

Adolescent Report 2014-15

Youth and Adults Working Together for a Healthy Future

Including Youth Commission Policy Recommendations

County of San Mateo Board of Supervisors

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Acknowledgements

This Report is dedicated to all of the youth in San Mateo County.

This report could not have been produced without the dedicated work, support and assistance of the following individuals: San Mateo County Board of Supervisors, Seren Pendleton-Knoll, Candice Newnes, Kimberley DeSimone, Shireen Malekafzali, and Nia Meadors.

CALL TO ACTION

San Mateo County has made tremendous progress to engage young people in order to address their unique needs. However, opportunities remain to build upon successes and support youth in new and innovative ways. It is the duty of the entire community to ensure that youth in San Mateo County are equipped with the skills necessary to thrive in today's society. Therefore, partnerships must be made between elected officials, local government agencies, organizations, and individuals to work towards this end. Building youth assets across the county is a long-term solution that requires strong, long-term commitment.

Specific actions need to be taken by every segment of our society to improve the lives of our young people:

- **Elected Officials:** Adopt one or many of the Youth Commission policy priorities listed in this report into a campaign platform or yearly policy agenda. Work with the Youth Commission to advance those priorities and implement strong policies and programs to promote healthy youth using a youth development model. This ensures model creates strong youth support, advances youth leadership and expands a culture of civic participation within the county.
- Local government agencies: Engage youth in the process of creating policies and programs that affect their lives and those in their communities. Many of the policies and programs we create today will impact the future for our youth. Prioritizing youth needs and aspirations in the public sphere will lead to a better future for our county and all our communities.
- **Organizations**: Each organization, whether they deal directly with youth or not, has a responsibility to our young people. Policy recommendations, which were based on robust research, are included in this report. Adopting one or two policy changes from these recommendations within your organizational structure and mission would provide enormous forward progress.
- **Individuals:** Each person has a responsibility to our young people. Youth have identified their policy priorities. Adult can serve as allies and strong advocates for youth priorities. Individuals can create, or look for opportunities to advance these priorities, as well as engage youth in everyday efforts that impact their lives.

We hope that readers of this report find the information presented here useful as they plan to promote youth development in their communities.

INTRODUCTION

San Mateo County values youth leadership and supports the inclusion of youth voices in decision-making processes. The decisions we make today shape the future for our children and youth. Therefore, understanding the state of youth in the County, as well as ensuring their development and leadership are key goals.

The 2013-14 Adolescent Report embodies these goals. Created by the <u>San Mateo County Youth Commission</u>, with support from partners including <u>StarVista</u>¹ and the San Mateo County Health System, the Adolescent Report provides a glimpse into the health status of our adolescent population and includes policy recommendations to improve it. The Report is the final product of an extensive youth development project where youth create research questions, develop and disseminate a survey, collect and analyze the data, then identify specific policy recommendations to address the findings. The purpose of the Report is to share evidence on where health needs are highest in order to inform the priorities of the Youth Commission, as well as guide the work of policymakers, providers, grant makers, young people and their allies across the county as they work to improve the lives of youth.

This is the third report of its kind for the County. The first was published in 2001 and the second in 2007, which resulted in several major accomplishments, one of which was the creation of the San Mateo County Children and Youth Bill of Rights in 2009. The Bill of Rights was written by the Peninsula Partnership Leadership Council (PPLC)² in collaboration with the Youth Commission. After learning about the challenges that youth experience from the 2007 Adolescent Report, PPLC which included two Youth Commissioners as equal members, elected to work with the Youth Commission to support a declaration that all young people in San Mateo County hold specific rights by virtue of their age and stage of mental and social development. It was the first of its kind in California and the second in the nation. The Children and Youth Bill of Rights became a model for the State of California, who in 2012 passed their own version of the Youth Bill of Rights.

The Youth Commission aims to achieve a similar level of success with the publication of the 2014-15 Adolescent Report. The Report is organized to include a glossary of key terms, background information relevant for understanding the context of the report, key findings, policy recommendations, and appendices, which include the methodology, and additional findings in the form of graphs and charts. These charts are organized by the six areas covered in the youth-led survey: 1) Demographics, 2) Overall Health, 3)

¹ StarVista is a non-profit organization that serves children, young people, adults, and families across San Mateo County. StarVista is contracted with the San Mateo County Health System to provide program coordination for the San Mateo County Youth Commission.

² Peninsula Partnership Leadership Council is a group of influential leaders from multiple disciplines whose mission is to formulate policies that meet the needs of children, youth and families in San Mateo County.

Alcohol, Tobacco, and Other Drugs, 4) Sex and Sexuality, 5) Discrimination, and 6) Violence. The graphs and charts include findings from the survey, accompanied by relevant findings from other data sources relevant to the topic.

The San Mateo County Youth Commission urges youth and adults across the county to advance the recommendations in this Report in any capacity they are able. Promoting the health and wellbeing of youth in San Mateo County must be front and center across all our work if we are to create a successful future for generations to come.

Glossary of Terms

- Adolescent: A person between 12-17 years of age.
- Child: A person between 2-11 years of age.
- **Connectedness**: According to the Centers for Disease Control, *connectedness* is the belief held by youth that adults and peers in and out of school care about their learning as well as about them as individuals; this is seen as an important protective factor.
- **Non-traditional Schools**: Include alternative, continuation, juvenile hall, court and community schools which are designed to accommodate educational, behavioral, and/or medical needs of children and adolescents that cannot be adequately addressed in a traditional school environment. Since grade designations are not clear in many non-traditional schools, all students are surveyed regardless of age or grade (i.e., 7, 8, 9, 10, 11, and 12).
- Youth Development: Positive youth development is an intentional, pro-social approach that engages youth within their communities, schools, organizations, peer groups, and families in a manner that is productive and constructive; recognizes, utilizes, and enhances youths' strengths; and promotes positive outcomes for young people by providing opportunities, fostering positive relationships, and furnishing the support needed to build on their leadership strengths.

BACKGROUND

The San Mateo County Youth Commission

The San Mateo County Youth Commission represents the voice of youth throughout the County and works to ensure that policies and programs meet their needs. The Youth Commission is an advisory commission to the San Mateo County Board of Supervisors, established in 1993, to address youth needs in the county and provide youth voice in local government. The Commission consists of 25 members, between the ages of 13 and 21, who reside or attend school in San Mateo County. Funded by the San Mateo County Health System, reporting to the Board of Supervisors, and housed under the non-profit organization StarVista, the Commission holds an important leadership role in elevating the voices of youth across the county.

The Youth Commission has expanded their efforts over the past five years. The Commission has worked rigorously to have a diverse set of youth that truly represent San Mateo County as a whole (25 youth from 16 different schools that represent all five high school districts). The Commission has also implemented several changes recently to improve its operation and engagement. The Commission switched from a two-track model –where the Commission was divided into a policy track or a Board/Commission track – to a committee model allowing a variety of focus areas. The five committees focus on the following issues: 1) environmental protection, 2) adolescent needs, 3) immigrant youth, 4) legislation, and 5) teen stress and happiness (also known as mental health). The adolescent needs committee focus their attention on the development and execution of the 2014-15 Adolescent Report.

The Commission has also increased its participation as youth liaisons to the County Boards and Commissions. There are currently 23 youth liaisons for 12 different Boards, Commissions, and Initiatives. This allows youth to have a direct voice on 12 different areas of county-focused activity. They also receive support and mentorship from with 24 adult allies who receive youth development trainings hosted by the staff of the Youth Commission. This, along with other trainings and support, allow for a great environment for youth development and leadership.

Development of the 2014-15 Adolescent Report

In order to identify solutions to advance health, we must first accurately identify the problems. The lack of available data to inform the decisions regarding youth policy led the San Mateo County Youth Commission to create the Adolescent Needs Survey as a tool to assess the health status of youth across the county and develop a set of policy priority based on the evidence to direct their agenda and inform the decisions made by policymakers —ensuring that resources are directed where they are most needed.

