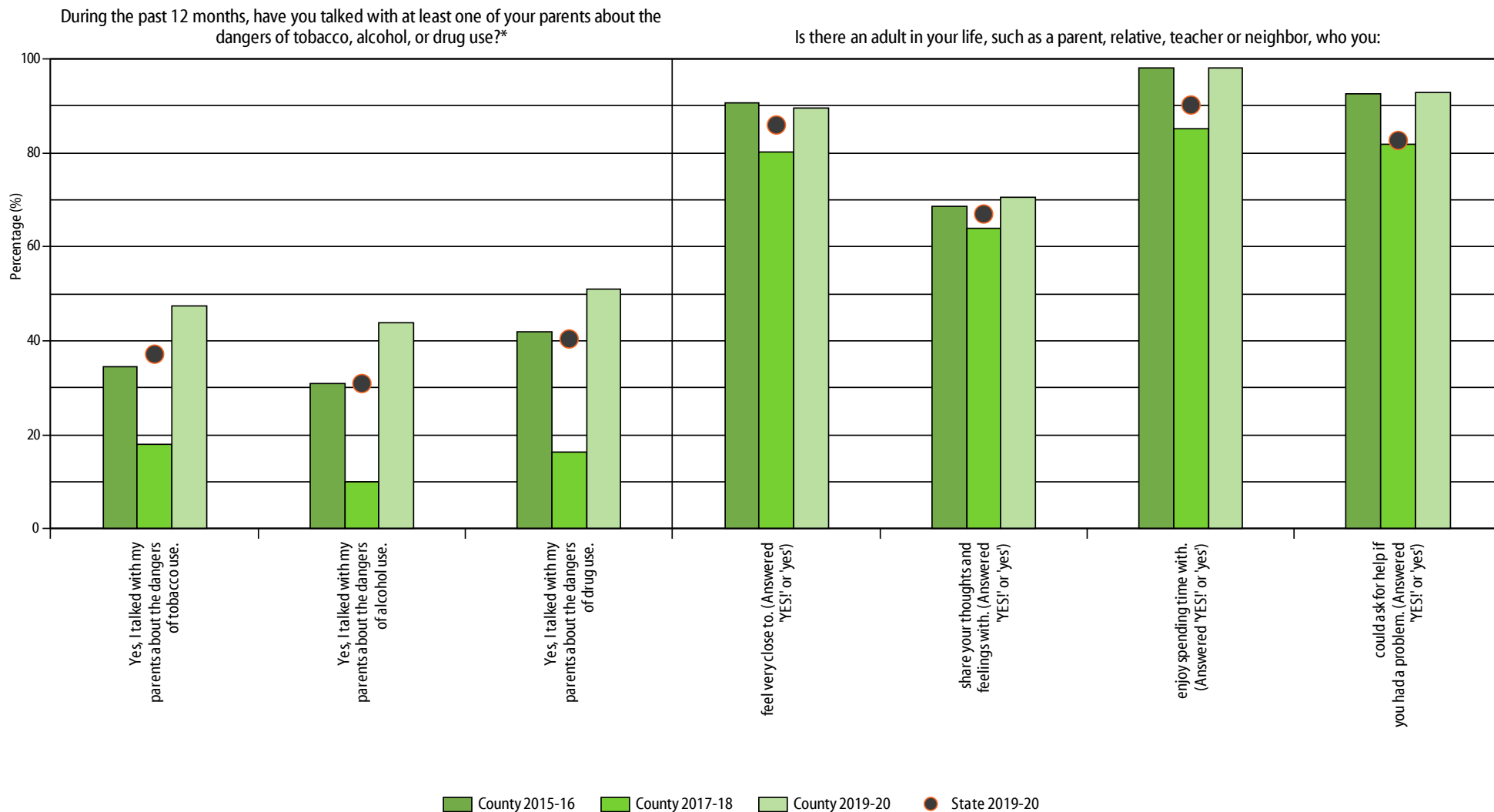
Cotton County, School Year 2019-20, All grades



* 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 and 12th grades: 5 or more protective factors.) BH Norm data on High Protection youth are not available due to state-by-state differences in calculation methodology.

Communication with adults

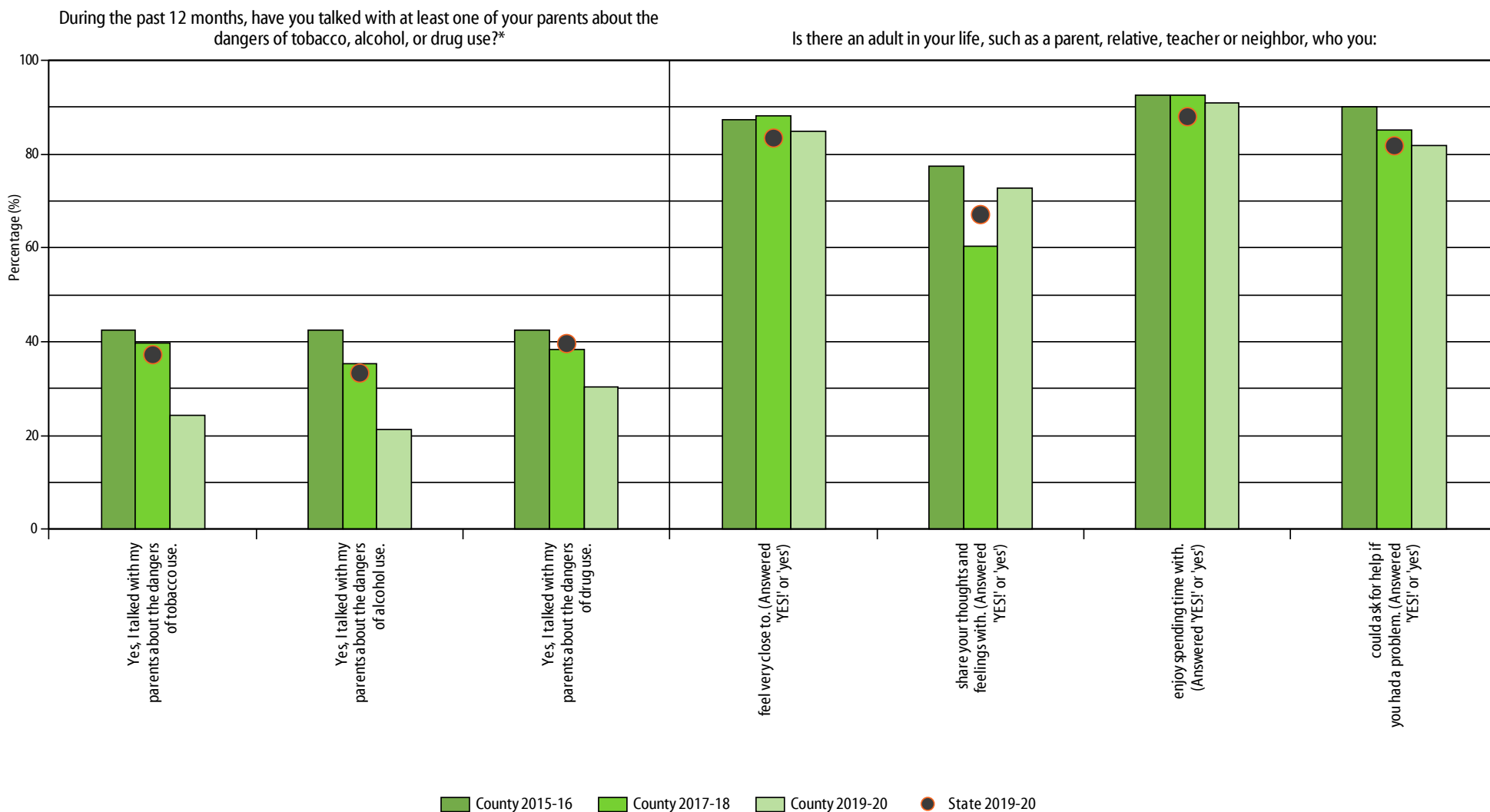
Cotton County, School Year 2019-20, 8th grade



* Due to a coding error in the web survey, online data for the school year 2015-16 are not available for the parental communication item. Reported data for this school year are from the paper survey only. If no data from the paper survey are available for school year 2015-16, data will be absent from the chart.

Communication with adults

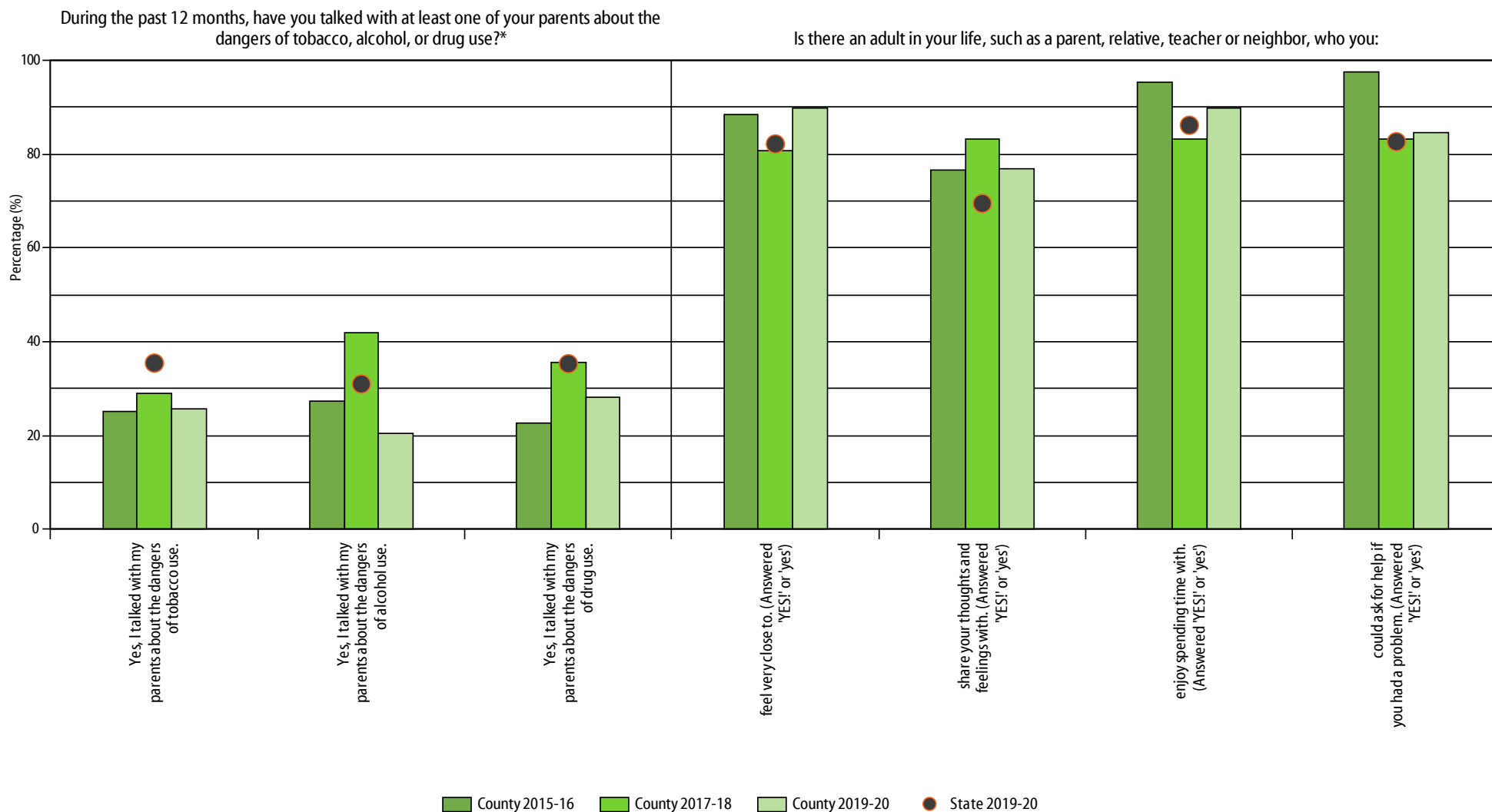
Cotton County, School Year 2019-20, 10th grade



