## FINAL REPORT OF THE DEPARTMENT OF CRIMINAL JUSTICE SERVICES

# A REVIEW OF VIRGINIA YOUTH DRUG AND ALCOHOL SURVEY EFFORTS

TO THE GOVERNOR AND
THE GENERAL ASSEMBLY OF VIRGINIA



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#### A Review of Virginia Youth Drug and Alcohol Survey Efforts

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#### I. AUTHORITY FOR STUDY

House Joint Resolution 613, passed by the 1997 Session of the General Assembly, directed the Department of Criminal Justice Services to "review previous survey efforts measuring drug and alcohol use by young people across the Commonwealth" to assist localities in their intervention efforts. This report is submitted to the General Assembly in fulfillment of that directive. (A complete copy of the resolution is shown in Appendix A.)

#### II. EXECUTIVE SUMMARY

The purpose of this study was to review and describe previous survey efforts used to measure drug and alcohol use by youth in Virginia. As directed by HJR 613, this study was requested to assist localities in drug and alcohol prevention and program planning. This review revealed that statewide drug and alcohol survey efforts of youth have been conducted in Virginia in 1989, 1992, and 1993; however, the results of those surveys do not provide a comprehensive picture of drug and alcohol use in Virginia. In addition, these findings could not be compared to national survey findings because the samples of students who participated in these studies did not represent the entire state of Virginia. Furthermore, the results of these statewide surveys were outdated and were not useful for examining within-state differences because findings were not reported for individual localities.

#### Local Survey Efforts

Because statewide survey efforts ceased after 1993, many localities have conducted their own survey efforts to measure alcohol and drug use by local youth. Eighty-two percent of the local Safe and Drug-Free Schools and Communities Act Coordinators from the school divisions that responded to our questionnaire indicated that their school division had administered a survey within the past ten years. The remaining 18 % either had not administered or were unsure if they had administered a drug and alcohol survey.

There was a great deal of variation in the survey methodologies used by localities that had administered drug and alcohol surveys. Over sixteen different types of drug and alcohol surveys were administered throughout the state between 1987 and 1997. Furthermore, the grade levels that were included in the survey samples ranged from fourth to twelfth grade. Because of these differences in survey methodologies, survey findings could not be summarized to provide a statewide estimate of youth drug and alcohol use. Additionally, the findings could not be used to make comparisons between localities. Therefore, local survey findings are not presented in this report.

However, a number of interesting findings were obtained from questionnaires completed by the local Safe and Drug-Free Schools and Communities Act Coordinators (SDFSCACs) throughout the state. When asked to describe their most recent youth drug and alcohol survey efforts, most SDFSCACs indicated they had used either the PRIDE Survey, a locally developed survey or the Virginia Student Survey. Only 55% of the SDFSCACs reported their locality had administered a

survey since 1994. Additionally, most SDFSCACs reported the results of their most recent surveys were useful for general planning or benchmarking purposes. About half of the SDFSCACs reported they had plans to administer a drug and alcohol survey in the future, and a majority of all respondents (78%) reported their locality would be interested in participating in a future statewide survey effort.

#### Drug and Alcohol-Related School Incidents/Offenses

Because survey findings could not be summarized to provide statewide estimates of drug and alcohol use or to make comparisons between localities, youth drug and alcohol offense data were also collected from the Virginia Department of Education, the Department of Motor Vehicles and the Department of State Police to provide a more standardized measure of youth alcohol and drug use. The findings indicated more drug and alcohol related arrests for youth between the ages of 15 and 17 than youth age 14 and under. The findings from these data also indicated substantial differences between localities with populations under 100,000 and localities with populations over 100,000. On average, the smaller localities had relatively higher rates of students possessing drugs and alcohol on school grounds and arrests for driving under the influence of alcohol. The larger localities had relatively higher rates of marijuana and cocaine-related arrests.

Because the drug and alcohol offense data were designed to provide statewide data, the number of offenses were readily available in a uniform format for all localities in Virginia. Despite the standardized format of these data, however, there are several limitations inherent in using these findings for assessing youth drug and alcohol use. First, these data only included the number of youth who had been formally identified as drug and alcohol-involved by police and/or schools. They do not include youth who may be at earlier stages of substance abuse or youth who have not been identified by authorities. Second, differences in arrest rates between localities may represent variations in detection and reporting, rather than actual differences in the incidence of such offenses.

#### Conclusions and Recommendations

Appropriately administered, standardized youth surveys may be more useful than drug and alcohol offense data for measuring drug and alcohol use in the general population. In addition to potentially identifying drug and alcohol-involved youth who have not been formally identified by police and the schools, standardized surveys may also eliminate difficulties in interpretation due to variations in detection and reporting between localities. Evaluators recommend the following strategies to guide future drug and alcohol use assessments:

• Localities should use survey instruments to measure drug and alcohol use, as this method appears to offer the most feasible approach to assessing youth drug and alcohol use in the general population.

- Local school divisions, Offices on Youth, and substance abuse agencies should attempt to coordinate youth drug and alcohol assessment efforts and the dissemination of survey findings for program planning purposes.
- Virginia should consider creating a task-force to identify a uniform survey to be recommended for use throughout the state, thereby enhancing future efforts to compile survey findings. This task force could also be responsible for identifying funding sources and the mechanism through which the surveys should be administered.
- The results of drug and alcohol surveys should be considered in the allocation of funds for drug and alcohol prevention and treatment programs funds (e.g., SDFSCA monies, federal substance abuse prevention and treatment block grants). These findings should also be used for program evaluations of drug prevention and treatment programs.

#### III. INTRODUCTION

Research suggests that a significant proportion of American youth between the ages of 12 and 17 have experimented with alcohol and drugs at some point in their lifetimes. According to the National Household Survey on Drug Abuse (U.S. Department of Health and Human Services, 1996a), 22 % of the youth who were interviewed reported using an illicit drug at least once in their lifetime. Additionally, 40 % of the youth in this survey reported drinking alcohol at least once.

Although alcohol and drug use seem to progress with age, substance use appears to begin quite early (U.S. Department of Health and Human Services, 1996a; Virginia Department of Health, 1997). In fact, national research indicates that the peak years for initiating alcohol and drug use are between seventh and ninth grade. Additionally, many students in both junior high school and senior high school report that alcohol and marijuana are "fairly easy" or "very easy" for them to obtain.

Drug and alcohol use are associated with many negative consequences for youth. For example, studies have shown that substance use among adolescents may be linked to sexually transmitted diseases (Fullilove, Fullilove, Bowser, and Gross, 1990) and traffic fatalities (U.S. Department of Health and Human Services, 1991a), as well as juvenile delinquency (Huizinga, Loeber, and Thornberry, 1993). Drug and alcohol use are likewise associated with juvenile homicide, suicide, and academic difficulties (U.S. Department of Health and Human Services, 1991b).

Thus, prior research suggests that adolescents who use drugs and alcohol are more likely to engage in criminal/delinquent behavior, experience problems in school, and behave in ways that threaten their health and the health of others. The costs associated with these problems may include larger juvenile court caseloads, the need for increased capacities for juvenile detention centers, the need for more school staff to handle student problems associated with drug use, and more money being spent on health care problems related to drug and alcohol use. There is little doubt that adolescent drug and alcohol use places substantial burdens on criminal justice, education, and health care systems at the national, state, and local levels.

#### THE ASSESSMENT OF YOUTH DRUG AND ALCOHOL USE

An accurate assessment of the number of youth who are using alcohol and other drugs is an important step towards effective prevention and treatment of youth substance abuse. In addition to providing prevention and treatment programs with the information they need for planning purposes, assessments of drug and alcohol use are also essential for determining the effectiveness of prevention programs. By identifying successful drug prevention programs and describing youth who are most at-risk for substance use, youth drug and alcohol assessments may also help decision-makers determine how to allocate funds and other resources most efficiently.

There are a variety of measures used to estimate the number of youth who are involved with drugs and alcohol, including youth alcohol and drug-related arrests, youth drug treatment facility usage, and youth drug and alcohol survey data. Alcohol and drug-related arrests and drug treatment facility usage differ from survey data because they only focus on offender and treatment populations. Youth drug and alcohol surveys, on the other hand, are broader in scope. In addition to possibly identifying youth with drug-related offense and treatment histories, surveys may also identify youth who are at earlier stages of drug involvement. Therefore, survey data may be more suitable for estimating drug/alcohol use in the general youth population.

#### REVIEW OF NATIONAL YOUTH ALCOHOL AND DRUG USE SURVEY EFFORTS

Several nationwide, self-administered surveys have attempted to assess youth drug and alcohol usage. In part, these school-based survey efforts provided a foundation for the HJR 613 study request. Three of the most recent nationwide survey efforts, the Monitoring the Future Survey, the PRIDE Survey, and the Youth Risk Behavior Survey, are described below. (See Appendix B for copies of the complete surveys.)

#### **National Assessment Tools**

Monitoring the Future Survey. The University of Michigan Research Center began administering the Monitoring the Future Survey (MTF) in 1975. Although it was originally designed to assess drug and alcohol use among high school seniors, eighth grade and tenth grade students also began participating in the study in 1991. Each annual effort surveys about 50,000 eighth, tenth, and twelfth grade students from approximately 424 public and private secondary schools across the country. The survey methodology uses a random sampling technique to ensure that participants represent the general population of youth in the United States.

<u>PRIDE Survey</u>. Administration of the National Parents' Resource Institute for Drug Education (PRIDE) Survey began in 1987. Although the sample size of PRIDE survey participants is large, the students are not necessarily representative of all youth in the United States because schools participate either voluntarily or in compliance with school board or state requirements. The 1995-96 survey included 129,560 students in grades six through twelve from 25 states.

<u>Youth Risk Behavior Survey</u>. Nationwide administrations of the Youth Risk Behavior (YRB) Survey, developed by the United States Centers for Disease Control (CDC), have taken place in 1990, 1991, 1993, and 1995. In each case, sampling techniques were used to ensure that the students who participated were representative of all students in grades nine through twelve in public and private schools throughout the United States.

<sup>&</sup>lt;sup>1</sup> A fourth measure, the National Household Survey on Drugs and Alcohol (NHSDA), is also commonly used to assess youth drug and alcohol use at the national level. Results from the NHSDA are not specifically included in this review because the procedure involves an interview at the student's home, rather than a self-administered survey in a school setting.

#### Summary of National Drug and Alcohol Survey Findings

The MTF (U.S. Department of Health and Human Services, 1996b), PRIDE, and YRB (U.S. Department of Health and Human Services, 1996c) Surveys each revealed that alcohol use among youth has remained high, but steady, over the past five to six years. Additionally, both the MTF Survey and the PRIDE Survey results showed increases in illicit drug use among youth. The YRB Survey results, however, only appeared to show a substantial increase in the use of marijuana. These national findings were not available on a state-specific basis, therefore, Virginia findings could not be derived from these national data sets.

#### **PURPOSE OF STUDY**

In consideration of existing national survey data which indicated an increase in self-reported drug use among youth, House Joint Resolution 613 was passed by the 1997 General Assembly to examine recent drug and alcohol surveys of young people in Virginia. This resolution also aimed to establish baseline data on the prevalence of youth drug and alcohol use for drug and alcohol program planning purposes. As directed by the study resolution, one goal of this study was to compile information on survey efforts and describe which surveys were used, years in which surveys were administered, and the composition of the survey samples.

Statewide survey efforts conducted in 1989, 1992, and 1993 were independently discussed in existing project reports. (See Virginia Department of Education, 1992; Virginia Department of Education, 1993; and Virginia Polytechnic Institute and State University, 1989.) A brief review of each of these survey efforts is included in this report.

Because no statewide survey efforts have been conducted since 1993, many localities have implemented their own survey efforts to measure drug and alcohol use in local populations. Evaluators contacted local Safe and Drug-Free Schools and Communities Act Coordinators and Local Offices on Youth for this information. Consequently, summary information on local survey efforts is also reviewed.

Evaluators originally established a secondary goal to summarize the actual findings from each local survey to provide information on the prevalence of youth drug and alcohol use throughout the commonwealth and to report specific drug and alcohol survey findings for each locality in Virginia for program planning purposes. However, a review of local survey processes revealed substantial differences in survey methodologies across localities, rendering a summary or comparison of survey findings between localities impossible.

Because locality-specific survey findings could not be summarized to provide information on the prevalence of youth drug and alcohol use across the commonwealth, recent youth drug and alcohol offense data obtained from the Virginia State Police, the Department of Motor Vehicles, and the Department of Education are included in this report to provide additional information. These data are also reported by each locality for program planning purposes. However, there are several limitations to generalizing from these data, which are discussed later in the report.

#### IV. METHODOLOGY

This study includes data from three primary sources: 1) three statewide surveys of drug and alcohol use in Virginia's youth (1989 Virginia Student Survey, 1992 Youth Risk Behavior Survey, 1993 Youth High School Risk Behavior Survey), 2) surveys of Safe and Drug-Free Schools and Communities Act Coordinators, and 3) youth drug and alcohol-related offense statistics from the Department of Education, Department of Motor Vehicles, and Virginia State Police.

#### Recent Statewide Drug and Alcohol Surveys

In 1989, the Governor's Council on Alcohol and Drug Abuse Problems contracted with the Department of Communication Studies at Virginia Polytechnic Institute and State University to develop and administer the "Virginia Student Survey" (VSS) to measure the extent of drug and alcohol use by Virginia youth. Sixty-three schools across the Commonwealth were selected at random for the study. Of these, 59 schools agreed to participate. Questionnaires were returned from 89 percent of the eighth, tenth, and twelfth grade students reported to be enrolled in those schools at the time of the survey administration.

The YRB Survey (see p. 5) was later implemented by the Virginia Department of Education and the Governor's Office on Drug Policy in 1992 and 1993. In 1992, a random sample of 47 public schools enrolling students in grades nine through twelve were invited to participate in this survey. From this sample, 26 of the public schools (55 % of those selected) agreed to participate. Of the projected 2,075 students who were randomly chosen from those 26 schools, 1,640 students obtained parental permission and actually completed the survey. In 1993, a random sample of 53 public schools enrolling students in grades nine through twelve were invited to participate in the survey. From this sample, 35 of the schools (66% of those selected) agreed to participate. A total of 1,923 students received parental permission and completed the survey.

For each of these survey efforts, aggregate data are available for the school divisions that participated in this survey effort. However, data are not available for individual schools or localities from any of these surveys.

#### Questionnaires from Safe and Drug-Free Schools and Communities Act Coordinators

Evaluators attempted to collect recent drug and alcohol survey information from needs assessments conducted by the local Offices on Youth. Through this process, we discovered that many localities did not operate an Office on Youth, and many operational Offices on Youth had not included drug and alcohol information in their needs assessments. In addition, some of the Offices on Youth indicated that they did not possess the most up-to-date information on drug and alcohol surveys conducted in each district, primarily because the surveys were administered by the local school system.

