

TEEN HEALTH SURVEY 1992

PRELIMINARY FINDINGS

Prepared by the Office of Resource Development and Assessment

TEEN HEALTH SURVEY '92

The Teen Health Survey, 1992 was administered to all students in attendance at Cambridge Rindge and Latin School on February 12 as part of a school wide standardized testing program that was taking place throughout the week.

The survey provides one source of information about high school age students who attend the Cambridge public high school. The information provided by the survey is self reported and therefore susceptible to error and inaccuracy on the part of the students reporting. However, self reporting offers educators and health providers valuable information about students' lives, practices and perceptions. There are several internal means of cross referencing student responses that can be used to confirm the validity of student responses with a measure of accuracy. By repeating the administration of the survey at regular intervals (annually or every two years), patterns of student behavior can be identified and analysed.

Students were instructed that the purpose of the survey was to help the Cambridge Public School Department and the Teen Health Center understand student concerns about their health and that it would be used to improve instruction, academic programs and health care programs for high school students throughout Cambridge. They were further instructed that there are no right or wrong answers and that filling out the questionnaire is voluntary, anonymous and confidential. Students were encouraged to answer all of the survey questions but they were also told that if they did not want to answer particular questions, they did not have to do so.

Valid Response Rate: The responses to all questions are discussed in terms of the valid response rate. It is based on the number of students actually answering each question and does not include the missing answers, thus providing a more accurate picture of the frequency distribution of responses to each question. Most students completed the survey answering the questions thoroughly. The percent of missing answers for most questions was below 15 percent and in many cases below 5 percent; it appears that students made a good effort to provide answers to the questions. School wide frequency distributions are used throughout.

Cross Tabulations: All items have been cross tabulated according to gender, grade and race/ethnicity. The volume of data generated by the survey does not allow for this report to provide a complete enumeration of all variables according to gender, grade and race/ethnicity; however, that data is available and can be requested through the Cambridge School Department. In some instances where it is revealing to report the frequency of response according to one or more of the cross tabulated sub-groups, this has been done. In most cases the results of the sub-samples are reported as a percent of the sub-sample who gave a particular response. For example, the race responses to Q6, "Born in the US?", would be reported as Bi-racial (87.3%), White (84.2%), Black (56.9%), Hispanic (54.6%), Asian (12.5%) reported being born in the US.. This means that among White students responding 84.2% were born in the US where as only 12.5% of the Asian students responding were born in the US. Another way of reporting, would be to discuss the racial proportion of the students who said they were born in the US. Among those born in the US, 5.1% are Bi-racial, 48.0% are White, 27.0% are Black, 10.2% are Hispanic and 1.2% are Asian. Since it is expected that most readers are interested in knowing if student behavior is proportionally equivalent for each group of students, responses are reported as a percent of the sub-sample according to gender, race and grade.

Cross tabulated figures require that respondents complete all of the appropriate questions that relate to the cross tabulation. For example, if a student answers Q 6, "Born in the USA?", but does not answer Q 5, "Race"; then that student will not be included in the cross tabulation report. This accounts for some of the school wide frequencies being slightly different from the cross tabulated frequencies.

Comparison to Teen Health Survey '89: The '92 survey and the '89 survey ask some of the same questions and therefore it is possible to compare aggregate student responses in '92 to their responses in '89. It is important for the reader to keep in mind that the group of students taking the survey in '92 is not the same as the group that took the '89 survey; it is not a survey administered to the same students, three years later. By comparing aggregate student response rates between the two surveys, patterns of student behavior between the two survey years can be compared.

Since the '89 survey was one of the first of its kind, much was learned from it about relevant topics and issues, framing the questions, formating, administration and analysis. In preparing the '92 survey efforts were made to involve representatives of public interest groups and task forces from the Cambridge community. As a result, the '92 survey is more comprehensive and reflects an awareness of the health issues that are of local, state and nation wide concern. Some questions were drafted in a manner that would allow for comparison to nation wide surveys as a means of informing Cambridge about the health issues of CRLS students.

Bilingual Student Teen Health Survey: The survey administered on February 12th does not include bilingual students who did not feel that they could take the survey in English. Translated versions of the survey in Haitian Creole, Spanish and Portuguese were subsuquently administered in May of '92. Results of the bilingual survey will be available at a later date and will be compared to results of the Bilingual Teen Health Survey administered in May 1990.