* Due to a coding error in the web survey, online data for the school year 2015-16 are not available for the parental communication item. Reported data for this school year are from the paper survey only. If no data from the paper survey are available for school year 2015-16, data will be absent from the chart.

Communication with adults

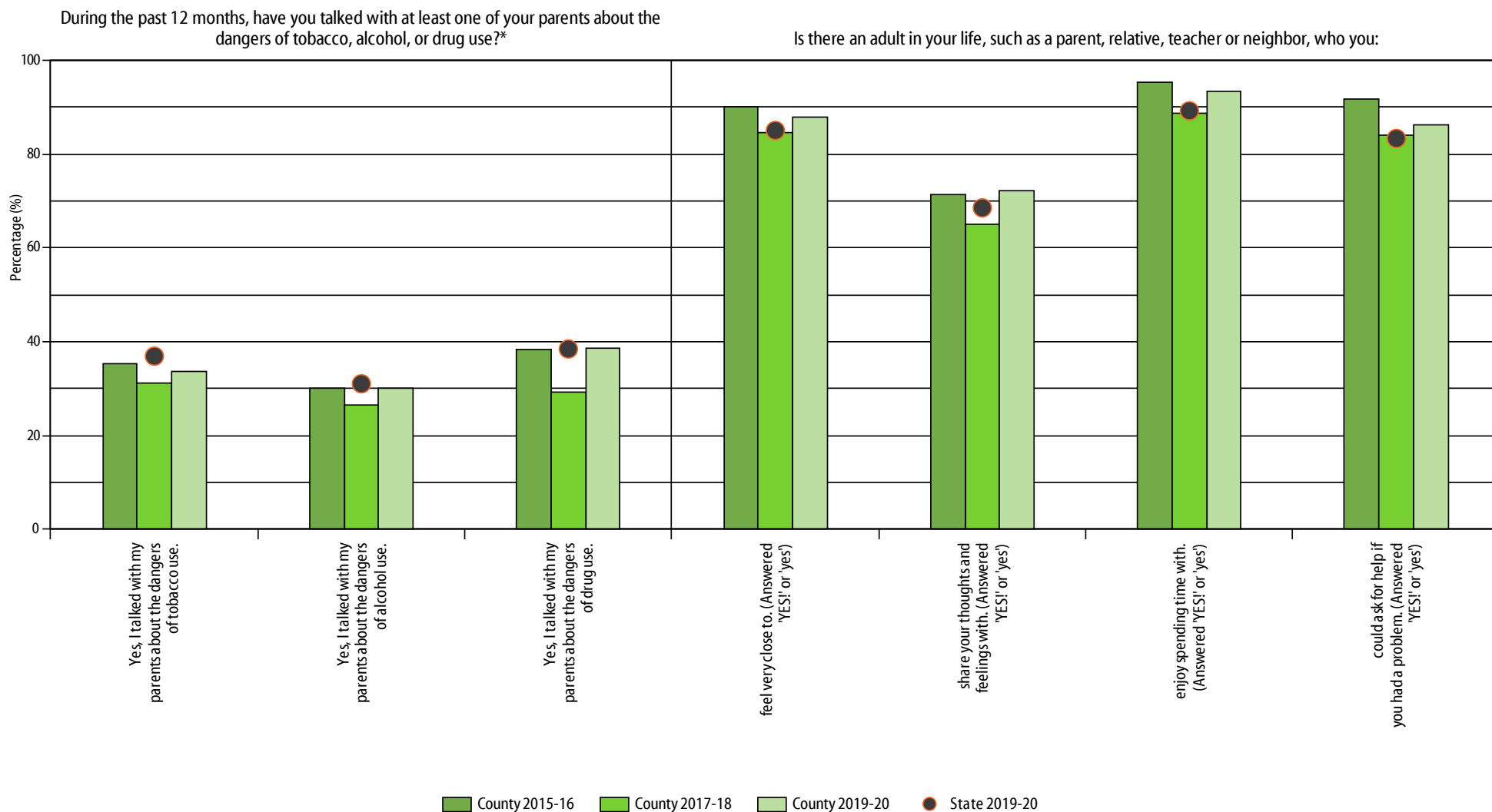
Cotton County, School Year 2019-20, 12th grade



* Due to a coding error in the web survey, online data for the school year 2015-16 are not available for the parental communication item. Reported data for this school year are from the paper survey only. If no data from the paper survey are available for school year 2015-16, data will be absent from the chart.

Communication with adults

Cotton County, School Year 2019-20, All grades



* Due to a coding error in the web survey, online data for the school year 2015-16 are not available for the parental communication item. Reported data for this school year are from the paper survey only. If no data from the paper survey are available for school year 2015-16, data will be absent from the chart.

Risk and protective scale definitions

Table 4. 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.
Community Disorganization	Research has shown that neighborhoods with high population density, lack of natural surveillance of public places, physical deterioration and high rates of adult crime also have higher rates 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	
Opportunities for Prosocial Involvement	When opportunities are available in a community for positive participation, children are less likely to engage in substance use and other problem behaviors.
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 school (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.

Risk and protective scale definitions

Table 4. 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 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 variety of problem behaviors, including drug use.
Sensation Seeking	Young people who seek out opportunities for dangerous, risky behavior in general are at higher risk for participating in drug use and other problem behaviors.
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.
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.

Data tables

Table 5. Percentage of students who used ATODs during their lifetime*

How old were you when you first/ Have you ever/ In your lifetime, on how many occasions (if any) have you/ How frequently have you... (One or more occasions.)		8th grade					10th grade					12th grade					All grades				
		County 2015-16	County 2017-18	County 2019-20	State 2019-20	MTF 2019	County 2015-16	County 2017-18	County 2019-20	State 2019-20	MTF 2019	County 2015-16	County 2017-18	County 2019-20	State 2019-20	MTF 2019	County 2015-16	County 2017-18	County 2019-20	State 2019-20	MTF 2019
Alcohol	had alcoholic beverages (beer, wine or hard liquor) to drink - more than just a few sips?	41.8	65.5	37.9	33.3	24.5	62.5	53.6	63.6	47.4	43.1	65.1	62.5	71.8	59.2	58.5	47.2	47.9	51.1	39.1	n/a
Cigarette	smoked a cigarette, even just a puff?	27.8	25.4	39.7	13.7	10.0	32.5	20.6	30.3	19.5	14.2	39.5	34.4	41.0	28.1	22.3	29.3	19.6	36.2	16.7	n/a
Marijuana	smoked marijuana?	9.1	27.6	10.5	13.4	15.2	32.5	29.0	39.4	27.2	34.0	30.2	28.1	41.0	39.3	43.7	17.1	21.0	25.0	20.2	n/a
Methamphetamine	used methamphetamines (meth, crystal meth)?	0.0	0.0	0.0	0.7	0.9	0.0	0.0	3.0	1.1	0.7	0.0	3.1	12.8	1.2	0.8	0.0	0.5	4.3	0.9	n/a
Heroin	used heroin?	0.0	0.0	0.0	0.5	0.7	0.0	0.0	3.0	0.8	0.4	0.0	0.0	5.1	0.9	0.6	0.0	0.0	2.8	0.7	n/a
Prescription Pain Relievers**	used prescription pain relievers (such as Vicodin, OxyContin, Percocet, or Codeine) without a doctor telling you to take them?	1.9	n/a	5.2	5.1	n/a	10.0	n/a	9.1	6.1	n/a	7.0	n/a	2.6	8.0	5.3	4.7	n/a	5.7	5.5	n/a
Prescription Stimulants	used prescription stimulants (such as Ritalin, Adderall, or Dexedrine) without a doctor telling you to take them?	0.0	n/a	0.0	3.2	6.8	5.0	n/a	3.0	4.3	8.2	2.3	n/a	2.6	6.0	7.7	1.6	n/a	2.1	3.8	n/a
Prescription Sedatives**	used prescription sedatives (tranquilizers, such as Valium or Xanax, barbiturates, or sleeping pills) without a doctor telling you to take them?	0.0	n/a	8.6	6.6	n/a	7.5	n/a	3.0	7.3	n/a	7.0	n/a	7.7	8.0	4.2	4.7	n/a	7.1	6.8	n/a
Prescription Drugs**	combined results of prescription stimulant, sedative and pain reliever questions (see appendix for details)	1.8	n/a	10.3	9.8	n/a	15.0	n/a	12.1	10.8	n/a	7.0	n/a	7.7	12.4	14.6	7.3	n/a	10.6	10.2	n/a
Over-the-Counter Drugs**	used over-the-counter drugs (such as cough syrup, cold medicine, or diet pills) for the purposes of getting high?	5.5	n/a	5.2	6.8	n/a	10.0	n/a	9.1	7.6	n/a	9.3	n/a	5.3	6.9	n/a	6.2	n/a	7.2	6.6	n/a

* OPNA lifetime use is calculated differently than previous years. Beginning in school year 2017-18, age of first use became the new basis for calculating lifetime use for substances other than alcohol. See text for a detailed explanation. However, during the 2017-18 administration, some schools in Cotton County used the 2015-16 OPNA Survey instrument, so lifetime use continued to be calculated using number of occasions for these schools in 2017-18.

