

New Mexico Youth Risk and Resiliency Survey (YRRS)



2003 Report of State Results

NEW MEXICO
DEPARTMENT OF
HEALTH



Public Education
Department



The University of New Mexico
Prevention Research Center

ACKNOWLEDGEMENTS

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Building a Healthy New Mexico!

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October 18, 2004

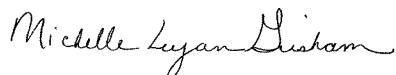
Dear Fellow New Mexicans,

New Mexico's youth face immense challenges as they grow and mature. The New Mexico Youth Risk and Resiliency Survey (NMYRRS) provides valuable information about how our state's youth are facing these challenges at both the state and local level.

The survey looks at risk behaviors as well as resiliency, or protective, factors. Resiliency factors are measures of the positive interactions and influences in the lives of our youth. Risk behaviors include the use of alcohol, tobacco, and other drugs; physical inactivity; poor nutrition; sexual activity; depression and suicidal ideation; excessive body weight; injury; and behaviors associated with violence.

This report provides a statewide overview of the results of the 2003 NMYRRS. A series of companion documents present local level data. The New Mexico Department of Health provides these reports in the hope that they will be valuable decision-making tools for program development and evaluation, resource allocation, and policy-making for those working with the state's youth.

Sincerely,



Michelle Lujan Grisham, J.D.
Secretary-Designate



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DR. VERONICA C. GARCÍA
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BILL RICHARDSON
Governor

October 27, 2004

Dear Colleagues:

On behalf of the New Mexico Public Education Department, I am pleased to provide you with a copy of the New Mexico Youth Risk and Resiliency Survey (NMYRRS).

The information provides us with a snapshot of current behaviors and assets of New Mexico's high school students.

I know that you will agree that the academic success of our youth is influenced by many factors including caring relationships and support (having a parent or some other adult in their home that is interested in their school work) or commitment to learning and positive identity and social competencies and life skills.

It is my hope that this report will be of assistance to all who work with youth and that it will support all of you that work for protective youth development in this state.

Yours in advocating for children,


Dr. Veronica C. Garcia

Secretary of Education

VCG:lb

EXECUTIVE SUMMARY

In the fall of 2003 the New Mexico Youth Risk and Resiliency Survey (NM YRRS) was conducted in 71 of the 89 school districts in New Mexico, with 10,778 of the 97,078 students in grades nine through twelve participating in 103 of the 191 public schools with those grades. The NM YRRS is a tool that can assist administrators and policy makers to identify health risk behaviors among students. The goal is to increase academic success by decreasing health risk behaviors that create barriers to student learning and may contribute to the achievement gap. This report presents the state-level results. These results can be generalized to most of the state with a fair degree of confidence.

- In 2003, 77% of high school students indicated that they wore seat belts most of the time or always, compared to 82% in 2001. An increase was noted for those who indicated that during the previous 30 days, they drove a vehicle after they had been drinking alcohol; 13% answered one or more times in 2001 increasing to 19% for 2003.
- Indicators of suicide attempts were unchanged from 2001 to 2003. Some violence indicators worsened in 2003 from 2001. A higher proportion of youth reported instances of being threatened by a weapon, being in physical fights, being forced to have sex, and being struck on purpose by a girlfriend or boyfriend. Slightly more youth reported carrying weapons on and off school property.
- In 2003, 30% of youth reported smoking in the previous 30 days, and 8% reported using smokeless tobacco. Smoking and chewing tobacco were highest among 12th grade boys.
- Binge drinking (defined as consuming 5 or more drinks of alcohol in a row within a couple of hours on at least one day out of the previous 30) increased from 29% in 2001 to 35% in 2003. The number of adolescents who reported having had at least one drink of alcohol on school property doubled, from 7% in 2001 to 14% in 2003.
- The number of youth reporting vigorous activity remained stable with 56% reporting vigorous activity three or more days a week in 2003, and 57% in 2001. Of those at-risk of becoming overweight, 41% of females and 38% of males said they exercised.
- Eighty-three percent of 2003 NM YRRS respondents reported not eating five or more servings of fruits and vegetables a day, on average, over the past seven days.
- For most resiliency factors, higher levels of resiliency were associated with fewer reported risk behaviors.

The results from NM YRRS provide the basis for decision-making for the development and implementation of new school health policies and programs, and the justification for funding projects to implement those decisions. As data collection continues in years to come, long term trends will be identified, increasing the likelihood that the survey data will be used to positively impact the lives of New Mexico's youth and the health of all New Mexicans.

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INTRODUCTION

Background

The New Mexico Youth Risk and Resiliency Survey (NM YRRS) was developed in New Mexico as a tool to assess the behavioral health risk and protective factors of New Mexico youth. Implemented in the fall of odd-numbered years, the survey is funded by the New Mexico Department of Health (NM DOH) and the New Mexico Public Education Department (NM PED), with additional assistance from the U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Division of Adolescent and School Health (CDC/DASH Cooperative Agreement No. UC87/CCU622624). The NM YRRS 2003 survey was carefully designed by a task force composed of representatives from the NM PED, NM DOH, UNM Center for Health Promotion and Disease Prevention (CHPDP) and other partners. Special attention was given to ensure that it was comparable to the CDC/DASH Youth Risk Behavior Survey (YRBS), which is administered in most states to obtain relevant data about school health issues. CDC/DASH approved the use of the NM YRRS as comparable to and a substitute for the YRBS. This is especially important because it allows the comparison of state data to national data. The NM YRRS differs from the YRBS in that the questions cover not only behavioral risk factors, to which the YRBS is limited, but also resiliency factors ('assets' or 'protective factors'). As in previous years, the survey was offered in both English and Spanish. The questionnaire and responses are included in this report in Appendix A.

Overview of Survey Administration

The NM YRRS sample frame encompassed all 89 districts and all public schools containing 9th through 12th graders in participating schools districts. The probability of schools being selected was proportional to population size from within each district. Seventy-one districts and 103 schools participated in the NM YRRS. The statewide participation rate was 56%. Data reported in this document exclude four schools that were sampled for only the CDC/DASH national YRBS. Details about the methods, instrument, sampling and administration of the survey are provided in Appendix B.

Overall, the demographic composition of the 10,778 high school students who completed the 2003 NM YRRS was similar to the 97,078 high school student's in the state (see Table 1).

Table 1. Characteristics of 2003 YRRS Survey Population

Demographic Category		Number of Participants	Proportion in 2003 YRRS	Proportion in State
Grade	9 th	3206	30%	31%
	10 th	2713	25%	26%
	11 th	2299	22%	23%
	12 th	2386	22%	20%
Gender	Female	5359	51%	51% *
	Male	5190	49%	49% *
Race/Ethnicity	American Indian/ Alaska Native	1144	11%	11% *
	Asian	106	1%	1% *
	Black/African American	205	2%	2% *
	Hawaiian/ Pacific Islander/ Other	80	1%	1% *
	Hispanic/Latino	5148	48%	51% *
	White	2999	28%	34% *
	Multiple Ethnicity	1096	10%	N/A

* 2001-2002 data, *QuickStatsWebPub042803*, New Mexico State Board of Education.

Relevance of the YRRS

The NM YRRS is a tool that can assist administrators and policy makers to identify health risk behaviors among students. The goal is to increase academic success by decreasing health risk behaviors that create barriers to student learning and may contribute to the achievement gap. Many state agencies, community groups and schools use the data to plan programs and allocate resources for the greatest benefit to all of New Mexico's students. The results from the YRRS provide the basis for decision-making about whether to develop and implement new school health policies and programs, and to justify funding projects to implement those decisions. YRRS results over multiple years also provide trend information concerning various behavioral risk and protective factors in the lives of New Mexico students. The data can assist schools in planning programs and curriculum and services to youth. Results of the NM YRRS and the CDC/DASH YRBS are relevant for determining the extent to which the objectives of *Healthy People 2010* are being met. These indicators reflect the major public health concerns in the United States and were chosen based on their ability to motivate action, the availability of data to measure their progress through programs such as the NM YRRS, and their relevance as broad public health issues.

Conducting the NM YRRS also enables the state to meet the reporting requirements for Title IV, the Safe and Drug-Free Schools Act, and the Safe Schools Accountability Indicator, which serves as the basis for safe schools planning.

Other uses for the data include the Title V Maternal and Child Health Block Grant program, which requires assessing the health of New Mexico children, and enables the Maternal and Child Health Councils to set priorities for state programs. The results also help those responsible for developing statewide youth safety programs, such as suicide prevention plans, and legislation on seat belt use, helmet laws, and tobacco issues.

This report provides a summary of statewide data. County-level results will be available at the Public Health District office in which a school district is located. School district results are provided to participating districts, and can only be obtained with direct permission from the participating school district.

2003 YRRS RESULTS

Personal Safety

Context

Motor vehicle-related injuries kill more young adults aged 15-19 than any other single cause of death in the United States.¹ Proper use of lap and shoulder belts can prevent approximately 60% of deaths of motor vehicle occupants.² In 2003, 18% of US high school students reported rarely or never wearing a seat belt while riding in a car driven by someone else.³ Furthermore, approximately 30% of motor vehicle crashes that result in injury involve alcohol,⁴ and 36% of motor-vehicle related fatalities of those aged 15-20 years and 20% of those less than 15 years old.⁵ In 2003, 12% of US high school students nationwide reported having driven a vehicle one or more times after drinking alcohol during the previous 30 days and 30% of high school students reported riding one or more times during the previous 30 days in a car with a driver who had been drinking alcohol.⁶

New Mexico Personal Safety Results

The 2003 results for indicate that New Mexico adolescents were taking slightly greater risks than in 2001. Nearly 77% indicated in 2003 that they wore seat belts most of the time or always, compared to 82% in 2001, therefore fewer youth are wearing seatbelts.

A significant increase was noted for those who indicated that during the previous 30 days, they drove a vehicle after they had been drinking alcohol; 13% answered one or more times in 2001 increasing to 19% for 2003.

Violence-Related Behaviors

Context

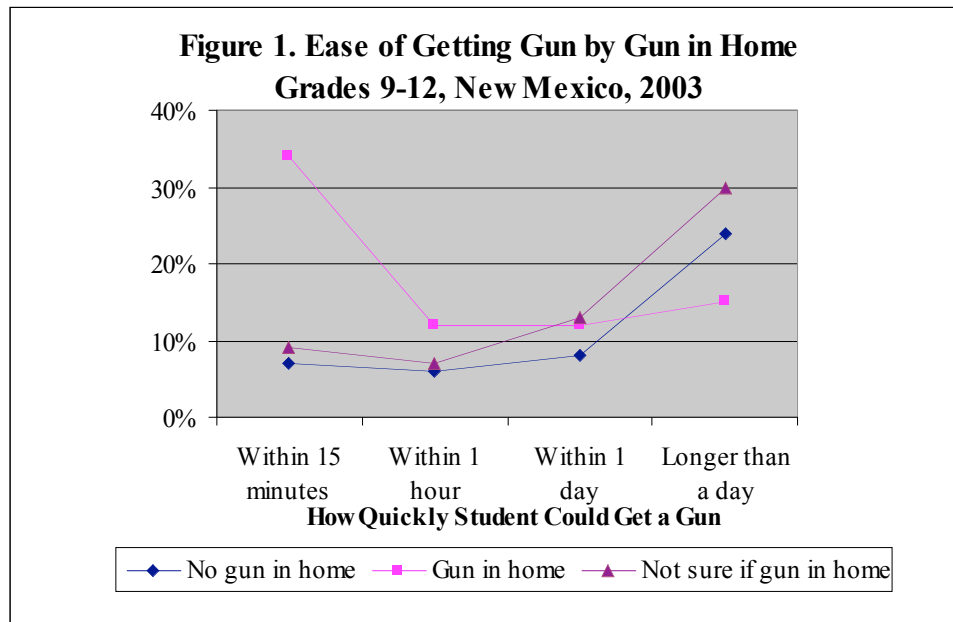
Homicide is the second leading cause of death among youth aged 15-19 years, with a ten-fold increase in the rate for this age group (10.6 per 100,000) over youth aged 10-14 years (1.3 per 100,000).⁷ Firearms significantly elevate the severity of violent events; firearms caused 82% of the homicides of 15-19 year olds in 1998.⁸ Nearly all school districts have a policy prohibiting weapons possession or use by high school students on school property,⁹ and a significant decrease in weapons possession (gun, knife, club) occurred from 1993 to 2001 (12%-6%) on school grounds.¹⁰

Physical fights precede many violence-related injuries and fatalities.¹¹ In 1999, 880,000 non-fatal violent crimes occurred nationally at schools involving students aged 12-18.¹² In 2003, 33% of high school students reported being in a physical fight, 13% at school.¹³ Rape has been associated with increased risks of health problems, including chronic disease.¹⁴ In 2003, 9% of US high school students had been hit, slapped, or physically hurt on purpose by a boyfriend or girlfriend on one or more occasions during the prior year, and 8% of high school students had at one time experienced forced sex.¹⁵ In 2003, 5% of high school students reported feeling unsafe at school or while going to or from school.¹⁶

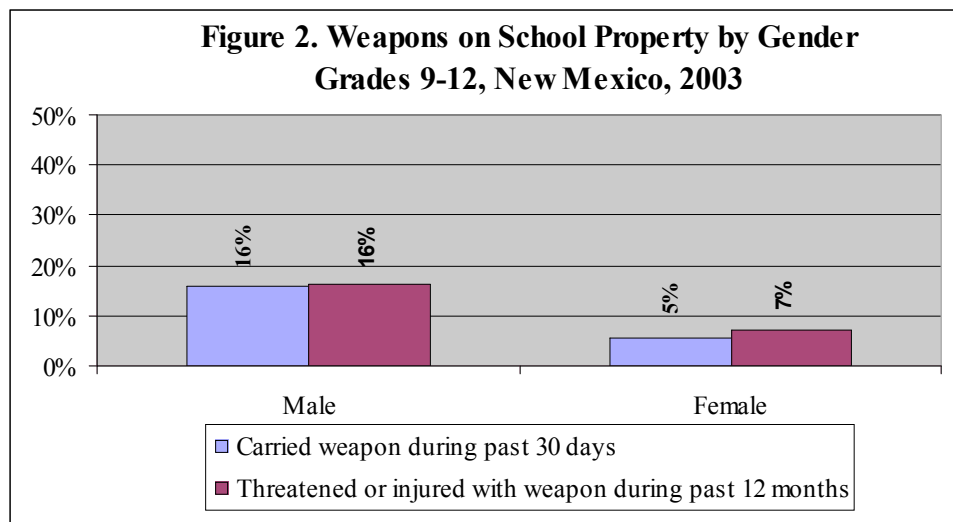
Suicide is the third leading cause of death for youth aged 15-19.¹⁷ In 2001, the national suicide rate for 15-19 year olds was 8 per 100,000, a decrease from the 1994 rate of 11 per 100,000.¹⁸ In 2003, 17% of high school students reported having made a plan to attempt suicide and 9% attempted suicide one or more times during the prior year.¹⁹ The percentage of high school students who seriously considered suicide decreased from 29% to 17%.²⁰

New Mexico Violence-Related Behavior Results

The 2003 results indicated little to no increases over 2001 in violence-related behavior for each issue addressed in the survey. More than half (50%) of respondents indicated there was a gun in their home in 2003. An interesting comparison was found among respondents who reported a gun in their home and the likelihood that they could get a gun in a certain time period (see Figure 1). Figure one shows that 34% of respondents had a gun in their home and could get a gun within 15 minutes. This is in contrast to the 7% of those who have no gun in their home and could obtain a gun as quickly. Only a quarter (25%) reported carrying a weapon such as a gun, knife or club one or more times in the previous 30 days in the 2003 survey, which was nearly identical to 2001 (24%); 11% indicated carrying a gun one or more times in the previous 30 days in 2003, which was not a significant difference from 8% in 2001.

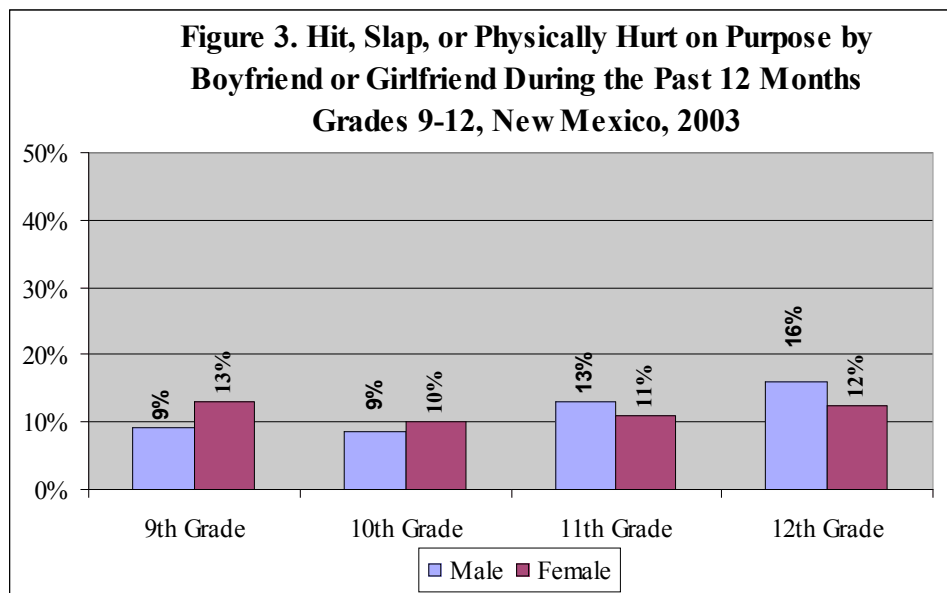


Other indicators for threats to safety were the responses to questions about how safe students feel at school, their involvement in fights and having experienced sexual violations. In 2003, 8% of respondents chose not to go to school because they felt unsafe at school or going to/coming home from school whereas 7% indicated feeling unsafe in 2001.