The Youth Commissioners were involved in all aspects of creating the 2014-15 Adolescent Report. They worked with staff from the San Mateo County Health System, StarVista, and parents to identify a set of hypotheses around adolescent health, which were then translated into 141 research questions listed in the Needs Assessment Survey. Superintendent Anne Campbell from the San Mateo County Office of Education encouraged school districts to participate in the survey, which resulted in completion of an impressive 3,284 surveys from 84 school districts. Once the results of the survey were received, members of the Youth Commission worked alongside epidemiologists from the San Mateo County Health System to analyze the results. Additional data was pulled from other relevant data sources, including the California Healthy Kids Survey, California Department of Education data, and Census data, to supplement the survey results and provide a well-rounded analysis of the state of adolescent health in the county.

The Youth Commission then utilized the findings to identify a set of policy recommendations to prioritize an agenda for promoting youth health. The next phase will be for the Youth Commissioners to work with local schools, agencies and elected officials, to advocate for implementation of these policies.

Other Youth Development Activities in San Mateo County

San Mateo County is making strides in implementing youth development practices. Youth voices are reflected within local government through the Youth Commission, as well as other efforts such as the city Youth Advisory Councils. The Youth Advisory Councils advise city Parks and Recreation Departments on issues and concerns pertaining to youth. They do this through projects, events, conferences and training opportunities. The following cities in San Mateo County have Youth Advisory Councils: Brisbane, Burlingame, East Palo Alto, Foster City, Millbrae, Pacifica, Redwood City, San Carlos and San Mateo.

Another county funded program that is allowing youth to come together to voice their concerns on a range of issues is Friday Night Live. Friday Night Live is a program of the Youth Leadership Institute. They have created a network of 18+ youth led groups that tackle issues from social justice to adolescent health and wellness to alcohol, tobacco and other drugs. Youth participating in Friday Night Live have the opportunity to work with peers and adults.

School-based programs have stayed consistently strong in their youth development practices by offering unique programs for teens. One example of this is Sequoia High Schools Teen Resource Center. They do this through their Youth Advisory Board, Peer Mediation and Healthy Sequoia. The Youth Advisory Board aims to give the students at Sequoia High School a place to foster their leadership skills. Each year they develop, distribute and collect a Needs Assessment survey to identify issues that are most important to their school community. Findings are then used to drive their project for the year. The Peer Mediation Program trains students in conflict mediation skills. The program provides students with the option of peer mediation for conflicts throughout the year. Healthy Sequoia was developed to provide students with educational and clinical resources for issues related to physical, nutritional and mental health. Another example of a school-based effort is Teen Talk Sexuality Education. While Teen Talk is a non-profit, they focus their efforts on teen pregnancy prevention programs by offering their resources for comprehensive sexuality education programs to the schools in San Mateo County.

Community Efforts have increased their utilization of youth development practices by offering more opportunities for teens to get involved in different ways. Our community-based programs have increased the variety in programs that they offer to our teens. There has been a huge effort in San Mateo County to increase the mentorship programs for youth. Some examples of that include, but are not limited to, Friends for Youth, Big Brothers-Big Sisters of the Bay Area, Fresh Lifelines for Youth, and GIRLS. These organizations create opportunities for youth to create meaningful relationships with adults other than their parents. There has also been an improvement in creating a space for youth leadership. Some organizations that offer programs for youth leadership include, but are not limited to, Girls to Women, Youth Leadership Institute (YLI), Youth United for Community Action (YUCA), YMCA's Youth in Government, Girl Scouts, Boy Scouts, and Boys and Girls Clubs. These programs allow teens to build their leadership assets through programs that they care about.

See Table 1 for select examples of youth development in San Mateo County between 2009 and 2014.

TABLE 1. Select Examples of Youth Development in San Mateo County in 2009-2014

Initiatives/Strategies	Activities
Expansion of Youth Commission	25 youth from 16 different high schools
	Switch to committee focused projects led by youth
	 Increase of youth-adult partnerships (23 youth liaisons for 12 County
	Boards/Commission/Initiatives)
	Mentorship trainings offered year round
School Based Programs	High School Programs
	 Sequoia Teen Resource Center (Youth Advisory Board, peer counselors)
	 Teen Talk Sexuality Education (Middle school and High school curriculums)
Community Efforts	Friends for Youth
	• GIRLS
	Girls to Women
	One EPA
	Youth United for Community Action (YUCA)
	YMCA- Youth in Government
	Girl Scouts/ Boy Scouts
	Boys and Girls Club
	Big Brothers-Big Sisters of the Bay Area
	Fresh Lifelines for Youth
	Youth Leadership Institute
Connections to County Initiatives	Youth Commission
	YO! Mateo
	Friday Night Live Chapters
	Youth Advisory Councils
	Foster Youth Advisory Board
	 Youth Advisory Councils (run through the City Parks and Recreation Departments)
Additional Accomplishments	San Mateo County Youth Conference (2011-2014)
	Bill of Right for Children and Youth (2009)

KEY FINDINGS

Analysis of the youth-led survey and additional data sources show both positive and negative trends in adolescent health in San Mateo County. For example, while the rate of children in the county drinking one or more sugar sweetened beverages per day dropped, the rate for teens increased by 17%. And, while the juvenile arrest rate is down, youth of color are disproportionally represented in the juvenile justice system.

The data is also clear on the importance of connectedness in a youth's life. A sense of connectedness, whether to school, family, friends or peers showed to support better health outcomes across the board. For example, students with higher levels of school connectedness had lower rates of truancy.

The data also reveals alarming issues facing adolescents and youth that must be addressed. Mental health challenges are staggering, with 70% of survey respondents reporting feelings of depression, nervousness or emotional stress. Healthy eating is a challenge for the majority of students, with only half of children eating the appropriate levels of fruits and vegetables per day, almost 70% of students in non-traditional schools not eating breakfast and too many of our youth being obese or overweight.

The key findings in Table 2 describe a small subset of the overall findings. They represent important findings in the areas the Youth Commission has prioritized for immediate action. Policy recommendations are prioritized using the same areas of focus.

TABLE 2: Key Findings

Topic	Key Findings	Reference Graph Page Number
Mental Health	 70% of respondents reported that school work, projects or finals was the primary cause of depression related feelings In the past month, nearly 70% of respondents reported being nervous, depressed or emotionally stressed. Students 	52 48, 49
	 attending non-traditional schools reported higher rates of depression-related feelings. 38% of female and 23% of male respondents reported having suicidal thoughts. 	57
Family/ Community Connectedness	Parent or adult belief in youth success is associated with lower self-harm/suicide.	153
	Students attending non-traditional schools reported lower rates of meaningful connections in their community	63
Youth Connectedness	80% of respondents who reported talking to a friend to relieve stress said they did not use drugs.	190
School Connectedness	Students who reported having higher levels of connectedness to school reported higher levels of feeling safe, while students reporting lower levels of connectedness to school reported higher levels of feeling unsafe.	129
Juvenile Justice	The juvenile arrest rate has declined from a high of 17.7 per 100,000 in 1998 to a low of 7.4 per 100,000 in 2011	224
	African Americans have the highest juvenile arrest rate of 48 per 100,000 in 2011 compared to 3.1 per 100,000 for their white counterparts.	225
	Hispanics make up 50% of juvenile felony arrests, 40% of those felony crimes were property offenses. Issues with racial profiling, discrimination, and lack of opportunity may influence these outcomes.	226, 227
Alcohol, Tobacco and Other Drugs	Students attending non-traditional schools reported higher rates of lifetime alcohol consumption, cigarette smoking,	72, 88, 97, 99

	month and an analysis of the state of the st	
	marijuana use and recreational use of prescription drugs.	402
	Only 55% of respondents reported that their schools provided	103
	effective drug and alcohol prevention services.	
Discrimination	Youth who have mental health problems or physical disabilities	179
	are more likely to have felt discriminated against than youth	
	who have no mental health problems or physical disabilities.	
	• 25% of male and 23% of female respondents who said they	120
	had experienced discrimination in the last month said that it	
	was because of their race or culture.	
Sex and Sexuality	Teen birth rates in San Mateo County have declined	109
	consistently over the past 15 years, from a high of 719 in 1995	
	to a low of 312 in 2011.	
	 74% of respondents reported that they feel they are making 	174
	informed decisions about sex and their sexuality	
Obesity and Nutrition	50% of children between ages 2-11 reported eating five or	210
•	more serving of fruits or vegetables per day.	
	• 35% of 7 th , 9 th and 11 th graders in San Mateo County are obese	229
	or overweight.	
	69% of non-traditional students reported not having eaten	236
	breakfast in the past day.	
	Daily consumption of sugar-sweetened beverages by children	225
	ages 2-11 years old dropped to 15%, while consumption by	
	adolescents age 12-17 increased to 56% drinking one or more	
	sugar-sweetened beverages per day.	
Educational Attainment	In 2011, 694 students in San Mateo County dropped out of	217
	school.	
	 In 2012, 52% of high school graduates reported taking college 	220
	preparatory courses in high school.	
	 In 2012, 4,760 students were suspended from school. 	238
	• In 2012, 20,265 students were truant from school. 63% of	243, 245
	students attending non-traditional schools reported being	,
	truant during the school year.	
	 Students with higher levels of school connectedness had lower 	246
	rates of truancy.	
	Tates of truditcy.	