** No equivalent category for these substances in the Monitoring the Future survey. MTF does not release current prescription pain reliever, sedative, or overall prescription drug data for grades 8 and 10. MTF data are not available for grade 6 or all grades combined.

Data tables

Table 6. 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.)		8th grade					10th grade					12th grade					All grades				
		County 2015-16	County 2017-18	County 2019-20	State 2019-20	MTF 2019	County 2015-16	County 2017-18	County 2019-20	State 2019-20	MTF 2019	County 2015-16	County 2017-18	County 2019-20	State 2019-20	MTF 2019	County 2015-16	County 2017-18	County 2019-20	State 2019-20	MTF 2019
Alcohol	had beer, wine, or hard liquor to drink?	20.0	29.8	13.8	13.6	7.9	42.5	20.6	27.3	22.1	18.4	34.9	43.8	35.9	31.9	29.3	24.4	21.2	22.7	18.0	n/a
Cigarette	smoked cigarettes?	1.9	8.8	6.9	2.7	2.3	17.5	5.9	6.1	4.3	3.4	16.3	16.1	5.1	6.3	5.7	8.4	6.5	5.8	3.5	n/a
Chewing tobacco	used smokeless tobacco?	11.3	8.6	1.7	4.4	2.5	20.0	8.8	3.0	7.0	3.2	23.3	6.5	7.7	10.6	3.5	12.6	6.1	3.6	5.8	n/a
Marijuana	used marijuana?	1.9	15.8	6.9	6.6	6.6	10.0	11.8	9.1	14.0	18.4	4.7	9.4	15.4	19.8	22.3	3.6	9.7	9.2	10.1	n/a
Cocaine	used cocaine or crack?	0.0	0.0	0.0	0.4	0.3	0.0	0.0	0.0	0.5	0.6	0.0	0.0	0.0	0.6	1.0	0.5	0.0	0.0	0.4	n/a
Inhalants	sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high?	3.7	1.8	0.0	3.4	2.1	2.5	2.9	0.0	1.7	1.1	0.0	0.0	0.0	0.8	0.9	2.6	2.8	0.7	2.3	n/a
Methamphetamine	used methamphetamines (meth, crystal meth)?	0.0	0.0	0.0	0.1	0.1	0.0	0.0	0.0	0.1	0.3	0.0	0.0	2.6	0.1	0.3	0.0	0.0	0.7	0.1	n/a
Heroin	used heroin?	0.0	0.0	0.0	0.1	0.1	0.0	0.0	0.0	0.1	0.2	0.0	0.0	0.0	0.1	0.3	0.0	0.0	0.7	0.1	n/a
Prescription Pain Relievers*	used prescription pain relievers (such as Vicodin, OxyContin, Percocet, or Codeine) without a doctor telling you to take them?	1.9	3.5	0.0	1.8	n/a	0.0	1.5	0.0	2.0	n/a	2.3	3.1	0.0	1.8	1.0	1.0	3.2	0.0	1.6	n/a
Prescription Stimulants	used prescription stimulants (such as Ritalin, Adderall, or Dexedrine) without a doctor telling you to take them?	0.0	0.0	0.0	0.9	2.2	2.5	0.0	0.0	1.2	2.4	2.3	0.0	0.0	1.3	2.0	1.0	0.0	0.0	0.9	n/a
Prescription Sedatives*	used prescription sedatives (tranquilizers, such as Valium or Xanax, barbiturates, or sleeping pills) without a doctor telling you to take them?	0.0	5.2	3.4	2.3	n/a	5.1	1.5	0.0	2.2	n/a	2.3	0.0	2.6	2.0	1.2	2.1	2.8	2.1	2.0	n/a
Prescription Drugs*	combined results of prescription stimulant, sedative and pain reliever questions (see appendix for details)	1.8	5.2	3.4	3.6	n/a	5.0	2.9	0.0	3.7	n/a	2.3	3.1	2.6	3.4	3.6	2.6	4.6	2.1	3.2	n/a
Over-the-Counter Drugs*	used over-the-counter drugs (such as cough syrup, cold medicine, or diet pills) for the purposes of getting high?	3.6	6.9	0.0	2.5	n/a	2.5	1.5	0.0	2.4	n/a	2.3	3.1	2.6	1.3	n/a	2.6	3.2	0.7	2.0	n/a

* No equivalent category for these substances in the Monitoring the Future survey. MTF does not release current prescription pain reliever, sedative, or overall prescription drug data for grades 8 and 10. Monitoring the Future survey data are not available for grade 6 or all grades combined.

Data tables

Table 7. Percentage of students with problem ATOD use

Alcohol and driving																					
During the past 30 days, how many times did you: (One or more times)		8th grade					10th grade					12th grade					All grades				
		County 2015-16	County 2017-18	County 2019-20	State 2019-20	BH Norm	County 2015-16	County 2017-18	County 2019-20	State 2019-20	BH Norm	County 2015-16	County 2017-18	County 2019-20	State 2019-20	BH Norm	County 2015-16	County 2017-18	County 2019-20	State 2019-20	BH Norm
DRIVE a car when you had been drinking alcohol?	Drinking and driving	0.0	9.8	0.0	1.7	2.3	8.1	1.5	0.0	2.4	3.5	18.6	3.2	5.4	5.0	7.5	6.4	4.1	1.5	2.5	3.9
RIDE in a car driven by someone drinking alcohol?	Riding with a drinking driver	16.4	31.1	27.6	16.8	17.8	20.0	11.8	9.1	14.1	17.8	20.9	22.6	16.2	12.3	17.8	19.6	18.8	19.7	14.6	16.7
Problem Use																					
		County 2015-16	County 2017-18	County 2019-20	State 2019-20	MTF 2019	County 2015-16	County 2017-18	County 2019-20	State 2019-20	MTF 2019	County 2015-16	County 2017-18	County 2019-20	State 2019-20	MTF 2019	County 2015-16	County 2017-18	County 2019-20	State 2019-20	MTF 2019
How many times have you had 5 or more alcoholic drinks in a row in the past 2 weeks? (One or more times)	Binge drinking	7.4	22.0	3.4	7.2	3.8	27.5	10.3	9.1	11.2	8.5	20.9	29.0	23.1	17.4	14.4	13.6	13.9	9.9	9.5	n/a
During the past 30 days, how many cigarettes did you smoke per day? (11 to 20 cigarettes, More than 20 cigarettes)	1/2 Pack of cigarettes/day	0.0	0.0	1.7	0.3	0.2	2.5	0.0	0.0	0.7	0.5	0.0	6.5	0.0	1.2	0.9	1.0	0.9	0.7	0.6	n/a
Treatment Needs*																					
Students who have used alcohol on 10 or more occasions in their lifetime or used any drugs in their lifetime and marked 3 or more of the following 6 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 feelings such as sadness, anger, or boredom.	Needs Alcohol Treatment	0.0	1.6	1.7	1.7	n/a	2.5	1.5	0.0	3.5	n/a	2.3	9.7	10.3	5.3	n/a	1.0	2.3	3.5	2.6	n/a
	Needs Drug Treatment	0.0	3.3	3.5	3.7	n/a	10.0	0.0	3.2	6.8	n/a	2.3	0.0	16.7	7.9	n/a	2.6	0.9	7.4	4.7	n/a
	Needs Alcohol and/or Drug Treatment	0.0	3.3	5.3	4.6	n/a	12.5	1.5	3.2	8.6	n/a	4.5	9.7	22.2	11.0	n/a	3.6	2.8	9.6	6.1	n/a

* No equivalent category for Treatment Needs in Bach Harrison Norm or Monitoring the Future data.

Table 8. Percentage of students with antisocial behavior

How many times in the past year (12 months) have you: (One or more times)	8th grade					10th grade					12th grade					All grades				
	County 2015-16	County 2017-18	County 2019-20	State 2019-20	BH Norm	County 2015-16	County 2017-18	County 2019-20	State 2019-20	BH Norm	County 2015-16	County 2017-18	County 2019-20	State 2019-20	BH Norm	County 2015-16	County 2017-18	County 2019-20	State 2019-20	BH Norm
Been drunk or high at school	1.9	8.5	5.2	7.9	5.1	7.7	5.9	3.0	13.8	11.4	11.4	15.6	10.3	16.0	15.2	5.2	6.4	6.4	9.8	8.8
Been suspended from school	22.2	6.7	8.6	13.6	12.1	15.0	11.8	3.0	9.2	9.8	2.3	3.1	15.4	6.7	7.9	11.3	6.8	9.2	10.3	9.8
Sold illegal drugs	0.0	1.7	1.7	2.1	2.2	10.0	1.5	6.3	3.9	4.9	7.0	3.1	0.0	4.4	6.7	4.2	1.4	2.1	2.7	3.8
Stolen or tried to steal a motor vehicle	0.0	3.4	0.0	1.8	1.8	5.0	0.0	3.0	1.8	2.3	0.0	3.1	0.0	1.1	2.1	1.5	1.4	0.7	1.4	1.9
Been arrested	1.9	5.1	0.0	3.1	3.2	7.5	1.5	6.1	3.3	3.9	2.3	0.0	5.1	2.7	4.1	3.6	2.3	3.5	2.7	3.3
Attacked someone with the idea of seriously hurting them	5.7	15.5	6.9	9.9	9.4	27.5	2.9	0.0	7.7	8.1	9.1	3.1	2.6	5.9	6.5	12.4	7.8	3.6	8.3	8.2
Carried a handgun	1.9	6.7	1.7	7.2	6.8	10.0	1.5	15.2	6.6	6.9	11.4	6.3	5.1	6.5	7.2	7.2	5.5	5.7	6.5	6.9
Carried a handgun to school	0.0	1.7	0.0	0.4	0.9	2.5	0.0	3.0	0.5	1.2	0.0	0.0	2.6	0.6	1.6	0.5	0.5	1.4	0.5	1.1