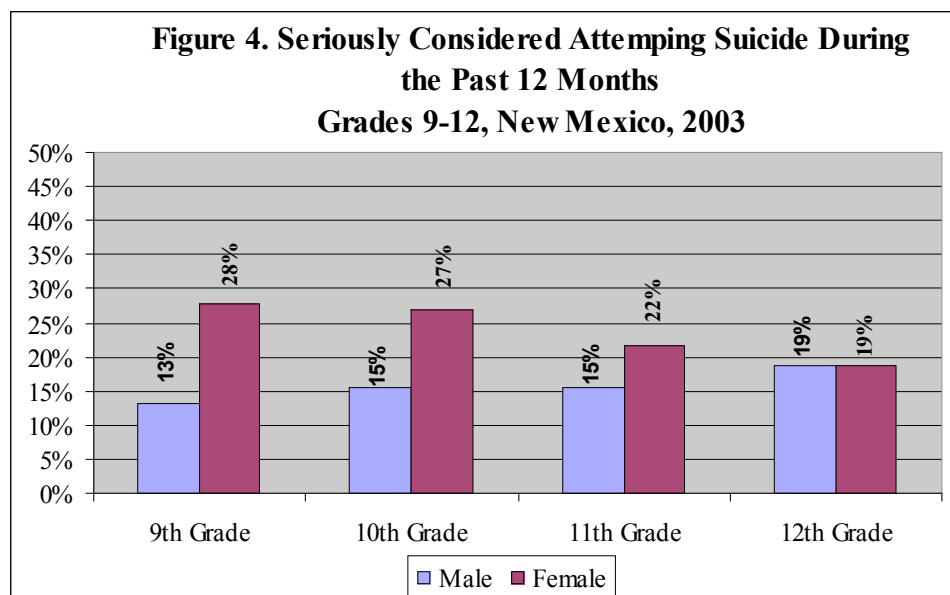


Little difference was reported between 2001 and 2003 with regard to being threatened or injured during the previous 12 months with a weapon on school property; 2003 (12%), 2001 (10%). Figure 2 indicates the percent threatened by gender and the percent who reported carrying a weapon by gender. A significant increase occurred in 2003 in the number who indicated being in a physical fight one or more times during the previous 12 months (39%; 19% on school property) as compared to 2001 (27%; 14% on school property). Notable increases occurred in 2003 in the number who indicated that during the previous 12 months a boyfriend or girlfriend had hit, slapped, or physically hurt them on purpose, from 7% in 2001 to 12% in 2003

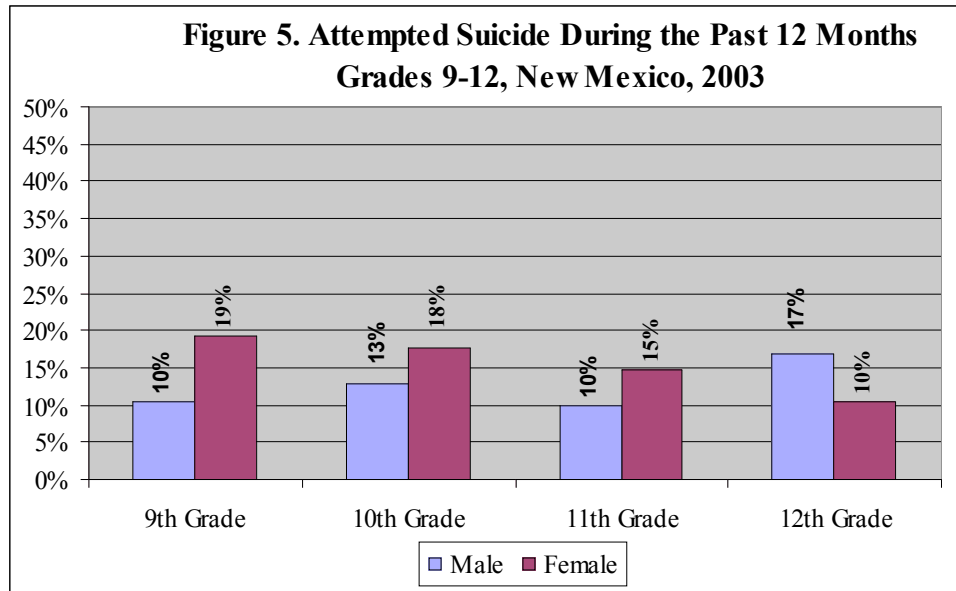
(see Figure 3 for results by grade and gender). Increases were also seen in the number who had been physically forced to have sexual intercourse when they did not want to (from 7% in 2001 to 11% in 2003).



Students were asked about suicide ideation and attempts. The 2003 results are very similar to the 2001 results in the number who felt so sad and hopeless in the previous 12 months that they stopped doing their usual activities (32% in 2003, 31% in 2001), and in the number that seriously considered attempting suicide in the previous 12 months (down to 20% in 2003, from 22% in 2001) (see Figure 4 for results by grade and gender).



The number of those who attempted suicide changed little from 13% attempted one or more times in 2001 to 14% attempted one or more times in 2003 (see Figure 5 for results by grade and gender); 8% indicated that their attempt had to be treated by a doctor or nurse.



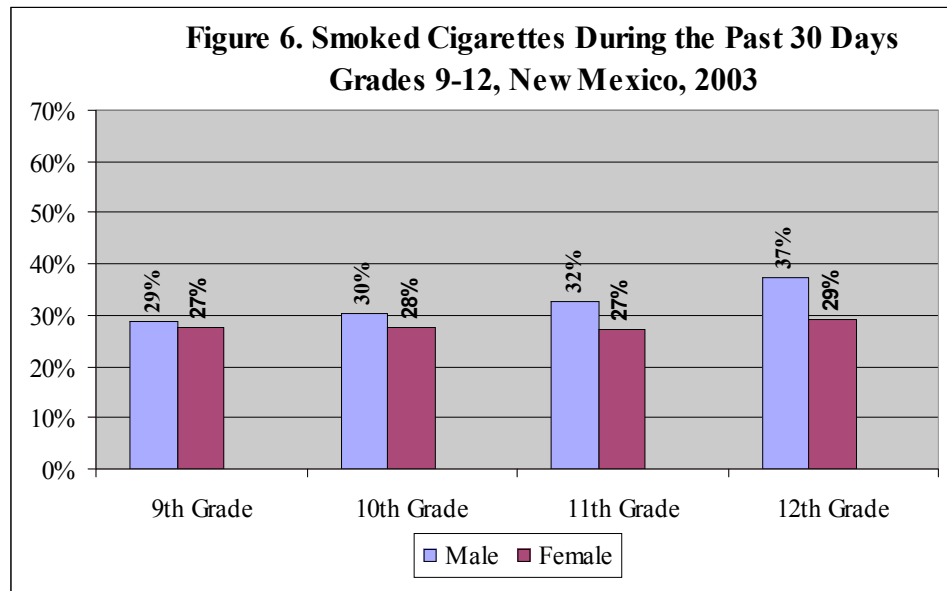
Tobacco Use

Context

One fifth of all deaths in the US are attributed to tobacco use, which is responsible for heart disease, various cancers (lung, larynx, mouth, esophagus and bladder), stroke and chronic obstructive pulmonary disease.²¹ Seventy-five percent of oral cavity and pharyngeal cancers are attributed to the use of smoked and smokeless tobacco.²² From 1991-1999, the percentage of US high school students who had ever smoked cigarettes remained steady, then decreased from 1999-2001. “Current” cigarette use among US high school students increased from 1991 (28%) to 1997 (36%) and then it decreased to 22% by 2003. In 2003, 11% of US male high school students were current smokeless tobacco users compared to only 2% among female students. In addition 20% of male high school students and 9% of female high school students reported cigar use in the previous month.²³ About 46% of school districts in the US prohibit tobacco use in school premises and vehicles, and at school events.²⁴ But in 2003, 8% of high school students reported smoking cigarettes in the last month on school property and 6% reported current smokeless tobacco use on school property. Of high school students younger than 18 who were smokers, 19% reported that they obtained cigarettes in a store or gas station, despite laws in all states prohibiting the sale of tobacco products to minors. In 2001, 67% of those who reported obtaining cigarettes in a store were *not* asked to show proof of age.²⁵ Smokeless tobacco use begins primarily in early adolescence.²⁶ If current patterns of smoking behavior continue, approximately 5 million US citizens of those under age 18 in 1995 could die prematurely.²⁷ Cigarette smokers are more likely than nonsmokers to drink alcohol and use marijuana and cocaine.²⁸

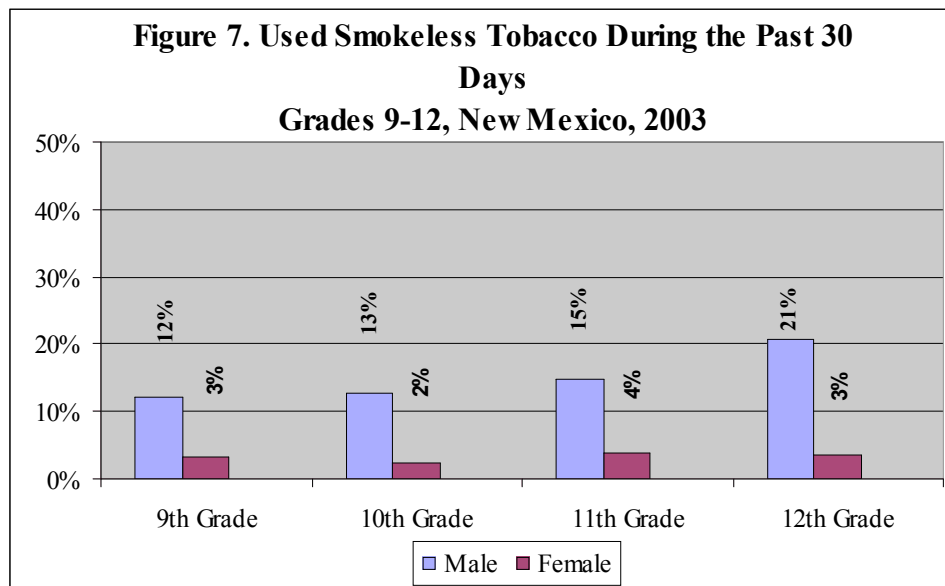
New Mexico Tobacco Use Results

Nearly two thirds (65%) of New Mexico students have ever tried smoking cigarettes. During the past 12 months, 54% of current smokers had tried to quit smoking. At the same time, 49% responded that they had never smoked a whole cigarette; and 30% had smoked on one or more days in the past 30 days (see Figure 6 for results by grade and gender). The proportion of frequent smokers (smoked on 20 or more of the previous 30 days) remained relatively stable between 2001 and 2003, at 10% of respondents in 2001, and 8% in 2003. The percentage of light smokers (smoked on 1-5 days of the last 30) was 14% in 2003 versus 10% in 2001.



A significant number (61.4%) of students reported being exposed to secondhand smoke (i.e., being in the same room with someone who was smoking) during the past seven days. In 2001, 31% of students reported being exposed to secondhand smoke during the past week in their own homes, and 62% were exposed to smoke in places outside the home.

Smokeless tobacco continues to be used more by males than females and, among males, use is higher in older males. The use of cigars and cigarillos, a question not asked in previous years, was 19% among all youth in 2003. Overall, smoking and chewing tobacco use was highest among 12th grade boys.



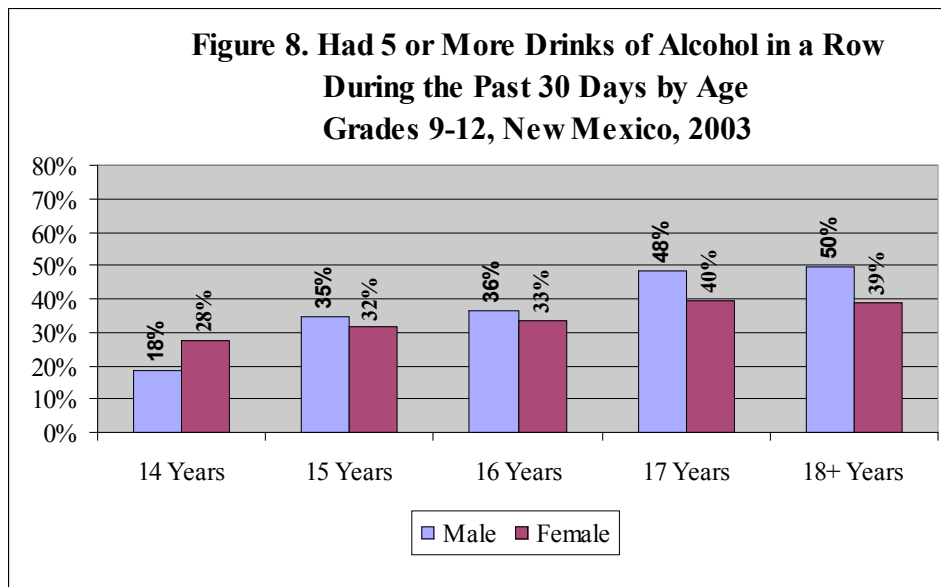
Alcohol Use

Context

On a national level, motor vehicle crashes are the leading cause of death among youth aged 15-19,²⁹ and 30% of all motor vehicle crashes that result in injury involve alcohol.³⁰ Heavy drinking among youth has been linked to increased number of sexual partners, use of marijuana, and poor academic performance.³¹ In 2003, 75% of high school students had one or more drinks of alcohol in their lifetimes, 45% had one or more drinks of alcohol during the previous 30 days, and 28% had 5 or more drinks of alcohol on one or more occasions during the previous 30 days.³²

New Mexico Alcohol Use Results

A quarter (24%) reported never having had a drink of alcohol, though 49% indicated that during the previous 30 days they had had no drinks. The consumption rate remained stable, with 51% reporting on one or more days of the previous 30 in 2003, versus 49% in 2001. Binge drinking (see Figure 8 for results by grade and gender), defined as consuming 5 or more drinks of alcohol in a row (i.e. within a couple of hours) on at least one day out of the previous 30, has increased from 29% in 2001 to 35% in 2003. However, the number of adolescents who reported having had at least one drink of alcohol on school property doubled from 7% in 2001 to 14% in 2003.



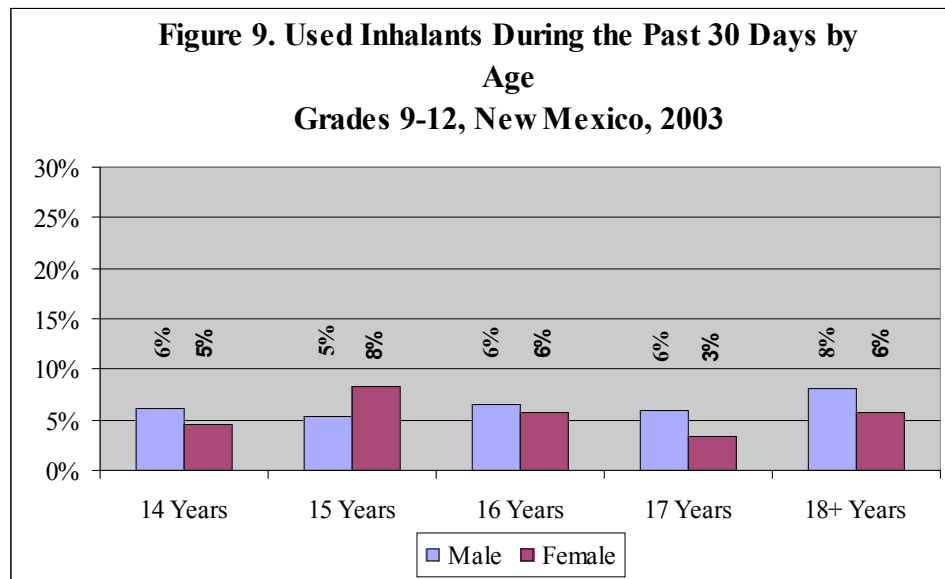
Marijuana & Other Drug Use

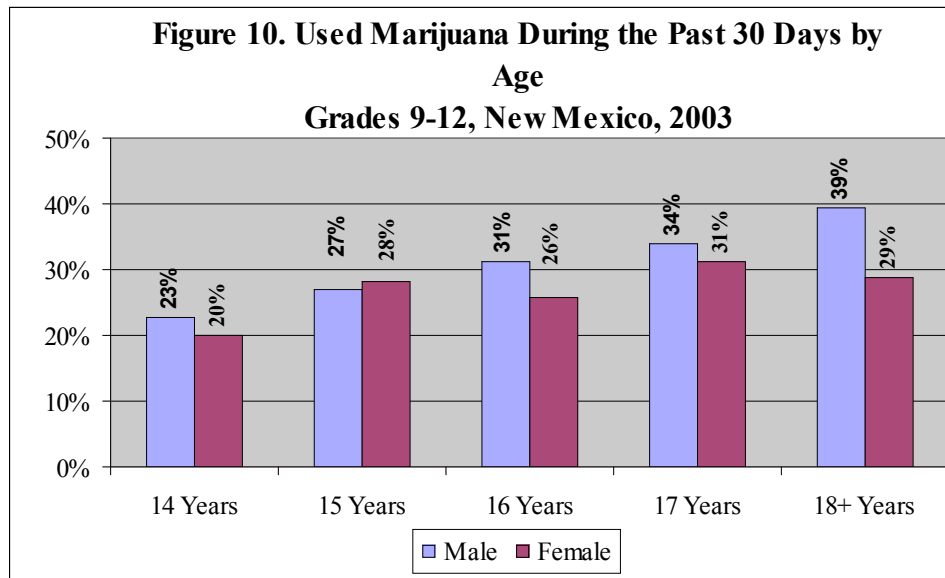
Context

The impact of drug use includes morbidity and mortality due to injury, suicide, early unwanted pregnancy, school failure, delinquency, and contracting sexually transmitted diseases.³³ Despite improvements in recent years, drug use is greater among youth in the US than in any other industrialized nation in the world.³⁴ On a national level in 2003, 40% of US high school students had used marijuana and 9% had used some form of cocaine in their lifetime. From 1991 to 2003, the percentage of high school students who used cocaine during the previous month doubled from 2% to 4%.³⁵

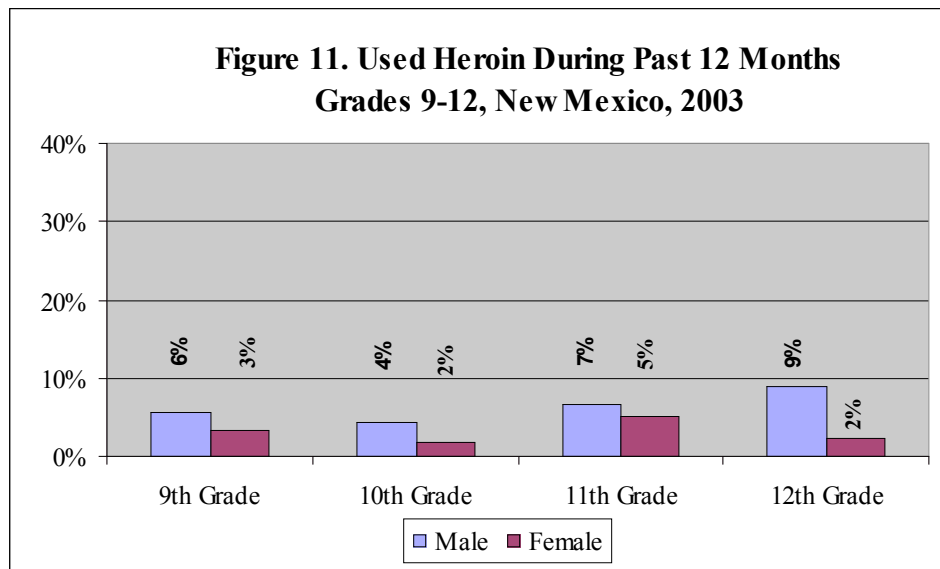
New Mexico Drug Use Results

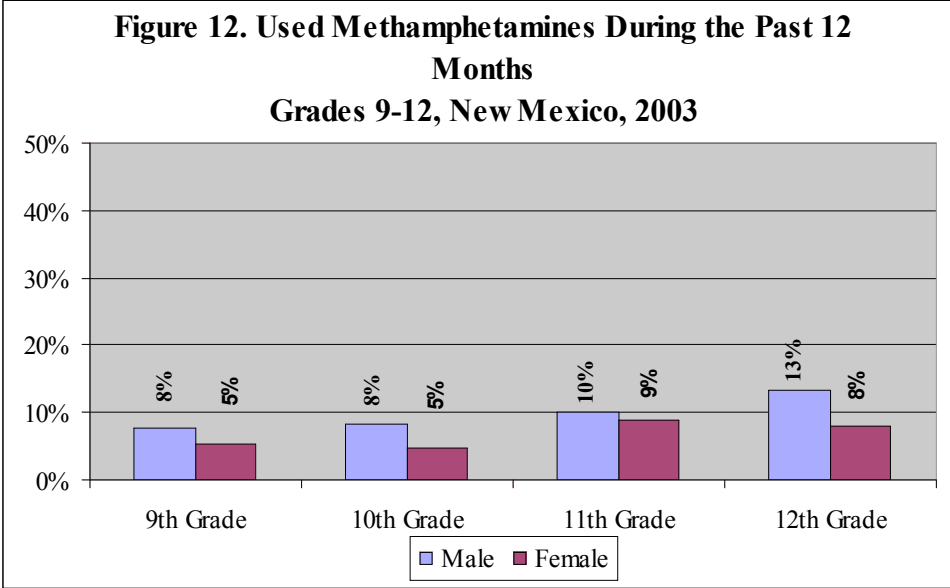
The 2003 responses to the questions indicated significant increases over 2001 results in most measures use and ease of access to illicit drugs. Thirty day marijuana use remained relatively stable from 27% in 2001 to 29% in 2003. Thirty day cocaine (including powder, crack, or freebase) use increased from 4% in 2001 to 9% in 2003. Thirty day use of inhalants (glue, aerosol spray can contents, paints, etc.) increased from 3% in 2001 to 7% in 2003 (see Figure 9 for results by age and gender). Overall, males used marijuana more than females (see Figure 10).