Looking at an Issue: In some cases, the implication of a response becomes apparent when viewed as the number of individual students involved, rather than a percent. For example, in examining the issue of HUNGER, 5.7% of 1254 respondents reported that they have gone hungry in the past year because there was not enough money to buy food for their home [Q 96.]. This means that 72 students suffer from lack of sufficient resources to have enough food to eat.

Particular issues of interest can be explored through an examination of several questions found throughout the survey. Where possible, results are reported as they relate to particular issues. No doubt, there are items and issues that will emerge over time that call for analysis in a variety of ways and efforts will be made to accomplish that.

PARTICIPATION

After reviewing all of the surveys, a total of 1512 usable surveys were generated for a valid participation rate of 72 percent based on the CRLS total population of 2060.

	<u>%</u>	<u>#</u>
GENDER:		
Male	49.2	729
Female.....	<u>50.8</u>	<u>752</u>
Total	100.0	1481
GRADE:		
Freshman - 9th grade	27.9	417
Sophomore - 10th grade	25.6	383
Junior - 11th grade	23.4	350
Senior - 12th grade	21.4	320
Other.....	<u>1.6</u>	<u>24</u>
Total	100.0	1494
AGE		
13	0.8	12
14	16.0	228
15	25.8	367
16	22.8	325
17	23.1	329
18	8.6	123
19	2.0	28
20+	<u>0.9</u>	<u>11</u>
Total	100.0	1425
RACE:		
Bi-racial	3.9	56
Black.....	30.8	448
White	36.8	535
Hispanic.....	12.0	175
Asian / Pacific Islander	6.1	88
American Indian / Alaskan Native.....	0.1	1
Other.....	<u>10.4</u>	<u>151</u>
Total	100.0	1454

The racial categories included the category of "Bi-racial" since a significant number of students self identify as bi-racial and there are some statistically significant responses to survey variables that emerge especially with regard to certain risk factors. These will be reviewed as the survey results are examined throughout this report. Readers are advised, however, to examine the results carefully because the small number of students who classify themselves as Bi-racial results in statistical sensitivity that is particularly evident in the lower percentage figures. This means that a very small number of students can affect the total percent reported. For example, it only takes 3 students to increase percent of the Bi-racial responses from 5.0% to 8.8%; however it would take 20 students to increase the percent of White responses from 5.0% to 8.8%. In the mid and higher percentage ranges the numerical values are more significant for the

small bi-racial population; ie., 30% of the Bi-racial student population is the equivalent of 17 Bi-racial students where as 5% of the Bi-racial students is only 3 students. When discussing 30% of the Black student population the numerical equivalent is 134 students and 5% of the Black student population is 22 students.

Although only one (1) student identified American Indian/Alaskan Native as their race, fourteen (14) students indicated that their family ancestry is American Indian.

FAMILY ANCESTRY:	<u>%</u>	<u>#</u>
Puerto Rican.....	6.7	89
Dominican	1.4	19
Central American	4.5	59
Other Hispanic, inc. Mexican, Cuban So. American	2.5	33
Brazilian.....	.5	7
Cape Verdean	1.8	24
Other Portuguese.....	8.6	113
Haitian.....	9.2	121
West Indian.....	8.0	106
Chinese.....	2.2	29
Cambodian.....	.2	2
Vietnamese	.8	10
Laotian	.2	3
Other Asian.....	1.2	16
Pakistani	2.0	27
European.....	17.3	229
African	9.2	122
North American Indian	1.1	14
Don't Know	6.1	80
Other.....	<u>16.5</u>	<u>218</u>
Total	100.0	1321

Among students reporting, 64.6% or 959 said they were born in one of the 50 United States. Half of the respondents report a language other than English spoken at home with the most frequently reported languages being Spanish 14.7%; Portuguese 10.4% and Haitian Creole 7.8%. In some homes the parent or grandparent may not speak English while the student is bilingual or fluent only in English. Other languages spoken at home include French 2.2%, Chinese 1.8%, with Vietnamese, Khmer and Laotian all reporting less than 1%.

Significantly, 45.8% (622) report they do not live with their fathers and 14.8% (212) do not live with their mothers. Twenty-four students (1.6%) report that they are married and 38 students (2.6%) report having children of their own. Thirty-six students (2.8%) report that they live with children of their own and 104 students (8.2%) do not live in a household with anyone over the age of 21. Most students live in a house or apartment but 28 students (1.8%) report living in a shelter, motel, halfway house, residential program or have no regular place to live.