Because drug and alcohol survey information was not consistently available from the Offices on Youth, evaluators then contacted the Safe and Drug-Free Schools and Communities Act Coordinator (SDFSCAC) in each locality. Local SDFSCACs are responsible for administering SDFSCA funds for their school divisions and providing information to the Virginia Department of Education required for the SDFSCA reporting form. With the assistance of the Virginia Department of Education, a questionnaire was mailed to 131 SDFSCACs to determine youth drug and alcohol survey practices in each locality. The questionnaire asked respondents to identify persons who make local decisions about drug and alcohol survey efforts, specify the current methodologies used locally to measure student drug and alcohol use, and describe the usefulness of drug and alcohol surveys. SDFSCACs were also asked about their plans to administer student drug and alcohol surveys in the future and their experiences with past statewide survey efforts. The complete SDFSCAC survey is shown in Appendix C.

#### Additional Youth Drug and Alcohol-Related Offense Data

Because locality-specific youth drug and alcohol survey results could not be summarized or compared, the following youth drug and alcohol-related offense data were collected as indicators of drug and alcohol use in each locality<sup>2</sup>:

- Incidents of students possessing drugs or alcohol in school: The Code of Virginia (§ 22.1-280.1) requires the Department of Education to collect data on incidents of crime, violence, and substance abuse from each local school division in Virginia. These data reflect the incidents of students possessing drugs or alcohol on school property, school buses, and during school-sponsored activities. Data were available for each locality in Virginia from 1993-1995 (Virginia Department of Education, 1996).
- Department of Motor Vehicles (DMV) Arrest Data: The number of youth arrested for Driving Under the Influence (DUI) were provided by the Department of Motor Vehicles. This information is collected by DMV in collaboration with the Virginia State Police and the Virginia Department of Transportation. DUI arrest data for drivers ages 16-17 are presented for each locality in Virginia for 1993-1996.
- <u>Uniform Crime Report Data:</u> Drug arrests (possession/sales of marijuana and narcotics) for juveniles under the age of 18 are presented for each locality from the Uniform Crime Report statistics collected by the Department of State Police from 1993 to 1996.

<sup>&</sup>lt;sup>2</sup> Reliable estimates of youth in drug and alcohol treatment facilities were not available from the Department of Mental Health, Mental Retardation, and Substance Abuse Services. DMHMRSAS staff members reported this was due to a lack of information system resources for tracking this data. The Department of Alcoholic Beverage Control was also contacted to determine if they collected information that might be useful in our review of youth drug and alcohol use. Officials from this agency reported the use of DMV statistics in their efforts to monitor youth drug and alcohol use. They did not identify any additional sources of information relevant to this report.

#### V. RESULTS

The results of this study are divided into three sections: a summary of the three statewide drug and alcohol surveys, results of the SDFSCAC survey, and locality-specific youth drug and alcohol offenses for the Commonwealth of Virginia.

#### Summary of Statewide Drug and Alcohol Surveys

A summary of the findings from the 1989 VSS, the 1992 YRB Survey and the 1993 YRB Survey are described below. Because different localities participated in each of the three survey efforts, it is difficult to determine if changes in findings between the three years are due to real differences in drug and alcohol use across time or differences between youth drug and alcohol use practices between the localities that participated in each of those efforts. In addition, the reporting procedures of the 1992 and 1993 YRB Surveys made it difficult to draw direct comparisons across time because findings were not consistently presented for each grade. Comparisons between the findings of the three survey efforts, therefore, should be interpreted with caution.

A comparison of alcohol use rates over the four-year period (1989-1993) suggests that alcohol use may have increased slightly from 1989 to 1992 and 1993 for students in twelfth grade. In 1989, 47% of the twelfth grade students reported they had tried alcohol during the past month. However, the percentage of eleventh and twelfth grade students who reported drinking alcohol during the past month was 51 % in 1992 and 54 % in 1993. Because alcohol use tends to increase with age, the 1992 and 1993 figures probably would have been even higher if they had only included the twelfth grade in that report. No comparable data were available for ninth and tenth grade students.

The average percentage of students who reported using marijuana remained steady from 1989 to 1992 and 1993. In 1989, 26 % of the students in grades 8, 10, and 12 reported having tried marijuana. Even though the sample of students in 1992 and 1993 included students in grades 9, 10, 11, and 12, the rates remained almost exactly the same: 27 % of the students in 1992 and 26 % of the students in 1993 reported trying marijuana.

The average percentage of students who reported using cocaine decreased over the four-year period. The percentages of students who reported using cocaine were 7 %, 6 %, and 4 % in 1989, 1992, and 1993. Despite the older age of the students in the 1992 and 1993 samples, the results suggested a slight decrease in the use of cocaine from 1989 to 1993.

## <u>Safe and Drug-Free Schools and Communities Act Coordinator (SDFSCAC)</u> <u>Ouestionnaires</u>

Because many localities had administered drug and alcohol surveys after the last statewide survey administration in 1993, local SDFSCACs were contacted to review these survey

methodologies. This information was used to determine whether or not the findings could be summarized to provide statewide youth drug and alcohol use estimates or to make comparisons of youth drug and alcohol use findings between localities. The results of the SDFSCAC questionnaires distributed by DCJS are presented below. These results are based on questionnaires from 115 localities (88%) that were returned to DCJS. The percentages shown in each table are based on the number of respondents for each question, not necessarily the entire sample of respondents.

<u>Survey Decision-Making</u>. As shown in Table 1, the results of the questionnaire revealed that superintendents, school board staff, and SDFSCACs are the persons most frequently responsible for making drug and alcohol survey decisions. These decisions include whether or not a survey will be administered, which survey will be administered, and how often a survey will be administered. Substance abuse advisory committees, local school staff, and community agencies are often involved as well, but to a lesser extent.

Table 1	
Persons Responsible For Making Decisions	5
About Student Drug and Alcohol Surveys	<b>1</b> 1.
	% of SDFSCACs
Who decides if a survey will be administered?	
(A total of 111 (96%) of the respondents answered this question)	
Superintendents	60%
School Board Staff	40%
Safe and Drug-Free School and Community Act Coordinator	32%
Substance Abuse Advisory Committee	13%
Local School Staff	11%
Community Agency	4%
Who decides which survey to administer?	
(A total of 111 (96%) of the respondents answered this question)	
Superintendents	
Safe and Drug-Free School and Community Act Coordinator	43%
School Board Staff	43%
Substance Abuse Advisory Committee	36%
Local School Staff	18%
Community Agency	11%
Recommendation of Department of Education	5%
2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1%
Who decides how often to administer a survey?	
(A total of 107 (93%) of the respondents answered this question)	
Superintendents	46%
Safe and Drug-Free School and Community Act Coordinator	46%
School Board Staff	37%
Substance Abuse Advisory Committee	17%
Local School Staff	11%
Community Agency <sup>a</sup> Percentages of localities which reported persons recognities for making decisions al	5%

<sup>&</sup>lt;sup>a</sup>Percentages of localities which reported persons responsible for making decisions about drug and alcohol surveys do not add up to 100% because many localities reported multiple persons.

Local Drug and Alcohol Survey Efforts. A description of the most recent local drug and alcohol survey efforts is presented in Table 2. The vast majority of localities (85%) had conducted a drug and alcohol survey within the past ten years. Among the 105 localities that had administered drug and alcohol surveys, most used either the PRIDE Survey (36%), a locally developed survey (26%), or the Virginia Student Survey (13%) to measure drug and alcohol use.

Table 2	
Description of Local Drug and Alcohol Survey Effo	orts <sup>a</sup>
Have you administered a drug and alcohol survey to the students in your locality in the past ten years? (A total of 115 (100%) b respondents answered this	% of SDFSCACs
question)	
Yes	85%
No	10%
Don't Know	6%
Which survey was most recently administered in your locality? (A total of 105 (91% respondents answered this question)	6)
PRIDE Survey	36%
Locally Developed Survey	26%
Virginia Student Survey	13%
Youth Risk Behavior Survey	6%
Informational Survey About You	5%
American Drug and Alcohol Survey	2%
Johnson Institute Student View Survey	2%
Better Beginnings	1%
George Mason University Student Attitude Survey	1%
Communities That Care Survey	1%
Michigan Drug and Alcohol Survey	1%
The Search Institute Drug and Alcohol Survey	1%
National Institute on Drug Abuse Survey	1%
Challenge Day Survey	1%
Southern Association for School Accreditation Survey	1%
Monitoring the Future Survey	1%
Center for Substance Abuse Prevention Survey	1%

Responses may not always total 100% due to rounding.

<u>Methodology of Local Drug and Alcohol Survey Efforts</u>. As shown in Table 3, slightly more than half of the localities (55%) reported administering their most recent survey within the past four years. Overall, more than half of the localities reported they had included grades eight through twelve in their most recent surveys. Less than half of the localities reported they had included grades four through seven.

Ten of these responses were based on supplementary data obtained from the local Offices on Youth.

Table 3	
Methodology of Local Drug and Alco	hol Survey Efforts
	% of SDFSCACs
In what year did you administer your most recent drug and alcoho	ol survey? (A
total of 105 (91%) respondents answered this question)	
Don't know	1%
1987	1%
1988	1%
1989	9%
1990	9%
1991	8%
1992	8%
1993	8%
1994	11%
1995	17%
1996	15%
1997	12%
What grades did you include in your most recent survey? (A total	of 104 (90%) <sup>b</sup>
respondents answered this question)	
Grade 4	9%
Grade 5	14%
Grade 6	40%
Grade 7	44%
Grade 8	67%
Grade 9	57%
Grade 10	85%
Grade 11	55%
Grade 12	74%

<sup>&</sup>lt;sup>a</sup>Responses may not always total 100% due to rounding.

<u>Utility of Local Drug and Alcohol Survey Efforts</u>. The reported uses of the local drug and alcohol survey efforts are shown in Table 4. Unfortunately, many of the SDFSCACs who indicated they had administered a survey did not respond when asked how they used these survey results. Among the 57% of the SDFSCACs who did respond, the most commonly mentioned uses for the drug and alcohol survey results were general planning (55%) and benchmarking (22%). Benchmarking refers to establishing baseline data, usually for evaluation purposes or for making comparisons with other localities or national data. Although only 5% of the localities reported using the results specifically for drug education and planning, this figure may be misleadingly low because this specific use may have been included in the broader general planning response. On average, the SDFSCACs rated the usefulness of the drug and alcohol surveys as a 3.8 on a scale of 1 (not very useful) to 5 (very useful).

Percentages of localities which included each grade in survey efforts do not add up to 100% because many localities surveyed multiple grades in their most recent survey.

Table 4		
Utility of Local Drug and Alcohol Survey Efforts <sup>a</sup>		
	% of SDFSCACs	
How did you use the results from your most recent survey? (A total of 60 (52%) of the	<b>;</b>	
respondents answered this question)		
General Planning	55%	
Benchmarking	22%	
Shared With Others	7%	
Drug Education	5%	
Community Planning	5%	
Did Not Help In Program Planning	5%	
Other	2%	

<sup>&</sup>lt;sup>a</sup>Responses do not total 100% due to rounding.

<u>SDFSCACs' Opinions of Virginia Student Survey, the YRB Survey and the PRIDE Survey</u>. As shown in Table 5, SDFSCACs were most familiar with the YRB Survey and the PRIDE Survey. Seventy-one percent of the respondents who were familiar with the YRB Survey indicated they would recommend the YRB Survey to other localities. However, only 67 % of the respondents who were familiar with the PRIDE survey and 61 % of the respondents who were familiar with the VSS indicated they would recommend each of those surveys.

When asked to discuss their opinions about each of the surveys, very few SDFSCACs responded. Remarks about the VSS were equally divided between positive and negative comments. Of the 8 SDFSCACs who commented on the VSS, 4 (50%) described the survey as informative and useful and 4 (50%) suggested that the survey items were inadequate or invalid. For example, one respondent wrote that the VSS provided "comprehensive, good, useful data." However, another respondent suggested that "more recent and better developed surveys" might be available.

Out of the 15 SDFSCACs who commented on the YRB Survey, 6 (40%) described it as too controversial. For example, one respondent wrote that "the survey items are unacceptable to the community." Respondents may have been referring to the questions on sexual behavior or suicide that are included on this survey. However, five respondents (33%) characterized the survey items as good/valid. One person, for example, noted that "the survey covers a broad range of health behaviors." Fewer respondents suggested that the survey was useful or that the survey items were inadequate or invalid.

Thirty-four SDFSCACs also commented about the PRIDE Survey. Thirteen (38%) described the survey items as good/valid and nine (26%) characterized the survey as useful. For example, one SDFSCAC wrote that PRIDE was "appropriate for planning, grant writing, and other uses." However, eight respondents (24%) reported that the survey items were inadequate or invalid, and four respondents (12%) indicated that the survey was too expensive to administer due to copyright fees.

Although 40% of the respondents indicated that the YRB Survey items might be too controversial, there seemed to be fewer concerns about the validity and reliability of the YRB Survey instrument, when compared to the PRIDE Survey and the VSS. This may explain why the YRB Survey was more likely to be recommended by respondents.

Table 5 SDFSCACs' Opinions of the Virginia Student S Youth Risk Behavior Survey and the PRIDE	
	% of SDFSCACs
Are you familiar with the Virginia Student Survey? (A total of 86 (75%) of	
the respondents answered this question)	
Yes	42%
No	47%
Don't Know	12%
Would you recommend the Virginia Student Survey for use in other	
localities? (A total of 36 (31%) of the respondents answered this question) <sup>b</sup>	
Yes	61%
No	17%
Don't Know	22%
Are you familiar with the Youth Risk Behavior Survey? (A total of 96 (83%) of the respondents answered this question) Yes No Don't Know	69% 22% 9%
Would you recommend the Youth Risk Behavior Survey for use in other localities? (A total of 66 (57%) of the respondents answered this ques	
Yes	67%
No .	9%
Don't Know	24%
Are you familiar with the PRIDE Survey? (A total of 100 (87%) of the respondents answered this question)	
Yes	66%
No	14%
Don't Know	7%
Would you recommend the PRIDE Survey for use in other localities? (A total of 76 (66%) of the respondents answered this question) <sup>b</sup>	
Yes	71%
No	13%
Don't Know	16%

<sup>&</sup>lt;sup>a</sup>Responses do not total 100% due to rounding.

<u>SDFSCACs' Opinions of Other Drug and Alcohol Surveys</u>. As shown in Table 6, only 23 (31%) of the respondents indicated they were familiar with other drug and alcohol surveys aside from

<sup>&</sup>lt;sup>b</sup>Recommendations were only presented for SDFSCACs who indicated they were familiar with each instrument.

the YRB, PRIDE, and VSS. When asked which other surveys they were familiar with, 51% of the respondents mentioned either the Informational Survey About You, the American Drug and Alcohol Survey or a locally developed survey. Nine other surveys were also mentioned, but with much less frequency. When asked if they would recommend any of these twelve surveys, 77% of the respondents indicated they would recommend at least one of them. However, because only 22 SDFSCACs responded to this question, this represents a total of only 17 SDFSCACs who would recommend one of the twelve surveys to another locality.