Use of heroin (see Figure 11 for results by grade and gender) on at least one day during the previous 12 months increased from 1% in 2001 to 5% in 2003, while use of methamphetamines for the same time frame increased slightly from 5% in 2001 to 8% in 2003 (see Figure 12 for results by grade and gender). Ease of access increased as well. In 2001, 29% of students indicated that someone had offered, sold or given them an illegal drug on school property during the previous 12 months; in 2003, 41% answered yes. Access to marijuana in 2003 was reported to be hard or very hard to obtain by 32%, while 68% indicated it was sort of easy or very easy to get. By contrast, access to cocaine or other illegal drugs was considered to be very hard or sort of hard to obtain by 67%, while 33% thought it was sort of easy to very easy to get.





Sexual Activity

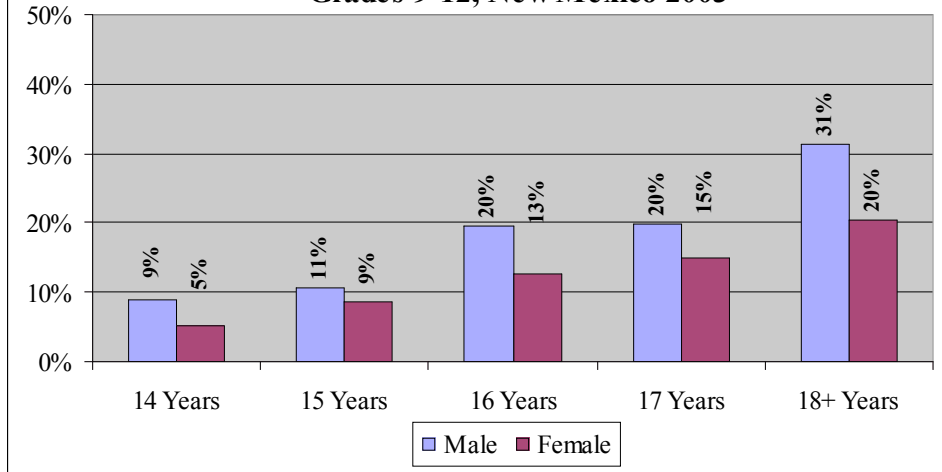
Context

Age at first intercourse and number of sexual partners is associated with increased risk for unwanted pregnancy and other sexually transmitted diseases, including HIV infection.³⁶ The percentage of US high school students who ever had sexual intercourse decreased from 54% in 1991 to 47% in 2003, while condom use among currently sexually active students increased from 46% in 1991 to 58% in 1999 and 63% in 2003.³⁷ The prevalence of multiple sex partners decreased by 24% from 19% to 14% from 1991 to 2001.³⁸ Sixty-six percent of all births among teenagers are the result of unintended pregnancy.³⁹ In 2003, 17% of currently sexually active high school students nationally used birth control pills at last sexual intercourse.⁴⁰ Among females aged 15-19 years, pregnancy rates decreased 19% from 116 per 1,000 in 1991 to 94 per 1,000 in 1997,⁴¹ and birth rates decreased 26% from 62 per 1,000 in 1991 to 46 per 1,000 in 2001.⁴² In addition, AIDS incidence among people aged 13 to 25 rose nearly 20% between 1990 and 1995. In 2000, new reports of individuals with AIDS were made by 1,688 young people aged 13 to 24, bringing the cumulative total in this age group to 31,293 cases of AIDS across the country.⁴³ In 2000, 86% of US high schools required HIV prevention education.⁴⁴

New Mexico Sexual Activity Results

Not all districts who agreed to participate in the YRRS allowed questions about sex. Therefore, the following data represent most, but not all, of the participating districts. The results of the 2003 survey indicated an increase in the number of New Mexican adolescents who had sexual intercourse before age 13: 5% in 2001 said they had sexual intercourse for the first time before age 13; 10% in 2003 reported this. In 2003, 48% indicated they had ever had sexual intercourse (a non-significant increase from 44% in 2001), 19% reported having had sexual intercourse with one person during their lifetime, 15% had 2-3, and 13% indicated 4 or more (see Figure 13 for results by age and gender). In 2003 14% said alcohol or drugs were used before having had sexual intercourse the last time, and 28% percent said a condom was used the last time they had engaged in sexual intercourse (unchanged from 2001).

**Figure 13. Had Sexual Intercourse with 4 or More People During Lifetime
Grades 9-12, New Mexico 2003**



Body Weight and Nutrition

Context

The results of the YRRS questions concerning self-reported height, weight and weight control behaviors can be used to calculate body mass index and determine the proportion high school students who are overweight. Although these self-reported estimates may be low,⁴⁵ they have been shown to provide trend data over time that are consistent with data from national surveys.⁴⁶ Overweight and obesity are increasing in both genders and among all age groups. According to the National Center for Health Statistics, between 1980 and 2000, the prevalence of overweight more than doubled among children and adolescents. An estimated 15% of US children aged years were overweight in 2000 (64 percent of U.S. adults were either overweight or obese in 2000).⁴⁷ The significance is that about 300,000 deaths per year in the US are associated with overweight and obesity, nearly as many cases of preventable diseases and deaths as from cigarette smoking.⁴⁸ These consequences can include in later life coronary heart disease, gallbladder disease, some types of cancer, and osteoarthritis,⁴⁹ and during adolescence hyperlipidemia, hypertension, abnormal glucose tolerance, and adverse psychological and social consequences.⁵⁰ High rates of body dissatisfaction among adolescent females result in many engaging in unhealthy weight control behaviors, including fasting and self-induced vomiting that have the potential to lead to abnormal psychological and physical development.⁵¹ The New Mexico results for both 2001 and 2003 indicated that such eating disorders were as prevalent among males as females.

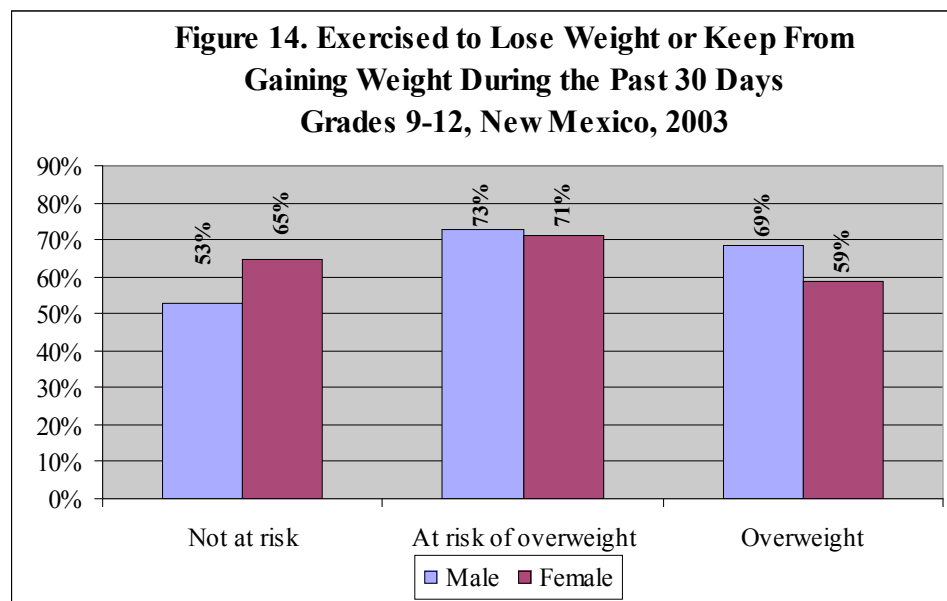
The nutrition questions measured food choices that contribute to good health and decreased risks of disease. These questions are similar to questions on the CDC Behavioral Risk Factor Surveillance Survey (BRFSS) given to adults, and thus the results offer the basis for a useful comparison. Dietary patterns containing higher intakes of fruits and vegetables, which are good sources of complex carbohydrates, vitamins, minerals and other substances needed for good health, are associated with a decreased risk for some types of cancer.⁵² In 2003, only 24% US of male high school students and 20% of US female high school students met the minimum average daily goal of five or more servings per day of vegetables and fruits.⁵³ Milk is by far the largest single source of calcium for high school students, essential for the formation and maintenance of healthy bones and teeth, while low calcium intake during the first two to three decades of life presents an important risk factor in developing osteoporosis later in life.⁵⁴ Only about half of male and more than 80% of female high school students do not meet dietary recommendations for calcium intake.⁵⁵

New Mexico Body Weight and Nutrition Results

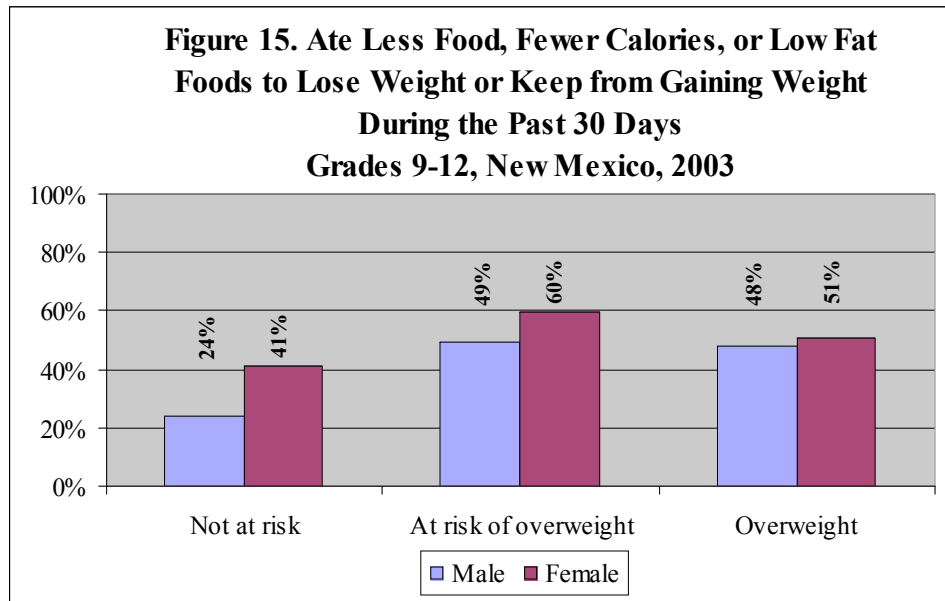
Students provided their height and weight. These responses were combined to calculate the body mass index (BMI in percentiles, calculated as kg./m^2 or $(.4536 \times \text{lbs})/(\text{.0254} \times \text{inches})^2$) of participants, which provides information about the percentages that are below the 85th percentile of BMI, those at risk of overweight (85th-95th%), and those overweight (>95th%). These percentiles are based on rankings for sex and age, and are based on 30 years worth of national data, compiled and presented as growth charts by the CDC.

Seventy-seven percent of those who responded to the survey were below the “at risk” body weight range (80% of females and 72% of males). Thirteen percent were in the “at risk of overweight” range (13% of females and 13% of males). Ten percent were in the “overweight” range. Boys were much more likely to be overweight than girls (6% of girls and 15% of boys).

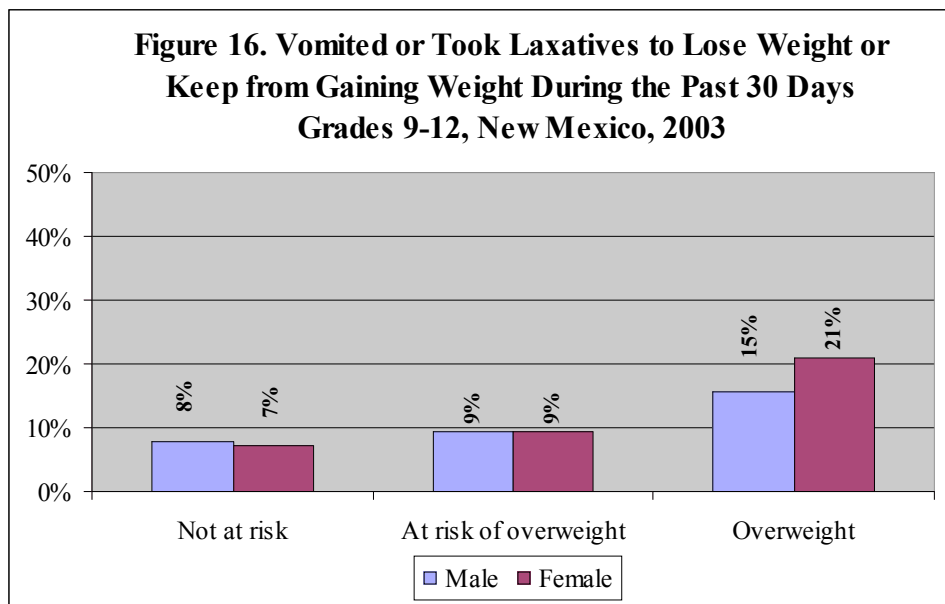
In 2001, 41% indicated they exercised to lose weight or to prevent weight gain; 62% of those from the 2003 survey indicated that they exercised. Of those below the “at risk of overweight” range, 35% of females and 47% of males indicated they did not exercise during the previous 30 days, while 65% of females and 53% of males said they did exercise (see Figure 14). Of those in the “at-risk of overweight” category, 29% of females and 28% of males said they did not exercise, while 71% of females and 72% of males said they did. Of those in the overweight category, 42% of females and 33% of males said they did not exercise, while 58% of females and 67% of males said they did exercise in the previous 30 days.



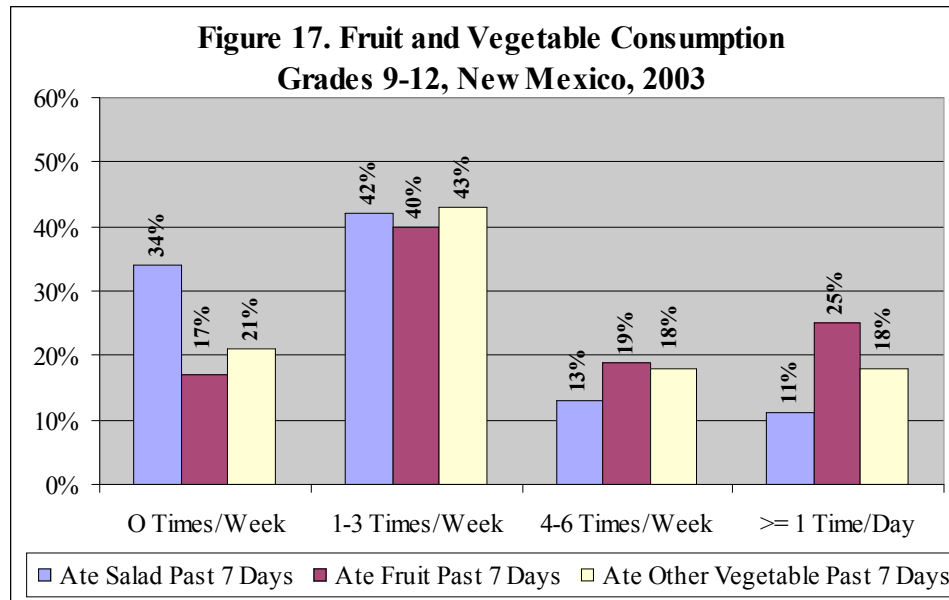
In 2003, females were more likely than males chose to reduce their caloric intake in an effort to control (see Figure 15). For both males and females those in the “at-risk of overweight” category were more likely to restrict their caloric intake than those in both the “normal” and the “overweight” categories.



A total of 10% of respondents reported that they vomited or took laxatives during the previous 30 days to lose weight or avoid gaining weight: 9% of females and 11% of males reported this. Overweight youth were more likely to engage in this weight control strategy (see Figure 16).



With regard to consumption of nutritional foods in the previous 7 days, little difference was indicated between males and females. Overall, 83% of 2003 NM YRRS respondents reported not eating five or more servings of fruits and vegetables a day, on average, over the past seven days. Thirty-four percent of 2003 NM YRRS respondents ate no green salad in the last seven days, 17% ate no fruit, and 21% ate no other vegetables in the same time period (see Figure 17).



Physical Activity, Personal Care and Health Habits

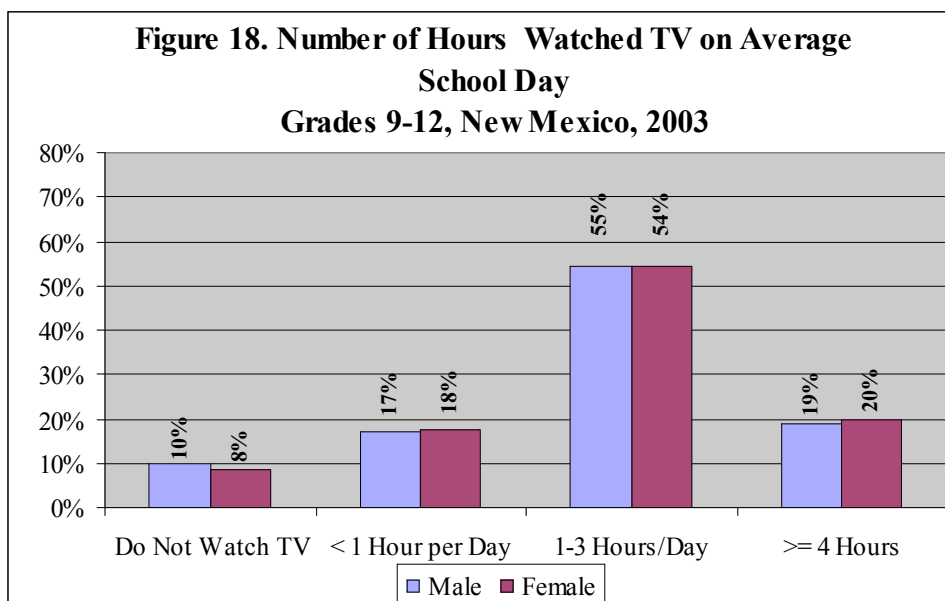
Context

Physical activity helps build and maintain healthy bones and muscles, control weight, build lean muscle, and reduce fat; it also reduces feelings of depression and anxiety, and promotes psychological well-being.⁵⁶ Regular physical activity also decreases the risk of dying prematurely, dying of heart disease, or developing diabetes, colon cancer, and high blood pressure.⁵⁷ School physical education classes can provide moderate to vigorous physical activity, and help students develop the skills and knowledge for engaging in lifelong physical activity.⁵⁸ Studies have shown that decreases in vigorous physical activity occur during grades 9-12, particularly for girls; by 11th grade, half do not participate in sufficient levels of vigorous physical activity. The percentage of US high school students enrolled in daily physical education decreased from 42% in 1991 to 25% in 1995, and increased then to 28% in 2003, still far below the 1991 level.⁵⁹ Television viewing is the principal sedentary leisure time activity in the US, related to obesity in young people.⁶⁰

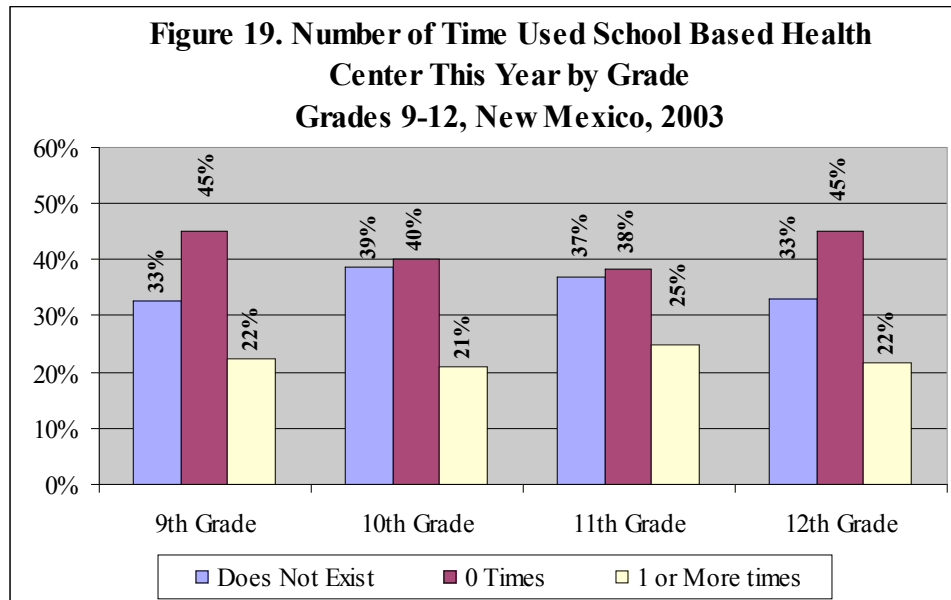
New Mexico Physical Activity, Personal Care and Health Habits Results

Results for 2003 resemble closely the 2001 survey results in this set of questions. The number of youth reporting vigorous activity remained stable with 56% reporting vigorous activity three or more days a week in 2003, and 57% in 2001. Of those in the at-risk of overweight category, 41% of females and 38% of males said they exercised.