Most respondents, 93.4% expect to finish high school with 81.4% planning to attend college. This is slightly higher than in '89 when 78.4% planned on attending college. Among their parents, 13.8% of the fathers or male in the home and 15.9% of the mothers or females in the home did not finish high school. Almost 30% of the fathers and mothers either finished college or went to school beyond college.

ACCESS TO HEALTH CARE AND HEALTH CARE PRACTICES [Q 13 - 24]

When asked when they last saw a doctor or nurse for a physical exam or check-up when they were not sick, hurt or pregnant, 59.8% reported during the last 12 months and an additional 21.8% have been examined within the last 4 years. Those who report never having been seen constitute 2.4% or 35 students. During the last 12 months 64.1% of the respondents have seen a dentist, 53.8% have had an eye exam, 78.6% have seen a doctor.

Students responded to an array of health issues in answer to the question, "To the best of your knowledge have you had any of the following health problems within the last 12 months?". The intent here is to discover the frequency of clinically diagnosed health problems. Some of the issues of self reporting become apparent in analyzing this question. As can be documented by health care providers, clients often report "problems" that are concerns, worries or symptoms and for which there is no clinical evidence.

In the future, students will be asked to report a problem that has been diagnosed or treated by a health care provider rather than being left to their own interpretation of what constitutes a health problem

HEALTH PROBLEM	%	#
Arthritis	3.2	46
Asthma	11.0	156
Diabetes	1.7	25
Dental Problems	21.0	299
Emotional Problems	21.8	309
Eye-Vision Problems	24.4	347
Hearing Problems	6.8	97
High Blood Pressure	3.3	47
HIV infection or AIDS	2.0	32
Seizures	1.5	21
Sexually Transmitted Disease	2.2	32
Sickle Cell Anemia	1.1	16
Speech Problems	3.9	55

The Teen Health Center was utilized during the last 12 months by 56.3% of the students responding. In addition, it was reported by 9.7% of the respondents as their usual source of health care as compared to the previous figure of 3.1% from the 1989 survey. Private doctors were the usual source of health care for 23.4% of the respondents, followed by 16.8% who said they go to the hospital clinic and 14.3% who go to a neighborhood health center.

The majority of students (72.7%) reported that they have health insurance. Providers include Harvard Community Health Plan (27.6%) and Blue Cross/Blue Shield (25.5%) and Medicaid (9.1%). Other private insurance (17.8%) accounts for the remaining insured students. Students who say that they do not have health insurance constitute 12.4% and students who don't know if they have health insurance are 14.9%.

PSYCHO-SOCIAL DEVELOPMENT [Q 25-58]

Emotional Resources: [Q 25-28] Students report that 45.8% have 5 or more close friends and that 48.7% have from 1-4 close friends; 5.5% or 81 students indicate that they have no close friends. When asked with whom they usually talk about their personal problems, friends (49.7%) were the most often chosen, then parents (20.1%), other family members (6.4%). 4.0% of the students report that they talk to counselors, teachers, coaches or other adults. 16% (224) of the students reported that they had no one to whom they usually talked about personal problems. Running away from home was reported by 6.8% as something that they did in the last 12 months.

Worries: [Q 28 & 33] School failure or poor grades (24.7%) and weight problems (23.9%) were the most frequently reported worries that that students had during the last 12 months. The percentages indicated here are a combination of respondents who indicated "often" or "always" to the question "how much did you worry". Other significant responses are, sadness/depression, (17.7%), arguing at home (16.7%), HIV infection or AIDS (14.5%), family not having enough money (13.7%), becoming pregnant or getting someone pregnant (13.2%), other kids use of drugs or alcohol (12.2%), sexually transmitted disease (11.7%), violence in neighborhood (11.6%), anxiety (8.7%), drug or alcohol use in family (7.5%), wanting to run away from home (7.0%), sexual abuse (6.0%). The following worries were also reported: physical fights in school (5.2%), physical fights at home (4.0%), their own alcohol or drug use (4.0%), family not having a place to live (3.7%), being gay or lesbian (1.9%).