Data tables

Table 9. Sources of alcohol and places of alcohol use in the past year

If you drank ALCOHOL (beer, wine, or hard liquor) and not just a sip or taste in the last year, how did you USUALLY get it? (Choose all that apply.)	8th grade				10th grade				12th grade				All grades			
	County 2015-16	County 2017-18	County 2019-20	State 2019-20	County 2015-16	County 2017-18	County 2019-20	State 2019-20	County 2015-16	County 2017-18	County 2019-20	State 2019-20	County 2015-16	County 2017-18	County 2019-20	State 2019-20
Sample size*	20	27	12	5,477	22	30	14	7,587	24	17	24	6,741	71	81	51	22,355
I bought it myself with a fake ID	0.0	3.7	0.0	3.5	9.1	0.0	7.1	2.4	4.2	5.9	12.5	3.7	4.2	2.5	9.8	3.5
I bought it myself without a fake ID	0.0	0.0	0.0	3.7	4.5	3.3	0.0	3.7	16.7	11.8	8.3	6.5	7.0	4.9	3.9	4.9
I got it from someone I know age 21 or older	30.0	40.7	25.0	31.6	50.0	53.3	64.3	39.8	62.5	58.8	62.5	51.5	46.5	46.9	52.9	41.2
I got it from someone I know under age 21	30.0	14.8	8.3	17.8	36.4	20.0	7.1	21.9	8.3	11.8	29.2	20.6	22.5	14.8	17.6	19.6
I got it from my brother or sister	20.0	14.8	0.0	11.5	13.6	6.7	7.1	11.0	4.2	5.9	8.3	11.1	11.3	9.9	5.9	11.1
I got it from home with my parents' permission	20.0	40.7	66.7	33.2	18.2	13.3	7.1	29.8	12.5	17.6	8.3	29.3	18.3	27.2	21.6	31.0
I got it from home without my parents' permission	25.0	22.2	16.7	29.2	13.6	16.7	7.1	25.2	8.3	11.8	12.5	14.3	15.5	16.0	11.8	21.6
I got it from another relative	20.0	22.2	0.0	20.5	9.1	6.7	0.0	15.1	4.2	11.8	8.3	12.6	9.9	12.3	3.9	15.8
I took it from a store or shop	0.0	0.0	0.0	3.8	4.5	0.0	0.0	3.2	0.0	0.0	4.2	2.8	1.4	0.0	2.0	3.4
A stranger bought it for me	0.0	3.7	0.0	4.0	9.1	0.0	7.1	5.8	8.3	5.9	4.2	7.0	5.6	2.5	3.9	5.8
I got it at a bar or restaurant	0.0	0.0	0.0	4.2	4.5	0.0	0.0	3.8	8.3	5.9	8.3	4.9	4.2	1.2	3.9	4.4
During the last 12 months, how often (if ever) have you used ALCOHOL (beer, wine, or hard liquor) in each of the following places? (Students marking one or more times)	8th grade				10th grade				12th grade				All grades			
	County 2015-16	County 2017-18	County 2019-20	State 2019-20	County 2015-16	County 2017-18	County 2019-20	State 2019-20	County 2015-16	County 2017-18	County 2019-20	State 2019-20	County 2015-16	County 2017-18	County 2019-20	State 2019-20
Sample size*	22	27	18	6,208	25	28	14	8,258	27	16	26	6,891	81	82	58	24,334
At your home	72.7	85.2	72.2	70.2	40.0	46.4	64.3	68.0	55.6	56.3	50.0	65.8	58.0	67.1	60.3	68.0
At friends' houses	63.6	48.1	33.3	48.1	80.0	71.4	42.9	61.6	66.7	75.0	76.9	69.6	67.9	56.1	55.2	58.1
At a school dance, a game, or other event	18.2	3.7	0.0	12.3	24.0	14.3	14.3	11.9	14.8	31.3	0.0	12.3	18.5	13.4	3.4	11.9
At school during the day	0.0	3.7	0.0	7.3	8.0	3.6	7.1	7.8	11.1	18.8	0.0	6.5	7.4	7.3	1.7	6.9
Near school	9.1	3.7	5.6	9.1	12.0	0.0	7.1	8.8	11.1	18.8	7.7	9.2	11.1	6.1	6.9	8.9
In a car	18.2	18.5	0.0	18.3	28.0	10.7	21.4	23.2	37.0	43.8	26.9	25.2	27.2	20.7	17.2	21.6
At a party	45.5	44.4	11.1	40.1	60.0	67.9	50.0	51.8	66.7	81.3	57.7	61.9	55.6	56.1	41.4	50.5
At a park or beach	9.1	25.9	0.0	12.2	24.0	10.7	7.1	14.0	48.1	43.8	15.4	15.5	28.4	22.0	8.6	13.9
At a bar or restaurant	9.1	7.4	5.6	11.9	8.0	10.7	7.1	10.5	29.6	37.5	15.4	13.3	16.0	14.6	10.3	12.2

* Sample size represents the number of youth who obtained alcohol from at least one source (sources of alcohol) or used reported alcohol use one or more times in a selected place. Students indicating they did not drink 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.

Data tables

Table 10. Student prescription drug use

If you have ever used prescription drugs in order to get high, not for a medical reason, how did you get them? (Mark all that apply.)	8th grade				10th grade				12th grade				All grades			
	County 2015-16	County 2017-18	County 2019-20	State 2019-20	County 2015-16	County 2017-18	County 2019-20	State 2019-20	County 2015-16	County 2017-18	County 2019-20	State 2019-20	County 2015-16	County 2017-18	County 2019-20	State 2019-20
Sample Size*	1	4	1	1,420	5	4	0	1,654	4	5	3	1,432	11	13	4	5,213
Friends	0.0	25.0	100.0	49.4	40.0	50.0	n/a	53.4	25.0	40.0	66.7	56.0	36.4	38.5	75.0	51.1
Family/Relatives	0.0	0.0	100.0	22.8	0.0	0.0	n/a	19.2	0.0	40.0	0.0	15.3	0.0	15.4	25.0	19.4
Parties	0.0	0.0	0.0	21.4	40.0	0.0	n/a	22.0	75.0	60.0	0.0	23.2	45.5	23.1	0.0	21.2
Home (e.g., Medicine Cabinet)	0.0	25.0	100.0	24.3	0.0	25.0	n/a	20.8	25.0	0.0	0.0	16.7	9.1	15.4	25.0	19.6
Doctor/Pharmacy	100.0	50.0	0.0	12.8	20.0	0.0	n/a	12.5	0.0	0.0	0.0	14.2	18.2	15.4	0.0	14.1
School	0.0	0.0	0.0	13.2	20.0	0.0	n/a	13.6	50.0	0.0	0.0	11.4	27.3	0.0	0.0	12.3
Other	0.0	0.0	0.0	22.9	0.0	0.0	n/a	20.0	0.0	0.0	33.3	20.5	0.0	0.0	25.0	21.7
Over the Internet	0.0	0.0	0.0	6.1	0.0	25.0	n/a	5.8	0.0	0.0	0.0	5.3	0.0	7.7	0.0	5.7
Outside the U.S. (e.g., Mexico, Canada)	0.0	0.0	0.0	7.2	20.0	0.0	n/a	5.2	0.0	0.0	0.0	4.6	9.1	0.0	0.0	5.8

* Sample size represents the number of youth who obtained prescription drugs from at least one source. Students indicating they have never used prescription drugs to get high are not included in the sample. In the case of smaller sample sizes, caution should be exercised before generalizing results to the entire community.

Data Tables

Table 11. Percent of students reporting psychological distress

		8th grade		10th grade		12th grade		All grades	
		County 2019-20	State 2019-20	County 2019-20	State 2019-20	County 2019-20	State 2019-20	County 2019-20	State 2019-20
Psychological distress									
Psychological distress*	High psychological distress	32.8	29.6	42.4	33.6	38.5	34.1	37.9	29.9
	Moderate psychological distress	29.3	27.8	24.2	28.1	25.6	28.3	27.9	28.0
	Low psychological distress	37.9	42.6	33.3	38.3	35.9	37.6	34.3	42.1
During the past 30 days, how often did you:									
feel nervous?	All of the time	15.5	16.6	21.2	19.9	30.8	20.5	20.7	17.5
	Most of the time	20.7	17.5	12.1	18.7	10.3	18.1	16.4	16.9
	Some of the time	43.1	29.6	33.3	30.1	17.9	30.0	33.6	29.4
	A little of the time	13.8	22.8	15.2	18.3	10.3	17.7	13.6	22.1
	None of the time	6.9	13.4	18.2	13.0	30.8	13.7	15.7	14.0
feel hopeless?	All of the time	12.1	13.0	27.3	13.2	20.5	13.8	18.6	12.8
	Most of the time	10.3	10.3	6.1	11.4	10.3	11.3	10.7	10.4
	Some of the time	24.1	16.8	15.2	19.3	17.9	20.1	18.6	17.3
	A little of the time	24.1	20.5	18.2	20.6	7.7	20.5	18.6	20.3
	None of the time	29.3	39.4	33.3	35.4	43.6	34.3	33.6	39.2
feel restless or fidgety?	All of the time	17.2	19.5	21.2	21.1	23.7	21.2	21.6	19.4
	Most of the time	15.5	16.3	9.1	17.3	10.5	16.9	14.4	15.8
	Some of the time	19.0	19.8	27.3	21.2	21.1	21.7	20.9	19.9
	A little of the time	27.6	18.2	24.2	17.5	5.3	17.5	18.7	18.1
	None of the time	20.7	26.3	18.2	22.9	39.5	22.7	24.5	26.8
feel so depressed that nothing could cheer you up?	All of the time	8.6	12.1	24.2	12.8	25.6	13.4	17.9	12.2
	Most of the time	15.5	8.8	15.2	9.6	5.1	9.4	12.9	8.9
	Some of the time	15.5	13.0	15.2	15.3	10.3	17.4	12.9	14.2
	A little of the time	17.2	17.3	12.1	18.8	15.4	19.2	15.0	17.6
	None of the time	43.1	48.7	33.3	43.6	43.6	40.5	41.4	47.2
feel that everything was an effort?	All of the time	14.0	14.1	21.2	16.0	20.5	17.3	19.4	15.7
	Most of the time	8.8	14.1	9.1	16.4	17.9	15.7	11.5	15.1
	Some of the time	19.3	23.9	24.2	24.5	23.1	24.4	20.9	23.2
	A little of the time	28.1	21.5	27.3	19.8	10.3	19.6	22.3	20.2
	None of the time	29.8	26.4	18.2	23.3	28.2	23.0	25.9	25.7
feel worthless?	All of the time	17.2	14.5	33.3	14.7	30.8	14.6	25.0	14.1
	Most of the time	12.1	9.2	6.1	9.8	7.7	9.4	10.0	8.9
	Some of the time	8.6	12.1	12.1	13.6	10.3	15.0	9.3	12.6
	A little of the time	22.4	16.0	15.2	16.9	12.8	17.5	17.9	16.4
	None of the time	39.7	48.3	33.3	45.1	38.5	43.4	37.9	48.1

* The psychological distress scale was introduced in the school year 2017-18 OPNA. This scale is calculated from student responses to specific questions (seen in the subsequent rows). See text for further explanation on how the scale is scored.