Fifty-six percent of the respondents participated 3 or more days during the previous week in 20 minutes of vigorous physical activity, while 18% did not exercise at all. Thirty-four percent watched television 3 or more hours on an average school day, and 9% did not watch any television (see Figure 18 for television hours by gender).



Half of the students indicated that they didn't participate in a physical education class in an average week in 2003. Only 22% said they participated 5 days. Physical examinations were completed within the previous 12 months by 57% (32% of the females, 25% of males), 15% indicated 1-2 years ago, 15% did not remember, and 7% said they had never been given a physical examination. School-based health centers were used one or more times by 22% of the respondents, although 35% stated their school had no health center (see Figure 19).



Family Characteristics

Context

New Mexico is among the fastest growing states in the US, with a large percent of the population being Hispanic, many of whom speak Spanish. New Mexico is a border state with a steady flow of immigrants from Mexico, Central and South America, and many other countries worldwide. At the same time, a significant percentage of the Hispanic population can trace their roots to early Spanish settlers of the territory of New Mexico. An additional factor being assessed in this survey is the fact that New Mexico has a very high poverty level (approximately 49th of the 50 states), a factor that contributes to food insecurity⁶¹ which is measured in this set of questions.

The US Census Bureau American Community Survey profile for 2002 estimated that, of 1,692,016 New Mexicans, 1,109,968 spoke only English at home while 582,048 spoke another language, the majority (474,581) of whom spoke Spanish at home. And, of 1,818,718 New Mexicans, 1,636,412 were born in the US, 941,478 in New Mexico, 162,036 were born in another country and of those 61,749 were naturalized US citizens.

Questions about whether children receive adequate food are studied by the United States Department of Agriculture, and the Food Security Institute Center on Hunger and Poverty. Three terms are relevant for understanding the results of these studies. *Food security* means to have assured access to enough food at all times to sustain an active and healthy life. *Food insecurity* occurs whenever the availability of nutritionally adequate and safe food, or the ability to acquire acceptable foods in socially acceptable ways, is limited or uncertain. *Hunger* is defined as the uneasy or painful sensation caused by a recurrent or involuntary lack of food and is a potential, though not necessary consequence of food insecurity. Over time, hunger may result in malnutrition. Food insecurity and hunger are concentrated in low-income households: the households with incomes below 130% of the poverty line had a food insecurity prevalence 3 times the national level. And nearly two-thirds of households reporting hunger had incomes under 185% of the poverty line.⁶²

Nationwide in 2002, of a total of 108 million households, 12.1 million (or 11.1%) were food insecure, thereby creating conditions of food insecurity for more than 13 million (or 18.1%) children under age 18. The conditions were even more severe for more than 567,000 children who also suffered from hunger. In New Mexico, of the total number of households (663,000) in 1998-2000, the state unfortunately ranked first in the nation with 15.87% or 105,000 of its households classified as “food insecure” (affecting 347,000 people), and ranked third with 4.57% or 30,000 households classified as “food insecure with hunger” (affecting 107,000 people).⁶³

New Mexico Family Characteristics Results

Among the NM YRRS respondents, 46% reported that they never speak a language other than English at home, 27% speak another language less than half the time, 17 % do so half or more of the time and 10% speak another language other than English at home all of the time. In terms of length of residence, 86% were born in the U.S., of which 35% are 9th graders, 23% 10th graders, 23% 11th graders, and 19% 12th graders. Of those who were born elsewhere, 5% moved

to the U.S. ten years ago, and 5% between five and nine years ago, of which 51% are 9th graders, 15 are 10th graders, 16% 11th graders, and 16% 12th graders. Five percent of the respondents came to the U.S. less than 5 years ago; of these 49% are 9th graders, 17% are 10th graders, 17% are 11th graders and 15% are 12th graders.

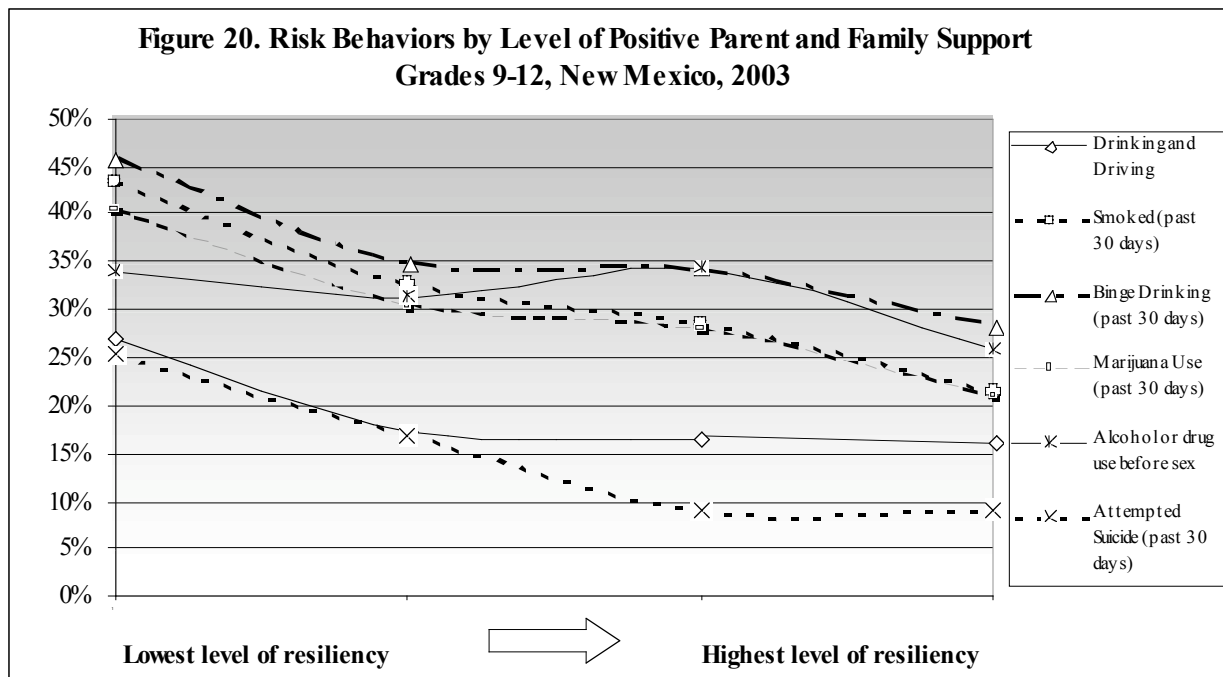
As defined above, *food security* means to have assured access to enough food at all times to sustain an active and healthy life. Eighty-eight percent of the respondents indicated that they had access to enough food to eat during the previous 12 months, indicating food security; 7% indicated that sometimes their family did not have enough food, and 4% indicated that often their family did not have enough to eat (indicating food insecurity).

Resiliency and Protective Factors

The NM YRRS includes a set of questions that are designed to identify the quality and number of resiliency and protective factors that New Mexico high school students experience. The responses to these questions provide the opportunity to consider the impact of these factors on adolescents' lives and an alternative perspective from which to evaluate the behavioral status of New Mexico high school students. Researchers on resiliency and protective factors have learned that a significant percentage of those adolescents who appear to have the worst of all possible environmental conditions against them are able to overcome these adversities if they have a sufficient level of resiliency and protective factors working in their favor. Their conclusion is that it is not so much the risk factors that predict the future life prospects of adolescents but whether there are sufficient resiliency and protective factors in their lives.

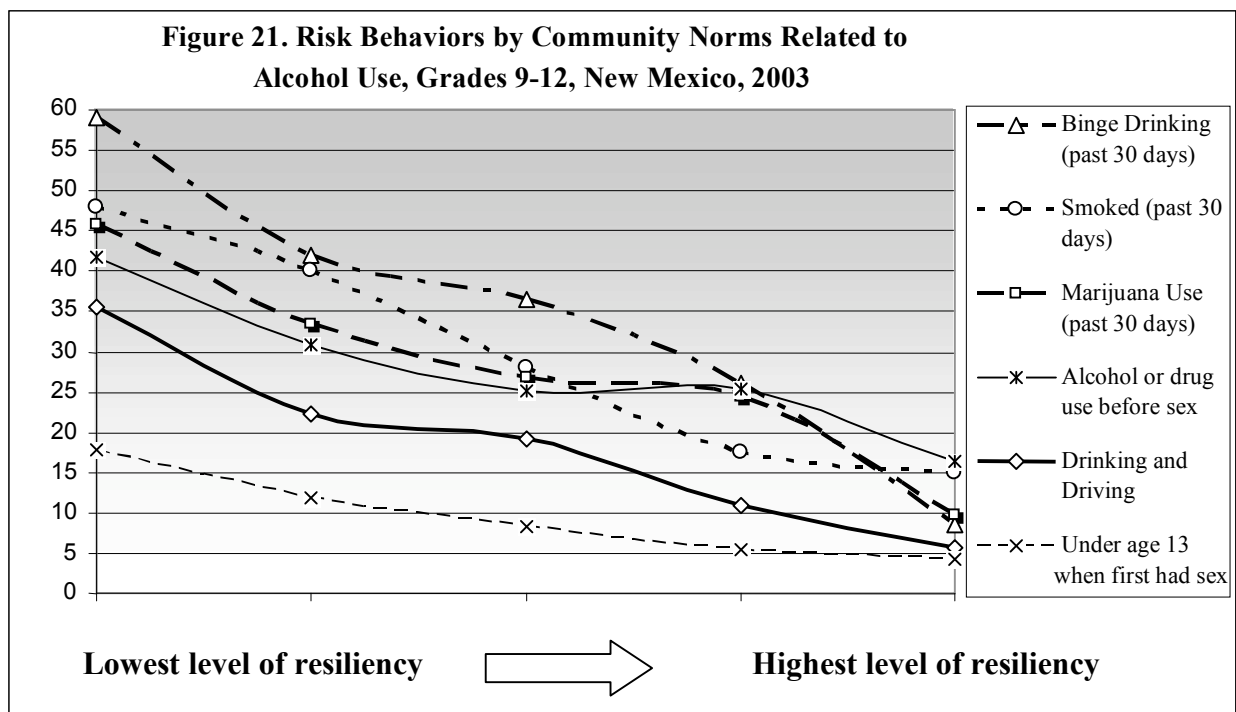
It is theorized that resiliency factors, "inoculate youth against a wide range of risk-taking behaviors"⁶⁴. To study this inoculation effect, we created 10 resiliency factors using factor analysis. Sets of responses to questions about resiliency were combined to create new variables. Each respondent was then coded with a resiliency score for each factor. The pools of scores were then divided into percentiles by increments of 20 (20th percentile, 40th percentile and so on). Once the resiliency factors had been divided into percentiles each resiliency factor was cross tabulated with responses to individual questions about risk behaviors.

Figure 20 is a cross tabulation of the resiliency factor, Positive Parent and Family Support, with the risk behaviors drinking and driving, smoking, binge drinking, marijuana uses, alcohol or drug use before sex, and attempted suicide. The higher the level of parental and family support, the lower the likelihood that a respondent will report engaging in the identified risk behaviors.

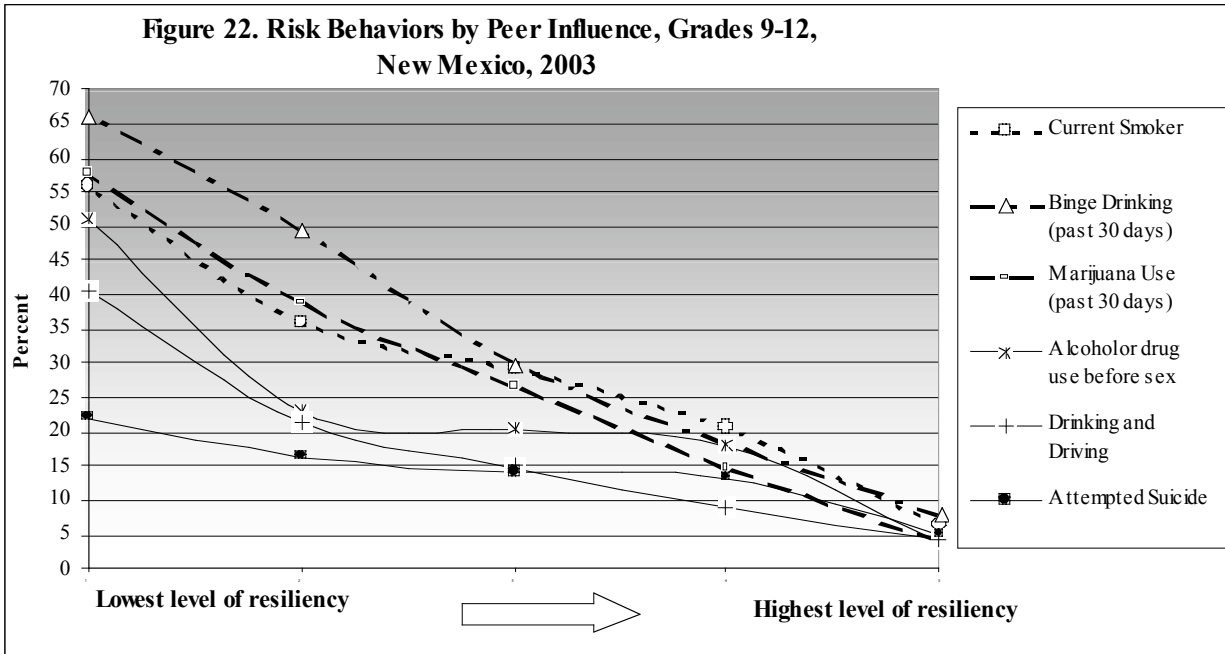


Between the lowest level of resiliency and the highest level of resiliency binge drinking declines from 46% to 28%. Drinking and driving, however, falls between the twentieth percentile and the fortieth percentile, but then levels off.

Figure 21 shows the resiliency factor is community, parent and youth norms toward alcohol use is higher if parents, community and youth maintain norms against youth alcohol drinking. Binge drinking shows a very steep drop from 59% to 8% when cross tabulated with this resiliency factor. Youth who reported low acceptance of youth alcohol consumption were very unlikely to report binge drinking themselves. However, age of first intercourse shows a more modest drop from 18% to 4%.



Examined in light of another resiliency factor, Peer Influence (see Figure 22, Questions 105-108), binge drinking has an even more dramatic drop from 66% to 8%. This resiliency factor is a composite of four questions that asked the respondent to judge their closest friends: do they get in a lot of trouble, do they do well in school, do they drink alcohol once a week or more, and have they used drugs such as marijuana? For all the risk factors depicted in Figure 22, (drinking and driving, smoking, binge drinking, marijuana use) with the exception of alcohol or drug use before sex, peer influence seems to be of great importance.



Parents, too, are an important influence on youth risk taking behavior. Although not as dramatic, the seven risk factors depicted in Figure 23 (drinking and driving, smoking, binge drinking, marijuana use, and alcohol or drug use before sex, rarely or never uses seatbelt, under age 13 when first had sex) all decreased to some degree as the reported level of parental boundaries and expectations increased. Smoking appeared to be most affected by this resiliency factor, while the use of seatbelts and onset of sexual activity were less affected.