Students were also asked "how often they worry about being treated differently for any of the following reasons?". With regard to race/ethnicity, 14.5% reported that they "often" or "always" worry about being treated differently. A disproportionate number of Black students (22.6%) and Bi-racial students (21.4%) worry; followed by Asian students (13.6%), Hispanic (11%), and White students (7.5%). With regard to their gender, 6.4% worry about being treated differently; 4.2% worry because of religion; 1.9% worry because of their sexual preference and 2.5% worry because of their disability.

Stress: [Q 36] Students were asked to report on stressful occurrence that have happened to them recently by answering yes or no to the question; "Have any of the following things happened to you in the past 12 months?":

- One or more failing grades - 42.6% (626) - This is the most frequently reported occurrence. Race frequencies indicate that a larger proportion of Black (51.1%), Hispanic (46.4%), and Bi-racial (39.3%) students report receive failing grades than White (35.7%) or Asian (24.4%).
- Death in the family - 26.3% (383).
- Serious problem getting along with family - 23.2% (337).

Other stressful occurrences that are reported by students include: family member had a serious injury or illness (18.2%), family moved (17.5%), received emotional or verbal abuse from family (16.5%), injury that required medical attention (15.3%), family member had alcohol or drug problem (14.4%), divorce or separation in family (13.9%), threatened with a knife or a gun (11.1%), witnessed a fatal injury (8.4%), had a problem with alcohol or drugs (6.4%), beaten or physically hurt by someone in family (5.4%), sexually abused (4.8%), beaten by someone not in family (4.5%).

The proportion of females (6.3%) who reported being sexually abused in the last 12 months is more than twice that of male (2.5%); the racial distribution indicates that sexual abuse is higher for Bi-racial students (8.9%) and Hispanic students (7.3%) than for the Black students (3.6%), White students (3.8%), or Asian students (4.8%).

Suicide: [Q 29-32] During the last 12 months. 12.3% of the students report having seriously considered hurting themselves; 8.9% seriously considered suicide; 7.9% have made a plan about how to attempt suicide, 8.2% (120) indicate that they have attempted suicide at least one time. Among those who have attempted suicide the gender distribution is proportional; the racial distribution indicates a higher rate of

attempted suicide among Hispanic students (10.5%) than among Bi-racial (7.2%), Black (7.2%), White (7.6%), or Asian (7.6%).

Sexual Harassment: [Q 34 & 35] Two hundred and twenty-four students (224) or 15.2% report that they have been touched in a sexual way against their will in school; 19.1% of the females and 10.9% of the males; the racial distribution indicates a higher rate of sexual harassment among Bi-racial students (25.0%, 14#) than among Black (14.1%, 61#), White (15.0%, 79#), Hispanic (15.0%, 25#), Asian (10.7%, 9#), Other (18.2%, 27#). Three hundred ten (310) students or 21.2% report that rude sexual comments have been directed at them at school; 29.5% of the females and 12.5% of the males report comments. A higher proportion of Bi-racial students (35.7%) report rude sexual comments than Black (18.7%), White (23.9%), Hispanic (22.3%) or Asian (10.7%).

Sexual Activity: [Q 37 -58] Among the 1403 respondents to this question, 49.4% have had sexual intercourse. Reported age of first sexual intercourse ranges from age 5-20.

AGE OF FIRST INTERCOURSE Q 38	MALE	FEMALE	TOTAL
Less than 10 years old,	9.4 (35)	1.9 (5)	6.3 (40)
10-14 years old	61.4 (229)	41.5 (111)	53.1 (340)
15-17 years old	28.7 (107)	53.9 (144)	39.2 (251)
18 + years old	.5 (2)	2.7 (7)	1.4 (9)

One hundred and nineteen (119) of the students, or 8.5%, report that during their lifetime, they have been forced to have sex with someone against their will. Among females, 11.6% (80) report having been forced to have sex against their will; among males the incidence is 4.9% (32). The racial/ethnic proportions are : Black -12.9%, Hispanic - 11.3%, Bi-racial - 7.5%, , White - 6.7%, and Asian -4.9%.

Among females, 6.6% (46) report having been pregnant and 2% (14) report having given birth to a child. Among the males, 8.4% (53) report having gotten someone pregnant and 4.6% (29) report having fathered a child. The slightly lower figures for the girls, in this case, may reflect the fact that a smaller percentage of girls who have given birth remain in school than boys who have fathered a child; consequently, the girls were not present for the survey.