Immigrant Population	 In 2011, 57% of children in the county lived with one or more foreign-born parent. 	258
Violence	28% of respondents reported seeing violence at their schools and 30% reported seeing violence in their community.	124
	16% of respondents from non-traditional schools reported carrying a knife or other weapon to schools four or more times.	125
	63% of respondents reported knowing non-violent ways to deal with conflict.	141
	19% of females reported being bullied or harassed via the internet compared to 11% of males.	130
	11% of respondents who reported being bullied or harassed via the internet missed one or more day of school in the past month, compared to the 6% who also reported being bullied but did not miss any school.	161
Neighborhood Safety	Only 53% of all respondents reported feeling safe in their community.	128
Dating Violence	11% of students attending non-traditional schools experience dating violence in the past year compared to.	111

YOUTH COMMISSION POLICY PRIORITIES

After careful review of the research findings, the Youth Commission identified a list of policies that could improve outcomes for youth in San Mateo County – see Youth Commission Policy Recommendations Section. The Commissioners then prioritized a subset of those recommendations, which they identified as most impactful in addressing the key findings. These priorities also represent what the Commission will focus much of their attention on over the coming years. See Table 3 below for priorities.

TABLE 3: Policy Priorities to Improve Youth Health and Wellbeing

Identified Need	Recommendation	Assets Building
Need for Social and Emotional Learning Support	Providing teachers, administrators with training on Social and Emotional Learning so that they can better support their students Social Emotional Learning development through role modeling.	 Caring school climate School engagement Bonding to school Interpersonal competence Personal power Self esteem
Quality After School Programs	Promoting efforts in schools and communities to provide youth with positive experiences and opportunities, such as quality after-school programs, to develop supportive connections with adults (outside of their parents and teachers) and peers and develop skills that will help them make healthy choices and become caring, responsible adults.	 Other adult relationships Adult role models Positive peer influence Youth programs Creative activities Resistance skills Personal power
Youth Development Programs	Encouraging youth engagement and youth development programs, such as youth advisory councils and forums, that allow youth to become active decision-makers in their own lives, take on leadership roles, and contribute to the community.	 Other adult relationships Community values youth Youth as resources Planning and decision making Personal power Positive view of personal future
Alternative Prevention Programs for Alcohol Tobacco and Other Drugs	Instituting peer support programs to mitigate consequences of substance use, such as SafeRides.	Caring neighborhoodCaring school climate

Economic and Racial Barriers	Ensure that all students who show signs of substance abuse receive adequate referrals to intervention services. Erasing barriers and expand opportunities by	 Positive peer influence Responsibility Restraint Planning and Decision making Community values youth
	dismantling racial barrier to economic inclusion and civic participation, building pipelines to high-quality jobs, and implementing place-based strategies and investments to create communities of opportunity.	 High expectations Achievement motivation Equality and Social Justice Responsibility Positive view of personal future
Sex Education and access to services	Requiring comprehensive health education in schools, including specific skills-based information about reproductive health, including STD-prevention, consent laws, confidentiality laws and contraception.	 Positive family communication Responsibility Planning and decision making Resistance skills Personal power
Comprehensives Bullying policy and mitigation programs	Instituting discipline policies that respond effectively to aggressors, victims, and bystanders, while avoiding unintended consequences of "zero tolerance" policies.	 Caring school climate Safety School boundaries Positive peer influence Integrity Responsibility

YOUTH COMMISSION ADOLESCENT REPORT POLICY RECOMMENDATIONS

As mentioned in the section above, the Youth Commission developed a long set of recommendations to address the findings of this report and improve health outcomes for San Mateo County youth. While the priorities described above are key to supporting positive outcomes for youth, the list provided in this section demonstrates the multitude of options elected officials, practitioners, leaders, advocates and individuals can take on to support our youth.

Overall Health

- Providing teachers, administrators with training on Social and Emotional Learning so that they can better support their students SEL development through role modeling.
- Supporting parents so they can effectively care, support and encourage their children.
- Increasing access to high quality, integrated programs for children from birth through age 8, beginning with investments that target low-income children.

Mental Health

- Ensuring adequate funding and training for a range of school professionals to recognize the signs of depression, self-injury, and suicidal ideation, and to connect students with appropriate services, including specific training for meeting the needs of gay, lesbian, bisexual, and transgender youth.
- Structuring public health systems and insurance reimbursement policies to require depression screening and encourage regular administration of psychosocial exams to youth.
- Promoting efforts in schools and communities to provide youth with positive experiences and opportunities, such as quality
 after-school programs, to develop supportive connections with adults (outside of their parents and teachers) and peers and
 develop skills that will help them make healthy choices and become caring, responsible adults.
- Ensuring adequate access to and quality of mental health services for children and youth.

Family & Community Connectedness

- Strengthening the social and financial safety net for single custodial parents through policies that support balancing work and caring for children, provide adequate cash assistance for low-income families in need, and effectively enforce child support obligations.
- Ensuring that kinship caregivers (such as grandparents) have the full range of support needed to provide for children in their care, enroll them in school, ensure that they receive regular medical care, and avoid placement in non-relative foster care.
- Eliminating legislation that discriminates against gay and lesbian populations, as anti-gay legislation and attitudes can
 negatively affect the mental health of gay and lesbian parents, which can affect the emotional and behavioral health of their
 children.
- Developing and implementing responsible fatherhood programs that are comprehensive and address child support collection issues, paternal employment, relationship skills, parenting skills, and domestic violence concerns.

Youth Connectedness

- Ensuring that struggling students graduate from high school by promoting access to school counselors and youth mentors, and supporting drop-out prevention programs and flexible learning environments that allow students to attain credits through non-traditional paths.
- Strengthening GED programs to ensure that youth successfully transition to higher education or employment.
- Supporting high school, community college, and community-based Career Pathways, Linked Learning, and Career Technical Education (CTE) programs that link youth to internships, apprenticeships, life skills classes, and job placement.
- Expanding employment opportunities for youth by implementing mechanisms that provide incentives to employers to hire and train disconnected youth, such as the Disconnected Youth Opportunity Tax Credit, while allowing them to receive high school or GED credits.
- Supporting cross-sector community collaborations that implement integrated approaches to at-risk, disconnected and foster
 youth. For example, the California Connected by 25 Initiative developed multi-agency, community partnerships to improve
 education, housing, and employment outcomes for young adults exiting foster care.
- Encouraging youth engagement and youth development programs, such as youth advisory councils and forums, that allow youth to become active decision-makers in their own lives, take on leadership roles, and contribute to the community.

School Connectedness

- Creating learning environments that allow for better connections between students and caring adults, which can include creating smaller learning environments.
- Developing fair and consistent school discipline policies that are equitably enforced.
- Creating opportunities for parents to participate actively and meaningfully in their children's academics and their school, and creating trusting relationships between parents and school staff.
- Offering professional development and appropriate decision-making authority to teachers and school administrators so that they can be more supportive of students' multi-faceted needs. For example, having trainings on diversity or gender bias.