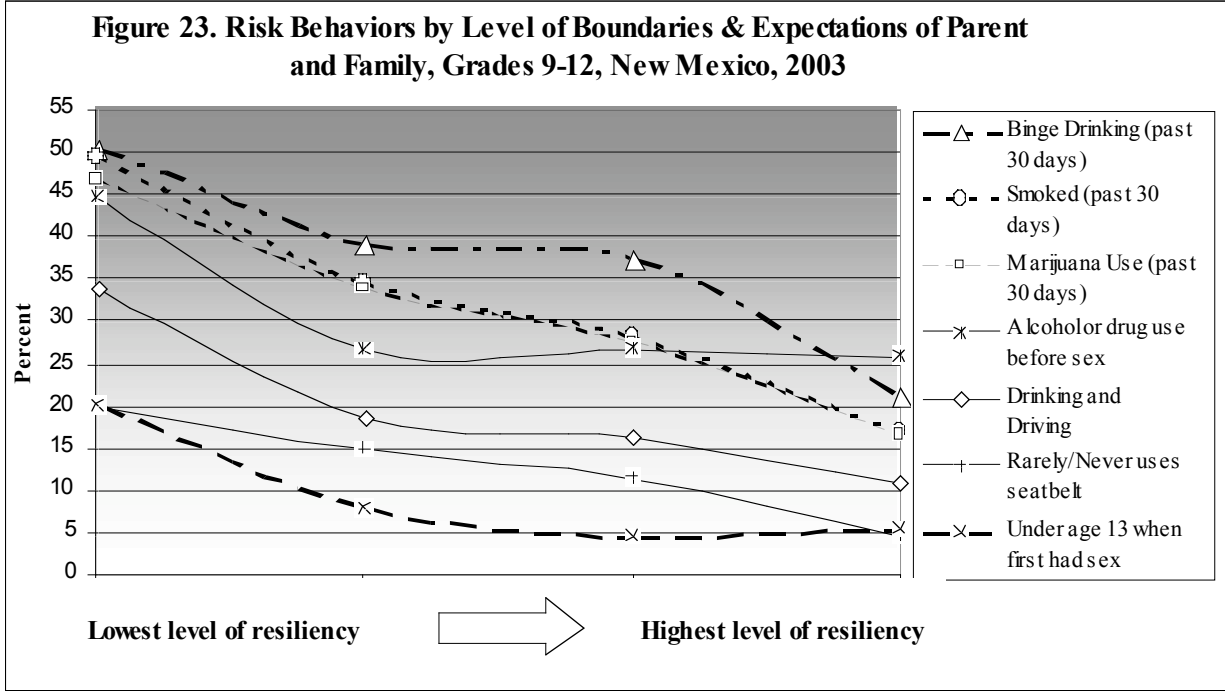
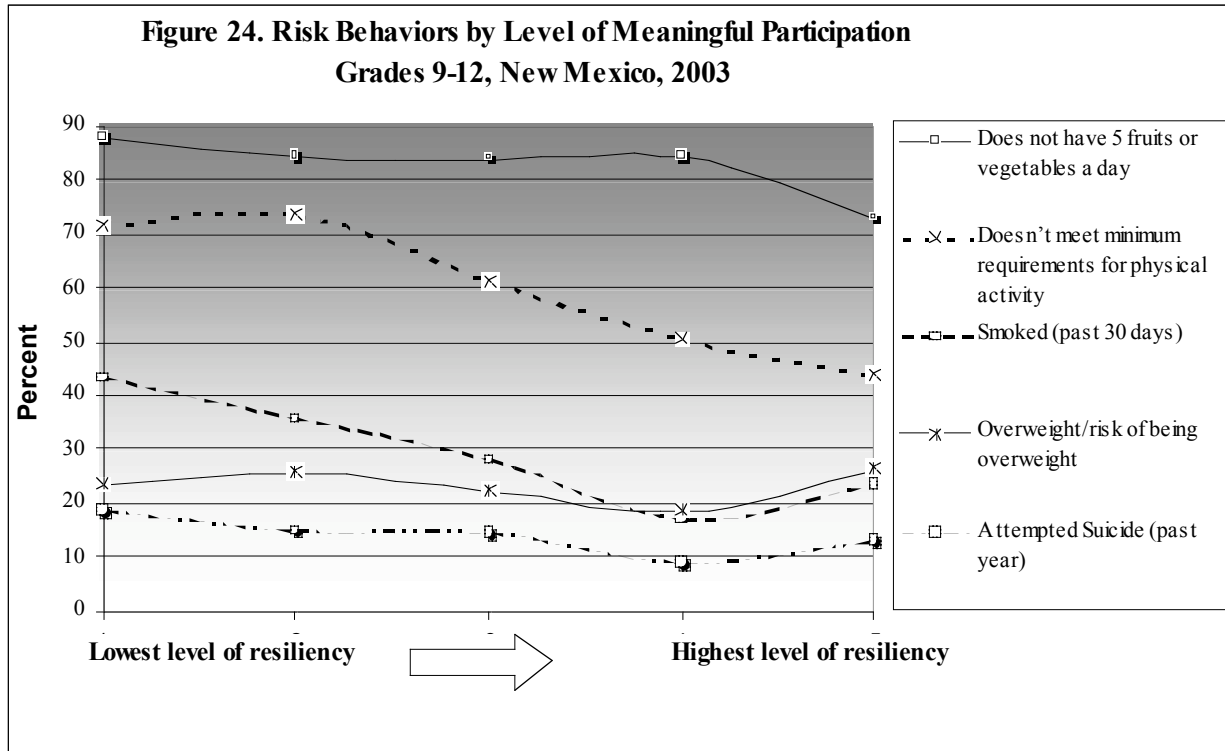


Figure 24 shows that not all risk factors are associated equally by purported resiliency factors. The resiliency factor, Meaningful Participation⁶⁵, is related to empowerment theory and represents the degree to which respondents are likely to be involved in extra curricular activities, sports, hobbies, and feel like they have decision making power. In the middle range of the resiliency factor, smoking appeared to be affected, but then increased slightly among those who reported being most active. Overweight appeared to be unaffected by this resiliency factor or any other. As the Meaningful Participation resiliency factor increased the otherwise poor rate of eating fruits and vegetables increased slightly. Attempted suicide appeared to be unaffected by the degree of meaningful participation.



CONCLUSIONS

The NM YRRS surveyed 71 of the 89 school districts in New Mexico, 103 of the 191 high schools, and 10,778 of the 97,078 of the students in those grades. The results of this statewide report can be generalized to most of the state with a fair degree of confidence. However, the majority of the districts that did not participate reside in the southeast corner of the state. Therefore, the NM YRRS response rate was insufficient in this region to draw firm conclusions about student risk behaviors in this portion of the state. As with all large quantitative surveys like the NM YRRS, the data, although reliable in terms of identification of behaviors and trends, cannot necessarily tell us why these behaviors occur.

Several important trends have been noted in this report. For questions about results that the body of this report does not answer, please refer to the appropriate appendices.

- The 2003 results for personal safety showed that 77% of NM youth indicated that they wore seat belts most of the time or always, compared to 82% in 2001. A significant increase was noted for those who indicated that during the previous 30 days, they drove a vehicle after they had been drinking alcohol; 13% answered one or more times in 2001 increasing to 19% for 2003.
- Some violence indicators worsened in 2003 from 2001. A higher proportion of youth reported instances of being threatened by a weapon, being in physical fights, being forced to have sex, and being struck on purpose by a girlfriend or boyfriend. Slightly more youth reported carrying weapons on and off school property. Suicide indicators were unchanged.
- With regard to violence related behavior, the presence of a gun in the home is associated with a respondents' perceived ability to obtain a gun in a short time frame.
- In 2003, 30% of youth reported smoking in the previous 30 days, and 8% reported using smokeless tobacco. Smoking and chewing tobacco appear to be highest among 12th grade boys.
- Binge drinking (defined as consuming 5 or more drinks of alcohol in a row within a couple of hours on at least one day out of the previous 30) increased from 29% in 2001 to 35% in 2003. The number of adolescents who reported having had at least one drink of alcohol on school property doubled, from 7% in 2001 to 14% in 2003.
- Marijuana use increased slightly from 27% in 2001 to 28% in 2003. Cocaine (including powder, crack, or freebase) use doubled from 4% in 2001 to 8% in 2003. Use of inhalants (glue, aerosol spray can contents, paints, etc.) increased from 3% in 2001 to 7% in 2003. Overall, males are using marijuana more than females.
- Overall, sexual activity of New Mexican adolescents increased slightly, while the number that had sexual intercourse before age 13 increased greatly. In 2003, 49% indicated they had ever had sexual intercourse (compared to 46% in 2001), 19% reported having had sexual intercourse with one person during their lifetime, 15% said 2-3, and 13% indicated 4 or more.

- The number of youth reporting vigorous activity remained stable with 56% reporting vigorous activity three or more days a week in 2003, and 57% in 2001. Of those in the at-risk of overweight category, 41% of females and 38% of males said they exercised.
- Half of the respondents indicated that they didn't participate in a physical education class in an average week in 2003. Only 22.4% said they participated 5 days a week.
- Eighty-three percent of 2003 NM YRRS respondents reported not eating five or more servings of fruits and vegetables a day, on average, over the past seven days ate no green salad in the last seven days.
- Resiliency scores showed that most risk factors are associated with most resiliency factors. The higher the level of resiliency the lower the likelihood that a respondent will report engaging in health risk behaviors.

As with all survey research there are limitations to the knowledge that can be gained from viewing these results. The NM YRRS relies on self-reported data; therefore measures such as Body Mass Index (BMI) may tend to underestimate body fat in comparison to independent measurement techniques. Nonetheless, self-reported data of BMI is not "BMI" as conventionally understood, but a proxy for BMI. This has implications for each of the places in the report where BMI is used as an indicator of risk.

Another limitation is that the NM YRRS sampled only youth who were in school on the day each school decided to collect their surveys, and does not include non-enrolled youth. Also, data were not available from a number of districts, especially those in the southeast corner of the state.

The New Mexico Youth Risk and Resiliency Survey continues to evolve to meet the needs of health professionals, parents, educators and students in New Mexico as questions are modified, removed or added to the survey (the 2003 survey was shorter than the 2001 NM YRRS by 20 questions). The number of districts and the total number of respondents both increased in 2003 over 2001. A higher response rate increases the accuracy and utility of the survey results. As data collection moves ahead in years to come, meaningful long term trends can be established, increasing the likelihood that decision makers will be able to positively impact the lives of New Mexico's youth and the health of all New Mexicans.

Appendix A. 2003 YRRS Survey

[Results are followed by a 95% confidence interval in brackets]

1. How old are you?

- | | |
|----------------------------|--------------|
| A. 12 years old or younger | 0.3% |
| B. 13 years old | 0.8% |
| C. 14 years old | 17.3% |
| D. 15 years old | 25.5% |
| E. 16 years old | 24.6% |
| F. 17 years old | 22.6% |
| G. 18 years old or older | 9.0% |

2. What is your sex?

- | | |
|-----------|--------------|
| A. Female | 50.8% |
| B. Male | 49.2% |

3. In what grade are you?

- | | |
|----------------------------|--------------|
| A. 9th grade | 29.9% |
| B. 10th grade | 25.3% |
| C. 11th grade | 21.4% |
| D. 12th grade | 22.3% |
| E. Ungraded or other grade | 0.9% |

4. How do you describe yourself? (**Select one or more responses.**)

- | | |
|--|--------------|
| A. American Indian or Alaska Native | 13.8% |
| B. Asian | 2.2% |
| C. Black or African American | 3.7% |
| D. Hispanic or Latino | 54.2% |
| E. Native Hawaiian or Other Pacific Islander | 1.6% |
| F. White | 33.8% |

5. During the past 12 months, how would you describe your grades in school?

- | | |
|-------------------------|--------------------------|
| A. Mostly A's | 26.5% [22.8,30.6] |
| B. Mostly B's | 35.3% [32.3,38.4] |
| C. Mostly C's | 22.3% [20.3,24.4] |
| D. Mostly D's | 4.9% [3.8,6.4] |
| E. Mostly F's | 2.3% [1.8,3.0] |
| F. None of these grades | 1.5% [0.7,3.0] |
| G. Not sure | 7.2% [6.0,8.6] |

The next 3 questions ask about personal safety.

8. How often do you wear a seat belt when **riding** in a car driven by someone else?

- | | |
|---------------------|--------------------------|
| A. Never | 3.7% [3.1,4.5] |
| B. Rarely | 7.8% [5.4,11.0] |
| C. Sometimes | 11.4% [10.5,12.4] |
| D. Most of the time | 31.4% [29.8,33.0] |
| E. Always | 45.7% [42.5,49.0] |

9. 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 | 65.1% [63.1,67.1] |
| B. 1 time | 12.0% [10.9,13.2] |
| C. 2 or 3 times | 12.4% [11.2,13.7] |
| D. 4 or 5 times | 3.9% [3.1,4.9] |
| E. 6 or more times | 6.6% [5.8,7.5] |

10. During the past 30 days, how many times did you **drive** a car or other vehicle **when you had been drinking alcohol**?

- | | |
|--------------------|--------------------------|
| A. 0 times | 80.9% [79.1,82.6] |
| B. 1 time | 8.1% [7.1,9.2] |
| C. 2 or 3 times | 6.1% [5.0,7.4] |
| D. 4 or 5 times | 1.5% [1.1,2.1] |
| E. 6 or more times | 3.4% [2.6,4.4] |

The next 11 questions ask about violence-related behaviors.

11. If you wanted to get a gun, how quickly could you get it?

- | | |
|-------------------------------|--------------------------|
| A. Could not get a gun at all | 39.3% [36.2,42.5] |
| B. Within 15 minutes | 20.6% [18.3,23.1] |
| C. Within one hour | 9.1% [7.9,10.5] |
| D. Within one day | 10.3% [9.2,11.6] |
| E. Within one week | 9.9% [8.3,11.7] |
| F. Within one month | 5.2% [3.9,6.9] |
| G. More than a month | 5.6% [4.8,6.5] |

12. Is there a gun in your home?

- | | |
|-------------|--------------------------|
| A. Yes | 49.8% [47.5,52.0] |
| B. No | 41.6% [39.0,44.2] |
| C. Not sure | 8.7% [6.5,11.4] |

13. During the past 30 days, on how many days did you carry **a weapon** such as a gun, knife, or club?

- A. 0 days **75.0%** [72.7,77.2]
- B. 1 day **5.8%** [4.7,7.2]
- C. 2 or 3 days **5.4%** [4.6,6.3]
- D. 4 or 5 days **2.5%** [1.9,3.3]
- E. 6 or more days **11.3%** [10.1,12.7]

14. During the past 30 days, on how many days did you carry **a gun**?

- A.** 0 days **88.7%** [87.3,90.0]
- B.** 1 day **3.6%** [2.9,4.4]
- C.** 2 or 3 days **3.1%** [2.6,3.7]
- D.** 4 or 5 days **1.6%** [0.9,2.8]
- E.** 6 or more days **3.0%** [2.4,3.8]

15. 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 **89.1%** [87.6,90.4]
- B. 1 day **3.2%** [2.6,4.1]
- C. 2 or 3 days **2.3%** [1.7,3.1]
- D. 4 or 5 days **0.9%** [0.6,1.5]
- E. 6 or more days **4.5%** [3.8,5.3]

16. During the past 30 days, on 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?

- A. 0 days **91.8%** [90.6,92.9]
- B. 1 day **3.5%** [3.0,4.2]
- C. 2 or 3 days **2.4%** [1.8,3.3]
- D. 4 or 5 days **0.5%** [0.4,0.7]
- E. 6 or more days **1.7%** [1.3,2.3]

17. 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**?

- A. 0 times **88.0%** [86.7,89.2]
- B. 1 time **5.2%** [4.4,6.2]
- C. 2 or 3 times **2.6%** [2.0,3.2]
- D. 4 or 5 times **1.0%** [0.8,1.4]
- E. 6 or 7 times **0.8%** [0.5,1.3]
- F. 8 or 9 times **0.2%** [0.1,0.3]
- G. 10 or 11 times **0.4%** [0.1,1.3]
- H. 12 or more times **1.8%** [1.3,2.4]

18. During the past 12 months, how many times were you in a physical fight?

- A. 0 times **61.1%** [58.5,63.7]
- B. 1 time **13.8%** [12.7,15.1]
- C. 2 or 3 times **13.5%** [11.2,16.1]
- D. 4 or 5 times **3.9%** [3.1,4.9]
- E. 6 or 7 times **1.8%** [1.2,2.7]
- F. 8 or 9 times **1.2%** [0.8,1.8]
- G. 10 or 11 times **0.8%** [0.4,1.5]
- H. 12 or more times **3.9%** [3.1,4.9]

19. During the past 12 months, how many times were you in a physical fight **on school property**?

- A. 0 times **81.4%** [79.7,83.0]
- B. 1 time **9.9%** [8.6,11.4]
- C. 2 or 3 times **5.0%** [4.2,6.0]
- D. 4 or 5 times **1.4%** [1.0,2.0]
- E. 6 or 7 times **0.5%** [0.3,0.7]
- F. 8 or 9 times **0.3%** [0.2,0.5]
- G. 10 or 11 times **0.1%** [0.0,0.1]
- H. 12 or more times **1.3%** [0.9,2.1]

20. During the past 12 months, did your boyfriend or girlfriend ever hit, slap, or physically hurt you on purpose?

- A.** Yes **11.8%** [10.3,13.5]
- B.** No **88.2%** [86.5,89.7]

21. Have you ever been physically forced to have sexual intercourse when you did not want to?

- A.** Yes **11.0%** [9.8,12.3]
- B.** No **89.0%** [87.7,90.2]

The next 5 questions ask about sad feelings and attempted suicide. Sometimes people feel so depressed about the future that they may consider attempting suicide; that is, taking some action to end their own life.

22. During the past 12 months, did you ever feel so sad or hopeless almost every day **for two weeks or more in a row** that you stopped doing some usual activities?

- A. Yes **31.9%** [29.4,34.5]
- B. No **68.1%** [65.5,70.6]

23. During the past 12 months, did you ever **seriously** consider attempting suicide?

- A.** Yes **20.7%** [18.7,22.7]
- B.** No **79.3%** [77.3,81.3]

24. During the past 12 months, did you make a plan about how you would attempt suicide?

- A.** Yes **15.9%** [14.1,17.7]
- B.** No **84.1%** [82.3,85.9]

25. During the past 12 months, how many times did you actually attempt suicide?

- A.** 0 times **85.5%** [83.6,87.2]
- B.** 1 time **7.8%** [6.8,9.0]
- C.** 2 or 3 times **4.1%** [3.5,4.9]
- D.** 4 or 5 times **0.9%** [0.6,1.5]
- E.** 6 or more times **1.6%** [1.2,2.1]

26. **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 **77.0%** [74.8,79.1]
- B. Yes **7.5%** [6.6,8.5]
- C. No **15.5%** [13.7,17.4]

The next 10 questions ask about tobacco use.

27. Have you ever tried cigarette smoking, even one or two puffs?

- A. Yes **64.8%** [61.5,68.0]
- B. No **35.2%** [32.0,38.5]

28. How old were you when you smoked a whole cigarette for the first time?

- A. I have never smoked a whole cigarette **49.3%** [46.4,52.2]
- B. 8 years old or younger **7.3%** [6.3,8.5]
- C. 9 or 10 years old **6.5%** [5.8,7.4]
- D. 11 or 12 years old **10.8%** [9.6,12.2]
- E. 13 or 14 years old **16.0%** [13.8,18.4]
- F. 15 or 16 years old **8.1%** [7.0,9.4]
- G. 17 years old or older **1.9%** [1.4,2.6]

29. During the past 30 days, on how many days did you smoke cigarettes?

- A. 0 days **69.8%** [67.8,71.7]
- B. 1 or 2 days **9.1%** [8.3,10.0]
- C. 3 to 5 days **5.2%** [4.0,6.7]
- D. 6 to 9 days **4.0%** [3.2,4.9]
- E. 10 to 19 days **3.4%** [2.6,4.4]
- F. 20 to 29 days **2.4%** [1.9,3.1]
- G. All 30 days **6.1%** [5.1,7.2]

30. 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 **69.8%** [67.6,72.0]
- B. Less than 1 cigarette per day **8.5%** [7.5,9.7]
- C. 1 cigarette per day **6.8%** [5.9,7.8]
- D. 2 to 5 cigarettes per day **10.7%** [9.0,12.7]
- E. 6 to 10 cigarettes per day **1.9%** [1.5,2.5]
- F. 11 to 20 cigarettes per day **0.7%** [0.5,1.0]
- G. More than 20 cigarettes per day **1.5%** [1.1,2.2]

31. During the past 30 days, on how many days did you smoke cigarettes **on school property**?

- A. 0 days **86.4%** [84.4,88.2]
- B. 1 or 2 days **5.7%** [4.6,7.0]
- C. 3 to 5 days **1.8%** [1.4,2.4]
- D. 6 to 9 days **1.4%** [1.0,2.0]
- E. 10 to 19 days **1.5%** [1.0,2.3]
- F. 20 to 29 days **1.3%** [0.6,2.6]
- G. All 30 days **1.8%** [1.3,2.6]

32. During the past 12 months, did you ever try **to quit** smoking cigarettes?

- A. I did not smoke during the past 12 months **66.3%** [63.6,69.0]
- B. Yes **18.3%** [16.8,20.0]
- C. No **15.3%** [13.5,17.4]

33. During the past 30 days, how did you **usually** get your own cigarettes? (Select only **one** response.)

- A. I did not smoke cigarettes during the past 30 days **68.4%** [66.1,70.7]
- B. I bought them in a store such as a convenience store, supermarket, discount store, or gas station **6.6%** [5.4,8.0]
- C. I bought them from a vending machine **0.8%** [0.6,1.2]
- D. I gave someone else money to buy them for me **6.3%** [5.2,7.7]
- E. I borrowed (or bummed) them from someone else **8.8%** [6.9,11.0]
- F. A person 18 years old or older gave them to me **2.1%** [1.7,2.6]
- G. I took them from a store or family member **2.2%** [1.6,2.9]
- H. I got them some other way **4.8%** [3.9,5.9]

34. During the past 30 days, on how many days did you smoke **cigars, cigarillos, or little cigars**?

- A. 0 days **80.6%** [79.0,82.1]
- B. 1 or 2 days **8.9%** [7.7,10.3]
- C. 3 to 5 days **4.6%** [3.8,5.5]
- D. 6 to 9 days **2.2%** [1.6,3.0]
- E. 10 to 19 days **1.5%** [1.1,2.0]
- F. 20 to 29 days **0.6%** [0.4,1.0]
- G. All 30 days **1.6%** [1.1,2.2]

35. During the past 30 days, on how many days did you use **chewing tobacco, snuff, or dip**, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen?