During the last 3 months 23.4% of the students report having had 1 partner, 8.5% have had 2 or 3 partners and 4.9% have had 4 or more partners. 3% of the girls and 2.8% of the boys report have had a sexual experience with someone of the same sex in the last year.

When asked if they used alcohol or drugs before they had sexual intercourse the last time, 7.5% (103) report yes; 10.5% are male and 5.1% are female.

Among the sexually active, 59.5% report that they always do something to prevent pregnancy and 11.9% report that they never do. When asked "The last time you had sexual intercourse, did you or your partner do any of the following things to try to prevent pregnancy?" Respondents answered yes or no to each item: 76.6% report using condoms, 23.9% report using birth control pill, 9.0% report using foam, jelly or cream spermicide, 6.1% use diaphragm. There is clearly a continuing need for education considering the number of sexually active students who do not know that withdrawal and douching are not viable forms of protection; 30.2% report withdrawal, 16.9% report rhythm and 14.9% report douching as their attempt to prevent pregnancy. All percentages reported here are calculated based on those who report being sexually active. The most frequently reported sources of protection are the drug store (26.2%); friends (18.3%) and neighborhood health center (15.0%).

A clear indicator of change in behavior is the 76.6% of students who report using condoms as protection at their last incident of sexual intercourse. This figure indicates a significant increase over the 1989 figure of 53.6%

AIDS education: [Q 57 & 58] 60.8% report that they have talked with their parents or another adult in their family about AIDS/HIV. 79.8% (1090) students report that information about AIDS has made them more careful about their sexual behavior. According to students' reported use, there is a 23.3% increase in the use of condoms from 53.6% in '89 to 76.6% in '92.

With regard to sexually transmitted disease (STD) which includes genital herpes, genital warts, chlamydia, syphilis, gonorrhea, AIDS and HIV infection, 3.5% report ever having had an occurrence. Among the sexually active, 57% report always using condoms to protect themselves from STD.

Well over 90% of the students responded accurately to the informational questions regarding AIDS/HIV transmission with the exception of one item which is invalid due to the wording. When asked about how people can reduce their chances of becoming infected with the AIDS/HIV virus respondents were less accurate.

Can people reduce their chances of becoming infected with the AIDS/HIV virus by any of the following?	% Yes	% No	% Don't know
Using a latex condom	80.8	8.1	11.1
Using a natural skin condom	24.1	46.7	29.2
Using a spermicidal jelly, foam or cream with nonoxinal 9	40.2	37.2	22.6
Not having sexual intercourse at all	85.7	9.4	4.8
Not sharing needles	84.1	10.7	5.3

ALCOHOL, CIGARETTES AND OTHER SUBSTANCES [Q 59 - 81]

The survey asks students to consider their substance use in detail (the number of occasions of use) from three time frames: during their entire life, during the last 12 months and during the last 30 days. In the following table the figures that represent "lifetime use" and "current use" are reported. Current use is any use that occurred in the last 30 days. The following percents represent any reported use regardless of the number of occasions. In the next column is the grade in which the highest percent of students report that they first did or tried the following things.

During the last 30 days the most frequently used substances are alcohol, cigarettes and marijuana, with all other substance use reported at well less than 5%

SUBSTANCE USED	LIFETIME	CURRENT USE (Last 30 days)	HIGHEST % OF FIRST USE
Alcohol	73.4% (969)	34.1% (432)	gr 7/8
Cigarettes (daily)	49.5% (678)	12.5% (171)	gr 7/8
Marijuana	26.1% (344)	14.0% (177)	gr 7/8, gr9
LSD	7.4% (97)	3.3% (44)	gr 9
Other Psychedelics	5.7% (75)	3.0% (38)	gr 9
Cocaine	4.1% (54)	1.9% (26)	gr 6 & gr 9
Amphetamines	4.9% (64)	2.4% (30)	gr 6 or below
Tranquilizers	4.4% (57)	2.4% (30)	"
Barbiturates	3.9% (50)	2.3% (29)	"
Heroin	2.5% (32)	1.9% (26)	"
Other Narcotics	3.8% (48)	2.3% (28)	"
Sniff Glue	7.0% (89)	3.5% (43)	"
Injected any illegal drug	2.8% (34)	NA	NA

Students were asked on how many occasions (if any) they used the following substances, on their own - that is without a doctor telling them to. The period being reported is the 12 months preceding the survey. Percents indicate the proportion of each racial/ethnic group's reported use. The highest percent of reported substance use occurs consistently among White students. Bi-racial students also reveal consistently high percents of reported use; however, note the very low numbers of Bi-racial students responding.