Data tables

Table 12. Percent of students reporting depression and suicide indicators

		8th grade					10th grade					12th grade					All grades				
		County 2015-16	County 2017-18	County 2019-20	State 2019-20	Natl. YRBS	County 2015-16	County 2017-18	County 2019-20	State 2019-20	Natl. YRBS	County 2015-16	County 2017-18	County 2019-20	State 2019-20	Natl. YRBS	County 2015-16	County 2017-18	County 2019-20	State 2019-20	Natl. YRBS
Depressive Symptoms Scale																					
Depressive symptoms calculation	High depressive symptoms	3.8	6.8	15.8	8.7	n/a	10.5	8.8	12.5	9.1	n/a	11.6	3.2	20.5	7.9	n/a	6.9	5.7	17.3	8.0	n/a
	Moderate depressive symptoms	69.8	71.2	71.9	69.6	n/a	63.2	67.6	71.9	70.9	n/a	74.4	61.3	56.4	70.4	n/a	71.3	70.6	66.2	69.5	n/a
	No depressive symptoms	26.4	22.0	12.3	21.7	n/a	26.3	23.5	15.6	20.0	n/a	14.0	35.5	23.1	21.8	n/a	21.8	23.7	16.5	22.5	n/a
Individual Depression Items:																					
Sometimes I think that life is not worth it.	NO!	46.3	33.9	38.6	43.3	n/a	47.4	50.0	33.3	40.1	n/a	37.2	54.8	35.9	41.1	n/a	48.9	46.0	37.1	45.0	n/a
	no	24.1	23.7	24.6	24.5	n/a	28.9	22.1	27.3	26.1	n/a	23.3	22.6	20.5	25.9	n/a	24.2	22.3	23.6	24.2	n/a
	yes	22.2	33.9	24.6	22.3	n/a	7.9	19.1	27.3	23.3	n/a	23.3	12.9	17.9	23.3	n/a	14.7	24.2	22.1	21.4	n/a
	YES!	7.4	8.5	12.3	9.9	n/a	15.8	8.8	12.1	10.4	n/a	16.3	9.7	25.6	9.8	n/a	12.1	7.6	17.1	9.4	n/a
At times I think I am no good at all.	NO!	40.7	25.4	14.0	29.4	n/a	35.9	34.3	24.2	28.1	n/a	23.3	48.4	30.8	29.7	n/a	33.7	32.4	22.9	31.1	n/a
	no	20.4	16.9	29.8	25.0	n/a	25.6	31.3	24.2	24.7	n/a	25.6	29.0	20.5	24.8	n/a	22.1	25.2	25.0	24.5	n/a
	yes	31.5	44.1	35.1	31.8	n/a	23.1	22.4	33.3	33.2	n/a	27.9	16.1	25.6	32.8	n/a	30.0	30.0	30.7	31.2	n/a
	YES!	7.4	13.6	21.1	13.9	n/a	15.4	11.9	18.2	14.0	n/a	23.3	6.5	23.1	12.6	n/a	14.2	12.4	21.4	13.2	n/a
All in all, I am inclined to think that I am a failure.	NO!	45.3	29.3	26.3	39.2	n/a	47.4	42.6	34.4	36.1	n/a	27.9	45.2	38.5	37.3	n/a	43.1	37.9	32.4	40.9	n/a
	no	28.3	36.2	28.1	30.7	n/a	23.7	29.4	25.0	33.1	n/a	32.6	38.7	30.8	33.6	n/a	26.6	33.6	27.3	30.6	n/a
	yes	22.6	25.9	29.8	20.2	n/a	21.1	19.1	21.9	20.6	n/a	27.9	16.1	10.3	20.3	n/a	23.4	21.8	21.6	19.3	n/a
	YES!	3.8	8.6	15.8	10.0	n/a	7.9	8.8	18.8	10.2	n/a	11.6	0.0	20.5	8.8	n/a	6.9	6.6	18.7	9.2	n/a
In the past year, have you felt depressed or sad MOST days, even if you felt OK sometimes?	NO!	37.0	31.0	25.9	31.5	n/a	30.0	29.4	25.0	27.6	n/a	25.6	45.2	28.2	28.2	n/a	33.3	32.5	25.7	31.9	n/a
	no	24.1	15.5	24.1	22.4	n/a	20.0	26.5	34.4	23.8	n/a	20.9	32.3	25.6	23.9	n/a	20.3	22.6	27.1	22.5	n/a
	yes	24.1	31.0	25.9	27.3	n/a	30.0	30.9	12.5	28.2	n/a	34.9	19.4	15.4	28.6	n/a	29.7	27.8	20.0	27.2	n/a
	YES!	14.8	22.4	24.1	18.7	n/a	20.0	13.2	28.1	20.3	n/a	18.6	3.2	30.8	19.3	n/a	16.7	17.0	27.1	18.4	n/a
Suicide Related Indicators*																					
During the past 12 months, did you ever seriously consider attempting suicide? (Answered 'Yes')		n/a	n/a	20.8	18.3	n/a	n/a	n/a	15.6	19.2	18.5	n/a	n/a	23.1	17.3	19.6	n/a	n/a	21.5	17.2	n/a
During the past 12 months, did you make a plan about how you would attempt suicide? (Answered 'Yes')		n/a	n/a	18.9	16.1	n/a	n/a	n/a	12.5	16.8	15.4	n/a	n/a	15.4	14.5	16.2	n/a	n/a	17.8	14.7	n/a
During the past 12 months, how many times did you actually attempt suicide? (Answered 1 or more times)		n/a	n/a	7.5	11.2	n/a	n/a	n/a	15.6	10.4	8.8	n/a	n/a	12.8	8.1	8.5	n/a	n/a	13.3	9.8	n/a

* The depressive symptom scale was introduced in the school year 2017-18 OPNA. This scale is calculated from student responses to specific questions (seen in the subsequent rows). See text for further explanation on how the scale is scored.

* Psychological distress and suicide items were introduced in the school year 2017-2018 OPNA. During the 2017-2018 OPNA administration, some schools used the 2016 OPNA Survey instrument. As such, data from questions new to 2017-18 are unavailable for Cotton County for 2017-2018 administration reporting.