Table 6	
SDFSCACs' Opinions of Other Drug and Alcohol Survey Inst	ruments <sup>2</sup>
	% of SDFSCACs
Are you familiar with any other drug and alcohol surveys? (A total of 73 (63%) of the	
respondents answered this question)	
Yes	31%
No	66%
Don't Know	3%
Which other surveys are you familiar with? (A total of 24 (21%) of the respondents answered this question)	
Informational Survey About You (ISAY)	17%
Locally Developed	17%
American Drug and Alcohol Survey	17%
Johnson Institute Student View Survey	12%
Monitoring the Future Survey	8%
Better Beginnings	4%
George Mason University Student Attitude Survey	4%
Communities That Care Survey	4%
Michigan Drug and Alcohol Survey	4%
Better Way to Prevention Survey	4%
The Search Institute Drug and Alcohol Survey	4%
The Colorado State Community Drug and Alcohol Survey	4%
Would you recommend any other drug and alcohol surveys for use in	
other localities? (A total of 22 (19%) of the respondents answered this question )	
Yes	77%
No	14%
Don't Know	9%

<sup>&</sup>lt;sup>a</sup>Responses may not always total 100% due to rounding.

<u>SDFSCACs'</u> Experiences with Statewide Survey Administrations. A description of the SDFSCACs' experiences with statewide survey administrations is shown in Table 7. Less than twenty percent of the respondents indicated they had participated in the statewide administrations of either the Virginia Student Survey (VSS) or the Youth Risk Behavior Survey (YRB). For both surveys, the most often mentioned use of the surveys was "general planning." A significant number of participants in the VSS also mentioned using the survey results to develop goals for the Office on Youth and for drug education. Participants in the YRB Survey were more likely to mention benchmarking (see p.12) as an additional use of survey results. Ratings of the usefulness of each survey were almost identical. On a scale from 1 (not very useful) to 5 (very

useful), the VSS participants rated the usefulness of their results a 3.7 and the YRB participants rated the usefulness of their results a 3.8.

Additionally, most localities (78%), regardless of prior participation in a statewide survey, indicated they would be in favor of participating in a future statewide survey effort.

Table 7	
SDFSCACs' Experiences with the Statewide Survey	<b>Y</b>
	% of SDFSCACs
Did your locality participate in the Statewide 1989 Virginia Student Survey	Administration?
(A total of 113 (98%) of the respondents answered this question)	
Yes	18%
No	41%
Don't Know	41%
How did you use the 1989 Virginia Student Survey Results? (A total of 15 (1	13%) of
respondents answered this question)	
General Planning	40%
Develop Goals for Office on Youth	20%
Drug Education	13%
Benchmarking	7%
Referrals to Community Service Boards	7%
Data couldn't be used	7%
Don't Know	7%
Did your locality participate in the Statewide 1992/1993 Youth Risk Behavid Administration? (A total of 112 (97%) of respondents answered this question	•
Yes	19%
No	52%
Don't Know	29%
How did you use the 1992/1993 Youth Risk Behavior Survey Results? (n=13	3)
General Planning	39%
Benchmarking	39%
Drug Education	8%
Shared With Others	8%
Community Planning	8%
Would your locality be interested in participating in a future statewide surv	/ev
administration? (A total of 113 (98%) of respondents answered this question	
Yes	78%
No	12%
Don't Know	10%

<sup>&</sup>lt;sup>a</sup>Responses may not always total 100% due to rounding.

<u>Future Student Drug and Alcohol Survey Planning</u>. A description of the SDFSCACs' future student drug and alcohol survey plans is shown in Table 8. Only one-quarter of the SDFSCACs reported they had a regular schedule for administering student drug and alcohol surveys. Among these localities, the schedules ranged from once a year to once every six years. Most localities with a regular schedule, however, conducted surveys every year (22%) or every two years (37%).

Table 8				
Future Student Drug and Alcohol Survey Planning				
Do you have a schedule for administering drug and alcohol surveys? (A total of 100 (87%) of respondents answered this question)	% of SDFSCACs			
Yes	25%			
No	75%			
What is your schedule for administering surveys? (A total of 25 (22%) of respondents answered this question)				
Every year	22%			
Every 2 years	37%			
Every 3 years	15%			
Every 4 years	15%			
Every 5 years	4%			
Every 6 years	7%			

<u>Future Drug and Alcohol Survey Methodologies</u>. Local drug and alcohol survey methodologies for future efforts are shown in Table 9. About half (51%) of the SDFSCACs reported they had plans to administer a drug and alcohol survey in the future. Eleven percent of the localities indicated they did not have plans to administer a future drug and alcohol survey, but 38 percent of the localities were unsure whether they would administer future surveys. Among those who planned to administer a survey in the future, 80% planned to do so within the next three years, and most planned to administer either a locally developed survey (24%) or PRIDE (22%).

Table 9	
Future Student Drug and Alcohol Survey Plans	
Do you plan to administer a drug and alcohol survey in the future? (A total	% of SDFSCACs
of 115 (100%) of all respondents answered this question)	
Yes	51%
No	11%
Undecided	38%
When will you administer the next survey? (A total of 59 (51%) of all	
respondents answered this question)	
1997-1998 school year	46%
1998-1999 school year	20%
1999-2000 school year	14%
2000-2001 school year	3%
Undecided	17%
Which survey will you administer in the future? (A total of 59 (51%) of all	
respondents answered this question)	
Locally Developed Survey	24%
PRIDE	22%
Youth Risk Behavior	9%
ISAY	3%
American Drug and Alcohol Survey	3%
George Mason University Student Attitude Survey	2%
Johnson Institute Student View Survey	2%
Don't Know	36%

<sup>\*</sup>Responses may not always total 100% due to rounding.

Reasons For Not Planning To Administer A Drug And Alcohol Survey In The Future. Eleven percent of the SDFSCACs indicated they had no plans to administer a drug and alcohol survey in the future. An additional thirty-eight percent of the SDFSCACs indicated they were uncertain about future drug and alcohol survey efforts. The reasons for these responses are listed in Table 10. Of the 50 respondents who provided reasons, many of these SDFSCACs attributed the lack of a definite plan to the need for permission from others, such as superintendents or school boards, or the fact that such surveys are not a high priority in their locality.

Table 10 Reasons for Not Having A Definite Drug and Alcohol Survey Plan			
	% of SDFSCAC		
Reasons for not planning to conduct a survey in the future or for being undecided			
about conducting a survey in the future: (A total of 50 (43%) of the respondents			
answered this question)			
Need permission from others	28%		
Information is not considered to be important	22%		
Lack of resources	14%		
Survey instruments are inadequate or invalid	12%		
Recently administered survey	10%		
Too controversial	4%		
Public relations issues	4%		
Another agency is conducting a survey	2%		
Discouraged by the Department of Education	2%		
Don't know	2%		

#### Youth Drug and Alcohol-Related Offense Data

Evaluators were unable to compile the local drug and alcohol survey findings to present statewide drug and alcohol use data among adolescents because of the differences in survey methodologies. Consequently, evaluators were also unable to determine if there were differences in youth drug and alcohol behaviors between localities. Therefore, youth drug and alcohol-related offenses were collected for each locality in the Commonwealth of Virginia to provide another perspective on current levels of youth drug and alcohol use.

It should be noted, however, that these data only represent the youth who have been formally identified through legal or educational procedures as being involved with drugs and alcohol. These data do not include youth who may be at earlier stages of drug involvement or youth who have engaged in substance use without being detected by authorities. It should also be noted that differences between localities may reflect differences in the detection and reporting of drug and alcohol-related offenses. For these reasons, comparisons between localities should be made with caution.

The following youth drug and alcohol-related offenses are shown in Tables 11-14 for each city and county in Virginia to provide limited, locality-specific information on youth drug problems in Virginia:

- incidents of students possessing drugs or alcohol in schools reported by localities to the Department of Education
- DUI arrests reported by the Department of Motor Vehicles
- Marijuana possession/sales arrests and narcotics possession/sales arrests reported by the Department of State Police.

Rates of the incidents of students possessing drugs and alcohol in schools are shown per 1,000 students in the locality. The DUI arrests, marijuana-related arrests, and narcotics-related arrests are shown per 1,000 people in the local population. The use of these rates, rather than numbers of incidents, allows for more appropriate comparisons among localities with different populations. Additionally, these rates are based on four-year averages (1993-1996) for each of the indicators.<sup>3</sup> These averages provide a more stable measure of each indicator than any single year.

The incidents of students possessing alcohol or drugs in schools ranged from .05 to 11.7 per 1,000 students, with an average of 2.75 incidents per 1,000 students across the state. The rate of DUI arrests ranged from .00 to .66 per 1,000 population, with an average of .07 DUI arrests per 1,000 population across the state. The rate of marijuana-related arrests ranged from .00 to .94 per 1,000 population, with an average of .22 arrests per 1,000 population across the state. Finally, the rate of narcotics-related arrests ranged from .00 to 1.15 per 1,000 population, with an average of .11 arrests per population across the state.

In the following tables, drug and alcohol offense data are presented for localities grouped into four population groups: less than 12,000; 12,000-25,000; 25,000-100,000; and over 100,000. These groupings allow for comparisons among localities that are similar in size. Localities are also ranked as high (top third), medium (middle third) or low (bottom third) on each of the four indicators within each population group. These rankings may be useful to identify localities experiencing greater problems.

The results of the drug and alcohol offense data revealed that the localities with populations less than 100,000 were very similar in the average number of youth drug and alcohol-related offenses reported. The localities with populations over 100,000 were different from the smaller localities in two significant ways. First, the larger localities had a lower rate of reports of students possessing drugs and alcohol in the schools and DUI arrests than the smaller localities. Second, the larger localities appeared to have a greater rate of marijuana and narcotics arrests than smaller localities. It is unclear why these differences exist between smaller and larger localities. One possibility, however, is that the school offenses and DUIs may be less likely to be detected or reported in larger localities. Another possibility may be that enforcement resources are focused on seemingly more serious marijuana/narcotics offenses in large localities.

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<sup>&</sup>lt;sup>3</sup> The incidents of students possessing drugs or alcohol in schools is based on a three-year average (1993-1995) because locality specific data were not available from the Department of Education for 1996.

Although not shown in Tables 11-14, analyses of the drug and alcohol-related offenses broken down by age across all localities revealed substantial differences in the rate of offenses between youth aged 14 and under and youth aged 15 to 17. Although age-related information was not available for the school possession charges or the DUI arrests, the data revealed an average of .03 marijuana-related arrests per thousand and .01 narcotics-related arrests per thousand for youth age 14 and under. However, among youth between the ages of 15 and 17, there was an average of .19 marijuana-related arrests per thousand and .09 narcotics-related arrests per thousand. These findings support other research which have suggested a progression of drug and alcohol use with age (Monitoring The Future Survey, 1996).

		Table 11			
	Juvenile Drug and Alcohol Related Offenses Reported (1993-1996)  Localities With Populations Under 12,000 <sup>a</sup>				
	Incidents of	Driving Under	Marijuana	Narcotics	
	Students	the Influence of	Possession/Sales	Possession/Sales	
	Possessing	Alcohol (DUI) Arrests-	Arrests-	Arrests-	
	Alcohol or Drugs	Ages 16-17	Age 17 and Under	Age 17 and Under	
	in Schools	(per 1,000 total	(per 1,000 total	(per 1,000 total	
	(per 1,000 students)	population)	population)	population)	
Counties:					
Amelia	11.70 (H) <sup>b</sup>	.10 (H)	.15 (M)	.05 (M)	
Bath	3.00 (H)	.05 (M)	.00 (L)	.00 (L)	
Bland	1.60 (L)	.04 (M)	.00 (L)	.00 (L)	
Charles City	1.60 (L)	.00 (L)	.15 (M)	.04 (M)	
Charlotte	2.50 (M)	.00 (L)	.00 (L)	.00 (L)	
Craig	4.90 (H)	.11 (H)	.16 (M)	.00 (L)	
Cumberland	2.90 (M)	.13 (H)	.16 (M)	.16 (H)	
Essex	1.90 (M)	.03 (L)	.05 (L)	.25 (H)	
Greene	2.50 (M)	.06 (M)	.16 (M)	.00 (L)	
Greenville	.86 (L)	.04 (M)	.15 (M)	.00 (L)	
Highland	5.10 (H)	.10 (H)	.10 (L)	.00 (L)	
King and Queen	3.40 (H)	.04 (M)	.04 (L)	.08 (M)	
King William	2.10 (M)	.04 (M)	.23 (H)	.08 (M)	
Lancaster	2.30 (M)	.07 (M)	.13 (M)	.09 (H)	
Lunenburg	1.60 (L)	.11 (H)	.00 (L)	.00 (L)	
Mathews	2.60 (M)	.08 (M)	.45 (H)	.09 (H)	
Middlesex	2.30 (M)	.03 (L)	.16 (M)	.03 (M)	
New Kent	2.90 (M)	.00 (L)	.13 (M)	.00 (L)	
Northumberland	2.60 (M)	.07 (M)	.18 (M)	.11 (H)	
Rappahannock	3.40 (H)	.00 (L)	.61 (H)	.04 (M)	
Richmond	.05 (L)	.13 (H)	.03 (L)	.06 (M)	
Surry	5.10 (H)	.00 (L)	.12 (L)	.00 (L)	
Sussex	.66 (L)	.03 (L)	.07 (L)	.10 (H)	
Cities:	.00 (2)	.03 (2)	.07 (2)	110(11)	
Bedford	3 10 (11)	.20 (H)	.65 (H)	.12 (H)	
Buena Vista	3.10 (H)	• •	1 ' '		
Clifton Forge	2.50 (M)	.66 (H)	.20 (H)	.00 (L)	
	4.10 (H)	.06 (M)	.38 (H)	.06 (M)	
Covington	2.00 (M)	.14 (H)	.00 (L)	.00 (L)	
Emporia	.86 (L)	N/A	.74 (H)	.31 (H)	
Falls Church	2.20 (M)	.00 (L)	.21 (H)	.08 (M)	
Franklin	.93 (L)	.08 (M)	.27 (H)	.31 (H)	
Galax	.83 (L)	.23 (H)	.15 (M)	.00 (L)	
Lexington	4.70 (H)	N/A	.11 (L)	.03 (M)	
Manassas Park	1.80 (L)	.04 (M)	.87 (H)	.03 (M)	
Norton	5.40 (H)	.36 (H)	.18 (M)	.24 (H)	
Poquoson	1.60 (L)	.13 (H)	.51 (H)	.00 (L)	
South Boston	N/A	.07 (M)	.14 (M)	.69 (H)	
Williamsburg	1.90 (M)	.03 (L)	.23 (H)	.27 (H)	
Overall	2.76	.09	.21	.09	

<sup>&</sup>lt;sup>a</sup>H=Highest Third, M=Middle Third, L=Lowest Third bThe unusually large number of incidents of drugs or alcohol on school grounds resulted from the 1994 data, in which an average of 22.6 incidents per 1,000 students were reported. However, the school possession data from 1993 (6.6 students per 1,000) and 1995 (6 incidents per 1,000) were also unusually high.