SUBSTANCE USED (last 12 months)	Bi-racial		Black		White		Hispanic		Asian	
	%	#	%	#	%	#	%	#	%	#
Alcohol	72.5	37	49.2	173	72.8	357	57.5	85	43.7	34
Marijuana	26.9	14	11.1	39	29.2	146	16.1	22	21.2	5
LSD	5.9	3	1.5	5	10.8	54	1.4	2	8.1	10
Other Psychedelics	7.9	4	2.1	7	7.4	37	2.1	3	2.8	2
Cocaine	2.0	1	2.1	7	3.2	16	0.7	1	2.6	2
Amphetamines	3.9	2	2.1	7	5.0	25	1.4	2	2.8	2
Tranquilizers	8.1	4	4.0	14	4.6	23	4.4	6	4.2	3
Barbiturates	4.0	2	2.7	9	3.0	15	2.2	3	1.7	1
Heroin	2.0	1	2.4	8	2.0	10	0.7	1	1.7	1
Other Narcotics	0.0	0	2.7	9	3.2	16	1.4	2	2.8	2
Sniff Glue	2.0	1	2.4	8	5.8	29	1.5	2	2.8	2
Inject illegal drug	6.1	3	3.7	12	2.1	10	1.5	2	0.0	0

With the exception of alcohol, which is proportionally equivalent, substance use is consistently higher among the males than the females.

SUBSTANCE USED (last 12 months)	Male		Female		Total	
	%	#	%	#	%	#
Alcohol	62.8	364	61.2	401	62.0	765
Marijuana	23.0	131	18.1	119	20.4	250
LSD	8.2	47	4.2	28	6.1	75
Other Psychedelics	6.9	39	2.9	19	4.7	58
Cocaine	3.5	20	1.8	12	2.6	32
Amphetamines	5.0	28	2.6	17	3.7	45
Tranquilizers	5.1	29	2.5	16	3.7	45
Barbiturates	5.0	29	2.6	17	3.7	46
Heroin	2.7	15	1.4	9	2.0	26
Other Narcotics	3.9	22	1.8	12	2.8	34
Sniff Glue	6.1	56	2.2	14	4.0	70
Inject illegal drug	4.0	21	1.6	10	2.7	31

Students were asked several questions about their behavior related to alcohol use and abuse that occurred in last 30 days: 22.0% (297) report having had 3+ drinks in a row; 4.0% (58) report drinking and driving; 4.1% (55) drink 3+ drinks & drive. 19.6% (263) have been a passenger in a car when the driver has been drinkin and 14.8% (193) have been a passenger in a car when the driver has had 3+ drinks in a row.

The occurrence of treatment for alcohol or drug problems is 4.2% among students; 12.1% among their parent(s). When asked how comfortable they would be asking an adult at their school for help with an alcohol or drug problem, 24.0% responded "very comfortable"; 26.7% responded "somewhat comfortable"; 22.4% responded "somewhat uncomfortable" and 26.8% responded "very uncomfortable".

When asked about how many cigarettes they smoke a day, 81.0% report that they do not smoke, 6.5% report that they smoke less than one cigarette a day and 12.5% cumulatively indicate that they smoke daily. Students were asked to describe their smoking habits and their responses are consistent with the statistics above. Those who do not smoke constitute 82.1% with 50.5% saying they have never smoked and 31.6% saying they have tried a few times and stopped, 6.6% say they used to smoke but have quit, and 11.3% describe themselves as currently smoking.

Buying cigarettes in the store appears to be particularly easy. Of the 44.0% who have tried to buy cigarettes in the store, 71% had no problem, 23% report that "sometimes they won't sell to me" and 4% indicate that "they usually won't sell to me". Among Freshmen, 66% had no problem, Sophmores (61%), Juniors (76%), and Seniors (83%).

PERCEPTIONS OF RISK

Students were asked to rate how much they thought people risked harming themselves (physically or in other ways) if they engaged in certain behaviors. The "Rating of Risk" is utilized to allow simplified comparisons between responses on individual behaviors. It represents a scale from 0 to 3 with:

- "0" representing "No risk"
- "1" representing "Slight risk"
- "2" representing "Moderate Risk"
- "3" representing "Great risk"

This rating is computed using the arithmetic mean for the students' responses to each item.