Juvenile Justice

- Improving systems of care to address the mental health needs of juvenile offenders, from initial screening or assessment at first contact with the juvenile justice system to provision of appropriate treatment to incarcerated youth.
- Addressing recidivism by reforming policies that increase the likelihood to re-offend, and providing services that decrease it, such as interpersonal skills training, behavioral programs, counseling, and community-based, family-style group homes tailored to the needs of the offenders. Creating community capacities to provide a safety net and structure for youth at risk of delinquency also can be effective

Alcohol, Tobacco and Other Drugs

- Instituting peer support programs to mitigate consequences of substance use, such as SafeRides.
- Ensuring that all students who show signs of substance abuse receive adequate referrals to intervention services
- Prioritizing early identification of risk factors correlated with substance use, especially among middle school-age youth, many of which can be documented by schools
- Promoting programs that do store front "makeovers" that would eliminate alcohol and cigarette advertisements at the eye level of children and adolescents.

Discrimination

- Erasing barriers and expand opportunities by dismantling racial barrier to economic inclusion and civic participation, building pipelines to high-quality jobs, and implementing place-based strategies and investments to create communities of opportunity.
- Eliminating discriminatory public policies that can contribute to mental health issues among gay, lesbian, bisexual, and transgender youth.
- Ensuring school anti-discrimination policies provide adequate protections for LGBTQ students.

Sex and Sexuality

- Condoms and other forms of contraception should be made available to adolescent students in schools throughout San Mateo County.
- Providing parent-education opportunities to ensure parents are equipped to talk with their children about sex and sexuality.
- Requiring comprehensive health education in schools, including specific skills-based information about reproductive health, including STD-prevention, consent laws, confidentiality laws and contraception.
- Adapting public health and reimbursement policies to encourage broader screening of youth for chlamydia and other sexually transmitted diseases.
- Supporting school-based health centers to ensure accessible preventive and ongoing services for teens.

Obesity & Nutrition

- Opportunities to increase physical activity should be available to school-aged children to reduce the number of overweight & obese children.
- Increasing breakfast consumption at school and healthy nutritional intake at breakfast through implementing programs such
 as universal school breakfast (in which all students receive free breakfast in school, regardless of income); mandating
 participation in the federal school breakfast program by more of the schools with the most low-income children; providing
 in-classroom breakfast; and increasing parent awareness of the School Breakfast Program.

- Increasing awareness among all school stakeholders including parents, teachers, students, and administrators about the links between eating breakfast and healthy body weight, cognitive function, and school finances.
- Examining the food supply and its relation to empty-calorie foods disproportionately consumed by adolescents, as there is an overlap between major sources of energy and empty calories.
- Supporting programs that introduce whole foods and healthy recipes, such as school gardens and trainings for child care providers on preventive health and nutrition.
- Addressing the lack of fresh and healthy foods in "food deserts," often low-income inner cities without supermarkets or other easy access to affordable, nutritious whole foods.

Educational Attainment

- Ensuring access to college preparatory courses for all students; some school districts are aligning their graduation requirements with the courses required for UC and CSU admission.
- Requiring that all middle and high schools educate students and their families about college requirements and options for paying for college by ensuring an effective ratio of qualified counselors to students

Immigrant Population

- Setting school and district policies to incorporate formal and informal strategies to promote family and community engagement.
- Ensuring that teacher candidates understand second language and literacy acquisition and how they inform effective instruction.
- Improving access to publicly funded social services, including targeted outreach to non-English speakers for state child care subsidies; conducting public education on language access rights for medical patients and their families; and enforcing existing language access laws in health care settings.
- Providing the funding and outreach to ensure that all immigrant children have health insurance.
- Addressing the needs of English language learners in public schools.
- Ensuring that federal immigration policy and the policies of immigration courts and county child welfare agencies protect the interests of lawfully present children, citizen children of immigrant parents and undocumented children.

Violence

- Providing alternatives to suspension.
- Promoting Safe and Supportive Schools- ensure that teachers are trained on strategies for cultivating meaningful
 relationships with students while creating a positive climate in the classroom.
- Reducing access to firearms by educating parents who own guns about the CAP laws and requiring them to buy the proper locks for their guns and ammunition.

Neighborhood Safety

- Designing neighborhoods and controlling signs of neighborhood disorder and deterioration -- such as graffiti and decaying buildings -- in a way that contributes to a perception of safety.
- Providing children and youth with safe places to go after school, and focusing on strategies to engage older youth in positive community activities and programs that are designed to increase retention in out-of-school-time programs
- Ensuring that children have safe bike and walking routes to school.

Dating Violence

- Supporting evidence-based school programs to change knowledge, attitudes, and behaviors in order to prevent teen dating violence; these should include culturally relevant curricula that focus on legal rights of victims and responsibilities of perpetrators as well as support groups for both the victims and perpetrators.
- Improving the development and implementation of age-appropriate screening tools used by child welfare agencies, health care providers, schools, and others to detect domestic and dating violence
- Promoting and supporting state- and county-level interagency and cross-system collaboration to ensure that there are
 adequate and appropriate services for teens exposed to such violence, as well as for younger children exposed to domestic
 violence; community responses should be comprehensive and coordinated, including child welfare services, law enforcement,
 domestic violence service providers, courts, schools and teen-serving organizations.

Gang Involvement

- Strengthening family relationships and stability, e.g. parental supervision, support, and financial security.
- Promoting evidence-based school discipline policies and ensuring that schools offer safe, caring, and engaging environments with adequate academic support.
- Training teachers and parents to effectively manage disruptive behavior by youth, and teaching students conflict resolution and interpersonal skills.
- Increasing adult supervision during out-of-school time, and providing positive opportunities for youth recreation and community engagement, such as high quality after-school programs.
- Addressing elevated risk factors for joining a gang by strengthening families, focusing on lesser delinquent behavior, moderating school discipline policies and improving school climate, providing academic support, enhancing adult supervision, improving conflict resolution skills, and offering positive alternatives for youth recreation.

School Safety

- Supporting well-implemented, age-specific, whole-school approaches to bullying prevention that involve multiple systems and methods, the entire school community, and long-term involvement by staff.
- Instituting discipline policies that respond effectively to aggressors, victims, and bystanders, while avoiding unintended consequences of "zero tolerance" policies.
- Crafting anti-bullying policies that increase the likelihood that victims will report bullying, rather than those that may inadvertently create a school culture that deters it.
- Implementing a multi-pronged strategy of staff training, student support, information sharing, and public statements of policy to reduce harassment of gay, lesbian, and bisexual students.

CONCLUSION

This report is the final product of a youth development project lead by the Youth Commission and supported by StarVista and the San Mateo County Health System. The findings paint a picture of the challenges facing our youth today and the policy priorities provide a roadmap towards addressing the challenges.

This report represents an opportunity for San Mateo County to do more and do better when it comes to our youth. Youth are the future of this county and the country. There is no bigger asset that we have. We must all prioritize our efforts, in whatever capacity we can, to ensure the priorities identified by the youth and supported by the data, are put into action.

APPENDICES

The six appendices listed below provide supplemental information critical to understanding the depth of the research methods and findings. The Descriptive and Hypothesis Testing Graphs in particular demonstrate the incredibly robust nature of the adolescent needs assessment and provide a vast amount of information into the daily experiences of San Mateo County youth.

- 1. Hypotheses Test Results
- 2. Methodology
- 3. Descriptive Graphs
- 4. Hypothesis Testing Graphs
- 5. Supplemental Graphs
- 6. San Mateo County Youth Needs Assessment Survey Instrument

APPENDIX 1: HYPOTHESES TEST RESULTS

This section describes whether the research findings supported the hypotheses developed by the Youth Commissioners at the beginning of this research project. The youth, working in partnership with adult allies, began the research process by identifying a set of hypotheses for the state of youth in San Mateo County. As the chart below reveals, the data supported the youth hypotheses in the vast majority of cases. This indicates that the youth had a good sense of the issues facing themselves and their peers anecdotally, which the research supports.