Table 12				
Juvenile Drug and Alcohol Related Offenses Reported (1993-1996)  Localities With Populations Greater than 12,000 and Less than 25,000°				
	Students	the Influence of	Possession/Sales	Possession/Sales
	Possessing	Alcohol (DUI) Arrests-	Arrests-	Arrests-
	Alcohol or Drugs	Age 16-17	Age 17 and Under	Age 17 and Under
	in Schools	(per 1,000 total	(per 1,000 total	(per 1,000 total
	(per 1,000 students)	population)	population)	population)
Counties:			F-F	
Alleghany	4.10 (H)	.00 (L)	.31 (H)	.02 (M)
Appomattox	1.50 (L)	.06 (M)	.06 (M)	.08 (H)
Brunswick	3.90 (H)	.06 (M)	.05 (L)	.02 (M)
Buckingham	2.70 (M)	.04 (M)	.02 (L)	.00 (L)
Caroline	4.00 (H)	.02 (L)	.38 (H)	.04 (M)
Clarke	2.50 (M)	.02 (L)	.30 (H)	.18 (H)
Dickenson	2.10 (L)	.07 (M)	.04 (L)	.00 (L)
Dinwiddie	4.90 (H)	.00 (L)	.22 (H)	.02 (M)
Floyd	2.30 (M)	.12 (H)	.04 (L)	.00 (L)
Fluvanna	3.40 (H)	.01 (L)	.06 (M)	.02 (M)
Giles	2.70 (M)	.18 (H)	.14 (M)	.00 (L)
Goochland	2.50 (M)	.02 (L)	.03 (L)	.06 (M)
Grayson	.16 (L)	.17 (H)	.05 (L)	.00 (M)
King George	3.10 (M)	.03 (M)	.03 (L) .10 (M)	.08 (H)
Lee	4.70 (H)	.03 (M)	.01 (L)	.00 (L)
Louisa	4.60 (H)	.01 (L)	.01 (L)	.00 (L)
Madison	1.90 (L)	.10 (H)	.01 (L)	.02 (M)
Nelson	5.30 (H)	.00 (L)	.02 (L) .17 (M)	.00 (L)
Northampton	4.20 (H)	.02 (L)	.29 (H)	.06 (M)
Nottoway	4.70 (H)	.06 (M)	.15 (M)	.18 (H)
Orange	2.60 (M)	.00 (M) .11 (H)	.26 (H)	.09 (H)
Page	3.40 (H)	.09 (H)	.09 (M)	.01 (L)
Patrick	1.50 (L)	.00 (L)	.00 (L)	.00 (L)
Powhatan	2.60 (M)	.04 (M)	.00 (L) .13 (M)	.04 (M)
Prince Edward	.53 (L)	1		.11 (H)
Rockbridge		.04 (M) .13 (H)	.07 (M)	.00 (L)
Scott	2.20 (M)	` ′	.07 (M)	.00 (L)
Southamptom	1.50 (L) 1.60 (L)	.03 (M)	.03 (L) .04 (L)	.00 (L)
Westmoreland	1.90 (L)	.01 (L) .09 (H)	.04 (L) .14 (M)	.11 (H)
Cities:	1.50 (L)	.09 (11)	.14 (141)	.11 (11)
Bristol	90 (1)	12 (11)	00 (1)	04 (M)
	.80 (L)	.13 (H)	.00 (L)	.04 (M)
Colonial Heights	1.50 (L)	.18 (H)	.47 (H)	.33 (H)
Fairfax City	2.90 (M)	.23 (H)	.42 (H)	.02 (M)
Fredericksburg	.80 (L)	.02 (L)	.41 (H)	.44 (H)
Hopewell	2.40 (M)	.01 (L)	.54 (H)	.44 (H)
Martinsville	4.30 (H)	.08 (M)	.17 (M)	.22 (H)
Radford	2.70 (M)	.06 (M)	.16 (M)	.13 (H)
Salem	2.00 (L)	.03 (M)	.35 (H)	.30 (H)
Staunton	4.00 (H)	.20 (H)	.17 (M)	.07 (M)
Waynesboro	2.60 (M)	.25 (H)	.19 (H)	.04 (M)
Winchester	2.80 (M)	.21 (H)	.82 (H)	.13 (H)
Overall	2.75	.08	.17	.08

<sup>a</sup>H=Highest Third, M=Middle Third, L=Lowest Third

		Table 13			
	Juvenile Drug and Alcohol Related Offenses Reported(1993-1996)				
	Localities With Populations Greater than 25,000 and Less than 100,000°				
<del></del>	Incidents of	Driving Under	Marijuana	Narcotics	
	Students	the Influence of	Possession/Sales	Possession/Sales	
	Possessing	Alcohol (DUI) Arrests-	Arrests- Age 17	Arrests- Age 17	
	Alcohol or Drugs	Age 16-17	and Under	and Under	
	in Schools	(per 1,000 total	(per 1,000 total	(per 1,000 total	
1	(per 1,000 students)	population)	population)	population)	
Counties:					
Accomack	2.40 (M)	.05 (M)	.09 (M)	.06 (M)	
Albemarle	4.20 (H)	.05 (M)	.48 (H)	.05 (M)	
Amherst	2.90 (M)	.07 (M)	.22 (M)	.02 (L)	
Augusta	3.80 (H)	.02 (L)	.03 (L)	.01 (L)	
Bedford	3.10 (M)	.08 (H)	.04 (L)	.00 (L)	
Botetourt	4.70 (H)	.02 (L)	.20 (M)	.00 (L)	
Buchanan	2.80 (M)	.11 (H)	.12 (M)	.03 (L)	
Campbell	3.20 (M)	.04 (M)	.08 (L)	.09 (H)	
Carroll	4.60 (H)	.13 (H)	.05 (L)	.04 (M)	
Culpeper	2.80 (M)	.09 (H)	.38 (H)	.31 (H)	
Fauquier	2.80 (M)	.04 (M)	.28 (H)	.10 (H)	
Franklin	5.00 (H)	.01 (L)	.09 (M)	.02 (L)	
Frederick	3.60 (H)	.05 (M)	.11 (M)	.00 (L)	
Gloucester	4.80 (H)	.04 (M)	.20 (M)	.00 (L)	
Halifax	2.60 (M)	.03 (L)	.03 (L)	.07 (M)	
Hanover	2.30 (L)	.03 (E)	.93 (H)	.06 (M)	
Henry	3.20 (M)	.00 (L)	.06 (L)	.07 (M)	
Isle of Wight	1.30 (L)	1			
		.02 (L)	.07 (L)	.03 (L)	
James City	1.90 (L)	.04 (M)	.46 (H)	.12 (H)	
Loudoun	2.50 (M)	.04 (M)	.40 (H)	.04 (M)	
Mecklenburg	3.50 (H)	.15 (H)	.07 (L)	.04 (M)	
Montgomery	3.50 (H)	.05 (M)	.05 (L)	.02 (L)	
Pittsylvania	2.10 (L)	.02 (L)	.02 (L)	.08 (H)	
Prince George	5.40 (H)	.02 (L)	.50 (H)	.08 (H)	
Pulaski	4.40 (H)	.13 (H)	.09 (M)	.07 (M)	
Roanoke	2.40 (M)	.06 (M)	.33 (H)	.08 (H)	
Rockingham	1.70 (L)	.09 (H)	.10 (M)	.04 (M)	
Russell	3.30 (M)	.09 (H)	.01 (L)	.03 (L)	
Shenandoah	2.90 (M)	.06 (M)	.21 (M)	.02 (L)	
Smyth	2.10 (L)	.11 (H)	.08 (L)	.01 (L)	
Spotsylvania	2.30 (L)	.02 (L)	.26 (M)	.02 (L)	
Stafford	2.10 (L)	.07 M)	.33 (H)	.03 (L)	
Tazewell	3.00 (M)	.16 (H)	.12 (M)	.12 (H)	
Warren	3.80 (H)	.13 (H)	.16 (M)	.08 (H)	
Washington	1.50 (L)	.09 (H)	.02 (L)	.01 (L)	
Wise	5.10 (H)	.16 (H)	.19 (M)	.04 (M)	
Wythe	3.40 (H)	.14 (H)	.29 (H)	.04 (M)	
York	1.80 (L)	.04 (M)	.31 (H)	.13(H)	
Cities:					
Charlottesville	2.90 (M)	.00 (L)	.17 (M)	.24 (H)	
Danville	.50 (L)	.07 (M)	.05 (L)	.13 (H)	
Harrisonburg	2.60 (M)	.07 (M)	.16 (M)	.06 (M)	
Lynchburg	1.70 (L)	.02 (L)	.19 (M)	.39 (H)	
Manassas	1.70 (L)	.03 (L)	.31 (H)	.11 (H)	
Petersburg	1.80 (L)	.04 (M)	.28 (H)	1.15 (H)	
Roanoke	1.10 (L)	.04 (M)	.38 (H)	.56 (H)	
Suffolk	3.60 (H)	.05 (M)	.39 (H)	.22 (H)	
Overall	2.93	.06	.20	.11	
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<sup>&</sup>lt;sup>a</sup>H=Highest Third, M=Middle Third, L=Lowest Third

		Table 14		
Juvenile Drug and Alcohol Related Offenses Reported (1993-1996)				
	Localities With Populations Greater 100,000 <sup>a</sup>			
	Incidents of	Driving Under	Marijuana	Narcotics
	Students	the Influence of	Possession/Sales	Possession/Sales
	Possessing	Alcohol (DUI) Arrests-	Arrests-	Arrests-
	Alcohol or Drugs	Age 16-17	Age 17 and Under	Age 17 and Under
	in Schools	(per 1,000 total	(per 1,000 total	(per 1,000 total
	(per 1,000 students)	population) <sup>b</sup>	population)	population)
Counties:				
Arlington	2.80 (H)	.01 (L)	.28 (M)	.07 (L)
Chesterfield	1.20 (L)	.08 (H)	.94 (H)	.11 (M)
Fairfax	2.90 (H)	.02 (H)	.22 (L)	.03 (L)
Henrico	2.20 (M)	.01 (L)	.60 (H)	.18 (M)
Prince William	2.70 (H)	.05 (H)	27 (M)	.08 (L)
Cities:				
Alexandria	2.00 (M)	.01 (L)	.26 (M)	.26 (H)
Chesapeake	1.70 (L)	.02 (H)	.44 (M)	.14 (M)
Hampton	2.90 (H)	.01 (L)	.47 (H)	.19 (M)
Newport News	2.30 (M)	.01 (L)	.39 (M)	.29 (H)
Norfolk	2.00 (M)	.01 (L)	.24 (L)	.33 (H)
Portsmouth	1.90 (M)	.01 (L)	.14 (L)	.15 (M)
Richmond City	.53 (L)	.01 (L)	.24 (L)	.99 (H)
Virginia Beach	1.60 (L)	.02 (H)	.54 (H)	.08 (L)
Overall	2.06	.02	.39	.22

aH-Highest Third, M=Middle Third, L=Lowest Third
bBecause this distribution was somewhat skewed, no medium group emerged from this analysis.

#### VI. CONCLUSIONS AND RECOMMENDATIONS

Various efforts have been made during the past decade to conduct surveys to assess the level of drug/alcohol use among youth in the Commonwealth. These efforts have consisted of administering different survey measures both statewide and locally. Although these efforts have provided various types of data on youth drug and alcohol use, Virginia currently has no up-to-date, comprehensive information available for assessing the level of drug/alcohol use among youth in the general population. This information is not available for the following reasons:

- The most recent statewide survey was conducted almost 5 years ago, in 1993. There is no statewide survey data available on current drug/alcohol use levels, despite the fact that levels and types of drug/alcohol use can change from year-to-year.
- The surveys that have been administered, even on a statewide basis, were not designed to provide a sample of drug/alcohol use that represents the entire Commonwealth. There is no standardized system in place for producing a representative, statewide sample of data.
- Although 82% of responding localities have administered a drug and alcohol survey within the past ten years, these surveys cannot provide a consistent, statewide profile of youth drug/alcohol use due to inconsistencies in the types of questions asked, the ages and grade levels of the youth who were surveyed, and the timeframes in which they were conducted. In addition, localities generally do not have a consistent method for administering youth drug and alcohol surveys.
- Furthermore, there are currently no plans for a future statewide administration of a standardized survey that will provide consistent, meaningful data on the extent of drug/alcohol use by Virginia's youth.

In sum, existing local survey data do not allow for an overall picture of the current drug and alcohol use practices of Virginia's youth, nor do they provide an adequate local measure of such use in many cases.

#### Plans for Future Survey Efforts

A review of the local SDFSCACs' plans for administering surveys in the future revealed the following information:

- Local Superintendents, Safe and Drug-Free Schools Coordinators and School Board Staff are the persons most commonly responsible for setting policy regarding surveys.
- Fifty-one percent of localities indicated they had definite plans to conduct a drug and alcohol survey in the future.

- When asked which survey they would administer in the future, localities mentioned a total of six different standardized surveys.
- In addition, 24 % of the localities that had plans to administer a future survey indicated they would use a locally developed survey. Because each of the locally developed surveys is independently created by local officials, there is a great deal of variation in the content of these surveys. For example, our review of several locally developed surveys that had been used in the past revealed that these surveys include a variety of different questions and response formats, which make the findings difficult to summarize or compare between localities.

In sum, current strategies to assess drug and alcohol use by Virginia's youth will continue to hinder efforts to summarize results or make comparisons among localities for future funding or program planning purposes because of the continuing variations in survey methodologies.

#### **Review of Supplementary Data**

To obtain another perspective on drug and alcohol use, evaluators examined Virginia Department of Education data on school drug and alcohol incident reports and arrest data from the Virginia Department of State Police Uniform Crime Reports. These findings indicated the following:

- Across the state, there was an average rate of 2.75 incidents of possession of drugs or alcohol on school grounds per 1,000 students.
- Across the state, there was an average rate of .07 DUI arrests, .22 marijuana-related arrests, and .11 narcotics-related arrests for persons under age 17 per 1,000 people in the total population.
- An analysis of the drug and alcohol-related offenses broken down by population size revealed that school possession charges and DUI charges were more prevalent in localities with populations less than 100,000. Marijuana charges and narcotics charges, however, were more prevalent in localities with populations greater than 100,000.
- The rate of marijuana and narcotics arrests was greater among youth between the ages of 15 and 17 than youth age 14 or less.

The differences in the rate of drug and alcohol offenses between smaller and larger localities are partially supported by data from recent focus groups conducted by the Virginia Department of Health (1997). The adolescents who participated in this study reported that alcohol and marijuana were the drugs of choice in rural and medium-sized cities and that cocaine was more prevalent in urban and suburban areas. Additionally, the findings suggesting a progression of drug and alcohol use with age are supported by national data from the *Monitoring the Future Survey* (1996). It is important to note, however, that the Uniform Crime Report data represent an offender population rather than a general youth population.

#### RECOMMENDATIONS

#### **Continuation of Survey Efforts**

Localities should use surveys to measure the extent of youth substance use in their communities for program planning and evaluation purposes.

Estimates of youth drug and alcohol use are essential for program planning and evaluation purposes. In fact, the lack of statewide data on drug and alcohol use among youth in Virginia may potentially threaten future SDFSCA funding, which requires accountability for the use of those funds. Other agencies, such as the Virginia Department of Health and the Department of Mental Health, Mental Retardation, and Substance Abuse Services are also in need of drug and alcohol use rates when they apply for federal grants and funding. Currently, the only data available to determine the need for drug and alcohol prevention programs or the effectiveness of drug and alcohol prevention programs are non-survey data, such as the number of school possession incidents and drug and alcohol-related arrests in each locality.