PERCEIVED RISK BEHAVIOR	NO RISK	SLIGHT RISK	MODERATE RISK	GREAT RISK	RATING OF RISK	CAN'T SAY
smoke occasionally	14.9	37.0	28.1	15.0	1.45	5.1
smoke regularly	9.7	7.0	21.8	56.9	2.32	4.5
try marijuana once or twice	25.1	28.1	56.9	4.5	1.36	5.3
smoke marijuana occasionally	14.1	15.9	26.4	38.0	1.94	5.8
smoke marijuana regularly	10.8	8.2	17.7	56.0	2.28	7.3
try LSD once or twice	10.6	14.9	20.9	43.0	2.08	10.6
take LSD regularly	9.8	4.2	13.0	62.1	2.43	11.0
try heroin once or twice	9.5	12.2	18.6	49.1	2.20	10.5
take heroin occasionally	9.2	3.4	15.9	61.3	2.44	10.3
take heroin regularly	9.3	3.0	7.7	68.4	2.53	11.7
try barbiturates once or twice	10.8	13.3	18.1	41.9	2.08	15.9
take barbiturates regularly	9.3	4.4	13.8	57.3	2.40	15.3
try amphetamines once or twice	11.3	13.4	17.2	42.5	2.08	15.6
take amphetamines regularly	9.2	3.9	11.7	60.4	2.45	14.7
try cocaine once or twice	9.8	8.3	17.2	54.5	2.30	10.3
take cocaine occasionally	8.9	2.7	11.4	67.0	2.52	9.9
take cocaine regularly	9.2	1.5	6.0	73.4	2.59	10.0
try crack once or twice	9.4	6.5	14.2	60.0	2.39	9.9
take crack regularly	9.6	4.3	6.1	69.8	2.52	19.2
try one or two drinks of alcohol	32.2	33.4	12.4	15.5	1.12	6.5
take one or two drinks every day	11.3	14.9	31.1	35.9	1.98	6.7
take four or five drinks every day	9.9	5.2	15.0	62.9	2.41	7.0
have 5 + drinks on weekends	11.5	9.9	20.6	49.7	2.18	8.4

Students responses indicate that they do not consider any of the behaviors to be risk free.[0.0-.75]

Behaviors that they consider to carry slight risk: [Rating of Risk = 0.76-1.50]

- smoking occasionally,
- trying marijuana once or twice,
- trying one or two drinks of alcohol.

Moderately risky behaviors include: [Rating of Risk = 1.51-2.25]

- smoking marijuana occasionally,
- trying LSD, heroin, barbiturates or amphetamines once or twice,
- taking one or two drinks daily,
- having 5+ drinks on weekends.

Behavior which they consider to involve great risk: [Rating of Risk = 2.26-3.00]

- smoking regularly (cigarettes or marijuana),
- taking LSD regularly,
- taking heroin occasionally or regularly,
- taking barbituates or amphetamines regularly,
- taking cocaine at all (once or twice, occasionally, or regularly),
- trying crack or taking it regularly,
- taking four or five drinks every day. ,

RISK TAKING BEHAVIOR [Q 82 - 91]

School Attendance: Students were asked to report on the number of occasions that they have skipped a full day of school in the last 4 weeks of school. More than a quarter (26.5%) of the 1317 respondents said that they have cut at least one day. Among them are 10% or 132 students who report that they skipped 3 or more days; the racial/ethnic populations are proportional.

During a 4 week period, 54.2% of the respondents skipped a class when they weren't supposed to on a day when they were in school; 26.1% or 341 students skipped 3 or more classes. Responses are approximately proportional by gender and race.

Among respondents, 8.8% or 115 students were suspended since September (this was reported in February). Proportionally, there are twice as many suspensions among males (11.6%) as among females (5.7%); the racial proportions are equivalent.

Weapons: During the last thirty days, 13.8% or 179 of the respondents said that they carried a weapon on at least one day; racial/ethnic population responses are equivalent. A knife or razor was the weapon most frequently carried by 7.2% (91) of the students, followed by a handgun by 4.6% (58), other gun by .9% (12), club, stick or bat .7% (9), other weapon by 1.5% (19).