- A. 0 days **91.2%** [89.9,92.4]
- B. 1 or 2 days **2.8%** [2.3,3.4]
- C. 3 to 5 days **1.5%** [1.1,2.0]
- D. 6 to 9 days **1.1%** [0.7,1.7]
- E. 10 to 19 days **1.3%** [0.9,2.0]
- F. 20 to 29 days **0.4%** [0.3,0.6]
- G. All 30 days **1.7%** [1.2,2.3]

36. During the past 7 days, on how many days were you in the same room with someone who was smoking cigarettes?

- A. 0 days **38.6%** [36.7,40.5]
- B. 1 or 2 days **25.9%** [24.1,27.7]
- C. 3 or 4 days **11.0%** [9.6,12.6]
- D. 5 or 6 days **5.9%** [4.8,7.1]
- E. 7 days **18.7%** [17.1,20.4]

The next 4 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.

37. How old were you when you had your first drink of alcohol other than a few sips?

- A. I've never had a drink of alcohol other than a few sips **23.7%** [21.8,25.6]
- B. 8 years old or younger **11.4%** [10.0,13.0]
- C. 9 or 10 years old **8.4%** [7.2,9.8]
- D. 11 or 12 years old **15.9%** [13.9,18.2]
- E. 13 or 14 years old **25.5%** [23.8,27.4]
- F. 15 or 16 years old **13.4%** [10.8,16.5]
- G. 17 years old or older **1.6%** [1.1,2.2]

38. During the past 30 days, on how many days did you have at least one drink of alcohol?

- A. 0 days **49.3%** [46.4,52.1]
- B. 1 or 2 days **23.2%** [21.1,25.4]
- C. 3 to 5 days **11.3%** [10.1,12.7]
- D. 6 to 9 days **6.9%** [6.1,7.9]
- E. 10 to 19 days **6.0%** [5.0,7.2]
- F. 20 to 29 days **1.5%** [1.1,2.1]
- G. All 30 days **1.7%** [1.3,2.3]

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?

- A. 0 days **64.6%** [61.7,67.4]
- B. 1 day **11.2%** [9.5,13.2]
- C. 2 days **8.8%** [7.6,10.0]
- D. 3 to 5 days **7.2%** [6.2,8.2]
- E. 6 to 9 days **3.9%** [3.2,4.7]
- F. 10 to 19 days **2.3%** [1.9,2.9]
- G. 20 or more days **2.0%** [1.5,2.6]

40. During the past 30 days, on how many days did you have at least one drink of alcohol **on school property**?

- A. 0 days **85.6%** [81.6,88.8]
- B. 1 or 2 days **8.0%** [6.3,10.0]
- C. 3 to 5 days **2.8%** [1.8,4.4]
- D. 6 to 9 days **1.3%** [1.0,1.8]
- E. 10 to 19 days **0.9%** [0.6,1.5]
- F. 20 to 29 days **0.4%** [0.2,0.8]
- G. All 30 days **1.1%** [0.7,1.7]

The next 3 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?

- A. I never tried marijuana **46.4%** [43.9,49.0]
- B. 8 years old or younger **5.0%** [4.2,6.0]
- C. 9 or 10 years old **4.6%** [4.0,5.4]
- D. 11 or 12 years old **11.5%** [9.9,13.3]
- E. 13 or 14 years old **21.9%** [19.0,25.1]
- F. 15 or 16 years old **9.3%** [8.0,10.8]
- G. 17 years old or older **1.3%** [0.8,2.0]

42. During the past 30 days, how many times did you use marijuana?

- A. 0 times **71.0%** [68.4,73.4]
- B. 1 or 2 times **8.9%** [7.6,10.3]
- C. 3 to 9 times **6.6%** [5.5,7.8]
- D. 10 to 19 times **3.7%** [3.0,4.7]
- E. 20 to 39 times **3.1%** [2.3,4.1]
- F. 40 or more times **6.7%** [5.8,7.9]

43. During the past 30 days, how many times did you use marijuana **on school property**?

- A. 0 times **86.8%** [84.7,88.6]
- B. 1 or 2 times **4.8%** [3.8,6.2]
- C. 3 to 9 times **3.4%** [2.6,4.4]
- D. 10 to 19 times **1.9%** [1.5,2.5]
- E. 20 to 39 times **0.9%** [0.6,1.2]
- F. 40 or more times **2.2%** [1.5,3.3]

The next 9 questions ask about other drugs.

44. During the past 30 days, how many times did you use **any** form of cocaine, including powder, crack, or freebase?

- A. 0 times **91.1%** [89.8,92.3]
- B. 1 or 2 times **3.5%** [2.9,4.2]
- C. 3 to 9 times **2.4%** [1.7,3.3]
- D. 10 to 19 times **1.2%** [0.8,1.7]
- E. 20 to 39 times **0.4%** [0.3,0.6]
- F. 40 or more times **1.4%** [1.0,2.1]

45. During the past 30 days, how many times have you sniffed glue, breathed the contents of aerosol spray cans, or inhaled **any** paints or sprays to get high?

- A. 0 times **93.2%** [92.1,94.2]
- B. 1 or 2 times **3.1%** [2.4,4.0]
- C. 3 to 9 times **1.1%** [0.9,1.4]
- D. 10 to 19 times **0.9%** [0.5,1.6]
- E. 20 to 39 times **0.2%** [0.1,0.4]
- F. 40 or more times **1.5%** [0.8,2.8]

46. During the past **30 days**, how many times have you used heroin (also called smack, junk, or China White)?

- A. 0 times **95.9%** [94.7,96.8]
- B. 1 or 2 times **1.8%** [1.3,2.6]
- C. 3 to 9 times **0.6%** [0.4,0.9]
- D. 10 to 19 times **0.3%** [0.1,0.8]
- E. 20 to 39 times **0.1%** [0.1,0.2]
- F. 40 or more times **1.3%** [0.6,2.6]

47. During the past **12 months**, how many times have you used heroin (also called smack, junk, or China White)?

- A. 0 times **94.8%** [93.4,95.9]
- B. 1 or 2 times **1.7%** [1.2,2.3]
- C. 3 to 9 times **1.0%** [0.7,1.3]
- D. 10 to 19 times **0.8%** [0.5,1.2]
- E. 20 to 39 times **0.3%** [0.2,0.4]
- F. 40 or more times **1.6%** [0.9,2.8]

48. During the past **30 days**, how many times have you used methamphetamines (also called speed, crystal, crank, or ice)?

- A. 0 times **92.7%** [91.3,94.0]
- B. 1 or 2 times **2.7%** [2.2,3.4]
- C. 3 to 9 times **1.8%** [1.2,2.6]
- D. 10 to 19 times **0.7%** [0.5,1.1]
- E. 20 to 39 times **0.8%** [0.3,2.6]
- F. 40 or more times **1.2%** [0.7,1.8]

49. During the past **12 months**, how many times have you used methamphetamines (also called speed, crystal, crank, or ice)?

- A. 0 times **91.8%** [90.5,93.0]
- B. 1 or 2 times **2.7%** [2.1,3.5]
- C. 3 to 9 times **1.8%** [1.5,2.3]
- D. 10 to 19 times **1.0%** [0.7,1.3]
- E. 20 to 39 times **0.6%** [0.4,0.8]
- F. 40 or more times **2.1%** [1.4,3.0]

50. During the past 12 months, how many times have you used ecstasy?

- A. 0 times **92.2%** [90.5,93.6]
- B. 1 or 2 times **3.5%** [3.0,4.2]
- C. 3 to 9 times **1.5%** [1.1,2.0]
- D. 10 to 19 times **0.9%** [0.6,1.2]
- E. 20 to 39 times **0.3%** [0.2,0.5]
- F. 40 or more times **1.6%** [0.9,2.9]

51. During your life, how many times have you used a needle to inject any **illegal** drug into your body?

- A. 0 times **96.3%** [95.2,97.1]
- B. 1 time **1.7%** [1.2,2.3]
- C. 2 or more times **2.1%** [1.6,2.7]

52. During the past 12 months, has anyone offered, sold, or given you an illegal drug **on school property**?

- A. Yes **41.2%** [39.1,43.3]
- B. No **58.8%** [56.7,60.9]

The next 3 questions ask about what people think about kids your age drinking alcohol.

53. How wrong would most adults in your community think it was for kids your age to drink alcohol (beer, wine, or hard liquor) regularly?

- A. Very wrong **36.4%** [33.5,39.3]
- B. Wrong **38.8%** [36.3,41.4]
- C. A little bit wrong **19.7%** [18.0,21.4]
- D. Not wrong at all **5.1%** [4.0,6.5]

54. How wrong do your parents feel it would be for you to drink alcohol (beer, wine, or hard liquor) regularly?

- A. Very wrong **61.5%** [59.9,63.0]
- B. Wrong **22.1%** [21.0,23.3]
- C. A little bit wrong **11.8%** [10.5,13.3]
- D. Not wrong at all **4.6%** [4.0,5.4]

55. How wrong do you think it is for someone your age to drink alcohol (beer, wine, or hard liquor) regularly?

- A. Very wrong **26.4%** [24.7,28.1]
- B. Wrong **25.0%** [23.7,26.5]
- C. A little bit wrong **30.4%** [28.7,32.2]
- D. Not wrong at all **18.2%** [15.9,20.7]

If you wanted to, how easy would each of the following be to get? Use the following scale:

56. Beer, wine, or hard liquor (for example, vodka, whiskey or gin)?

- A. Very hard **14.0%** [12.2,15.9]
- B. Sort of hard **13.1%** [11.5,14.9]
- C. Sort of easy **23.1%** [21.7,24.6]
- D. Very easy **49.8%** [46.8,52.9]

57. Marijuana?

- A. Very hard **20.0%** [18.1,22.0]
- B. Sort of hard **11.7%** [10.5,13.1]
- C. Sort of easy **21.7%** [19.4,24.3]
- D. Very easy **46.6%** [43.3,49.9]

58. Cocaine, LSD, methamphetamines, or other illegal drug

- A. Very hard **44.2%** [41.9,46.4]
- B. Sort of hard **22.3%** [20.2,24.7]
- C. Sort of easy **14.0%** [12.3,15.9]
- D. Very easy **19.5%** [17.8,21.2]

59. About how many adults have you known personally who, in the past year, have used marijuana, cocaine or other drugs?

- A. None **34.6%** [32.3,36.9]
- B. 1 adult **16.9%** [15.0,18.9]
- C. 2 adults **12.8%** [11.7,14.1]
- D. 3 to 4 adults **13.9%** [12.9,15.1]
- E. 5 or more adults **21.7%** [20.1,23.5]

60. About how many adults have you known personally who, in the past year, have sold or dealt drugs?

- A. None **53.3%** [51.0,55.6]
- B. 1 adult **15.9%** [14.4,17.6]
- C. 2 adults **11.3%** [10.3,12.5]
- D. 3 to 4 adults **8.3%** [7.6,9.0]
- E. 5 or more adults **11.1%** [9.9,12.5]

The next 6 questions ask about sexual behavior.

61. How old were you when you had sexual intercourse for the first time?

- A. I never had sexual intercourse **51.0%** [49.0,54.9]
- B. 11 years old or younger **5.6%** [4.6,6.7]
- C. 12 years old **4.0%** [3.1,5.1]
- D. 13 years old **8.1%** [6.1,10.7]
- E. 14 years old **10.6%** [9.0,12.4]
- F. 15 years old **10.8%** [9.3,12.5]
- G. 16 years old **6.0%** [5.0,7.2]
- H. 17 years old or older **2.9%** [2.2,4.0]

62. During your life, with how many people have you had sexual intercourse?

- A. I never had sexual intercourse **52.7%** [49.8,55.7]
- B. 1 person **18.6%** [16.8,20.4]
- C. 2 people **8.1%** [7.0,9.3]
- D. 3 people **6.8%** [5.5,8.4]
- E. 4 people **3.6%** [2.9,4.5]
- F. 5 people **2.5%** [1.8,3.4]
- G. 6 or more people **7.7%** [6.4,9.2]

63. During the past 3 months, with how many people did you have sexual intercourse?

- A. I never had sexual intercourse **52.8%** [49.8,55.8]
- B. I had sexual intercourse, but not during the past 3 months **14.6%** [13.2,16.3]
- C. 1 person **21.4%** [18.8,24.2]
- D. 2 people **4.8%** [3.9,5.9]
- E. 3 people **1.7%** [1.3,2.3]
- F. 4 people **1.0%** [0.7,1.4]
- G. 5 people **0.6%** [0.4,1.1]
- H. 6 or more people **3.1%** [1.9,5.0]

64. Did you drink alcohol or use drugs before you had sexual intercourse the **last time**?

- A. I never had sexual intercourse **52.4%** [49.3,55.4]
- B. Yes **13.8%** [11.9,16.0]
- C. No **33.8%** [31.3,36.4]

65. The **last time** you had sexual intercourse, did you or your partner use a condom?

- A. I never had sexual intercourse **53.5%** [50.6,56.5]
- B. Yes **27.9%** [26.2,29.8]
- C. No **18.5%** [16.4,20.9]

66. The **last time** you had sexual intercourse, what **one** method did you or your partner use to **prevent pregnancy**? (Select only **one** response.)

- A. I never had sexual intercourse **52.5%** [49.5,55.4]
- B. No method was used to prevent pregnancy **8.4%** [7.3,9.5]
- C. Birth control pills **6.5%** [5.2,8.1]
- D. Condoms **24.0%** [22.0,26.1]
- E. Depo-Provera **2.4%** [1.6,3.6]
- F. Withdrawal **2.4%** [1.8,3.3]
- G. Some other method **1.6%** [1.2,2.3]
- H. Not sure **2.2%** [1.7,2.8]

The following questions ask about your family, your school, other adults, your friends and yourself. Use the following scale:

In my home, there is a parent or some other adult ...

67. who is interested in my school work.

- A. Not true at all **5.1%** [4.2,6.3]
- B. A little true **10.1%** [9.1,11.3]
- C. Pretty much true **21.5%** [19.5,23.6]
- D. Very much true **63.2%** [60.5,65.9]

68. who talks with me about my problems.

- A. Not true at all **12.9%** [11.1,15.0]
- B. A little true **20.6%** [18.9,22.4]
- C. Pretty much true **28.1%** [25.8,30.7]
- D. Very much true **38.3%** [36.1,40.6]

69. who listens to me when I have something to say.

- A. Not true at all **10.3%** [8.9,11.9]
- B. A little true **16.2%** [14.5,18.0]
- C. Pretty much true **27.0%** [24.9,29.2]
- D. Very much true **46.5%** [43.9,49.1]

70. who expects me to follow the rules.

- A. Not true at all **4.9%** [4.2,5.7]
- B. A little true **7.8%** [6.9,8.8]
- C. Pretty much true **20.5%** [18.4,22.6]
- D. Very much true **66.8%** [64.7,68.9]

71. who believes that I will be a success.
- A. Not true at all **6.2%** [5.0,7.7]
 - B. A little true **8.2%** [7.0,9.6]
 - C. Pretty much true **17.7%** [16.3,19.2]
 - D. Very much true **67.8%** [65.5,70.1]

72. who always wants me to do my best.
- A. Not true at all **4.1%** [3.5,4.9]
 - B. A little true **6.6%** [5.0,8.8]
 - C. Pretty much true **12.6%** [11.5,13.8]
 - D. Very much true **76.6%** [74.5,78.6]

At my school, there is a teacher or some other adult...

73. who really cares about me.
- A. Not true at all **15.8%** [13.5,18.5]
 - B. A little true **25.3%** [22.8,28.0]
 - C. Pretty much true **24.3%** [21.8,27.0]
 - D. Very much true **34.7%** [31.8,37.6]

74. who notices when I'm not there.
- A. Not true at all **12.8%** [11.4,14.4]
 - B. A little true **21.1%** [19.2,23.1]
 - C. Pretty much true **28.1%** [25.5,30.8]
 - D. Very much true **38.0%** [35.8,40.3]

75. who listens to me when I have something to say.
- A. Not true at all **14.2%** [12.9,15.5]
 - B. A little true **21.6%** [20.1,23.1]
 - C. Pretty much true **29.1%** [27.3,31.0]
 - D. Very much true **35.2%** [33.1,37.2]

76. who tells me when I do a good job.
- A. Not true at all **12.4%** [11.2,13.7]
 - B. A little true **16.4%** [14.4,18.6]
 - C. Pretty much true **29.3%** [26.6,32.1]
 - D. Very much true **41.9%** [39.6,44.3]

77. who always wants me to do my best.
- A. Not true at all **9.2%** [8.0,10.5]
 - B. A little true **15.9%** [14.1,18.0]
 - C. Pretty much true **25.8%** [23.1,28.7]
 - D. Very much true **49.0%** [46.8,51.3]

78. who believes that I will be a success.
- A. Not true at all **12.2%** [10.7,14.0]
 - B. A little true **18.0%** [16.0,20.2]
 - C. Pretty much true **25.9%** [24.2,27.7]
 - D. Very much true **43.9%** [41.6,46.1]

Outside of my home and school, there is an adult...

79. who really cares about me.
- A. Not true at all **9.9%** [8.9,10.9]
 - B. A little true **10.8%** [9.2,12.7]
 - C. Pretty much true **20.4%** [18.9,22.0]
 - D. Very much true **58.9%** [56.6,61.2]

80. who notices when I am upset about something.
- A. Not true at all **11.1%** [9.6,12.7]
 - B. A little true **13.3%** [11.7,15.0]
 - C. Pretty much true **25.6%** [23.7,27.6]
 - D. Very much true **50.0%** [47.7,52.3]

81. whom I trust.
- A. Not true at all **11.9%** [10.4,13.5]
 - B. A little true **9.9%** [8.3,11.6]
 - C. Pretty much true **22.9%** [19.5,26.8]
 - D. Very much true **55.4%** [51.6,59.0]

82. who tells me when I do a good job.
- A. Not true at all **10.9%** [9.5,12.3]
 - B. A little true **13.7%** [12.0,15.6]
 - C. Pretty much true **25.1%** [23.7,26.5]
 - D. Very much true **50.3%** [47.6,53.1]

83. who always wants me to do my best.
- A. Not true at all **9.2%** [8.0,10.7]
 - B. A little true **11.7%** [10.4,13.1]
 - C. Pretty much true **22.7%** [20.9,24.7]
 - D. Very much true **56.4%** [53.3,59.4]

84. who believes that I will be a success.
- A. Not true at all **9.5%** [8.1,11.0]
 - B. A little true **11.7%** [10.7,12.8]
 - C. Pretty much true **22.2%** [20.3,24.3]
 - D. Very much true **56.6%** [54.4,58.8]

I have a friend about my own age...