However, there are a number of disadvantages inherent in using non-survey data to estimate youth drug and alcohol use in the general population. For example, drug and alcohol offense data provide only the number of youth who have actually been identified as being alcohol or drug-involved by law enforcement agencies. These data do not reflect the number of youth at earlier stages of alcohol and drug involvement or youth who have not been formally identified by authorities. In addition, it is unclear whether differences between localities' offense rates reflect differences in enforcement or true differences in prevalence of substance use behaviors. For example, it is unclear whether the difference in offense rates between localities with populations over 100,000 and localities with populations less than 100,000 reflects a true difference in drug and alcohol use behaviors between youth in large versus small localities, or if these differences are due to variations in enforcement and reporting.

Survey data are more conducive to providing a baseline measure of substance use in the general youth population. In addition to identifying the number of youth who have already been formally identified as drug and alcohol users by authorities, drug and alcohol surveys may also capture the number of youth who have not previously been identified as drug or alcohol users. In addition, survey data from various localities may be easily summarized or compared, if the same survey instrument is used across the state.

Overall, youth drug and alcohol surveys appear to offer the best opportunity for measuring the extent of youth drug and alcohol use in the general population.

#### **Coordination of Youth Agencies**

Local school divisions, Offices on Youth, state and local juvenile justice agencies, and substance abuse agencies should attempt to coordinate youth drug and alcohol assessment efforts and the dissemination of such findings for program planning purposes.

While attempting to compile descriptions of previous survey efforts for the purpose of this report, evaluators discovered that, in some cases, the local Offices on Youth did not possess copies of the most recent drug and alcohol survey findings that were available from the school divisions they were serving. In other cases, they did not include youth drug and alcohol use estimates in their needs assessments because this information is not specifically required by the Department of Juvenile Justice. To plan appropriate interventions for youth in the community, Offices on Youth should possess the most up-to-date survey findings from school divisions, regardless of their involvement in the survey administration.

#### **Future Statewide Survey Efforts**

A task-force should be created to determine the best approach to improve future drug and alcohol survey efforts in the Commonwealth of Virginia.

According to the SDFSCACs who responded to the survey, past statewide survey efforts were largely successful. Many of the SDFSCACs elaborated that these survey efforts were useful for program planning purposes, drug education, and benchmarking. Furthermore, the majority of SDFSCACs surveyed were in favor of a future statewide survey effort. A consistently implemented survey measure will allow findings from Virginia localities to be summarized to determine the extent of drug and alcohol use for the entire Commonwealth.

Despite the advantages of a statewide survey, there are several important factors that should be considered before a statewide survey effort is implemented. First, data from nationally administered surveys may be more helpful than survey data from locally developed surveys. The use of a standardized instrument will facilitate comparisons between the state and the rest of the nation. Such information might be helpful, for example, when applying for federal drug education and prevention program grants. Although the MTF Survey, the PRIDE Survey, and the YRB Survey each have a national data base for comparison purposes, it should be noted that the PRIDE Survey is not a nationally representative sample.

The receptivity of the survey among the localities throughout the state is another important factor. The results of the SDFSCAC Survey revealed that the YRB Survey was the most highly recommended survey among the three surveys that we asked SDFSCACs to evaluate. Although some of the SDFSCACs commented on the controversial nature of some of the questions, the task force could consider the possibility of eliminating any such questions. On the other hand, implementation of a comprehensive instrument may have advantages for collecting information on other youth behaviors, such as sexual and violent behavior.

The availability of training for various surveys may also have an impact on receptivity. For example, the American Cancer Society provides training for the use of the YRB Survey. DCJS has also begun providing training to local Offices on Youth on a needs assessment model called "Communities That Care", which also includes a drug and alcohol survey component. There may also be additional surveys or needs assessment models for which training is available that

were not revealed in our research for this report. Such training may increase the willingness of localities to implement particular survey instruments.

The cost of drug and alcohol surveys is an important consideration as well. The cost of survey administration for the aforementioned national surveys ranges anywhere from \$0 to \$2 per student. However, some of the surveys include a complete analysis and/or reporting of the data, whereas others do not. These factors must be considered to determine which approach is most cost effective, and to guide the solicitation of funding for assessment efforts.

Another issue that should be considered is whether or not the survey includes a mechanism for detecting untruthful responses. Although every effort is made to ensure student anonymity, there may be some students who do not believe their responses are completely private and this may contribute to under-reporting of drug and alcohol problems. Conversely, some students may not take such surveys seriously and may exaggerate their substance use. However, many nationally-administered surveys include mechanisms to detect students who are not answering truthfully. Respondents who indicate use of a non-existent drug or who are inconsistent in their responses, for example, are usually discarded from the final analysis. This is an essential component to a reliable and valid survey.

The creation of a task-force consisting of Safe and Drug-Free Schools and Communities Act administrators and drug and alcohol experts should be considered to determine the best approach to future drug and alcohol survey efforts in the Commonwealth of Virginia. The task force should consist of representation from: the Department of Education (e.g., SDFSCA administrators); Local School Boards; Superintendents; the Virginia Department of Health; the Department of Mental Health, Mental Retardation, and Substance Abuse Services; the Department of Criminal Justice Services; the Department of Juvenile Justice; and local Offices on Youth. This task-force could be responsible for identifying potential funds for a statewide survey effort, the best mechanism for administering a statewide survey, and an appropriate drug and alcohol survey for use across the Commonwealth.

#### Youth Drug and Alcohol Use Surveys and Funding Decisions

The findings from drug and alcohol surveys should be considered in the allocation of funds for drug and alcohol prevention and treatment programs and for program evaluation of drug prevention and treatment programs.

A standardized survey instrument will allow for comparisons between localities to identify areas of the Commonwealth which may be experiencing more severe youth drug and alcohol problems. The estimates from such surveys will allow decision-makers to determine the areas that are in greater need of funding for drug and alcohol prevention/intervention and treatment programs. Because survey findings appear to be the best method for measuring the extent of youth drug and alcohol use, survey findings may provide the most valuable information for making such decisions.

Additionally, school divisions should continually monitor youth drug and alcohol use to determine the effectiveness of their drug and alcohol prevention programs. Increases in drug and alcohol use among youth who participate in such programs may indicate the need for revisions in program services. Localities should be attentive to accountability when using funds from relevant sources such as the SDFSCA Grant Program, the federal Bureau of Justice Assistance Edward Byrne Anti-Drug Abuse Grant Program, the federal Office of Juvenile Justice and Delinquency Title V prevention funds, the Health and Human Services Substance Abuse Prevention and Treatment block grants, and the Virginia Juvenile Community Crime Control Act monies (Code of Virginia §§16.1-309.2-16.1-309.10). For example, the SDFSCA requires localities to collect impact data on the programs funded by SDFSCA grant money. The implementation of drug and alcohol use surveys is one appropriate mechanism for accomplishing this task.

### VII. REFERENCES

- Fullilove, R. E., Fullilove, M. T., Bowser, B. P., and Gross, S. A. (1990). Risk of sexually transmitted disease among black adolescent crack users in Oakland and San Francisco, California. Journal of the American Medical Association, 263, 851-855.
- Huizinga, D., Loeber, R., & Thornberry, T. (1993). Longitudinal study of delinquency, drug use, sexual activity, and pregnancy among children and youth in three cities. <u>Public Health Reports</u>, 108, 90-96.
- U.S. Department of Health and Human Services (1991a). Alcohol-related traffic fatalities among youth and young adults--United States, 1982-1989. Morbidity and Mortality Weekly Report, 40, 178-187.
- U.S. Department of Health and Human Services. (1991b). Public health service: Healthy people 2000: National health promotion and disease prevention objectives (full report, with commentary) (DHHS Publication No. PHS 91-50212). Washington, DC: U.S. Government Printing Office.
- U.S. Department of Health and Human Services. (1996a). National Household Survey On Drug Abuse: Population estimates 1995 (DHHS Publication No. SMA 96-3095). Washington, DC: U.S. Government Printing Office.
- U.S. Department of Health and Human Services. (1996b). National survey results on drug use from the Monitoring The Future study, 1975-1995. Volume 1: Secondary school students (DHHS Publication No 1 NIH 96-4139). Washington, DC: U.S. Government Printing Office.
- U.S. Department of Health and Human Services. (1996c). Youth Risk Behavior Surveillance-United States, 1995. Morbidity and Mortality Weekly Report, 45, 11-14.
- Virginia Department of Education, Pre and Early Adolescent Division; The Governor's Drug Policy Office; and The Survey Research Laboratory, Virginia Commonwealth University. (1992). 1992 Virginia Youth Risk Behavior Survey Report.
- Virginia Department of Education, Pre and Early Adolescent Division; The Governor's Drug Policy Office; and The Center for Public Service; Virginia Commonwealth University. (1993). 1993 Virginia High School Youth Risk Behavior Survey Report.
- Virginia Department of Education. (1996). Report on Crime and Violence in Virginia's Public Schools, 1994-1996.

Virginia Department of Health. (1997). Youth speak out about their health: Adolescent health needs assessment report.

Virginia Polytechnic Institute and State University, Department of Communication Studies. (1989). 1989 Virginia Student Survey: Main Findings.

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Appendix A

House Joint Resolution 613

### HOUSE JOINT RESOLUTION NO. 613

Requesting the Department of Criminal Justice Services to undertake a study to review previous survey efforts measuring drug and alcohol use by young people across the Commonwealth.

Agreed to by the House of Delegates, February 20, 1997 Agreed to by the Senate, February 19, 1997

WHEREAS, recently released national studies verify the increase in drug and alcohol use by adolescents; and

WHEREAS, the University of Michigan's "Monitoring the Future, National High School Drug Use" study revealed an increase in the use of drugs by secondary school students from 1991 to 1995; and

WHEREAS, specifically the study found that, in 1995, the use of illicit drugs by eighth grade students over the previous 12 months had nearly doubled since 1991, from 11 to 21 percent; and

WHEREAS, in Virginia, during the 1993-94 school year, 1,607 students were found to be in possession of drugs on school grounds, and an additional 1,106 were found to be in possession of alcohol; and

WHEREAS, state juvenile arrest rates for drug possession increased 285 percent from 1990 to 1995; and

WHEREAS, jurisdictions which operate Offices on Youth under the auspices of the Department of Juvenile Justice are required every three years to survey their youth population on risk behaviors, including the use of alcohol and drugs; and

WHEREAS, the Department of Mental Health, Mental Retardation and Substance Abuse Services annually extrapolates adolescent substance abuse rates from the National Household Survey, and conducts an analysis of community risk factors compiled from data gathered by community services boards; and

WHEREAS, the Department of Education previously conducted Youth Risk Behavior Study Surveys, developed by the National Centers for Disease Control, which were administered by local school divisions every two years; and

WHEREAS, the State Council on Higher Education for Virginia conducted a survey in 1993 of drug and alcohol use by college students; and

WHEREAS, none of the Virginia-based survey efforts have been cross-analyzed to provide a baseline on drug and alcohol use among young people across the state; and

WHEREAS, without comprehensive data analysis, the state and communities are hindered in their intervention efforts to respond effectively to teen drug and alcohol usage; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That the Department of Criminal Justice Services be requested to undertake a study to review previous survey efforts measuring drug and alcohol use by young people across the Commonwealth. This study, when completed, should provide a comprehensive compilation of survey efforts measuring adolescent drug and alcohol use in Virginia which can be used by localities to assist them in their intervention efforts.

The Departments of Mental Health, Mental Retardation and Substance Abuse Services, Education, and Juvenile Justice are requested to provide technical support for and guidance to the study effort.

The Department of Criminal Justice Services shall complete its work in time to submit its findings and recommendations to the Governor and the 1998 Session of the General Assembly as provided in the procedures of the Division of Legislative Automated Systems for the processing of legislative documents.

### Appendix B

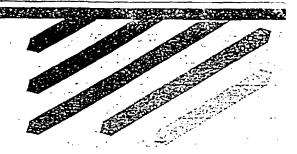
National Drug and Alcohol Surveys:
Michigan Alcohol and Other Drugs (MAOD) School Survey<sup>1</sup>,
PRIDE Survey, and
Youth Risk Behavior (YRB) Survey

(Please note that both the MAOD Survey and the PRIDE Survey were copied with permission from the authors. Because each of these surveys has a copyright, it is illegal to make additional copies of these instruments without such authorization.)

<sup>&</sup>lt;sup>1</sup> The Monitoring the Future Survey includes a set of core questions on drug and alcohol use as well as some additional questions on non-drug issues, which vary between localities. Because localities are randomly chosen to participate in the Monitoring The Future Survey and different versions of the survey are administered in different regions of the U.S., a standard copy of this survey is not available for use by other localities. Schools that wish to administer a survey with the core drug and alcohol questions from the MTF Survey may use the MAOD Survey.

# **MICHIGAN**

# ALCOHOL AND OTHER DRUGS SCHOOL SURVEY



This questionnaire was developed for use in schools throughout the state of Michigan to help increase our understanding of a number of important behaviors of students--but in particular, their use of cigarettes, alcohol, and other drugs. It is designed to parallel closely the questionnaire used in the nationwide school surveys conducted each year by the University of Michigan.

This is not a test; the questions simply ask for your experiences and attitudes in a number of areas. It is important that you answer each question as thoughtfully and honestly as you can. If you have trouble understanding a question, raise your hand for assistance. If you do not always find an answer which fits exactly, use the one that comes closest. If a question does not apply to you, leave it blank.

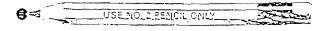
This study is completely voluntary. Also, if there is any question that you or your parents would find objectionable for any reason, just leave it blank.

This questionnaire contains nothing which identifies you. Nobody ever knows who filled out any questionnaire. After you and your classmates complete your questionnaires, they will be taken directly to Western Michigan University where an optical scanner will be used to read the answers onto a computer tape for analysis. All results will be reported in group form--never for individuals or classrooms.

Other students have said that they have found this questionnaire interesting, and that they enjoy filling it out. We hope you will too.

### MARKING INSTRUCTIONS

- USE A NO. 2 PENCIL ONLY.
- DARKEN THE CIRCLE COMPLETELY NEXT TO THE ANSWER YOU CHOOSE.
- ERASE CLEANLY ANY MARKS YOU WISH TO CHANGE.
- DO NOT MAKE ANY STRAY MARKS ON THIS FORM.



These kinds of markings will work:

These kinds of markings will NOT work: 😌 🏖 🗦



## PART A

BEFORE	BEGINNIN	NG BE	SURE	YOU	READ	THE
INSTRU	CTIONS O	NTHE	COVE	R.		