Hypotheses Developed by the Youth Commission	Findings of the Survey Support or Do Not Support the Hypothesis
Overall Health	
Hypothesis 1: Youth who have been abused or raped are more likely to harm (or think about harming) themselves than those not abused.	Support
Hypothesis 2: Youth who have been a target of discrimination are more likely to harm themselves or think about harming themselves than those not experiencing discrimination.	Support
Hypothesis 3 : Youth who do not have emotional support or stress outlets are more likely to contemplate/attempt suicide/self-harm than those who have support/outlets.	Support
Hypothesis 4: Youth who have mental health problems are more likely to have thought about/attempted suicide than youth who do not.	Support
Hypothesis 5: Youth who know of suicide prevention programs are less likely to attempt suicide than those who do not know about these programs.	Does Not Support
Hypothesis 6: Youth in a bad mental state are less likely to have adequate stress relief than those not in a bad mental state.	Support
Hypothesis 7: Youth who do not meet academic goals are more likely to be depressed/have lower self-esteem.	Support
Hypothesis 8: Students with interest outside the core curriculum do not feel supported within school	Support
Hypothesis 9: Those who participate in extra-curricular activities are less likely to engage in suicidal or self-harm behaviors.	Does Not Support
Hypothesis 10: Youth in bad emotional states are more likely to trust peers than trust adults.	Does Not Support
Hypothesis 11: Youth who are bullied online are less likely to attend school regularly.	Support

Hypothesis 12: Youth in a highly competitive academic environment feel they are disadvantaged if they don't perform to a high standard.	Support
Hypothesis 13: Youth who feel pressured from academic performance are more likely to have abnormal amount of stress and engage in self-harm.	Support
Hypothesis 14: Youth who do not meet academic goals and/or other's expectations fall into depression/have lower self-esteem.	Support
Hypothesis 15: Youth who feel financial pressure are more likely to have contemplated quitting school to support themselves/family.	Support
Hypothesis 16: Young women do not feel supported to take on leadership roles.	Does Not Support
Sex and Sexuality	•
	1
Hypothesis 1: Youth who receive sex education are more likely to make informed decisions about sex than those without sex education.	Support
Hypothesis 2: Youth with knowledge / access to community resources are more likely to have safe sex than those without	Support
resources.	
Hypothesis 3: Females who have been or are currently on probation are more likely to have been pregnant.	Support
Hypothesis 4: Youth who have open communication with parents or some other adult about sex are more likely to engage in safe sex.	Support
Alcohol, Tobacco, and Other Drugs	
Hypothesis 1: Youth who have mental health problems are more likely to drink than those who do not have mental health problems.	Support
Hypothesis 2: Youth who do not receive drug education/substance abuse issues are more likely to abuse drugs than those who have received such information.	Support
Hypothesis 3: Youth in a bad mental state are more likely to use drugs than those not in a bad mental state.	Support
Hypothesis 4: Youth who are educated at home about alcohol and drugs are less likely to engage in risky behavior.	Does Not Support
Discrimination	•
Hypothesis 1: Youth who have mental health problems or disabilities are more likely to be a target of discrimination than youth who are not mentally ill or disabled.	Support
Hypothesis 2: Youth experience discrimination at school based on sexuality.	Support
<i>,</i>	

Hypothesis 4: Students comfortable expressing their sexual orientation at school are more likely to become active in school	Does Not Support
activities.	
Hypothesis 5: Youth who have experienced discrimination will have different views about how schools should promote	Does Not Support
tolerance than youth who have not.	
Hypothesis 6: Youth from ethnic backgrounds experience more discrimination by law enforcement.	Support
Hypothesis 7: Youth who have nontraditional gender performance feel discriminated against/isolated.	Support
Hypothesis 8: Youth who attended or plan to attend a community college feel inferior/insecure/more discriminated against.	Does Not Support
Violence	
Hypothesis 1: Youth who do not get emotional support are more likely to join gangs than those with emotional support.	Support
Hypothesis 2: Youth who do not have positive ways to reduce stress will engage in riskier behavior than those with positive stress relief.	Support
Hypothesis 3: Youth with access to a gun are more likely to carry a gun and be prone to violence than those without gun access.	Support
Hypothesis 4: Youth who binge drink or abuse drugs are more prone to violence than those who do not drink (or drink less).	Support
Hypothesis 5: Youth who do not have creative/physical outlets are more likely to join gangs.	Does Not Support
Hypothesis 6: Youth are more likely to be bullied online then physically.	Does Not Support
Hypothesis 7: Youth who have domestic violence in their household are more likely to be in an abusive relationship.	Support
Hypothesis 8: Youth who live in risky neighborhoods are more likely to engage in violent behavior.	Support
Relationships	
Hypothesis 1: Youth with divorced parents are more likely to practice unsafe sex.	Does Not Support
Hypothesis 2: Youth with a single parent are more likely to practice unsafe sex.	Support
Hypothesis 3: Youth in divorced households receive less emotional support from family members.	Support
Hypothesis 4: Youth who receive higher quality of support have higher academic performance.	Support
Hypothesis 5: Youth who don't have strong relationships with adults are more likely to have mental health issues.	Support

APPENDIX 2: METHODOLOGY

A number of methods were utilized to analyze the data collected from the Youth Commission-administered survey, as well as existing datasets. The methodology used for each dataset is described below.

Kidsdata.org Data

All data that has been included aside from the Needs Assessment Survey were found on Kidsdata.org. Kidsdata.org is a program of the Lucile Packard Foundation for Children's Health. It is a collection of data that lends itself to be an easy to use resource. The data sources range from local (California Healthy Kids Survey) to national (U.S. Census) data. The site allows for customization of data by topic, region, and demographic.

The majority of the data used for this report are derived from the California Health Kids Survey (CHKS). The sample characteristics and purpose is described below. For more information on the sample characteristics of other data sources, please refer to the footnotes of respective graphs.

For more information: http://www.kidsdata.org

For more information on their 35+ public sources: http://www.kidsdata.org/pages/majorsources

California Healthy Kids Survey

The California Healthy Kids Survey (CHKS) is a comprehensive and customizable youth self-report data collection system that provides essential and reliable health risk assessment and resilience information to schools, districts, and communities. Targeted at grades 5-12, the CHKS enables schools and communities to collect and analyze valuable data regarding local youth health risks, assets, and behaviors. It is designed to be part of a comprehensive data-driven decision making process to help guide the development of more effective health, prevention, and youth development programs. It is administered every two years to a majority of schools in the county.

The CHKS employs a set of questionnaire modules that collect data across a comprehensive range of risk behaviors. Current modules cover: alcohol and other drug use, tobacco use, violence and school safety, nutrition and physical health, sexual behavior and attitudes, and youth resilience. CHKS data included in this report are from the 2011-12 school year. For more information: http://chks.wested.org

U.S. Census Bureau, American Community Survey

"The U.S. Census counts every resident in the United States. It is mandated by Article I, Section 2 of the Constitution and takes place every 10 years. The data collected by the decennial census determine the number of seats each state has in the U.S. House of Representatives and is also used to distribute billions in federal funds to local communities.

"The 2010 Census represented the most massive participation movement ever witnessed in our country. Approximately 74 percent of the households returned their census forms by mail; the remaining households were counted by census workers walking neighborhoods throughout the United States. National and state population totals from the 2010 Census were released on December 21, 2010. Redistricting data, which include additional state, county and local counts, will be released starting in February 2011." For more information: http://www.census.gov/2010census

Youth Commission Survey

Questionnaire Development

The 2011-2012 Youth Commission cohort created the survey questions and hypotheses. This was a collaborative effort between the Youth Commissioners, the Health Department, and the community. Schools were then approached for the distribution and administration of the survey to students; some schools declined to take the survey. The survey was then distributed and collected in 2012-2013. Data entry was completed by a third party, the program coordinator from StarVista, and several staff from the Health Department.

<u>Sample</u>

To make the survey accessible to everyone, the survey was physically distributed and a web version of the survey was made available via Survey Monkey. 2016 physical surveys were returned and 1292 surveys were submitted through Survey Monkey. The final sample size was 3284. The 24 (0.73%) surveys may have been lost in the merging of the results of the physical and Survey Monkey surveys.