85. who really cares about me.
- A. Not true at all **6.6%** [5.3,8.0]
 - B. A little true **10.4%** [9.4,11.4]
 - C. Pretty much true **19.4%** [17.3,21.6]
 - D. Very much true **63.7%** [60.9,66.4]

86. who talks with me about my problems.
- A. Not true at all **9.6%** [8.4,11.1]
 - B. A little true **12.5%** [11.1,14.1]
 - C. Pretty much true **18.6%** [15.6,22.1]
 - D. Very much true **59.2%** [55.1,63.2]

87. who helps me when I'm having a hard time.
- A. Not true at all **8.2%** [6.8,9.8]
 - B. A little true **11.2%** [10.2,12.3]
 - C. Pretty much true **19.9%** [17.9,22.1]
 - D. Very much true **60.7%** [58.0,63.3]

How true do you feel these statements are for you?

88. When I am not at home, one of my parents/guardians knows where I am and who I am with.

- A. Not true at all **7.9%** [6.7,9.2]
- B. A little true **13.2%** [11.5,15.1]
- C. Pretty much true **27.5%** [25.4,29.7]
- D. Very much true **51.4%** [49.1,53.7]

89. My family has clear rules about drug and alcohol use.

- A. Not true at all **6.5%** [5.6,7.6]
- B. A little true **12.8%** [11.5,14.3]
- C. Pretty much true **20.2%** [18.8,21.6]
- D. Very much true **60.5%** [58.6,62.3]

90. My family has clear rules and standards for my behavior.

- A. Not true at all **6.7%** [5.5,8.1]
- B. A little true **11.6%** [10.0,13.4]
- C. Pretty much true **24.6%** [22.9,26.5]
- D. Very much true **57.1%** [55.1,59.1]

91. In my school, there are clear rules about what students can and cannot do.

- A. Not true at all **8.0%** [7.1,9.1]
- B. A little true **12.1%** [10.2,14.3]
- C. Pretty much true **28.2%** [25.9,30.7]
- D. Very much true **51.7%** [48.4,54.9]

92. At school, I help decide things like class activities or rules.

- A. Not true at all **35.5%** [33.7,37.3]
- B. A little true **23.7%** [21.9,25.6]
- C. Pretty much true **19.8%** [18.1,21.6]
- D. Very much true **21.1%** [18.9,23.3]

93. At school, I try hard to do my best work.

- A. Not true at all **5.9%** [4.9,7.0]
- B. A little true **13.6%** [12.0,15.3]
- C. Pretty much true **32.2%** [30.0,34.4]
- D. Very much true **48.4%** [46.2,50.7]

94. I plan to go to college or some other school after high school.

- A. Not true at all **7.1%** [6.0,8.3]
- B. A little true **7.2%** [5.9,8.9]
- C. Pretty much true **13.9%** [11.8,16.2]
- D. Very much true **71.8%** [68.4,75.0]

95. At school I am involved in sports, clubs, or other extra-curricular activities (such as band, cheerleading, student council, etc.).

- A. Not true at all **31.1%** [29.0,33.2]
- B. A little true **8.1%** [6.7,9.7]
- C. Pretty much true **12.4%** [11.2,13.6]
- D. Very much true **48.5%** [45.8,51.3]

96. There is at least one adult in my community I could talk to about something important.

- A. Not true at all **15.5%** [13.9,17.3]
- B. A little true **13.0%** [11.9,14.2]
- C. Pretty much true **19.6%** [17.2,22.2]
- D. Very much true **51.8%** [48.9,54.8]

97. Outside of my home and school, I am a part of clubs, sports teams, church/temple, or other group activities.

- A. Not true at all **30.7%** [28.5,33.0]
- B. A little true **13.6%** [12.0,15.3]
- C. Pretty much true **14.3%** [12.9,15.7]
- D. Very much true **41.5%** [37.8,45.3]

98. Outside of my home and school, I am involved in music, art, literature, sports or a hobby.

- A. Not true at all **25.8%** [24.4,27.3]
- B. A little true **12.3%** [11.2,13.6]
- C. Pretty much true **16.8%** [22.8,30.6]
- D. Very much true **45.0%** [43.2,46.8]

99. Outside of my home and school, I help other people.

- A. Not true at all **12.2%** [10.7,14.0]
- B. A little true **22.7%** [21.1,24.5]
- C. Pretty much true **29.7%** [26.8,32.7]
- D. Very much true **35.4%** [32.7,38.2]

100. I try to understand what other people feel and think.

- A. Not true at all **8.4%** [7.2,9.8]
- B. A little true **13.9%** [13.0,14.9]
- C. Pretty much true **32.2%** [29.9,34.6]
- D. Very much true **45.5%** [42.8,48.2]

101. It is important to think before you act.

- A. Not true at all **5.8%** [5.0,6.8]
- B. A little true **10.5%** [8.6,12.8]
- C. Pretty much true **23.5%** [22.1,25.0]
- D. Very much true **60.1%** [57.9,62.3]

102. I have to have everything right away.

- A. Not true at all **22.7%** [21.0,24.5]
- B. A little true **36.1%** [32.5,39.9]
- C. Pretty much true **21.8%** [19.2,24.7]
- D. Very much true **19.3%** [16.3,22.7]

103. I often do things without thinking about what will happen.

- A. Not true at all **19.8%** [18.0,21.7]
- B. A little true **33.5%** [31.4,35.7]
- C. Pretty much true **24.0%** [22.2,26.0]
- D. Very much true **22.7%** [20.3,25.2]

104. It's hard for me to stick with one thing even when it's fun.

- A. Not true at all **40.8%** [38.3,43.3]
- B. A little true **23.7%** [21.6,26.0]
- C. Pretty much true **18.1%** [15.9,20.6]
- D. Very much true **17.4%** [14.8,20.4]

105. My friends get into a lot of trouble.

- A. Not true at all **33.9%** [30.7,37.3]
- B. A little true **34.1%** [31.9,36.3]
- C. Pretty much true **16.4%** [13.4,19.8]
- D. Very much true **15.6%** [13.4,18.0]

106. My friends do well in school.

- A. Not true at all **7.4%** [6.3,8.6]
- B. A little true **23.7%** [20.8,26.8]
- C. Pretty much true **39.2%** [36.2,42.2]
- D. Very much true **29.8%** [27.4,32.2]

Among the people you consider to be your closest friends, how many would you say do the following?

107. Drink alcohol once a week or more?

- A. None **35.7%** [33.4,38.1]
- B. A few **33.6%** [31.0,36.4]
- C. Some **14.0%** [12.6,15.5]
- D. Most **12.3%** [10.6,14.3]
- E. All **4.3%** [3.3,5.7]

108. Have used drugs such as marijuana or cocaine?

- A. None **34.0%** [31.4,36.6]
- B. A few **30.6%** [28.3,33.0]
- C. Some **14.9%** [13.3,16.7]
- D. Most **14.3%** [12.5,16.2]
- E. All **6.2%** [4.7,8.1]

The next 8 questions ask about how many times you have done the following things.

109. How many times have you done what feels good no matter what?

- A. I've never done this **27.1%** [25.1,29.1]
- B. I've done it but not in past year **12.8%** [11.3,14.5]
- C. Less than once a month **15.0%** [13.3,16.7]
- D. About once a month **11.5%** [10.0,13.2]
- E. 2 to 3 times a month **12.6%** [10.9,14.5]
- F. Once a week or more **21.1%** [19.7,22.5]

110. How many times have you done something dangerous because someone dared you to do it?

- A. I've never done this **38.4%** [36.5,40.3]
- B. I've done it but not in past year **22.2%** [20.5,24.0]
- C. Less than once a month **16.8%** [15.5,18.3]
- D. About once a month **9.2%** [8.0,10.5]
- E. 2 to 3 times a month **5.9%** [5.0,7.0]
- F. Once a week or more **7.5%** [5.7,9.8]

111. How many times have you done crazy exciting things even if they are a little dangerous?

- A. I've never done this **22.2%** [20.3,24.3]
- B. I've done it but not in past year **20.2%** [18.2,22.4]
- C. Less than once a month **19.0%** [16.1,22.3]
- D. About once a month **13.0%** [11.6,14.4]
- E. 2 to 3 times a month **12.9%** [11.1,14.9]
- F. Once a week or more **12.7%** [10.5,15.3]

112. How often do you attend religious or spiritual services?

- A. Every day **6.2%** [5.3,7.2]
- B. 1 to 6 times a week **27.1%** [25.3,29.0]
- C. 1 to 3 times a month **17.9%** [16.5,19.4]
- D. 3 to 11 times a year **12.7%** [11.5,13.9]
- E. Only once or twice a year **13.5%** [11.6,15.8]
- F. Never **22.6%** [19.7,25.9]

113. During the school year, how many hours a week do you work at a part-time job?

- A. I don't work **65.8%** [63.3,68.1]
- B. 1 to 4 hours per week **8.3%** [7.0,9.8]
- C. 5 to 9 hours per week **8.3%** [7.4,9.4]
- D. 10 to 20 hours per week **9.5%** [7.8,11.6]
- E. Over 20 hours per week **8.1%** [6.8,9.6]

114. During the last four weeks, how many days of school have you missed because you skipped or ditched?

- A. None **55.0%** [52.1,57.8]
- B. 1 day **14.8%** [13.6,16.0]
- C. 2 days **9.9%** [8.4,11.6]
- D. 3 days **7.4%** [6.5,8.5]
- E. 4 to 5 days **6.0%** [5.0,7.2]
- F. 6 to 10 days **3.3%** [2.7,4.2]
- G. 11 or more days **3.5%** [2.8,4.5]

115. How often do you come to classes without bringing paper or something to write with?

- A. Never **56.4%** [54.1,58.7]
- B. Sometimes **32.8%** [30.2,35.4]
- C. Usually **10.8%** [9.1,12.8]

116. How often do you come to classes without your homework finished?

- A. Never **18.8%** [17.2,20.5]
- B. Sometimes **61.2%** [59.4,62.8]
- C. Usually **20.1%** [18.3,21.9]

The next 3 questions ask about body weight.

117. During the past 30 days, did you **exercise** to lose weight or to keep from gaining weight?

- A. Yes **61.3%** [59.2,63.4]
- B. No **38.7%** [36.6,40.8]

118. During the past 30 days, did you **eat less food, fewer calories, or foods low in fat** to lose weight or to keep from gaining weight?

- A. Yes **38.0%** [36.0,40.1]
- B. No **62.0%** [59.9,64.0]

119. During the past 30 days, did you **vomit or take laxatives** to lose weight or to keep from gaining weight?

- A. Yes **9.6%** [8.4,11.0]
- B. No **90.4%** [89.0,91.6]

The next 7 questions ask about food you ate or drank during the past 7 days. Think about all the meals and snacks you had 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.

120. During the past 7 days, how many times did you drink **100% fruit juices** such as orange juice, apple juice, or grape juice? (Do **not** count punch, Kool-Aid, sports drinks, or other fruit-flavored drinks.)

- A. I did not drink 100% fruit juice during the past 7 days **21.7%** [19.9,23.6]
- B. 1 to 3 times during past 7 days **36.4%** [34.4,38.4]
- C. 4 to 6 times during past 7 days **18.4%** [15.7,21.6]
- D. 1 time per day **8.1%** [7.2,9.1]
- E. 2 times per day **7.0%** [5.6,8.7]
- F. 3 times per day **3.5%** [2.9,4.2]
- G. 4 or more times per day **4.9%** [4.1,5.8]

121. During the past 7 days, how many times did you eat **fruit**? (Do **not** count fruit juice.)

- A. I didn't eat fruit during past 7 days **16.6%** [15.5,17.7]
- B. 1-3 times during the past 7 days **39.6%** [36.2,43.0]
- C. 4-6 times during the past 7 days **19.0%** [17.5,20.6]
- D. 1 time per day **9.1%** [7.9,10.5]
- E. 2 times per day **8.2%** [6.6,10.2]
- F. 3 times per day **3.4%** [2.8,4.2]
- G. 4 or more times per day **4.1%** [3.0,5.7]

122. During the past 7 days, how many times did you eat **green salad**?

- A. I did not eat green salad during the past 7 days **34.3%** [31.6,37.1]
- B. 1-3 times during the past 7 days **41.6%** [39.1,44.2]
- C. 4-6 times during the past 7 days **12.8%** [11.5,14.3]
- D. 1 time per day **6.9%** [5.9,8.0]
- E. 2 times per day **2.2%** [1.7,2.7]
- F. 3 times per day **0.9%** [0.6,1.4]
- G. 4 or more times per day **1.3%** [1.0,1.6]

123. During the past 7 days, how many times did you eat **potatoes**? (Do **not** count french fries, fried potatoes, or potato chips.)

- A. I did not eat potatoes during the past 7 days **25.4%** [23.9,27.0]
- B. 1-3 times during the past 7 days **48.3%** [45.4,51.3]
- C. 4-6 times during the past 7 days **14.2%** [12.9,15.6]
- D. 1 time per day **6.6%** [4.9,8.7]
- E. 2 times per day **2.2%** [1.7,2.9]
- F. 3 times per day **0.9%** [0.6,1.3]
- G. 4 or more times per day **2.4%** [1.0,5.3]

124. During the past 7 days, how many times did you eat **carrots**?

- A. I did not eat carrots during the past 7 days **51.0%** [49.4,52.6]
- B. 1-3 times during the past 7 days **32.9%** [30.9,35.0]
- C. 4-6 times during the past 7 days **8.0%** [7.0,9.2]
- D. 1 time per day **4.0%** [2.8,5.8]
- E. 2 times per day **2.2%** [1.5,3.1]
- F. 3 times per day **0.8%** [0.5,1.5]
- G. 4 or more times per day **1.1%** [0.9,1.4]

125. During the past 7 days, how many times did you eat **other vegetables**? (Do **not** count green salad, potatoes, or carrots.)

- A. I did not eat other vegetables during the past 7 days **20.7%** [18.3,23.4]
- B. 1-3 times during the past 7 days **43.3%** [40.5,46.2]
- C. 4-6 times during the past 7 days **18.0%** [16.3,19.9]
- D. 1 time per day **9.5%** [7.8,11.5]
- E. 2 times per day **4.8%** [4.0,5.7]
- F. 3 times per day **1.5%** [1.0,2.1]
- G. 4 or more times per day **2.2%** [1.7,2.8]

126. During the past 7 days, how many **glasses of milk** did you drink?
(Include the milk you drank in a glass or cup, from a carton, or with cereal. Count the half pint of milk served at school as equal to one glass.)

- A. I did not drink milk during the past 7 days **17.8%** [15.9,19.9]
- B. 1-3 glasses during past 7 days **29.0%** [27.2,30.8]
- C. 4-6 glasses during past 7 days **18.9%** [16.5,21.6]
- D. 1 glass per day **10.1%** [8.3,12.1]
- E. 2 glasses per day **11.2%** [10.2,12.3]
- F. 3 glasses per day **5.8%** [5.1,6.5]
- G. 4 or more glasses per day **7.2%** [5.8,8.9]

The next 8 questions ask about physical activity, personal care and health habits.

127. On how many of the past 7 days did you exercise or participate in physical activity for **at least 20 minutes that made you sweat and breathe hard**, such as basketball, soccer, running, swimming laps, fast bicycling, fast dancing, or similar aerobic activities?

- A. 0 days **18.0%** [16.0,20.2]
- B. 1 day **12.0%** [10.6,13.5]
- C. 2 days **13.7%** [10.8,17.2]
- D. 3 days **11.7%** [10.8,12.8]
- E. 4 days **8.8%** [6.9,11.1]
- F. 5 days **11.4%** [9.8,13.1]
- G. 6 days **7.3%** [5.9,9.0]
- H. 7 days **17.1%** [15.7,18.6]

128. On how many of the past 7 days did you participate in physical activity for **at least 30 minutes** that did **not** make you sweat or breathe hard, such as fast walking, slow bicycling, skating, pushing a lawn mower, or mopping floors?

- A. 0 days **28.1%** [25.6,30.8]
- B. 1 day **15.7%** [13.4,18.3]
- C. 2 days **17.3%** [15.5,19.2]
- D. 3 days **10.8%** [9.4,12.4]
- E. 4 days **5.8%** [5.1,6.5]
- F. 5 days **6.5%** [5.6,7.5]
- G. 6 days **3.1%** [2.4,4.1]
- H. 7 days **12.7%** [10.6,15.2]

129. On an average school day, how many hours do you watch TV?

- A. I do not watch TV on an average school day **9.1%** [7.5,10.8]
- B. Less than 1 hour per day **17.6%** [16.4,18.9]
- C. 1 hour per day **18.8%** [16.2,21.6]
- D. 2 hours per day **20.4%** [18.6,22.3]
- E. 3 hours per day **15.1%** [13.6,16.7]
- F. 4 hours per day **8.4%** [7.3,9.6]
- G. 5 or more hours per day **10.8%** [9.0,12.8]

130. In an average week when you are in school, on how many days do you go to physical education (PE) classes?

- A. 0 days **50.2%** [42.0,58.4]
- B. 1 day **4.8%** [3.5,6.7]
- C. 2 days **5.4%** [3.8,7.5]
- D. 3 days **10.4%** [5.0,20.3]
- E. 4 days **6.7%** [3.8,11.5]
- F. 5 days **22.5%** [18.2,27.4]

131. When did you last have a physical exam?

- A. Within the last 12 months **56.6%** [54.2,58.9]
- B. 1-2 years ago **15.4%** [13.6,17.2]
- C. More than 2 years ago **6.5%** [5.3,8.0]
- D. I don't remember **15.0%** [13.2,17.0]
- E. I've never had a physical exam **6.5%** [5.8,7.4]

132. If your school has a school-based health center, how many times did you use it for services this year?

- A. My school does not have a school-based health center **34.9%** [31.5,38.4]
- B. 0 times **42.7%** [39.5,46.0]
- C. 1 time **12.7%** [11.2,14.3]
- D. 2 times **5.1%** [3.9,6.4]
- E. 3 or more times **4.7%** [3.9,5.5]

133. Are you limited in any way in any activities because of any impairment or health problem?

- A. Yes **12.0%** [10.4,13.9]
- B. No **76.1%** [73.7,78.4]
- C. Not sure **11.9%** [9.7,14.4]

134. Because of any impairment or health problem do you have any trouble learning, remembering, or concentrating?

- A. I do not have any impairment or health problem **44.9%** [42.8,47.1]
- B. Yes **14.4%** [11.4,18.1]
- C. No **31.0%** [28.2,33.8]
- D. Not sure **9.7%** [8.6,11.0]

These last 3 questions ask for some information about you and your family.

135. How often do you speak a language other than English at home?

- A. Never **45.7%** [42.2,49.2]
- B. Less than half the time **27.0%** [24.8,29.3]
- C. About half the time **10.4%** [9.0,12.0]
- D. More than half the time but not all of the time **6.6%** [5.4,8.1]
- E. All of the time **10.3%** [9.1,11.7]

136. Were you born in the USA or did you move here from another country?

- A. Born in the USA **85.2%** [82.5,87.6]
- B. Moved to USA 10 or more years ago **5.6%** [4.6,6.8]
- C. Moved to USA between 5 and 9 years ago **4.6%** [3.5,6.2]
- D. Moved to USA less than 5 years ago **4.5%** [2.7,7.4]

137. During the past 12 months, which of the following statements best describes the food eaten by you and your family?

- A. Enough food to eat **88.3%** [87.0,89.5]
- B. Sometimes not enough food to eat **7.4%** [6.1,9.0]
- C. Often not enough food to eat **4.3%** [3.1,5.8]

**This is the end of the survey.
Thank you very much for your help.**

Appendix B. Methods

During the Fall of 2003 and the Spring of 2004 the New Mexico Department of Health (NM DOH), the New Mexico Public Education Department (NMPED) and the University of New Mexico Center for Health Promotion and Disease Prevention (CHPDP), with technical support from the U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Division of Adolescent and School Health (CDC/DASH Cooperative Agreement No. UC87/CCU622624), collaborated to survey almost 11,000 high school students throughout the state of New Mexico for the NM YRRS. This appendix describes the sampling design for the survey, the survey instrument, the administration of the survey, the response rate and the analysis.