	The first few questions ask for some background information about yourself.				
۱. ۱	What is your grade le	vet in school?			
	7th grade 8th grade 9th grade	<ul><li>○ 10th grade</li><li>○ 11th grade</li><li>○ 12th grade</li></ul>			
2.	What is your sex?				
	① Male	② Female			
3.	How do you describe	yourself?			
	① American India ② Black or Airo-A ③ Mexican Amer ④ Puerto Rican o ③ Oriental or Asi ⑤ White or Cauca ⑦ Other	american ican or Chicano r other Latin American an American			
	raised mostly by fos others, answer for the both a step-father and	sks about your father. If you were ter parents, step-parents, or hem. For example, if you have nd a natural father, answer for the ost important in raising you.			
4.	What is the highest completed?	level of schooling your father			
	<ul><li>3 Some high so</li><li>3 Completed high</li><li>4 Some college</li><li>5 Completed co</li></ul>	gh school illege professional school after college			
5.	How likely is it that following things a Mark one for each				
	a. Graduate from :	a two-year coilege 👉 🗇 🤄 🖼 🗀			

	ost recent grading		
① A ② A- or B÷ ③ B	① B- or C+ ③ C ⑤ C- or D+	⑦ D ③ D- or below	V
7. During the LAST school have yo	FOUR WEEKS, h u missed because		
○ None ○ 1 day ○ 2 days ○ 3 days	○ 4 to 5 da ○ 6 to 10 d ○ 11 or ma	ays	
	ns ask for your o certain drugs and		s.
(Mark one circle)  a. Smoke one or	elves (physically e for each line.)	or in other ways  **Signification**  **Country**  **Count	<b>}</b> :
	s tobacco regulari acco, snuff, plug, tco)		<b>(1)</b>
c. Try marijuana	once or twice	1 3 3 4	<u>(5)</u>
d. Smoke marijus	ana occasionally	0394	<u> </u>
e. Smoke marijus	ana regularly	①③③④	<u>(3)</u>
f. Try LSD ("acid	") ance or twice	0600	<b>(1)</b>
g. Take LSD regu	lariy	0333	(3)
h. Try heroin onc	e or twice ,	0699	(5)
pills, bennies	iines (uppers, pe; s. speed) gnce or		(i)
) ( ) Take anipheta	ញ៖nes វិទិច្ឆប់ផ្ទៃពីម :	. 3 3 3 4	<u>(</u> ]
N Fruid baarine vr priturige	gowder form on	 . 0336	<b>(</b>
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ti m. Taka popalna :	១០១១៨៩៩ ខេត្តប្បធ្វេកទេ	2633	(3)
a. Thy forabki oc	diaine anda ar tw	nce 0333	(3)
c. Take "crack" /	oposine godssion	a) 9888	(5)

Graduate from college four-year

8. CONTINUED. . .

o. Take "crack" cocaine regularly 🛈	234	(5)
q. Take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day	0234	(5)
r. Take four or five drinks nearly every day	)234	(5)
s. Have five or more drinks once or twice each weekend	) 2 3 4	(3)
t. Take steroids to increase athletic performance or muscle development	1000	3
<ol> <li>How difficult do you think it would leach of the following types of drug some?</li> </ol>	ce for you t s, if you w	o get anted
(Mark one circle for each line.)	sine	
	Probably lamas  Very Outread  Fairy Deficial  Fairy Deficial	Pury Easy
a. Marijuana (pot, grass)	①② <b>②</b> ④	<b>③</b>
b. LSO ("acid")	0000	1
e. Amphetamines (uppers, peo pills, bennies, speed)	0000	(1)
d. Barbiturates (downers, reds. yellows, etc.)	0000	3
e. Tranquitizers (like Valium)	0000	(3)
f. "Crack" codaine	.0000	<b>()</b>
g. Cotame in powder form .	0000	3
n Fernin	2933	3
Silm o om or i al patal intetroadané la colo foi calcion e pareganet ett	233	<b>3</b>
. Stending amaginacistenders	333	<b>3</b>
Augmond deverages (been wine) or iquich ( ) ( )	2 (2 (2))	3 (3)
	কল কো	7.3

### PART B

The following questions are about tobacco, alcohol and drug use:

- 10. Have you ever smoked cigarettes?
  - (1) Never
  - ② Once or twice
  - 3 Occasionally but not regularly
  - (4) Regularly in the past
  - 3 Regularly now
- 11. How often have you smoked cigarettes during the past 30 days?
  - (1) Not at all
  - 2 Less than one cigarette per day
  - (3) One to five cigarettes per day
  - 4 About one-half pack per day
  - (5) About one pack per day
  - (a) About one and one-half packs per day
  - Two packs or more per day
- 12. Have you ever taken or used smokeless tobacco (chewing tobacco, snuff, plug, dipping tobacco)?
  - ① Never
  - ② Once or twice
  - Occasionally but not regularly
  - (4) Regularly in the past
  - (1) Regularly now
- 13. How often have you taken smokeless tobacco during the past 30 days?
  - O Not at all
  - Once or twice
  - Once or twice car week
  - Three to five times per week
  - O About once a day
  - More than once a day
- 14. Next we want to ask you about drinking alcoholic beverages, including beer, wine, wine coolers, and liquor. Have you ever had any beer, wine, wine codiers, or liquor to drink-more than just a few sips?

₹ <u>`</u>	".:- GO TO QUESTION 18	
_		
. :	*45- CONTINUE WITH QUESTION	15
`~	32	

15. On how many occasions have you had alconolic beverages to drink. . (more than just a few sips)?

Mark the discretion each line.

un vour l'fattime?

(June) ast 12 means) .

16. On occasions that you drink alcoholic beverages, how often do you drink enough to feel pretty high?	20. On how many occasions (if any) have you used psychedelics other than LSD (like PCP, mescaline, peyote, psilocybin)
① On none of the occasions	0 7.2 6.9 6.19 60.39
② On few of the occasions	
① On about half of the occasions	ain your lifetime?
④ On most of the occasions	
③ On nearly all of the occasions	bduring the last 12 months?
17. Think back over the LAST TWO WEEKS. How many times have you had five or more drinks in a row?  (A"drink" is a glass of wine, a bottle of beer, a wine	cduring the past 30 days?
cooler, a shot glass of liquor, or a mixed drink.)	21. On how many occasions (if any) have you taken "crack" cocaine (cocaine in chunk or rock form)
○ None	
Once Twice	0 1,2 10,19 40,4
Three to five times	ain your lifetime?
Six to nine times	a
O Ten or more times	b during the last 12 months?
The next major section of this questionnaire deals with various other drugs. There is a lot of talk these	cduring the past 30 days?
days about this subject, but not enough accurate information. Therefore, we still have a lot to learn about the actual experiences and attitudes of people	22. On how many occasions (if any) have you taken cocaine in any other form
your age.	0 1.2 10.19 20.19 40,
We hope that you can answer all questions, but if you	ain your lifetime?
find one which you feel you cannot answer honestly, we would prefer that you leave it blank. Remember	bduring the last 12 months?
that your answers are anonymous.	·
19 On how	cduring the past 30 days?
18. On how many occasions (if any) have you used marijuana (grass, pot) or hashish (hash, hash oil)	
(Mark one circle for each line.)	Amphetamines have been prescribed by doctors to help people lose weight or give people more energy. They are sometimes called uppers, ups, speed, bennies, dexies, pep pills, and diet pills. Drugstores are not supposed to sell them without a prescription from a doctor.
ain your lifetime?	Amphetamines do NOT include any non-prescription drugs, such as over the counter diet pills (like
bduring the last 12 months?	Dexatrim⊕) or stay awake pills (like No-Doz⊕), or any mail-order drugs.
cduring the past 30 days?	23. On how many occasions (if any) have
19. On how many occasions (if any) have you used LSD ("acid")	you taken amphetamines on your ownthat is, without a doctor telling you to take them
,	ain your lifetime?
bduring the last 12 months?	bduring the last 12 months?
cduring the past 30 days?	during the past 30 days?

and the second of the second second

Barbiturates are sometimes prescribed by doctors to help people relax or get to sleep. They are sometimes called downs, downers, goofballs, yellows, reds, blues, rainbows.

24. On how many occasions (if any) have you taken barbiturates on your own-that is, without a doctor telling you to take them. . .

a. ...in your lifetime? ......

b. . . . during the last 12 months? . . . OOOOO

c. ...during the past 30 days? ..... OOOOO

Tranquilizers are sometimes prescribed by doctors to calm people down, quiet their nerves, or relax their muscles. Librium, Valium, and Miltown are all tranquilizers.

25. On how many occasions (if any) have you taken tranquilizers on your own--that is, without a doctor telling you to take them. . .

a. ...in your lifetime? .......

b. ...during the last 12 months? ... OOOOO

c. ...during the past 30 days? .....

26. On how many occasions (if any) have you used heroin (smack, horse, skag)

a. ...in your lifetime? ......

b. ...during the last 12 months? ... OOOOO

c. ...during the past 30 days? .....

There are a number of narcotics other than heroin such as methadone, opium, morphine, codeine, demerol, paregoric, talwin, and laudanum. These are sometimes prescribed by doctors.

27. On how many occasions (if any) have you taken narcotics other than heroin on your own--that is, without a doctor telling you to take them. . .

c. ...during the past 30 days? ..... 00000

28. On how many occasions (if any) have you sniffed glue, or breathed the contents of aerosol spray cans, or inhaled other gases or sprays in order to get high...

c. ...during the past 30 days? .....

Steroids, or anabolic steroids, are sometimes prescribed by doctors to promote healing from certain types of injuries. Some athletes, and others, have used them to try to increase athletic performance or muscle development.

29. On how many occasions (if any) have you taken steroids, on your own-that is, without a doctor telling you to take them. . .

b. ...during the last 12 months? ... O O O O

c. ...during the past 30 days? .....

30. On how many occasions (if any) have you taken any of these drugs (like heroin, cocaine, amphetamines or steroids) by injection with a needle... (Do not include anything you took under a doctor's orders.)

c. ...during the past 30 days? .....

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### PART C

These next questions ask for some information about safety issues.

າ 31. How often do you feel unsafe ເຊື້ອງ ເຊ້
a when you are at school?
bgoing to or from school?
32. During the LAST FOUR WEEKS, how many days did you not go to school because you felt you would be unsafe at school or on your way to and from school?
33. During the LAST FOUR WEEKS, on how many days (if any) were you
acarrying a weapon such as a gun $\sqrt[3]{6}$ $\sqrt[3]{6}$ $\sqrt[3]{6}$ $\sqrt[3]{6}$ $\sqrt[3]{6}$ or knife to school?
bcarrying a club or other weapon to school?
The next questions are about some things which may have happened TO YOU while you were at school (inside or outside or in a school bus).
34. During the LAST 12 MONTHS, how often
34. During the LAST 12 MONTHS, how often
aHas something of yours been stolen?
a
a

Next are some questions about your experience as a driver, or as a passenger in a car. 35. During the LAST TWO WEEKS, how many times (if any). have you been a passenger in a car. . . a. . . . when the driver had been of the drinking? . . . . . b. ...when you think the driver had 5 or more drinks? ... 1 2 1 4 5 6 36. During the LAST TWO WEEKS, how many times (if any) have you driven a car, truck, or motorcycle after. . . a. . . . drinking alcohol? . . . . . .  $\bigcirc$   $\bigcirc$   $\bigcirc$   $\bigcirc$   $\bigcirc$ b. ...having five or more drinks in a row? ......①③③④⑤ 37. When you drive a car, how often do you wear seat belts? ..... ①②③①⑤ 38. When you are riding in the front passenger seat of a car, how often do you wear a seat belt? ..... ① ② ③ ④ ⑤ PART D 39. In what grade did you FIRST do each of the following things? Don't count anything you took because a doctor told you to; and mark "never" if you have never done it. (Mark one circle for each line.) a. Smoke your first 000000000000 cigarette ....... b. Smoke digarettes on a daily basis ............ 333393333 c. Try smokeless tobacco (shuff, plug or chewing d. Try an alcoholic beverage more than just a few sips ...... ① - ②②④③⑤⑦⑤④ e. Drink enough to feel drunk or very high . . . . ① ② ③ ④ ⑤ ⑦ ③ ⑨

10 10 10 10 10 10 10 10 10 10 10 10 10 1	
f. Try marijuana or hashish . ① ②③④⑤⑥③⑧	
g. Try LSD ① ②③④⑤⑥⑦⑧⑨	b. Trying marijua
h. Try any psychedelic other than LSD① ②①④⑤⑥②⑧	c. Smoking marij
i. Try amphetamines ① ②③④⑤⑦⑧⑨	d. Smoking mariji
j. Try barbiturates ① ② ③ ④ ⑤ ⑦ ⑧ ⑨	e. Trying LSD onc
k. Try tranquilizers ②③④⑤⑤⑦⑧⑨	f. Trying an amph pill, bennie, s orders once o
I. Try "crack" cocaine① ②③④⑤⑥⑦⑧	
m. Try any other form of	g. Trying "crack"
cocaine① ②③④⑤⑥⑦⑧⑨	h. Taking "crack"
n. Try heroin	i. Trying cocaine
o. Try any narcotic other	j. Taking cocaine
than heroin	k. Taking one or t
p. Try inhalants (sniff glue, aerosols, etc.)	day
	Taking four or f
q. Try steroids① ②③④⑤⑥⑦④⑨	day
r. Try injecting some drug with a needle (without a doctor's orders)	m. Having five or r twice each we
	n. Using smokeles
40. Do you think that in the future you will ever	o. Taking steroids
a smoke cigarettes	42. How much pres your friends ar
bdrink alcoholic beverages ① ② ③ ④	asmoke cigare
ctry or use marijuana	bdrink alcoho
dtry or use cocaine	cuse marijuar
etry or use any other illegal drug ① ③ ④	duse other ille
41. How do you think your CLOSE FRIENDS feel (or would feel) about YOU doing each of the following things?  a. Smoking one or more packs of	43. During the past ever) have you of the following a. At your home.
a. Smoking one or more packs of $\frac{3}{3} \cdot \frac{3}{6} \cdot \frac{3}{6}$ cigarettes per day	b. At friends' hous
organizates per day	5. / K ///C//C3 ///Ods

	and the second s	
	Don't Disappicos Nappicos Pirongly Disapprove	
b.	Trying marijuana once or twice ① ② ③	
¢.	Smoking marijuana occasionally①②①	
d.	Smoking marijuana regularly ① ② ③	
e.	Trying LSD once or twice ① ② ③	
f.	Trying an amphetamine (upper, pep pill, bennie, speed) without a doctor's orders once or twice	
g.	Trying "crack" cocaine once or twice ① ② ③	
h.	Taking "crack" cocaine occasionally①②③	
i.	Trying cocaine powder once or twice ① ② ③	
j.	Taking cocaine powder occasionally ① ② ③	
k.	Taking one or two drinks nearly every day ① ② ③	
1.	Taking four or five drinks nearly every day①②③	
m	Having five or more drinks once or twice each weekend	
n.	Using smokeless tobacco regularly 1 2 3	
ο.	Taking steroids	
	How much pressure do you feel from your friends and schoolmates to $\frac{2}{\sqrt{2}} \frac{2}{\sqrt{2}} \frac{2}{\sqrt{2}} \frac{2}{\sqrt{2}}$	
	smoke digarettes	
	drink alcoholic beverages ① ③ ④	
	usa marijuana ①③④④	
Ġ.	use other illegal drugs①①①②	
	During the past 30 days, how often (if ever) have you used alcohol in each of the following places?	, at the .
	Ac your name	
ხ.	At friends' houses	

-7-

43. CONTINUED	These final questions concern your school.
43. CONTINUED  ***  ***  ***  ***  ***  ***  ***	46. How many of the following drug education experiences have you had in school?  (Mark all that apply.)
d. At school during the day ①②③④	① None
e. Near school	<ul><li>② A special course just about drugs</li><li>③ A part of a health course</li></ul>
f. In a car	Films, lectures, or discussions in one of my other regular courses
g. At a party ① ② ③ ④	<ul> <li>Films or lectures, outside of my regular pourses</li> <li>Special discussions ("rap" groups) about drugs</li> </ul>
44. During the past 30 days how often (if ever) have you used marijuana or any other drugs (like cocaine, amphetamines, etc.) in each of the following places?	47. Do you know what your school's policy is for dealing with students caught doing the following hings on school property
a. At your home	As Trinks
b. At friends' houses	a smoking cigarettes (1 (2)(3)
c. At a school dance, a game, or other	busing (or possessing) alcohol ① ② ②
event	cusing (or possessing) an illegal drug ① (i) (i)
d. At school during the day ① ② ③ ④	dselling an illegal drug
e. Near school	ecarrying a weapon
f. In a car ① ② ③ ④	
g. At a party①②①④	48. If a student is caught doing each of the following things on school property by a teacher, how like y is it that something will be done (like pur is ument notification of parents, referral to treatment, etc.)?
45. If you ever found yourself "hooked" on drugs, or otherwise needed help related to your drug or alcohol use, would you be likely to turn to any of the following sources for help?  (Mark one circle for each line.)	asmoking cigarettes
b. Friends ① ③ ③	busing (or possessing) alcohol ① ② ③
c. A teacher	cusing (or possessing) an illegal drug (1) (3) (3)
d. A school counselor	dseiting an ittegal drug
e. A doctor ①③①	ecarrying a weapon
i. A drug clinic	
g. A minister, priest, or rabbi ① ② ③	THANK YOU AGAIN FOR YOUR HELP.