Data tables

Table 13. Percentage of students reporting risk

Percentage of students reporting risk	8th grade					10th grade					12th grade					All grades				
	County 2015-16	County 2017-18	County 2019-20	State 2019-20	BH Norm	County 2015-16	County 2017-18	County 2019-20	State 2019-20	BH Norm	County 2015-16	County 2017-18	County 2019-20	State 2019-20	BH Norm	County 2015-16	County 2017-18	County 2019-20	State 2019-20	BH Norm
Community																				
Low Neighborhood Attachment	28.3	53.4	49.1	42.7	35.7	30.0	50.0	45.5	47.8	42.8	50.0	51.6	53.8	52.4	49.4	38.4	51.7	47.8	48.5	42.5
Community Disorganization	47.2	73.7	63.6	46.3	48.6	62.5	63.2	51.5	47.5	50.2	61.0	67.7	79.5	49.9	51.0	58.2	62.2	65.9	46.0	48.4
Laws & Norms Favorable to Drug Use	49.1	65.0	49.1	39.7	33.5	50.0	38.2	59.4	38.3	36.0	52.4	77.4	48.7	46.6	44.2	48.4	56.3	51.5	41.0	37.3
Perceived Availability of Drugs	34.6	42.4	36.4	30.1	26.8	38.5	31.3	27.3	28.6	27.4	47.5	38.7	43.6	30.6	32.7	44.6	36.8	36.5	31.3	30.1
Perceived Availability of Handguns	44.2	43.3	51.9	34.1	33.2	46.2	28.4	36.4	23.3	21.8	58.5	32.3	33.3	28.4	26.7	47.8	34.3	41.2	27.1	26.4
Family																				
Poor Family Management	42.6	72.4	32.7	42.2	36.0	23.7	33.8	28.1	34.3	32.0	30.0	45.2	35.9	36.5	35.2	39.8	53.1	35.3	42.3	35.9
Family Conflict	35.2	44.8	47.3	34.3	32.7	31.6	39.7	31.3	38.0	37.5	36.6	35.5	43.6	37.9	37.5	39.0	42.3	42.6	37.2	36.1
Family History of Antisocial Behavior	42.0	56.9	50.9	33.8	29.5	55.3	42.6	35.5	34.7	32.6	38.5	35.5	41.0	37.2	34.4	47.3	46.9	44.4	35.8	32.3
Parental Attitudes Favorable to Drug Use	32.0	51.7	32.7	25.2	22.7	39.5	33.8	34.4	34.8	35.6	48.7	35.5	35.9	35.5	36.8	33.1	34.4	33.1	27.8	28.0
Parental Attitudes Favorable to Antisocial Behavior	50.0	55.2	38.2	46.2	46.5	52.6	44.1	38.7	46.5	49.6	48.7	51.6	33.3	44.0	49.1	49.1	44.3	36.3	43.3	46.4
School																				
Academic Failure	46.2	38.3	26.3	39.7	29.6	46.2	43.3	24.2	38.4	32.3	38.6	32.3	27.0	38.6	33.4	41.5	34.1	28.3	37.9	31.0
Low Commitment to School	58.2	58.6	55.2	64.0	49.1	45.0	44.9	37.5	58.0	45.9	68.2	59.4	44.7	58.1	47.8	58.2	55.0	50.0	60.3	47.5
Peer and individual																				
Rebelliousness	23.6	51.7	41.8	28.9	26.0	45.0	38.2	21.9	29.6	30.4	37.2	51.6	41.0	27.8	31.7	40.2	45.6	35.8	28.5	28.1
Early Initiation of Antisocial Behavior	47.3	30.0	25.9	29.9	24.6	47.5	26.1	30.3	28.1	26.3	34.1	34.4	25.6	26.2	25.5	39.0	26.4	25.5	27.1	25.3
Early Initiation of Drug Use	38.2	52.5	31.0	24.6	23.3	32.5	23.2	27.3	21.5	24.8	29.5	21.9	28.2	24.8	32.3	36.4	32.1	28.4	23.1	25.7
Attitudes Favorable to Drug Use	48.1	57.4	34.5	36.2	27.9	40.0	41.2	54.5	47.1	39.6	40.9	43.8	48.7	45.4	41.4	39.9	41.4	42.6	37.7	33.0
Attitudes Favorable to Antisocial Behavior	33.3	57.4	36.2	40.1	29.4	55.0	32.4	48.5	44.2	34.7	43.2	40.6	41.0	41.3	35.3	48.5	45.0	41.8	44.5	34.1
Perceived Risk of Drug Use	62.3	69.0	67.2	58.5	47.7	62.5	67.6	72.7	70.4	60.2	47.6	71.0	64.1	67.6	58.6	58.9	72.5	67.4	63.1	54.5
Interaction With Antisocial Peers	33.3	33.9	15.5	30.2	23.9	42.5	14.5	40.6	27.6	24.0	20.5	31.3	28.9	25.8	23.5	33.0	24.3	27.3	31.3	25.2
Friends' Use of Drugs	38.9	55.9	46.6	33.7	26.5	35.0	21.7	43.8	30.0	27.7	20.5	28.1	26.3	27.6	28.2	31.4	32.6	36.7	28.4	25.4
Rewards For Antisocial Behavior	40.0	41.0	32.8	33.5	30.1	22.5	16.2	48.5	36.0	39.5	45.5	35.5	35.9	37.2	44.1	36.6	30.7	36.9	33.4	35.1
Intentions to Use	31.5	52.5	41.8	31.3	28.7	46.2	33.8	45.5	43.9	40.4	44.2	38.7	59.0	50.3	46.0	45.5	43.3	48.6	41.6	38.7
Depressive Symptoms	43.4	62.7	59.6	48.1	37.4	44.7	38.2	56.3	50.6	43.2	55.8	35.5	53.8	49.8	41.8	45.2	46.9	56.8	46.9	38.7
Total																				
Students at High Risk*	54.5	70.5	50.0	40.5	n/a	55.0	36.2	45.5	37.8	n/a	54.5	46.9	46.2	39.4	n/a	59.2	51.4	49.3	39.7	n/a

* 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 and 12th grades: 9 or more risk factors.)

BH Norm data on High Risk youth are not available due to state-by-state differences in calculation methodology.

Data tables

Table 14. Percentage of students reporting protection

Percentage of students reporting protection	8th grade					10th grade					12th grade					All grades				
	County 2015-16	County 2017-18	County 2019-20	State 2019-20	BH Norm	County 2015-16	County 2017-18	County 2019-20	State 2019-20	BH Norm	County 2015-16	County 2017-18	County 2019-20	State 2019-20	BH Norm	County 2015-16	County 2017-18	County 2019-20	State 2019-20	BH Norm
Community																				
Opportunities for Prosocial Involvement	56.9	46.4	47.2	50.4	n/a	57.9	43.9	46.7	49.8	n/a	58.3	58.6	43.2	50.6	n/a	55.7	45.0	45.4	48.6	n/a
Rewards for Prosocial Involvement	59.6	50.0	41.8	40.4	45.1	45.0	51.5	36.4	35.6	39.7	45.2	41.9	48.7	34.5	38.9	45.4	46.4	41.3	37.8	41.4
Family																				
Family Attachment	62.7	41.1	66.7	50.4	59.9	57.9	51.5	56.3	54.2	61.4	55.0	48.4	46.2	52.0	59.0	54.7	47.4	57.5	52.1	60.6
Opportunities for Prosocial Involvement	60.4	45.6	74.5	58.7	65.9	57.9	60.3	53.1	53.8	60.6	57.5	48.4	56.4	52.5	58.3	59.2	51.9	60.3	54.4	60.7
Rewards for Prosocial Involvement	52.8	36.8	54.5	43.7	52.5	56.8	54.4	43.8	50.4	57.9	52.5	48.4	53.8	48.8	54.6	50.0	46.0	50.7	47.8	55.6
School																				
Opportunities for Prosocial Involvement	50.9	67.2	87.9	61.0	68.5	55.0	63.8	45.5	62.1	66.9	45.5	75.0	71.8	62.9	67.5	47.7	63.1	71.8	57.8	66.2
Rewards for Prosocial Involvement	52.7	49.2	77.2	43.5	54.9	50.0	72.5	45.5	53.7	60.8	36.4	50.0	76.9	41.4	49.4	47.2	55.2	67.4	45.1	55.1
Peer and individual																				
Belief in the Moral Order	66.7	44.8	62.1	61.3	71.8	43.6	58.8	59.4	52.5	60.6	58.1	51.6	61.5	55.3	58.8	51.8	52.1	60.0	55.5	63.5
Religiosity	74.5	49.2	41.4	51.2	45.9	67.5	61.8	59.4	50.0	40.2	65.1	58.1	51.3	44.8	34.0	65.1	49.8	48.6	45.5	39.4
Interaction with Prosocial Peers	60.4	37.3	50.0	49.1	54.8	62.5	52.2	46.9	51.6	53.6	56.8	46.9	42.1	47.2	47.6	60.6	44.7	47.1	46.1	52.1
Prosocial Involvement	64.8	51.7	74.1	50.2	55.4	60.0	54.4	46.9	51.5	57.3	50.0	56.3	51.3	50.4	54.5	55.4	49.8	60.7	48.1	55.5
Rewards for Prosocial Involvement	63.6	39.3	58.6	45.4	54.4	65.0	63.2	63.6	53.9	61.8	47.7	54.8	53.8	57.5	63.3	53.3	49.5	58.9	48.8	58.9
Total																				
Students with High Protection*	58.2	36.1	67.2	42.9	n/a	52.5	53.6	51.5	45.4	n/a	47.7	46.9	59.0	43.7	n/a	51.5	45.9	59.9	43.4	n/a

* 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 and 12th grades: 5 or more protective factors.)

BH Norm data on High Protection youth are not available due to state-by-state differences in calculation methodology.

Data tables

Table 15. Additional data for prevention planning - Communication with adults

		County 2015-16	County 2017-18	County 2019-20	State 2019-20	County 2015-16	County 2017-18	County 2019-20	State 2019-20	County 2015-16	County 2017-18	County 2019-20	State 2019-20	County 2015-16	County 2017-18	County 2019-20	State 2019-20
Communication about ATOD*																	
During the past 12 months, have you talked with at least one of your parents about the dangers of tobacco, alcohol, or drug use? By parents, we mean your biological parents, adoptive parents, stepparents, or adult guardians – whether or not they live with you. (Choose all that apply)*	Yes, I talked with my parents about the dangers of tobacco use.	34.5	18.0	47.4	37.2	42.5	39.7	24.2	37.2	25.0	29.0	25.6	35.4	35.2	31.2	33.6	36.9
	Yes, I talked with my parents about the dangers of alcohol use.	30.9	9.8	43.9	30.9	42.5	35.3	21.2	33.3	27.3	41.9	20.5	31.0	30.1	26.6	30.0	31.0
	Yes, I talked with my parents about the dangers of drug use.	41.8	16.4	50.9	40.4	42.5	38.2	30.3	39.6	22.7	35.5	28.2	35.3	38.3	29.4	38.6	38.4
Is there an adult in your life, such as a parent, relative, teacher or neighbor, who you:																	
feel very close to.	NO!	0.0	4.9	0.0	6.5	2.5	4.4	6.1	7.7	0.0	16.1	10.3	8.8	2.1	7.5	5.0	7.3
	no	9.4	14.8	10.3	7.5	10.0	7.4	9.1	8.8	11.6	3.2	0.0	9.0	7.8	8.0	7.1	7.6
	yes	26.4	26.2	29.3	29.3	15.0	27.9	24.2	32.1	23.3	38.7	17.9	31.9	21.9	26.8	25.5	29.2
	YES!	64.2	54.1	60.3	56.7	72.5	60.3	60.6	51.3	65.1	41.9	71.8	50.3	68.2	57.7	62.4	55.9
share your thoughts and feelings with.	NO!	7.4	6.6	10.3	11.7	7.5	10.3	9.1	11.8	4.7	13.3	10.3	11.7	7.3	11.2	9.9	11.9
	no	24.1	29.5	19.0	21.3	15.0	29.4	18.2	21.0	18.6	3.3	12.8	18.8	21.2	23.8	17.7	19.5
	yes	31.5	21.3	31.0	29.8	32.5	14.7	42.4	31.5	37.2	50.0	23.1	31.6	33.2	23.4	31.9	30.2
	YES!	37.0	42.6	39.7	37.2	45.0	45.6	30.3	35.6	39.5	33.3	53.8	37.9	38.3	41.6	40.4	38.4
enjoy spending time with.	NO!	0.0	4.9	1.8	5.1	0.0	1.5	3.0	6.2	0.0	10.0	10.3	7.5	0.5	4.2	4.3	5.9
	no	1.8	9.8	0.0	4.7	7.5	5.9	6.1	5.7	4.7	6.7	0.0	6.3	4.1	7.0	2.1	4.9
	yes	38.2	32.8	28.1	34.3	30.0	39.7	36.4	37.5	44.2	46.7	23.1	37.1	34.0	33.6	28.6	33.7
	YES!	60.0	52.5	70.2	55.9	62.5	52.9	54.5	50.5	51.2	36.7	66.7	49.1	61.3	55.1	65.0	55.5
could ask for help if you had a problem.	NO!	0.0	4.9	1.8	7.5	5.0	4.4	12.1	8.3	0.0	13.3	10.3	8.6	3.1	6.1	7.2	7.8
	no	7.4	13.1	5.3	9.8	5.0	10.3	6.1	9.9	2.3	3.3	5.1	8.7	5.2	9.8	6.5	8.8
	yes	40.7	27.9	35.1	32.6	32.5	30.9	33.3	35.2	32.6	43.3	23.1	34.8	34.7	31.3	30.2	32.5
	YES!	51.9	54.1	57.9	50.1	57.5	54.4	48.5	46.6	65.1	40.0	61.5	47.8	57.0	52.8	56.1	50.9

* Due to a coding error in the web survey, online data for the school year 2015-16 are not available for the parental communication item. Reported data are from the paper survey only. A value of "n/a" indicates no data from the paper survey are available for that grade.