Analyses

School

Missing information for school occurred for a few reasons. Students had the option to leave the "school" question blank if they wanted further anonymity. Young adults who were not in school left this blank as well. Since the school variable was used to group respondents into geographical regions of the county, those missing a school response were missing a region response. Because of the low numbers of schools and respondents living in the Coastside region of the county, these responses were grouped with Mid-County.

The analysis plan was adopted from the previous Needs Assessment report, which had been developed by the previous Youth Commission and the Epidemiology Unit of the San Mateo County Health Department. Three main analyses were designed: an overview/description of the sample, hypothesis testing for each of the six sections of the questionnaire (overall health, alcohol/drug use, sexuality, violence, discrimination, and relationships), and a needs assessment based on perceptions of services provided by respondents' school and community.

One of the commissioners also calculated conditional probabilities to test the hypotheses. Though his analysis is not shown in this report, it served as a helpful tool to inform the accepting or rejecting of hypotheses, along with policy recommendations.

Hypotheses were tested using the chi-squared test as all of the variables were categorical or made categorical. Tests with associated p-values of <0.05 were indicated in the charts. A p-value is the probability of obtaining a result at least as extreme as the one that was obtained if the tested hypothesis is false. Generally, one rejects the null hypothesis (accepts the tested hypothesis) if the p-value is smaller than or equal to the significance level, which we set to 0.05. A p-value is less than 0.05 indicates that the results seen would be very unlikely if the tested hypothesis is false. The conclusion is then one of the following: 1. The hypothesis is correct, or 2. An event with a probability less than or equal to 5% has occurred. If the test statistic is outside the critical region (i.e., \geq 0.05), the only conclusion is that *there is not enough evidence to reject the hypothesis*. This is *not* the same as evidence in favor of the null hypothesis – lack of evidence against a hypothesis is not evidence for it.

Please note that when the word "hypothesis" is used in relation to significance tests, it has a different meaning than how the word is used in relation to the hypotheses mentioned in the report. In statistics, the hypothesis is referred to as the null hypothesis, to which there is also an alternate hypothesis. This is different from the way that the word "hypothesis" is used in the context of the report and should not be confused with the statistical interpretation of the word.

APPENDIX 3: DESCRIPTIVE GRAPHS

(Chapter 1)

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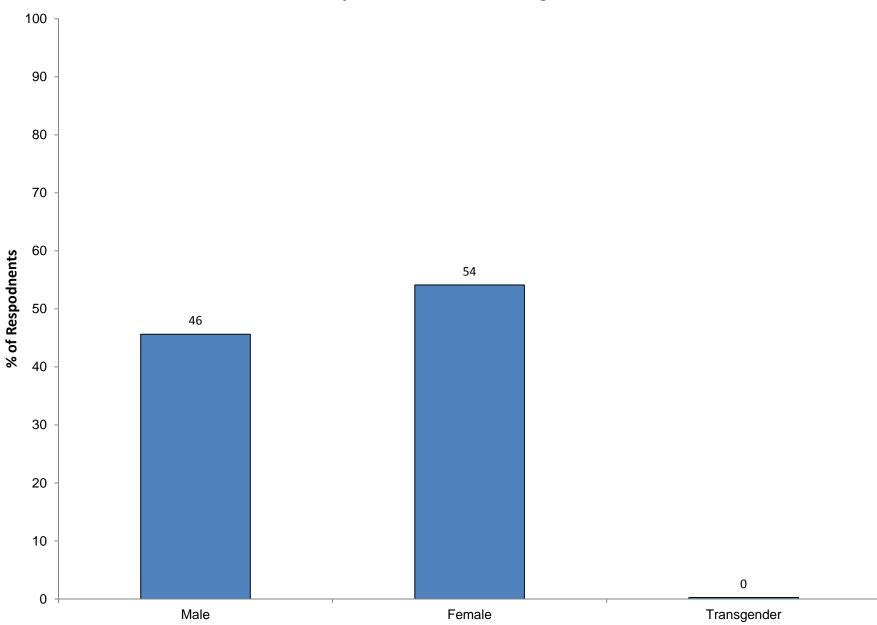
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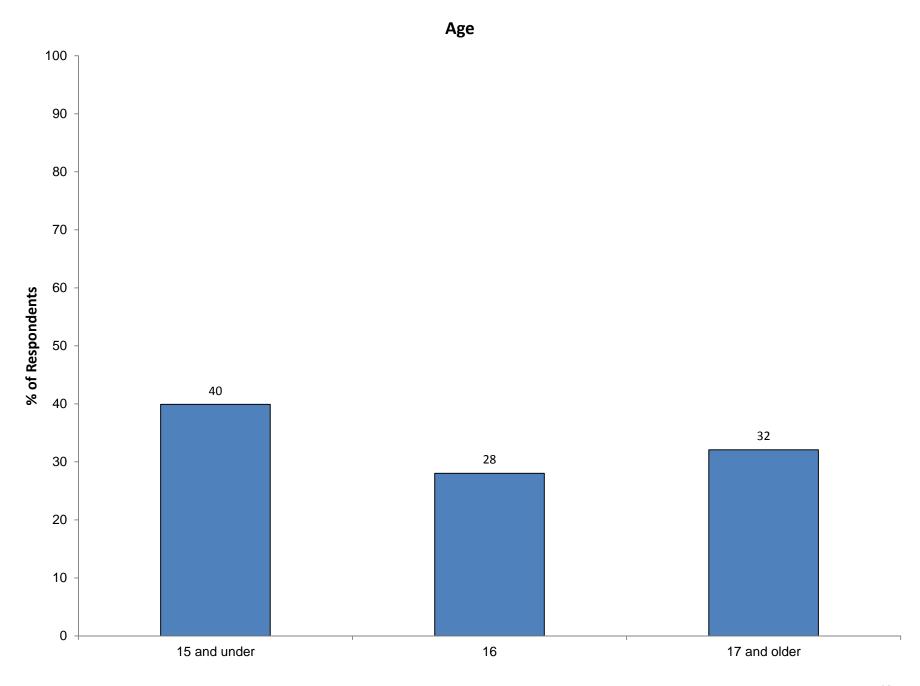
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Survey & San Mateo County Youth Demographics