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# THE PRIDE QUESTIONNAIRE FOR GRADES 6-12 • USE NO. 2 PENCIL ONLY

O 1995 PRIDE, Inc.

I. PERSONAL	AND FAMILY INFORMA	TION		
1. Ethnic origin:	3. Age:  10 years old or less 11 years old 12 years old 13 years old 14 years old 15 years old 16 years old 17 years old 18 years old 19 years old or more	4. Grade:  6  7  8  9  9  9	5. Do you live with:	7. Do your parents have a job? father? mother?  Yes, full-time Yes, part-time No  8. What is the educational level of your father? mother? Some high school high school graduate some college college graduate
2. Do you get into tro 3. Do you take part it as sports team 4. Do you take part it as socuts, rec. 5. Do you attend che 6. Do you go to part 7. Do you use alcone 8. Have you threater 9. Have you threater both of your parents to	puble at school?  In school activities such s, band, clubs, etc.?  In community activities such teams, youth clubs, etc.?  Irch, synagogue, etc.?  Icl/drugs at parties?  Inded to harm a teacher?  Inded to harm one or  Interests, guardian, etc.?		<ul> <li>12. Do your parents set of</li> <li>13. Do your parents punish break the rules?</li> <li>14. Have you been in trout</li> <li>15. Do you take part in gate.</li> <li>16. Have you thought about.</li> <li>17. When you were in 5th participate in the Duniformed police of</li> <li>18. Have your teachers to</li> </ul>	cohol/drugs?
2. Beer? 3. Wine coolers? 4. Liquor? 5. Marijuana? 6. Cadaine (crack, 7. Udders (stimular) 8. Downers (debre) 9. Innalants (glue, 10. Halludinogens (§	IG DRUGS 〈취임[설명] IFUL TO 〈설명[설명]		IV. WITHIN THE PAS YEAR HOW OFT HAVE YOU  1. Smoked digarettes? 2. Crunk beer? 3. Crunk wine codiers? 4. Crunk liquor? 5. Smoked marijuana? 6. Used docaline (crack, etc.); 7. Used uppers (stimulants)? 8. Used downers (decressant) 9. Used innalants to get high 10. Used hailucinogens (PCP, II) 11. Used heroin (opiates)? 12. Used designer drugs (MDN)	EN 8 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6

V. WHAT EFFECT DO           YOU MOST OFTEN           GET WHEN YOU           1. Drink beer?           2. Drink wine coolers?         00000           3. Drink liquor?         00000           4. Smoke marijuana?         00000           5. Use cocaine (crack, etc.)?         00000           6. Use uppers (stimulants)?         00000           7. Use downers (depressants)?         00000           8. Use inhalants (glue, etc.)?         00000           9. Use hallucinogens (LSD, etc.)?         00000           10. Use heroin (opiates)?         00000           11. Use designer drugs (MDMA, etc.)?         00000	VIII. WHILE AT SCHOOL  HAVE YOU  (In the past year)  1. Carried a gun?  2. Carried a knife, club or other weapon?  3. Threatened a student with a gun, knife or club?  4. Threatened to hurt a student by hitting, slapping or kicking?  5. Hurt a student by using a gun, knife or club?  6. Hurt a student by hitting, slapping or kicking?  7. Been threatened with a gun, knife or club by a student?  8. Had a student threaten to hit, slap or kick you?  9. Been afraid a student may hurt you?  10. Been hurt by a student who hit, slapped or kicked you?
VI. WHERE DO YOU           (You may mark more than 1 response for each question)           1. Smcke cigarettes?         0000000           2. Drink beer?         0000000           3. Drink wine coolers?         0000000           4. Drink liquor?         0000000           5. Smcke marijuana?         0000000           6. Use cocaine (crack, etc.)?         0000000           7. Use uppers (stimulants)?         0000000           8. Use downers (depressants)?         0000000           9. Use inhalants (giue, etc.)?         0000000           10. Use hallucinogens (LSD, etc.)?         0000000           11. Use heroin (opiares)?         0000000           12. Use dasigner drugs (MDMA, etc.)?         0000000	IX. WHILE NOT AT SCHOOL  HAVE YOU  (In the past year)  1. Carried a gun?  2. Carried a knife, club or other weapon?  3. Eeen threatened with a gun, knife or club by a student?  4. Been threatened with a gun, knife or club by an adult?  5. Eeen threatened by a student to beat you up?  6. Eeen threatened by an adult to beat you up?  7. Eeen hurt by a student using a gun, knife or club?  8. Eeen hurt by an adult using a gun, knife or club?  9. Eeen afraid a student will hurt you?
VII. WHEN DO YOU  (You may mark more than 1 response for each cuestion)  Sincke digarettes?  Crink beer?  Crink wine coolers?  Crink liquer?  Sincke marijuana?  Use cocaine (crack, etc.)?  Use uppers (stimulants)?  Use downers (depressants)?  Use chanalants (glue, etc.)?	X. HOW EASY IS  IT TO GET  1. Caparertes? 2. Seer? 3. Wine coolers? 4. Liquer? 5. Marijuana? 6. Cocarne (crack, etc.)? 7. Uppers (stimulants)? 8. Cowners (cepressants)? 9. Innaiants (grue, etc.)?
10. Use hailucinogens (LSD, etc.)?	10. Halfudinogens (LSD, etc.)?       0.0000         11. Herdin (opiates)?       0.0000         12. Designer drugs (MDMA, etc.)?       0.0000

# 1995 Youth Risk Behavior Survey

This survey is about health behavior. It has been developed so you can tell us what you do that may affect your health. The information you give will be used to develop better health education for young people like yourself.

DO NOT write your name on this survey. The answers you give will be kept private. No one will know what you write. Answer the questions based on what you really do.

Completing the survey is voluntary. Whether or not you answer the questions will not affect your grade in this class.

The questions that ask about your background will only be used to describe the types of students completing this survey. The information will not be used to find out your name. No names will ever be reported.

Make sure to answer every question. Fill in the ovals completely. When you are finished, follow the instructions of the person giving you the survey.

THANK YOU VERY MUCH FOR YOUR HELP

### **IMPORTANT**

- · Choose only one answer for each question.
- Use a #2 pencil only.
- · Make dark marks.
- Example: (A) (B) (Φ) (D).
- · Erase completely to change your answer.
- 1. How old are you?
  - (A) 12 years old or younger
  - ® 13 years old
  - © 14 years old
  - 15 years old
  - 16 years old
  - 17 years old
  - @ 18 years old or older
- 2. What is your sex?
  - A Female
  - Male
- 3. In what grade are you?
  - 9th grade
  - ® 10th grade
  - © 11th grade
  - 12th grade
  - © Ungraded or other
- 4. How do you describe yourself?
  - White not Hispanic
  - ® Black not Hispanic
  - C Hispanic or Latino
  - Asian or Pacific Islander
  - © American Indian or Alaskan Native
  - Other

The next 17 questions ask about safety and violence.

- 5. How often do you wear a seat belt when **riding in** a car driven by someone else?
  - (A) Never
  - · 3 Rarely
  - © Sometimes
  - Most of the time
  - Always

- **6. During the past 12 months, how many times did you ride a motorcycle?** 
  - **(2)** 0 times
  - **(B)** 1 to 10 times
  - **©** 11 to 20 times
  - **©** 21 to 39 times
  - **©** 40 or more times
- 7. When you rode a motorcycle during the past 12 months, how often did you wear a helmet?
  - (a) I did not ride a motorcycle during the past 12 months
  - Never wore a helmet
  - C Rarely wore a helmet
  - Sometimes wore a helmet
  - Most of the time wore a helmet
  - Always wore a helmet
- **8. During the past** 12 months, how many times did you ride a bicycle?
  - (A) 0 times
  - **3** 1 to 10 times
  - © 11 to 20 times
  - @ 21 to 39 times
  - **© 40 or more times**
- 9. When you rode a bicycle during the past 12 months, how often did you wear a helmet?
  - (a) I did not ride a bicycle during the past 12 months
  - Never wore a helmet
  - © Rarely wore a helmet
  - **D** Sometimes wore a helmet
  - Most of the time wore a helmet
  - Always wore a helmet
- 10. During the past 30 days, how many times did you ride in a car or other vehicle driven by someone who had been drinking alcohol?
  - (A) 0 times
  - CD 1 time
  - **©** 2 or 3 times
  - 4 or 5 times
  - 3 6 or more times
- 11. During the past 30 days, how many times did you drive a car or other vehicle when you had been drinking alcohol?
  - @ 0 times
  - 3 1 time
  - © 2 or 3 times
  - 4 or 5 times
  - **©** 6 or more times

- 12. During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club?
  - O days
  - 1 day
  - © 2 or 3 days
  - 1 4 or 5 days
  - 6 or more days
- 13. During the past 30 days, on how many days did you carry a gun?
  - O days
  - 1 day
  - © 2 or 3 days
  - ① 4 or 5 days
  - 6 or more days
- 14. During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club on school property?
  - (A) 0 days
  - 1 day
  - © 2 or 3 days
  - ① 4 or 5 days
  - 1 6 or more days
- 15. During the past 30 days, how many days did you not go to school because you felt you would be unsafe at school or on your way to or from school?
  - ② 0 davs
  - ③ 1 day
  - © 2 or 3 days
  - ① 4 or 5 days
  - © 6 or more days
- 16. During the past 12 months, how many times has someone threatened or injured you with a weapon such as a gun, knife, or club **on school property**?
  - ② 0 times
  - 3 1 time
  - © 2 or 3 times
  - 1 4 or 5 times
  - ② 6 or 7 times
  - Ɗ 3 or 9 times
  - 10 or 11 times
  - 3 12 or more times

- 17. During the past 12 months, how many times has someone stolen or deliberately damaged your property such as your car, clothing, or books **on school property**?
  - **(A)** 0 times
  - 1 time
  - © 2 or 3 times
  - @ 4 or 5 times
  - © 6 or 7 times
  - © 8 or 9 times
  - @ 10 or 11 times
  - I 12 or more times
- 18. During the past 12 months, how many times were you in a physical fight?
  - @ 0 times
  - ® 1 time
  - © 2 or 3 times
  - 1 4 or 5 times
  - 6 or 7 times
  - 8 or 9 times
  - © 10 or 11 times
  - ® 12 or more times
- 19. During the past 12 months, how many times were you in a physical fight in which you were injured and had to be treated by a doctor or nurse?
  - O times
  - 3 1 time
  - © 2 or 3 times
  - 1 4 or 5 times
  - © 6 or more times
- 20. During the past 12 months, how many times were you in a physical fight **on school property**?
  - @ 0 times
  - 3 1 time
  - © 2 or 3 times
  - 1 4 or 5 times
  - 3 6 or 7 times
  - © 8 or 9 times
  - © 10 or 11 times
  - 12 or more times

- 21. The **last time** you were in a physical fight, with whom did you fight?
  - (A) I have never been in a physical fight
  - A total stranger
  - © A friend or someone I know
  - D A boyfriend, girffriend, or date
  - A parent, brother, sister, or other family member
  - © Someone not listed above
  - More than one of the persons listed above

Sometimes people feel so depressed and hopeless about the future that they may consider attempting suicide, that is, taking some action to end their own life. The next four questions ask about attempted suicide.

- 22. During the past 12 months, did you ever **seriously** consider attempting suicide?
  - A) Yes
  - ® No
- 23. During the past 12 months, did you make a plan about how you would attempt suicide?
  - A Yes
  - ® No
- 24. During the past 12 months, how many times did you actually attempt suicide?
  - @ 0 times
  - ® 1 time
  - © 2 or 3 times
  - @ 4 or 5 times
  - © 6 or more times
- 25. **If you attempted suicide** during the past 12 months, did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?
  - (A) I did not attempt suicide during the past 12 months
  - B Yes
  - © No

### The next ten questions ask about tobacco use.

- 26. Have you ever tried cigarette smoking, even one or two puffs?
  - A Yes
  - ® No
- 27. How old were you when you smoked a whole cigarette for the first time?
  - (A) I have never smoked a whole cigarette
  - 8 years old or younger
  - © 9 or 10 years old
  - 11 or 12 years old
  - 13 or 14 years old
  - 15 or 16 years old
  - 17 years old or older
- 28. During the past 30 days, on how many days did you smoke cigarettes?
  - O days
  - ® 1 or 2 days
  - © 3 to 5 days
  - 1 6 to 9 days
  - © 10 to 19 days
  - © 20 to 29 days © All 30 days
- 29. During the past 30 days, on the days you smoked, how many cigarettes did you smoke **per day**?
  - A I did not smoke cigarettes during the past 30 days
  - ® Less than 1 cigarette per day
  - © 1 cigarette per day
  - 2 to 5 cigarettes per day
  - © 6 to 10 cigarettes per day
  - 11 to 20 cigarettes per day
  - © More than 20 cigarettes per day
- 30. During the past 30 days, how did you usually get your own cigarettes? (Select only **one** response.)
  - I did not smoke cigarettes during the past 30 days
  - I bought them in a store such as a convenience store, supermarket, or gas station
  - © I bought them from a vending machine
  - ① I gave someone else money to buy them for me
  - (E) I borrowed them from someone else
  - I stole them
  - (5) I got them some other way

- 31. When you bought cigarettes in a store during the past 30 days, were you ever asked to show proof of age?
  - (A) I did not smoke cigarettes during the past 30 days
  - I did not buy cigarettes in a store during the past 30 days
  - © Yes, I was asked to show proof of age
  - D No, I was not asked to show proof of age
- 32. During the past 30 days, on how many days did you smoke cigarettes on school property?
  - @ 0 days
  - 1 or 2 days
  - © 3 to 5 days
  - @ 6 to 9 days
  - **©** 10 to 19 days
  - © 20 to 29 days
  - © All 30 days
- 33. Have you ever tried to quit smoking cigarettes?
  - A Yes
  - ® No
- 34. During the past 30 days, on how many days did you use **chewing tobacco or snuff**, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen?
  - O days
  - ® 1 or 2 days
  - © 3 to 5 days
  - ① 6 to 9 days
  - 10 to 19 days
  - © 20 to 29 days
  - @ All 30 days
- 35. During the past 30 days, on how many days did you use chewing tobacco or snuff on school property?
  - @ 0 days
  - 1 or 2 days
  - © 3 to 5 days
  - @ 6 to 9 days
  - © 10 to 19 days
  - © 20 to 29 days
  - @ All 30 days

The next five questions ask about drinking alcohol. This includes drinking beer, wine, wine coolers, and liquor such as rum, gin, vodka, or whiskey. For these questions, drinking alcohol does not include drinking a few sips of wine for religious purposes.