Data tables

Table 16. 2019-20 Drug Free Communities Report - National Outcome Measures (NOMs)

Core Measure	Definition	Substance	6th grade		8th grade		10th grade		12th grade		Male**		Female**	
			Percent	Sample	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...)	have five or more drinks of an alcoholic beverage in a row once or twice a week	Binge drinking	n/a	n/a	86.2	58	72.7	33	64.1	39	72.6	62	82.3	79
	smoke one or more packs of cigarettes per day	Tobacco	n/a	n/a	86.2	58	81.8	33	69.2	39	83.9	62	79.7	79
	smoke marijuana regularly	Marijuana	n/a	n/a	63.2	57	46.9	32	31.6	38	51.6	62	52.6	76
	use prescription drugs that are not prescribed to them	Prescription drugs	n/a	n/a	86.2	58	78.8	33	71.8	39	82.3	62	81.0	79
Perception of parental disapproval (Parents feel it would be wrong or very wrong to...)	have one or two drinks of an alcoholic beverage nearly every day	Alcohol	n/a	n/a	94.5	55	90.6	32	79.5	39	87.1	62	89.2	74
	smoke cigarettes	Tobacco	n/a	n/a	92.7	55	96.9	32	84.6	39	90.3	62	91.9	74
	smoke marijuana	Marijuana	n/a	n/a	85.2	54	86.7	30	84.6	39	85.2	61	86.1	72
	use prescription drugs not prescribed to you	Prescription drugs	n/a	n/a	98.2	55	93.5	31	94.9	39	95.2	62	95.9	73
Perception of peer disapproval (Friends feel it would be wrong or very wrong to...)	have one or two drinks of an alcoholic beverage nearly every day	Alcohol	n/a	n/a	74.5	55	75.8	33	48.7	39	69.4	62	68.0	75
	smoke tobacco	Tobacco	n/a	n/a	72.7	55	78.8	33	59.0	39	71.0	62	72.4	76
	smoke marijuana	Marijuana	n/a	n/a	72.7	55	57.6	33	41.0	39	66.1	62	57.9	76
	use prescription drugs not prescribed to you	Prescription drugs	n/a	n/a	81.8	55	87.9	33	76.9	39	82.3	62	82.9	76
Past 30-day use (at least one use in the past 30 days)	had beer, wine, or hard liquor	Alcohol	n/a	n/a	13.8	58	27.3	33	35.9	39	24.2	62	21.5	79
	smoked cigarettes	Tobacco	n/a	n/a	6.9	58	6.1	33	5.1	39	4.8	62	6.5	77
	used marijuana	Marijuana	n/a	n/a	6.9	58	9.1	33	15.4	39	8.1	62	10.1	79
	combined results of prescription stimulant/sedative/narcotics questions	Prescription drugs	n/a	n/a	3.4	58	0.0	33	2.6	39	0.0	62	3.8	79

* 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.

** 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.

Data tables

Table 17. Additional data for prevention planning - School safety and interpersonal violence

		8th grade				10th grade				12th grade				All grades			
		County 2015-16	County 2017-18	County 2019-20	State 2019-20	County 2015-16	County 2017-18	County 2019-20	State 2019-20	County 2015-16	County 2017-18	County 2019-20	State 2019-20	County 2015-16	County 2017-18	County 2019-20	State 2019-20
Safety																	
I feel safe at my school.	YES! or yes	90.9	73.8	84.2	72.0	80.0	91.3	78.8	71.5	92.9	81.3	84.6	74.6	87.6	80.6	83.0	74.6
I feel safe in my neighborhood.	YES! or yes	85.2	70.7	80.0	78.4	90.0	85.3	81.8	78.2	83.3	61.3	71.8	76.3	82.2	79.6	78.3	78.2
Verbal and Physical Violence																	
What are the chances you would be seen as cool if you defended someone who was being verbally abused at school?	No or very little chance	18.2	23.3	12.3	23.5	12.5	25.0	18.2	22.9	20.5	22.6	35.9	22.2	17.0	23.9	20.0	23.1
How wrong do you think it is for someone your age to pick a fight with someone?	Not wrong at all	5.6	8.3	5.2	6.6	12.5	10.3	3.0	6.0	6.8	12.5	10.8	4.6	7.8	9.2	5.8	5.5
How wrong do you think it is for someone your age to attack someone with the idea of seriously hurting them?	Not wrong at all	0.0	0.0	1.7	2.3	7.5	4.5	3.0	2.3	2.3	0.0	2.6	1.8	3.6	1.8	2.1	2.1
How many times in the past year (12 months) have you attacked someone with the idea of seriously hurting them?	At least one time in the past year	5.7	15.5	6.9	9.9	27.5	2.9	0.0	7.7	9.1	3.1	2.6	5.9	12.4	7.8	3.6	8.3
It is all right to beat up people if they start the fight.	YES! or yes	52.8	68.4	53.4	48.5	61.5	50.0	65.6	51.7	55.8	48.4	53.8	48.4	54.2	51.9	56.4	45.5
How wrong do your parents feel it would be for you to pick a fight with someone?	Not wrong at all	2.0	7.0	7.3	3.4	2.6	2.9	0.0	3.1	0.0	6.5	7.7	3.1	1.8	4.3	5.9	3.1

Notes on the school year 2019-20 OPNA administration

Ensuring the validity of the 2019-20 OPNA

Surveys are checked for validity on several criteria, and surveys that do not meet these checks are considered dishonest and removed from reported results. The types of validity checks used include cross checking improbable response combinations (e.g. multiple instances of higher 30 day use than lifetime use in equivalent substances, or a 19 year-old 6th grade student), improbably frequent substance use, and external checks such as comparing the student's reported grade to the grades served by the surveyed institution.

The data presented in this report reflect the students who answered the item(s) in the manner specified, and the number of students answering any given item may vary.

Changes to ATOD questions and calculations

Reporting prior to the school year 2017-2018 OPNA calculated lifetime use by the number of occasions used, whereas the school year 2017-18 and 2019-20 OPNA lifetime use is calculated from questions asking about age of first use.

In surveys administered prior to school year 2017-18, these data were obtained by counting the number of students having indicated one or more occasions of use of the substance in their lifetime (i.e. a bank of questions framed with “*In your lifetime, on how many occasions (if any) have you...*” followed by the substance in question).

Beginning in the school year 2017-18 OPNA, lifetime use counts were obtained by generating a count of students answering any response other than Never to the question “How old were you when you first...” (*smoked marijuana, used heroin, etc.*).

Significant analysis was conducted prior to the switch and Bach Harrison found that the two methods gathered comparable data; however, report readers should keep this change in mind as they compare lifetime use data from previous administrations to data from school year 2017-18 OPNA onward.

Not all lifetime use questions moved to the age-of-first-use methodology. Since several agencies track alcohol use, lifetime use of alcohol is calculated using a separate question (identical to previous years) to ensure that the results continue to be directly comparable from one administration to the next.

Additionally, beginning in the school year 2017-2018 OPNA, lifetime use questions for *smokeless tobacco, cocaine or crack*, and *inhalant use* were removed entirely (but were still retained in the 30-day use question bank), and three drug categories (*LSD or other hallucinogens, Ecstasy*, and *synthetic drugs*) were omitted from both the lifetime and 30-day use question bank.

These changes allowed removal of redundant questions, freeing up survey space and reducing survey completion time without sacrificing core lifetime use data.

The changed approach to lifetime use necessitated an adjustment to the calculation of drug treatment needs. As with previous surveys, *Needs Drug Treatment* continues to require that students answer YES to at least 3 drug treatment questions, but now requires any lifetime drug use, rather than drug use on 10 or more occasions.

Notes on the school year 2019-20 OPNA administration

Weighting procedures for the OPNA

Bach Harrison analysts applied weights to the data to make the results more accurately reflect the total population of Oklahoma students in grades 6, 8, 10, and 12. Data from the 2015-16 OPNA featured weighting at the state and region levels, with district and school data reported without any weighting.

Bach Harrison changed the weighting procedure in the school year 2017-18 reporting cycle to allow for weighting of district-level data as well, in an effort to make district-level reporting more reflective of students enrolled at that level. The weighting accounts for the probability of a school participating in the survey and the probability of inclusion of students in each grade in each school.

To examine the effects of this change to district-level reporting, a comparison of ATOD use rates, antisocial behavior, and risk and protective factor scales was conducted using the two procedures. Results showed that the two

methods produced identical or nearly identical results, particularly for smaller school districts where all schools participated. Larger districts, which were more likely to have inconsistent participation of schools, showed some differences that exceeded 1%. Again, there were no weighting changes to region and state-level data from previous administrations. We believe that school year 2017-18 and 2019-20 data presented in district reports are comparable to data from previous administrations.

If you have any concern about whether observed trends over time are a result of the new method of weighting the survey data please contact Director of Survey Services Mary Johnstun at Bach Harrison (mary@bach-harrison.com). We will be happy to review the survey weighting procedure with you and if necessary conduct further analyses of your data to assist in accurately determining trends over time for your area.

Risk and protective scale component items

Community Domain

Risk Factors

Low Neighborhood Attachment

- Q84** I like my neighborhood.
- Q86** I'd like to get out of my neighborhood.
- Q82** If I had to move, I would miss the neighborhood I now live in.