Violent Behavior: A quarter of the respondents (24.6%) said that they have been in a physical fight in the last year; 7.3% fought 2-3 times, 2.1% fought 3-4 times and 3.8% fought 6 or more times. The proportion of males is 36.6% and the females is 14.2%; the racial populations are proportional. The percent of respondents who had to be medically treated after a fight are 6.1% or 77 students. Among females, physical fights most frequently reported are with friends (17.4%) and then with family members (7.6%). Among males, physical fights most frequently reported are with friends (31.5%) and then with strangers (20.0%). They report fighting with family at 3.2%.

The percent of students who have tricked or forced someone to have sex with them is 5.2% or 66 students. The proportion among males is 8.1% and among females 2.2%.

During the last 12 months 9.3% or 120 students have been arrested one or more times. Proportionally there are almost three times as many arrests among males (14.0%) as females (4.9%). The racial/ethnic proportions are: 16.9% (8) arrests among Bi-racial students, 8.4% (31) among Black students, 6.1% (40) among White students, 12.2% (17) among Hispanic students, and 4.9% (4) among Asian students.

PERSONAL HEALTH HABITS [Q 92-101]

The proportion of students reporting that they watch less than an hour of TV on school days is 30.7%, 1-3 hours is 39.4%, 3-5 hours is 17.8%, and more than 5 hours is 12.0%.

The following tables indicate students practices and concerns regarding nutrition, exercise and weight. Exercise and weight are reported according to male and female as well as total response rates.

NUTRITION	6-7 days		3-5 days		1-2 days		0 days	
(frequencies are for total respondents)	%	#	%	#	%	#	%	#
How many days a week...eat breakfast?	40.7	508	19.3	241	21.5	269	18.3	231
How often do you eat red meat?	18.9	234	37.8	469	31.8	394	11.5	143
How often do you eat fried food?	13.0	160	37.0	456	42.1	519	7.9	98

EXERCISE	MALES		FEMALES		TOTAL	
How often do you exercise?	%	#	%	#	%	#
Aerobic exercise, less than 3 days	29.8	165	47.1	311	39.0	506
Aerobic exercise, 3-7 days	70.2	389	53.0	349	60.8	772
Stretching exercise, less than 3 days	45.7	252	46.7	303	46.4	583
Stretching exercise, 3-7 days	54.3	299	53.3	347	53.6	671
Strengthen/toning exercise, < 3 days	40.5	223	63.7	413	52.7	661
Strengthen/toning exercise, 3-7 days	59.9	327	36.5	236	46.9	591

WEIGHT CONCERNS	MALE		FEMALE		TOTAL	
What are you trying to do?	%	#	%	#	%	#
Loose weight	23.4	124	50.9	329	38.5	453
Gain weight	30.3	161	12.7	82	20.6	243
Stay the same	16.9	90	18.1	117	17.6	207
Do nothing about weight	29.4	156	18.3	118	23.3	274

WEIGHT LOSS PRACTICES	MALE		FEMALE		TOTAL	
Do you do any of the following to lose or maintain your weight?	%	#	%	#	%	#
Smoke cigarettes	5.4	28	5.4	34	5.4	62
Diet Pills	5.8	30	5.6	35	5.7	65
Fast	9.8	50	26.4	1164	18.9	214
Laxatives	4.3	22	2.6	16	3.4	38
Speed	4.3	22	2.9	18	3.5	40
Eat Less	16.0	82	42.5	266	30.6	348
Snack Less	23.0	118	51.9	325	38.9	442
Vomit	4.7	24	6.4	40	5.6	64
Less High Fat/Fried Food	23.0	118	49.4	308	37.4	426



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EXECUTIVE DEPARTMENT
ROBERT W. HEALY
City Manager

RICHARD C. ROSSI
Deputy City Manager

May 17, 1993

To The Honorable, The City Council:

In response to Awaiting Report Item No. 52, regarding a request for survey of students at Cambridge Rindge & Latin School, please find attached a copy of the Teen Health Survey for 1992, received from Jill Herold, Assistant City Manager for Human Services.

Very truly yours,

Robert W. Healy
City Manager

RWH/mev
attachment

Consent Agenda #4
Response to Awaiting Rpt. #52 RE:
Survey of Students at CRLS

F-107

In City Council,
May 17, 1993

*Refer to budget hearing
on 5/22/93.*