- 36. How old were you when you had your first drink of alcohol other than a few sips?
  - (A) I have never had a drink of alcohol other than a few sips
  - 3 8 years old or younger
  - © 9 or 10 years old
  - 11 or 12 years old
  - 13 or 14 years old
  - ① 15 or 16 years old
  - © 17 years old or older
- 37. During your life, on how many days have you had at least one drink of alcohol?
  - O days
  - 1 or 2 days
  - © 3 to 9 days
  - ① 10 to 19 days
  - © 20 to 39 days
  - **(E)** 40 to 99 days
  - © 100 or more days
- 38. During the past 30 days, on how many days did you have at least one drink of alcohol?
  - O days
  - ® 1 or 2 days
  - © 3 to 5 days
  - @ 6 to 9 days
  - **©** 10 to 19 days
  - ② 20 to 29 days
  - @ All 30 days
- 39. During the past 30 days, on how many days did you have 5 or more drinks of alcohol in a row, that is, within a couple of hours?
  - O days
  - 1 day
  - © 2 days
  - ① 3 to 5 days
  - © 6 to 9 days
  - © 10 to 19 days
  - @ 20 or more days

- 40. During the past 30 days, on how many days did you have at least one drink of alcohol **on school property**?
  - O days
  - 1 or 2 days
  - © 3 to 5 days
  - 1 6 to 9 days
  - 10 to 19 days
  - © 20 to 29 days
  - @ All 30 days

The next four questions ask about marijuana use. Marijuana also is called grass or pot.

- 41. How old were you when you tried marijuana for the first time?
  - I have never tried marijuana
  - 3 8 years old or younger
  - © 9 or 10 years old
  - 11 or 12 years old
  - 13 or 14 years old
  - 15 or 16 years old
  - © 17 years old or older
- 42. During your life, how many times have you used marijuana?
  - O times
  - 3 1 or 2 times
  - © 3 to 9 times
  - ① 10 to 19 times
  - © 20 to 39 times
  - ① 40 to 99 times
  - © 100 or more times
- 43. During the past 30 days, how many times did you use marijuana?
  - ② 0 times
  - ® 1 or 2 times
  - © 3 to 9 times
  - 10 to 19 times
  - © 20 to 39 times
  - 3 40 or more times

- 44. During the past 30 days, how many times did you use marijuana on school property?
  - O times
  - 1 or 2 times
  - © 3 to 9 times
  - 10 to 19 times
  - **©** 20 to 39 times
  - 40 or more times

The next nine questions ask about cocaine and other drug use.

- 45. How old were you when you tried **any** form of cocaine, including powder, crack, or freebase, for the first time?
  - A I have never tried cocaine
  - ® 8 years old or younger
  - © 9 or 10 years old
  - 11 or 12 years old
  - 13 or 14 years old
  - 15 or 16 years old
  - © 17 years old or older
- 46. During your life, how many times have you used **any** form of cocaine, including powder, crack, or freebase?
  - @ 0 times
  - 1 or 2 times
  - © 3 to 9 times
  - 10 to 19 times
  - © 20 to 39 times
  - 40 or more times
- 47. During the past 30 days, how many times did you use any form of cocaine, including powder, crack, or freebase?
  - O times
  - ® 1 or 2 times
  - © 3 to 9 times
  - @ 10 to 19 times
  - **©** 20 to 39 times
  - © 40 or more times
- 48. During your life, how many times have you used the crack or freebase forms of cocaine?
  - 0 times
  - 1 or 2 times
  - © 3 to 9 times
  - ① 10 to 19 times
  - © 20 to 39 times
  - ① 40 or more times

- 49. During your life, how many times have you sniffed glue, or breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high?
  - 0 times
  - 1 or 2 times
  - © 3 to 9 times
  - ① 10 to 19 times
  - **©** 20 to 39 times
  - © 40 or more times
- 50. During your life, how many times have you taken steroid pills or shots without a doctor's prescription?
  - (A) 0 times
  - ® 1 or 2 times
  - © 3 to 9 times
  - ① 10 to 19 times
  - © 20 to 39 times
  - 40 or more times
- 51. During your life, how many times have you used any other type of **illegal** drug, such as LSD, PCP, ecstasy, mushrooms, speed, ice, or heroin?
  - @ 0 times
  - 1 or 2 times
  - © 3 to 9 times
  - ① 10 to 19 times
  - © 20 to 39 times
  - 1 40 or more times
- 52. During your life, how many times have you used a needle to inject any **illegal** drug into your body?
  - @ 0 times
  - 1 time
  - © 2 or more times
- 53. During the past 12 months, has anyone offered, sold. or given you an illegal drug on school property?
  - A Yes
  - ⊕ No

# The next two questions ask about AIDS education and information.

- 54. Have you ever been taught about AIDS or HIV infection in school?
  - A Yes
  - B No
  - © Not sure
- 55. Have you ever talked about AIDS or HIV infection with your parents or other adults in your family?
  - A) Yes
  - ® No
  - © Not sure

### The next eight questions ask about sexual behavior.

- 56. Have you ever had sexual intercourse?
  - A Yes
  - B No
- 57. How old were you when you had sexual intercourse for the first time?
  - A I have never had sexual intercourse
  - ® 11 years old or younger
  - © 12 years old
  - 13 years old
  - 14 years old
  - 15 years old
  - @ 16 years old
  - 17 years old or older
- 58. During your life, with how many people have you had sexual intercourse?
  - A I have never had sexual intercourse
  - 3 1 person
  - © 2 people
  - 3 people
  - 4 people
  - © 5 people
  - @ 6 or more people

59. During the past 3 months, with how many people did you The next six questions ask about body weight. have sexual intercourse? I have never had sexual intercourse 64. How do you describe your weight? (1) I have had sexual intercourse, but not during the past 3 months (A) Very underweight © 1 person Slightly underweight 2 people © About the right weight © 3 people Slightly overweight 4 people (E) Very overweight © 5 people (H) 6 or more people 65. Which of the following are you trying to do about your weight? 60. Did you drink alcohol or use drugs before you had (A) Lose weight sexual intercourse the last time? Gain weight I have never had sexual intercourse. © Stay the same weight Yes (1) I am not trying to do anything about my weight © No 66. During the past 30 days, did you diet to lose weight or to 61. The last time you had sexual intercourse, did you or keep from gaining weight? your partner use a condom? A Yes (A) I have never had sexual intercourse ® No Yes © No 67. During the past 30 days, did you exercise to lose weight or to keep from gaining weight? 62. The last time you had sexual intercourse, what one A Yes method did you or your partner use to prevent ® No pregnancy? (Select only one response.) A l have never had sexual intercourse 68. During the past 30 days, did you vomit or take 3 No method was used to prevent pregnancy laxatives to lose weight or to keep from gaining weight? @ Birth control pills Condoms A Yes Withdrawal ® No © Some other method Not sure 69. During the past 30 days, did you take diet pills to lose weight or to keep from gaining weight? 63. How many times have you been pregnant or gotten A Yes someone pregnant? 3 No © 0 times 3 1 time ② 2 or more times Not sure

The next seven questions ask about food you ate yesterday. Think about all meals and snacks you ate yesterday from the time you got up until you went to bed. Be sure to include food you ate at home, at school, at restaurants, or anywhere else.

- 70. Yesterday, how many times did you eat fruit?
  - @ 0 times
  - 1 time
  - © 2 times
  - @ 3 or more times
- 71. Yesterday, how many times did you drink fruit juice?
  - O times
  - ® 1 time
  - © 2 times
  - @ 3 or more times
- 72. Yesterday, how many times did you eat green salad?
  - (A) 0 times
  - 1 time
  - © 2 times
  - © 3 or more times
- 73. Yesterday, how many times did you eat **cooked** vegetables?
  - 0 times
  - 1 time
  - © 2 times
  - ① 3 or more times
- 74. Yesterday, how many times did you eat hamburger, hot dogs. or sausage?
  - ② 0 times
  - 3 1 time
  - © 2 times
  - ② 3 or more times
- 75. Yesterday, how many times did you eat french fries or potato chips?
  - ⓐ 0 times
  - ③ 1 time
  - @ 2 times
  - @ 3 or more times
- 76. Yesterday, how many times did you eat cookies. doughnuts, pie, or cake?
  - 3 times
  - 3 1 time
  - © 2 times
  - 3 or more times

The next eight questions ask about physical activity.

- 77. On how many of the past 7 days did you exercise or participate in sports activities for at least 20 minutes that made you sweat and breathe hard, such as basketball, jogging, swimming laps, tennis, fast bicycling, or similar aerobic activities?
  - @ 0 davs
  - 1 day
  - © 2 days
  - ① 3 days
  - 4 days
  - © 5 days
  - @ 6 days
  - T days
- 78. On how many of the past 7 days did you do stretching exercises, such as toe touching, knee bending, or leg stretching?
  - @ 0 days
  - 1 day
  - © 2 days
  - @ 3 days
  - © 4 days © 5 days
  - © 5 days
  - ® 7 days
- 79. On how many of the past 7 days did you do exercises to **strengthen or tone your muscles**, such as push-ups, sit-ups, or weight lifting?
  - O days
  - 1 day
  - © 2 days
  - © 3 days
  - © 4 days
  - ② 5 days
  - © 6 days ⊕ 7 days
- 80. On how many of the past 7 days did you walk or bicycle for at least 30 minutes at a time? (Include walking or bicycling to or from school.)
  - O days
  - 1 day
  - @ 2 davs
  - 3 days
  - 4 days
  - 3 davs
  - 3 6 days
  - ® 7 days

		_
	In an average week when you are in school, on how	<u> </u>
	many days do you go to physical education (PE)	
]	classes?	
	O days	-
1	③ 1 day	
4	© 2 days	<b> </b>
1	② 3 days	
	© 4 days	
	© 5 days	
Ì	C o days	
		_
	During an average physical education (PE) class, how	
	many minutes do you spend actually exercising or	
	playing sports?	
	I do not take PE	-
1	Less than 10 minutes	
	© 10 to 20 minutes	
	© 21 to 30 minutes	
1	© More than 30 minutes	
	C More than 50 minutes	
	During the past 12 months, on how many sports teams	-
	run by your school, did you play? (Do not include PE	
	classes.)	
	0 teams	-
1	® 1 team	-
	© 2 teams	-
	© 3 or more teams	
		-
0.4	During the next 10 months, as how assets to asset	į.
04.	During the past 12 months, on how many sports teams	
	run by organizations outside of your school, did	
	you play?	
	① 0 teams	
	3 1 team	
	© 2 teams	-
	① 3 or more teams	

# Appendix C Safe and Drug-Free Schools and Communities Act Coordinator Questionnaire

DCJS Survey: Student Drug and Alcohol Use Surveys									
Safe and Drug Free School Coordinate	or's Name								
Locality						· · · · · · · · · · · · · · · · · · ·			
Directions: If you have never administered a dry your locality, please complete the entire survey.  1. Have you or someone else in your locality.									
2. Who makes the following decisions a  (A) Whether or not to administ  (B) Which survey to administer  (C) How often to administer a	er a drug and	alcohol survey	7?						
3. Do you plan to administer a drug and alcohol survey in your locality in the future?   Yes   Undecided									
If yes, when?				Which survey v	vill you use?_				
If no or undecided, please expl	ain:								
4. For each of the following surveys, plethe survey to other localities:  Virginia Student Survey- Developed and administered by the Governor's Council on	(A) Are you Yes		not you are fa		survey instru  ou recommen  No		whether or not you would recommend  Please Explain:		
Alcohol and Drug Abuse in 1989.  Youth Risk Behavior Survey- Developed by the CDC and administered by the Virginia Department of Education in 1992 and 1993.									
<b>PRIDE Survey-</b> A nationally administered survey by Parents Resource Institute for Drug Education.									
Other- Please write the name of any other survey you are familiar with in the space provided.									

5. Did y the 199	our locality participat 2/1993 Virginia Youth	e in eith <mark>er (A)</mark> 1 Risk Behavio	the 1989 Virgor Survey spoo	ginia Student S nsored by the '	Survey sponsored Virginia Departme	by the Gove ent of Educa	ernor's Cou tion and th	ncil on A e Governo	lcohol and Drug Abuse r's Drug Policy Office	Problems or (B)	
(A)198	9 Virginia Student Sur	vey	<u> </u>	'es	□No			on't Know			
	If yes, how useful were the results from that survey on a scale from 1 (Not Very Useful) to 5 (Very Useful)? (Please circle one number:)										
	Not Very Usef	ul	1	2	3	4		5	Very Useful		
	Please describe how,	if at all, you u									
(B) 199	2/1993 Youth Risk Be				□No			n't Know			
	If yes, how useful we	re the results f	rom that surv	ey on a scale f	from 1 (Not Very	Useful) to 5	(Very Use	ful)? (Plea	se circle <u>one</u> number:)		
	Not Very Usefi	ıl	1	2	3	4		5	Very Useful		
		OU HAVE <u>N</u> I	EVER ADMI	INISTERED A	A DRUG AND A	LCOHOL S	SURVEY	-	ENTS IN YOUR LO		
7. Do yo If yes, p	u have a set schedule lease describe your scl	for administer nedule:	ing drug and	alcohol survey	s (e.g., every 2 ye	ars or every	year)?		□Yes	□No	
Please a 8. In wh	nswer the next 4 que at year was the most re	stions in refer ecent drug and	ence to the national alcohol surve	nost recent dr ey administere	rug and alcohol so	irvey admi	nistration	in your lo	cality:		
9. What the surve	was the name of the rey that was administer	nost recent dn ed.)	ig and alcoho	l use survey th	at was administer	ed? (Please	write "loca	lly develo	ped" if someone in you	r locality created	
10. Wha	t grade levels did you	include in the	most recent s	urvey?	· · · · · · · · · · · · · · · · · · ·						
11. How	useful were the result	s from that sur	vey on a scal	e from 1 (Not	Very Useful) to 5	(Very Usef	ul)? (Pleaso	circle <u>on</u>	e number:)		
	Not Very Useful	1	2	<u>:</u>	3	ŧ	5	Very U	seful		
	Please describe how,	if at all, you us	sed the results	s. (If the last s	urvey you admini	stered was t	he same as	#5, please	write "see above".)		
		Please	mail the comp	leted survey in th	ie enclosed envelope o	or fax to Sand	ra Wright at	804-225-38	53.		