Community Disorganization

- Q81** How much does each of the following statements describe your neighborhood?
- a** crime and/or drug selling
 - b** fights
 - c** lots of empty or abandoned buildings
 - d** lots of graffiti
 - e** gang activity
- Q89** I feel safe in my neighborhood

Laws and Norms Favorable Toward Drug Use

- Q79** If a kid drank some beer, wine, or hard liquor (for example: vodka, whiskey, or gin) in your neighborhood would he or she be caught by the police?

- Q78** If a kid smoked marijuana in your neighborhood would he or she be caught by the police?
- Q77** How wrong would most adults (over 21) in your neighborhood think it was for kids your age:
- a** to use marijuana?
 - b** to drink alcohol?
 - c** to smoke cigarettes?

Perceived Availability of Drugs and Handguns

- Q90** If you wanted to get some cigarettes, how easy would it be for you to get some?
- Q91** If you wanted to get some beer, wine, or hard liquor (for example, vodka, whiskey, or gin), how easy would it be for you to get some?
- Q92** If you wanted to get a drug like cocaine, LSD, or amphetamines, how easy would it be for you to get some?
- Q93** If you wanted to get a handgun, how easy would it be for you to get one?
- Q94** If you wanted to get some marijuana, how easy would it be for you to get some?

Protective Factors

Opportunities for Prosocial Involvement

- Q76** Which of the following activities for people your age are availability in your community?
- a** sports teams
 - b** scouting
 - c** boys and girls clubs
 - d** 4-H clubs
 - e** service clubs
- Q85** There are lots of adults in my neighborhood I could talk to about something important.

Rewards for Prosocial Involvement

- Q83** My neighbors notice when I am doing a good job and let me know about it.
- Q87** There are people in my neighborhood who are proud of me when I do something well.
- Q88** There are people in my neighborhood who encourage me to do my best.

Risk and protective scale component items

Family Domain

Risk Factors

Poor Family Management

- Q106** My family has clear rules about alcohol and drug use.
- Q120** Would your parents know if you did not come home on time?
- Q108** If you skipped school would you be caught by your parents?
- Q107** If you carried a handgun without your parent's permission, would you be caught by them?
- Q103** When I am not at home, one of my parents knows where I am and who I am with.
- Q101** The rules in my family are clear.
- Q118** My parents ask if I've gotten my homework done.
- Q105** If you drank some beer or wine or liquor (for example, vodka, whiskey, or gin) without your parent's permission, would you be caught by your parents?

Family Conflict

- Q102** People in my family often insult or yell at each other.
- Q104** We argue about the same things in my family over and over.
- Q119** People in my family have serious arguments.

Family History of Antisocial Behavior

- Q124** Has anyone in your family ever had a severe alcohol or drug problem?

- Q100** Have any of your brothers or sisters ever:

- a** drank beer, wine or hard liquor (for example, vodka, whiskey, or gin)?
- b** smoked marijuana?
- c** smoked cigarettes?
- d** taken a handgun to school?
- e** been suspended or expelled from school?

- Q123** About how many adults (over 21) have you known personally who in the past year have:

- a** used marijuana, crack, cocaine, or other drugs?
- b** sold or dealt drugs?
- c** done other things that could get them in trouble with the police, like stealing, selling stolen goods, mugging or assaulting others, etc.?
- d** gotten drunk or high?

Parental Attitudes Favorable Toward Drugs and Antisocial Behavior

- Q122** How wrong do your parents feel it would be for YOU to:

- a** have 1 or 2 drinks of beer, wine, or hard liquor (for example, vodka, whiskey, or gin) nearly every single day?
- b** smoke cigarettes?
- c** use marijuana?
- d** steal anything worth more than \$5?
- e** draw graffiti, or write things, or draw pictures on buildings or other property (without the owner's permission)?
- f** pick a fight with someone?

Protective Factors

Family Attachment

- Q109** Do you feel very close to your mother?
- Q116** Do you feel very close to your father?
- Q110** Do you share your thoughts and feelings with your mother?
- Q112** Do you share your thoughts and feelings with your father?

Opportunities for Prosocial Involvement

- Q111** My parents ask me what I think before most family decisions affecting me are made.

- Q115** If I had a personal problem, I could ask my mom or dad for help

- Q117** My parents give me lots of chances to do fun things with them.

Rewards for Prosocial Involvement

- Q113** Do you enjoy spending time with your mother?

- Q114** Do you enjoy spending time with your father?

- Q99** My parents notice when I am doing a good job and let me know about it.

- Q98** How often do your parents tell you they're proud of you for something you've done?

Risk and protective scale component items

School Domain

Risk Factors

Academic Failure

- Q16** Putting them all together, what were your grades like last year?
- Q14** Are your school grades better than the grades of most students in your class?

Low Commitment to School

- Q21** During the LAST FOUR WEEKS, how many whole days of school have you missed because you skipped or “cut”?

- Q17** How important do you think the things you are learning in school are going to be for your later life?
- Q18** How interesting are most of your courses to you?
- Q20** How often do you feel that the schoolwork you are assigned is meaningful and important?
- Q19** Now, thinking back over the past year in school, how often did you:
 - a** enjoy being in school?
 - b** hate being in school?
 - c** try to do your best work in school?

Protective Factors

Opportunities for Prosocial Involvement

- Q7** Teachers ask me to work on special classroom projects.
- Q10** There are lots of chances for students in my school to talk with a teacher one-on-one.
- Q15** I have lots of chances to be part of class discussions or activities.
- Q6** In my school, students have lots of chances to help decide things like class activities and rules.
- Q9** There are lots of chances for students in my school to get involved in sports, clubs, and other school activities outside of class.

Rewards for Prosocial Involvement

- Q8** My teachers notices when I am doing a good job and let me know about it.
- Q11** I feel safe at my school.
- Q12** The school lets my parents know when I have done something well.
- Q13** My teachers praise me when I work hard in school.

Risk and protective scale component items

Peer-Individual Domain

Risk Factors

Rebelliousness

- Q71** I like to see how much I can get away with.
- Q72** I ignore the rules that get in my way.
- Q70** I do the opposite of what people tell me, just to get them mad.

Early Initiation of Antisocial Behavior

- Q24** How old were you when you first (even if only one time):
 - l** got suspended from school?
 - m** got arrested?
 - n** carried a handgun?
 - o** attacked someone with the idea of seriously hurting them?

Early Initiation of Drug Use

- Q24** How old were you when you first (even if only one time):
 - a** smoked marijuana?
 - b** smoked a cigarette, even just a puff?
 - c** had more than a sip or two of beer, wine, or hard liquor (for example, vodka, whiskey, or gin)?
 - d** began drinking alcoholic beverages regularly, that is, at least once or twice a month?

Attitudes Favorable Toward Antisocial Behavior and Drug Use

- Q25** How wrong do you think it is for someone your age to:
 - a** take a handgun to school?
 - b** steal anything worth more than \$5?
 - c** pick a fight with someone?
 - d** attack someone with the idea of seriously hurting them?
 - e** stay away from school all day when their parents think they are at school?
 - f** drink beer, wine or hard liquor (for example, vodka, whiskey, or gin) regularly?
 - g** smoke cigarettes?
 - h** use marijuana?
 - i** use LSD, cocaine, amphetamines or another illegal drug?

Perceived Risk of Drug Use

- Q66** How much do you think people risk harming themselves (physically or in other ways) if they:
 - a** smoke one or more packs of cigarettes per day?
 - b** try marijuana once or twice?
 - c** smoke marijuana once or twice a week?
 - d** take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day?

Interaction with Antisocial Peers

- Q22** Think of your four best friends (the friends you feel closest to). In the past year (12 months), how many of your best friends have:
 - h** been suspended from school?
 - j** carried a handgun?
 - k** sold illegal drugs?
 - m** stolen or tried to steal a motor vehicle such as a car or motorcycle?
 - n** been arrested?
 - o** dropped out of school?

Friends' Use of Drugs

- Q22** Think of your four best friends (the friends you feel closest to). In the past year (12 months), how many of your best friends have:
 - b** smoked cigarettes?
 - c** tried beer, wine, or hard liquor (for example, vodka, whiskey, or gin) when their parents didn't know about it?
 - e** used marijuana?
 - g** used LSD, cocaine, amphetamines, or other illegal drugs?

Rewards for Antisocial Behavior

- Q67** What are the chances you would be seen as cool if you:
 - a** smoked cigarettes?
 - c** began drinking alcoholic beverages regularly, that is, at least once or twice a month?
 - e** smoked marijuana?
 - f** carried a handgun?

Risk and protective scale component items

Peer-Individual Domain

Risk Factors (cont'd)

Intentions to Use

Q69 Sometimes we don't know what we will do as adults, but we may have an idea. Please answer how true these statements may be for you. WHEN I AM AN ADULT, I WILL:

- a** smoke cigarettes.
- b** drink beer, wine, or liquor.
- c** smoke marijuana.

Depressive Symptoms

Q62 In the past 12 months have you felt depressed or sad MOST days, even if you feel okay sometimes?

Q59 Sometimes I think that life is not worth it.

Q60 At times I think I am no good at all.

Q61 All in all, I am inclined to think that I am a failure.

Protective Factors

Belief in the Moral Order

Q64 I think it is okay to take something without asking if you can get away with it.

Q63 It is all right to beat up people if they start the fight.

Q58 I think sometimes it's okay to cheat at school.

Q121 It is important to be honest with your parents, even if they become upset or you get punished.

Religiosity

Q51 How often do you attend religious services or activities?

Interaction with Prosocial Peers

Q22 Think of your four best friends (the friends you feel closest to). In the past year (12 months), how many of your best friends have:

- a** participated in clubs, organizations, or activities at school?
- d** made a commitment to stay drug-free?
- f** tried to do well in school?
- i** liked school?
- l** regularly attended religious services?

Prosocial Involvement

Q27 How many times in the past year (12 months) have you:

- e** participated in clubs, organizations, or activities at school?
- g** done extra work on your own for school?
- j** volunteered to do community service?

Rewards for Prosocial Involvement

Q67 What are the chances you would be seen as cool if you:

- b** worked hard in school?
- d** defended someone who was being verbally abused at school?
- g** regularly volunteered to do community service?

Contacts

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