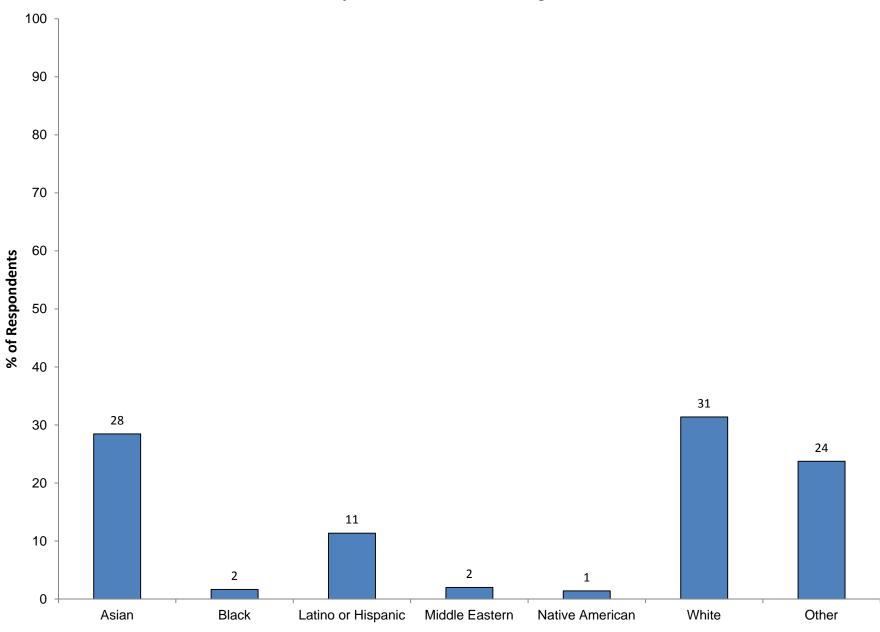
Questions 1 through 3, 134 through 141

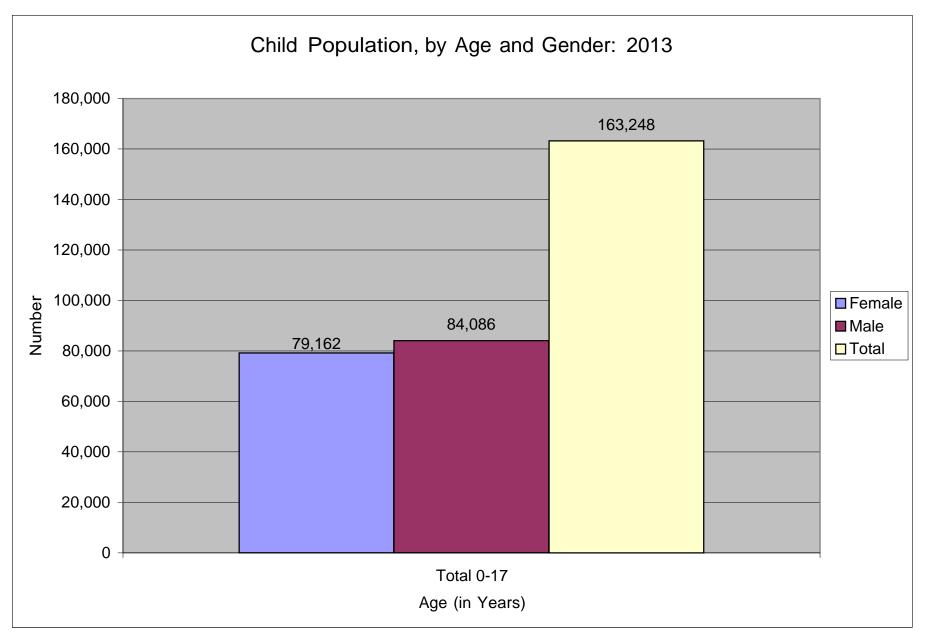
Q1: Are you male, female or transgender?



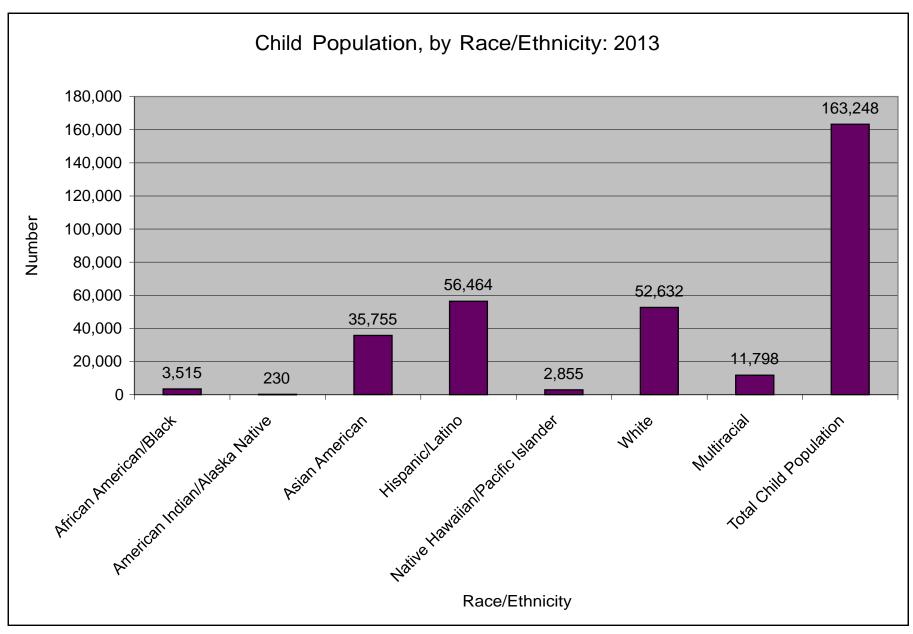


What is your race or cultural background?

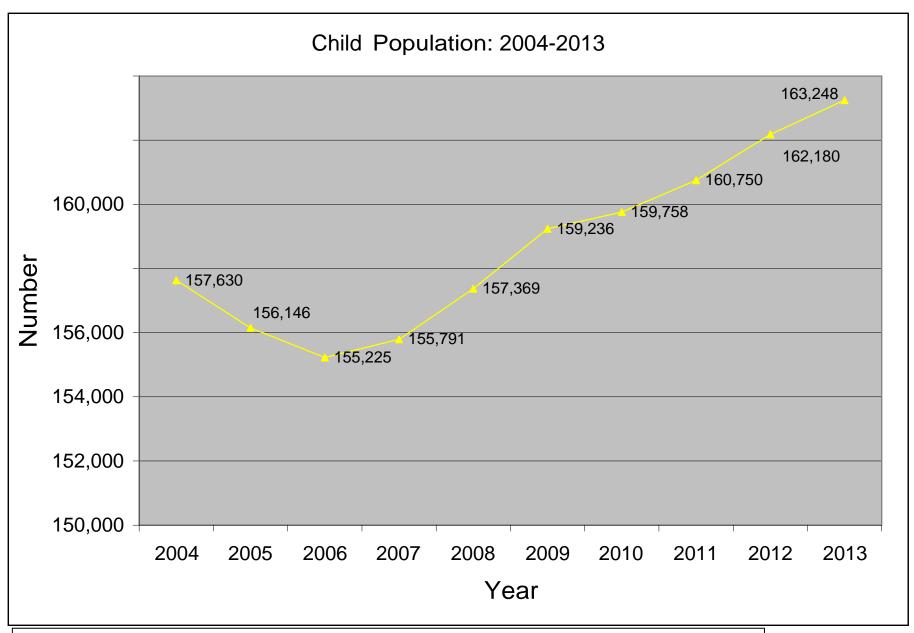




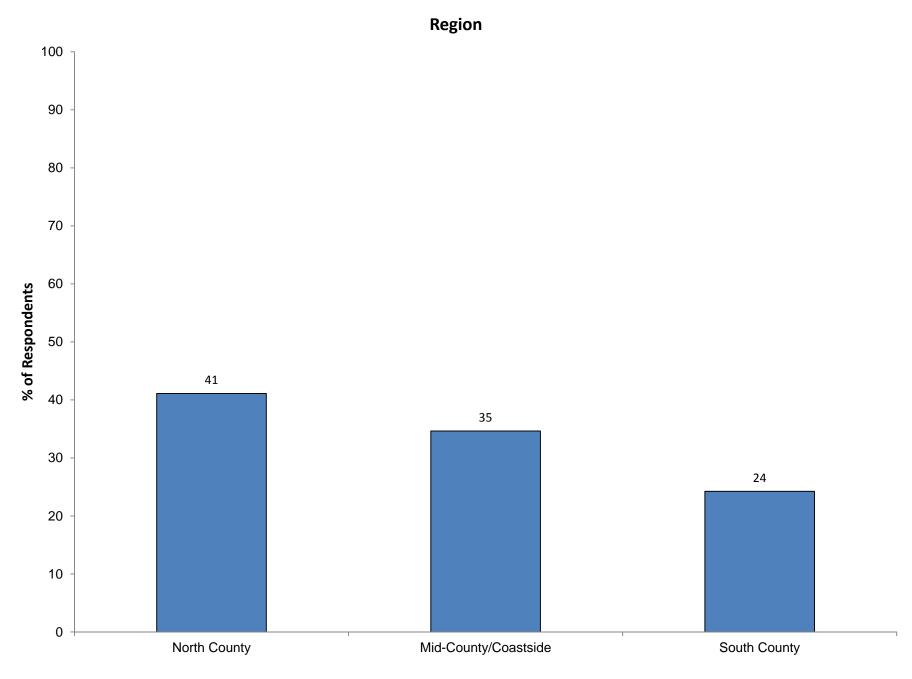
California Dept. of Finance, <u>Race/Ethnic Population with Age and Sex Detail</u>, <u>1990-1999</u>, <u>2000-2010</u>, <u>2010-2060</u> (May 2013); U.S. Census Bureau, <u>Current Population Estimates</u>, <u>Vintage 2012</u> (June 2013).