Sampling Design

The NM-YRRS presented an interesting sampling challenge reflecting the state and national sampling needs. Stakeholders in New Mexico wanted enough data from each participating district to create district level reports, whereas the CDC merely required data to represent the State of New Mexico in a statewide sample. Two separate but overlapping sample frames were used to select the schools: one was drawn to satisfy CDC sampling criteria and one to allow the NM DOH to report district level data for each district.

The NM DOH began by drawing two independent samples of schools: one simple and non-stratified to satisfy the CDC requirements, and the second larger and stratified by district to satisfy the NM DOH needs. Both samples for schools were drawn from a list of all eligible schools in the state. New Mexico has 89 school districts and approximately 174 high schools. The CDC non-stratified school sample included only 17 districts and 24 schools. The district stratified sample encompassed all 89 districts and 139 of 174 schools.

Each sampled school was contacted through the district superintendent and school principal. For those who agreed to participate, classrooms for each statewide, stratified and non-stratified sample were selected from each school by first assembling a list of all 2nd period classes. The list was next purged of all classes with two or less students enrolled, English as a second language classes, remote instruction classes, teacher preparation periods, self-contained special education classes, classes comprising students below 9th grade, or classes identified as 'office or teacher aide'. The remaining classes were numbered sequentially. PCSample (a CDC designed software for selecting school samples) was used by CHPDP to generate a list of random numbers for each school. A sample of classrooms was then drawn from the school class list using the list of random numbers. Selected classes were then verified with a contact person at each school. The contact person confirmed the teachers name, number of students enrolled, and the amount of Spanish-language materials needed for each classroom. Students who were unable to fill out the survey by themselves were also eliminated from the sample due to confidentiality concerns.

Survey Instrument

As noted above, the NM YRRS 2003 survey was designed by a NM DOH task force, composed of representatives from NM PED, NM DOH and the UNM Center for Health Promotion and Disease Prevention (CHPDP) and other partners. Special attention was given to

ensuring that the survey met CDC DASH Youth Risk Behavior Survey (YRBS) specifications. This meant that at least 58 of the NM YRRS questions had to be identical to the CDC/DASH YRBS. Sixty questions on the 2003 NM YRRS were taken directly from the 2003 CDC/DASH YRBS. DASH approved the use of the NM YRRS as a substitute for the YRBS. DASH approval will allow results from the NM YRRS to be included in national YRBS data if all sampling and participation requirements are met.

The YRBS does not address resiliency factors ('assets' or 'protective factors'), however. Learning about the assets of New Mexico youth was of great concern to the NMDOH task force. Questions addressing resiliency were drawn from the California Health Kids Survey and from the Communities that Care (Hawkins & Catalano) survey. Together the risk and resiliency questions totaled 137, a long survey by any measure, but shorter than the previous YRRS (2001) by 20 questions. As in the past, the survey was also offered in Spanish.

Administration

CHPDP was contracted to administer the NM YRRS through a competitive bid process. CHPDP sent letters to all district superintendents inviting their participation. Of the 89 districts in New Mexico, 69 superintendents expressed willingness to participate. Each superintendent that agreed to participate was asked to provide a list of all high school principals. Each principal was then approached individually. As an incentive, principals were initially offered \$100 per school that completed the NM YRRS, and \$25 per classroom. Those principals who agreed were asked to designate a contact person at the school who would act as a local coordinator. Each contact person was asked to provide a list of all 2nd period classrooms in grades 9-12. Classrooms were then sampled as described above.

Each school was allowed to choose the day on which they completed the NM YRRS. However, they were asked to complete all surveys before the November break. Nonetheless, because of various scheduling problems, some schools did not complete the survey until March of 2004. All youth in attendance on the selected day in the selected classrooms were expected to complete the YRRS if they were able.

The school contact was then asked to collect all the completed surveys and ship them back to CHPDP for scanning, compilation and analysis.

Response Rate

Out of 139 principals in 89 districts, 103 participated in the YRRS in 2003, representing 71 districts. The total high school enrollment in fall 2003 was 97,078. The total high school enrollment for the 71 participating districts was 64,613 or 77% of the total state high school population. In total, 10,778 usable surveys out of a possible 18,402 respondents were returned from these districts. The statewide response rate, which accounts for school district participation, school participation and student participation, and weights responses according to school and school district population, was 56 %.

This is the second year that New Mexico conducted a survey that combined risk and resiliency questions. However, the survey differs from the last time the YRRS was conducted.

As with any new survey, trend results can only be established over time and thus only some of the responses from 2001 are comparable to those from 2003. A middle-school YRRS will be available in the future, providing an even more in-depth picture of adolescent behaviors and assets.

The data were weighted by district and then aggregated to provide state results. The data were not weighted by age, grade, gender, or ethnicity since the basis of the sampling design was stratification by classroom within each district only. The demographic composition of the students taking the 2003 YRRS falls within similar proportions to the student population of the state. There does not appear to be any significant misrepresentation in the demographic categories as listed in the tables below.

**Table A-1
Ethnicity as Reported for YRRS 2003**

Single Categories		
Ethnicity	Number	Percentage
American Indian or Alaska Native	1144	10.8
Asian	106	1.0
Black	205	1.9
Hispanic	5148	48.7
Hawaiian or Other Pacific Islander	80	0.8
White	2999	28.4
Multiple Ethnicity	885	8.4
Sub Total	10567	100.0
Table A-2		
Select Multiple Categories		
Ethnicity	Number	Percentage
Single Categories	9682	91.6
American Indian/Alaska Native-Hispanic	123	1.1
American Indian/Alaska Native-White	97	0.9
Hispanic-White	371	3.4
Sub Total	591	5.5
Table A-3		
Aggregated Multiple Categories		
Ethnicity	Number	Percentage
All Hispanic Multiple	655	6.1
All Non-Hispanic Multiples	230	2.1
Sub Total	885	8.2

Data Management and Analysis

The total high school enrollment in fall 2003 was 97,078. The total high school enrollment for the 71 participating districts was 64,613 or 67% of the total state high school population. In total, 10,778 usable surveys out of a possible 18,402 respondents were returned from these districts for a response rate of 56 %.

All surveys were collected by the Center of Health Promotion and Disease Prevention (CHPDP) and were sent to University of New Mexico Computer Information and Research Technology (UNM CIRT) for scanning. The resulting flat file was sent to CHPDP where it was read into the Statistical Analysis Software (SAS)[®] for further analysis. Once the flat file was read into SAS, the dataset was corrected for certain irregularities between the scanning procedure and the actual surveys. Furthermore, consistency and logic checks were performed and, where found, inconsistent answers were set to missing. Weights were assigned to each participant so that the weighted sample estimates more accurately represented the entire student population in the State of New Mexico. Resiliency scales were constructed and a factor analysis was performed on the resiliency scales to summarize them with a single factor load where appropriate. The factor loadings were dichotomized into percentile of 20 and then cross tabulated with chosen risk factors. Statistical tests of significance were performed to test for statistically significant differences in population proportions among the percentiles of the resiliency scales.

Endnotes/Citations

- ¹ Hoyert DL, Arias E, Smith BL, Murphy SL, Kochanek KD. Deaths: Final Data for 1999. National Vital Statistics Reports 49: 1–113, 2001.
- ² Highway Traffic Safety Administration. Benefits of safety belts and motorcycle helmets: report to Congress, February 1996. Washington DC: United States Department of Transportation, 1996.
- ³ Centers for Disease Control and Prevention. Surveillance Summaries, May 21, 2004. MMWR 2004:53(No. SS-2).
- ⁴ National Highway Traffic Safety Administration. 1998 Youth fatal crash and alcohol facts. Washington, DC: United States Department of Transportation, 1998.
- ⁵ Centers for Disease Control and Prevention. Alcohol Involvement in Fatal Motor-Vehicle Crashes - United States, 1997-1998. Morbidity and Mortality Weekly Report 48(47):1086-7, 1999.
- ⁶ Centers for Disease Control and Prevention. Surveillance Summaries, May 21, 2004. MMWR 2004:53(No. SS-2).
- ⁷ Anderson RN. Deaths: Leading Causes for 1999. National Vital Statistics Reports 49: 1-88, 2001.
- ⁸ Rosenberg ML, O'Carroll PW, Powell KE. Let's be clear. Violence is a public health problem. Journal of the American Medical Association 267:3071-3072, 1992.
- ⁹ Centers for Disease and Prevention. School Health Programs and Policies Study: A Summary Report. Journal of School Health. 71(7)249-350, 2001.
- ¹⁰ Centers for Disease Control and Prevention. Youth Risk Behavior Surveillance - United States, 2001. Morbidity and Mortality Weekly Report 51:SS-4, 2002.
- ¹¹ Cotton NU, Resnick J, Browne DC, Martin SL, McCarraher DR, Woods J. Aggression and fighting behavior among African-American adolescents: Individual and family factors. American Journal of Public Health 84:618-622, 1994.
- ¹² Kaufman P, Chen X, Choy SP, Peter K, Ruddy SA, Miller AK, Fleury JK, Chandler KA, Planty MG, Rand MR. Indicators of School Crime and Safety: 2001. United States Departments of Education and Justice. NCES 2002- 113/NCJ-190075. Washington, DC: 2001.
- ¹³ Centers for Disease Control and Prevention. Surveillance Summaries, May 21, 2004. MMWR 2004:53(No. SS-2).
- ¹⁴ Davis TC, Peck GQ, Storment JM. Acquaintance rape and the high school student. Journal of Adolescent Health 14:220-224, 1993.
- ¹⁵ Centers for Disease Control and Prevention. Surveillance Summaries, May 21, 2004. MMWR 2004:53(No. SS-2).
- ¹⁶ Centers for Disease Control and Prevention. Surveillance Summaries, May 21, 2004. MMWR 2004:53(No. SS-2).
- ¹⁷ Centers for Disease Control and Prevention. Youth Risk Behavior Surveillance - United States, 2001. Morbidity and Mortality Weekly Report 51:SS-4, 2002.
- ¹⁸ Hoyert DL, Arias E, Smith BL, Murphy SL, Kochanek KD. Deaths: Final Data for 1999. National Vital Statistics Reports 49: 1–113, 2001.
- ¹⁹ Centers for Disease Control and Prevention. Surveillance Summaries, May 21, 2004. MMWR 2004:53(No. SS-2).
- ²⁰ Centers for Disease Control and Prevention. Surveillance Summaries, May 21, 2004. MMWR 2004:53(No. SS-2).
- ²¹ United States Department of Health and Human Services. Preventing Tobacco Use Among Young People: A Report of the Surgeon General. Washington, DC: United States Government Printing Office, 1994.

-
- ²² Centers for Disease Control and Prevention (July 2002). Oral Cancer: Deadly to Ignore. Fact sheet on oral cancer. Available at: <http://www.cdc.gov/OralHealth/factsheets/oc-facts.html>
- ²³ Centers for Disease Control and Prevention. Youth Risk Behavior Surveillance - United States, 2001. Morbidity and Mortality Weekly Report 51:SS-4, 2002.
- ²⁴ Small MI, Jones SE, Barrios LC, Crossett LS, Dahlberg LL, Albuquerque MS, Sleet DA, Greene BZ, Schmidt ER. School policy and environment: results from the School Health Policies and Programs Study 2000. *Journal of School Health* 71(7): 325-334, 2001.
- ²⁵ Centers for Disease Control and Prevention. Surveillance Summaries, May 21, 2004. MMWR 2004:53(No. SS-2).
- ²⁶ States Department of Health and Human Services. Spit tobacco and youth. United States Department of Health and Human Services, Office of Inspector General. Publication No. OEI 06-92-00500, 1992.
- ²⁷ Centers for Disease Control and Prevention. Projected smoking-related deaths among youth - United States. Morbidity and Mortality Weekly Report 45(44)971-4, 1996.
- ²⁸ Everett SA, Giovino GA, Warren CW, Crossett L, Kann L. Other substance abuse among high school students who use tobacco. *Journal of Adolescent Health* 23:289-296, 1998.
- ²⁹ Hoyert DL, Arias E, Smith BL, Murphy SL, Kochanek KD. Deaths: Final Data for 1999. *National Vital Statistics Reports* 49: 1-113, 2001.
- ³⁰ National Highway Traffic Safety Administration. 1998 Youth fatal crash and alcohol facts. Washington, DC: United States Department of Transportation, 1998.
- ³¹ Wechsler H, Dowdall GW, Davenport A, Castillo S. Correlates of college student binge drinking. *American Journal of Public Health* 85:921-926, 1995.6
- ³² Centers for Disease Control and Prevention. Surveillance Summaries, May 21, 2004. MMWR 2004:53(No. SS-2).
- ³³ Abuse and Mental Health Services Administration. (2001). Summary of findings from the 2000 National Household Survey on Drug Abuse (NHSDA) Series: H-13, DHHS Publication No. SMA 01-3549. Rockville, MD, 2001.
- ³⁴ Blanken AJ. Measuring use of alcohol and other drugs among adolescents. *Public Health Reports* 108:25-30, 1993.
- ³⁵ Centers for Disease Control and Prevention. Surveillance Summaries, May 21, 2004. MMWR 2004:53(No. SS-2).
- ³⁶ Abma JC, Sonenstein FL. Sexual activity and contraceptive practices among teenagers in the United States, 1988 and 1995. National Center for Health Statistics. *Vital Health Statistics Series* 23:1-26, 2001.
- ³⁷ Centers for Disease Control and Prevention. Surveillance Summaries, May 21, 2004. MMWR 2004:53(No. SS-2).
- ³⁸ Centers for Disease Control and Prevention. Youth Risk Behavior Surveillance - United States, 2001. Morbidity and Mortality Weekly Report 51:SS-4, 2002.
- ³⁹ National Center for Health Statistics. Fertility, family planning, and women's health: New data from the 1995 National Survey of Family Growth. *Vital and Health Statistics Series* 23:19, 1997.
- ⁴⁰ Centers for Disease Control and Prevention. Surveillance Summaries, May 21, 2004. MMWR 2004:53(No. SS-2).
- ⁴¹ Ventura SJ, Mosher WD, Curtin SA, Abma JC. Trends in pregnancy rates for the United States, 1976-97: an update. *National Vital Statistics Report* 49(4):1-12, 2001.
- ⁴² Martin JA, Park MM, Sutton PD. Births: preliminary data for 2001. *National Vital Statistics Report* 50(10):1-20, 2002.
- ⁴³ Centers for Disease Control and Prevention. (August 2002). HIV/AIDS Surveillance in Adolescents: L265 Slide Series. [On-line]. Available at: <http://www.cdc.gov/hiv/graphics/adolesnt.htm>
- ⁴⁴ Centers for Disease and Prevention. School Health Programs and Policies Study: A Summary Report. *Journal of School Health*. 71(7)249-350, 2001.
-

-
- ⁴⁵ Brener ND, McManus T, Galuska DA, Lowry R, Wechsler H. Reliability and Validity of Self-Reported Height and Weight Among High School Students. *J Adolesc Health*. 2003 Apr;32(4):281-7.
- ⁴⁶ Galuska DA, Serdula M, Pamuk E, Siegel PZ, Byers T. Trends in overweight among U. S. adults from 1987 to 1993: a multistate telephone survey. *American Journal of Public Health* 86:1729-1735, 1996.
- ⁴⁷ NCHS, CDC. (August 2002) Prevalence of overweight among children and adolescents: United States, 1999-2000 [On-line]. Available at:<http://www.cdc.gov/nchs/products/pubs/pubd/hestats/overwght99.htm>
- ⁴⁸ United States Department of Health and Human Services. The Surgeon General's call to action to prevent and decrease overweight and obesity. Rockville, MD: United States Department of Health and Human Services, Public Health Service, Office of the Surgeon General; 2001.
- ⁴⁹ Public Health Service. The Surgeon General's Report on Nutrition and Health. Washington, DC: United States Department of Health and Human Services, Public Health Service, 1988. DHHS publication no. (PHS) 88-50210.
- ⁵⁰ Dietz WH. Health consequences of obesity in youth: childhood predictors of adult disease. *Pediatrics* 101:518-525, 1998.
- ⁵¹ French SA, Jeffery RW. Consequences of dieting to lose weight: effects on physical and mental health. *Health Psychology* 13:195-212, 1994.
- ⁵² Van Duyn MA, Pivonka E. Overview of the health benefits of fruit and vegetable consumption for the dietetics professional: selected literature. *Journal of American Dietitians Association*. 100(12):1511-21, 2000.
- ⁵³ Centers for Disease Control and Prevention. Surveillance Summaries, May 21, 2004. *MMWR* 2004;53(No. SS-2).
- ⁵⁴ United States Department of Agriculture, Agricultural Research Service. Unpublished data from the 1989-91 Continuing Survey of Food Intakes by Individuals. February 1998.
- ⁵⁵ National Center for Health Statistics, Centers for Disease Control and Prevention. Unpublished data from the 1988-94 National Health and Nutrition Examination Survey. May 1998.
- ⁵⁶ United States Department of Health and Human Services. Physical Activity and Health: A Report of the Surgeon General. Atlanta: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, 1996.
- ⁵⁷ United States Department of Health and Human Services. Physical Activity and Health: A Report of the Surgeon General. Atlanta: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, 1996.
- ⁵⁸ McKenzie KL, Nader PR, Strikmiller PK, Yang M, Stone EJ, Perry CL, Taylor WC, Epping JM, Feldman HA, Luepker RV, Kelder SH. School physical education: effect of the Child and Adolescent Trial for Cardiovascular Health. *Preventive Medicine* 25:423-431, 1996.
- ⁵⁹ Centers for Disease Control and Prevention. Surveillance Summaries, May 21, 2004. *MMWR* 2004;53(No. SS-2).
- ⁶⁰ Crespo CJ, Smith E, Troian RP, Bartlett SJ, Macera CA, Anderson RE. Television watching, energy intake and obesity in United States children. *Archives of Pediatric and Adolescent Medicine*. 155:360-365, 2001.
- ⁶¹ Food Security Institute Center on Hunger and Poverty. web site <http://www.centeronhunger.org>
- ⁶² Food Security Institute Center on Hunger and Poverty. web site <http://www.centeronhunger.org>
- ⁶³ Food Security Institute Center on Hunger and Poverty. web site <http://www.centeronhunger.org>
- ⁶⁴ Benson PB. All kids are our kids: What communities must do to raise caring and responsible children and adolescents. Jossey-Bass Publishers, San Francisco, 1997.
- ⁶⁵ Lerner, Richard M., and Catherine E. Barton. Adolescents as Agents in the Promotion of their Positive Development: The Role of Youth Actions in Effective Progras. *In Control of Human Behavior, Mental Processes and Consciousness: Essays in Honor of the 60th Birthday of August Flammer*. W.J. Perrig and A. Grob, eds. Pp. 457-475. Mahwah, NJ: Lawrence Erlbaum Associates. 2000
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