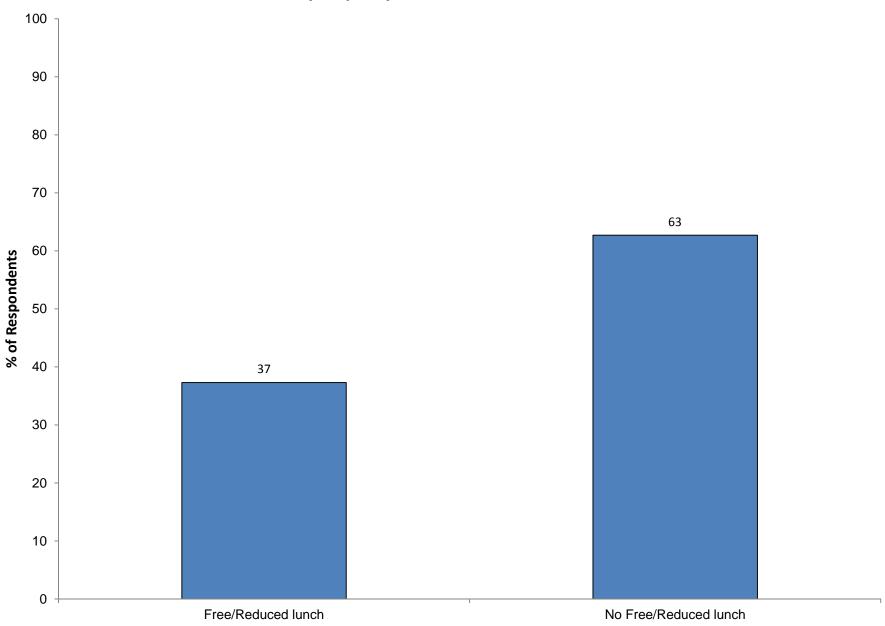
California Dept. of Finance, <u>Race/Ethnic Population with Age and Sex Detail, 2000-2010, 2010-2060</u> (May 2013); U.S. Census Bureau, <u>Current Population Estimates, Vintage 2012</u> (June 2013).

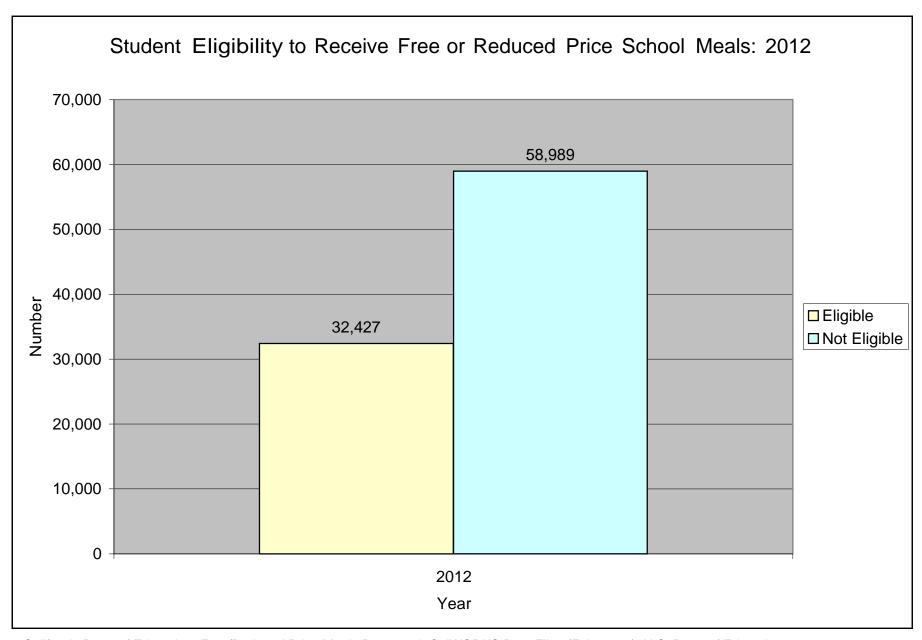


California Dept. of Finance, Race/Ethnic Population with Age and Sex Detail, 1990-1999, 2000-2010, 2010-2060 (May 2013); U.S. Census Bureau, Current Population Estimates, Vintage 2012

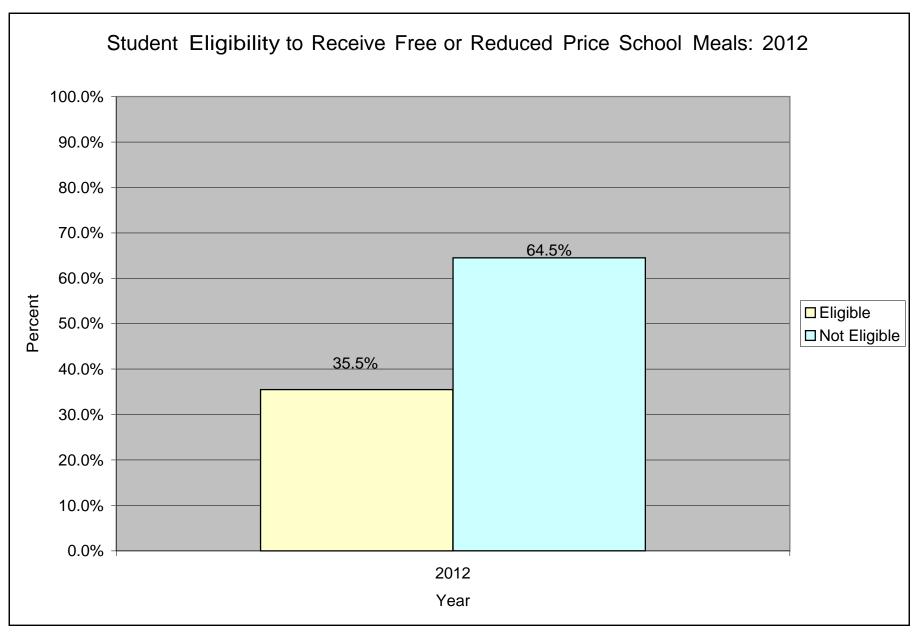


Do you qualify for free or reduced lunch?





<u>California Dept. of Education, Free/Reduced Price Meals Program & CalWORKS Data Files (Feb. 2014); U.S. Dept. of Education, NCES Digest of Education Statistics (Feb. 2014).</u>

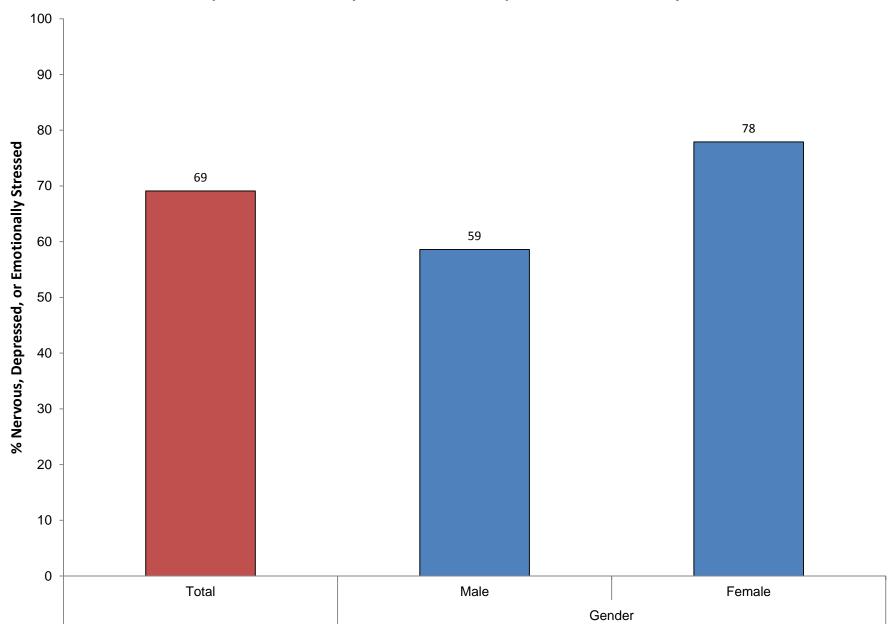


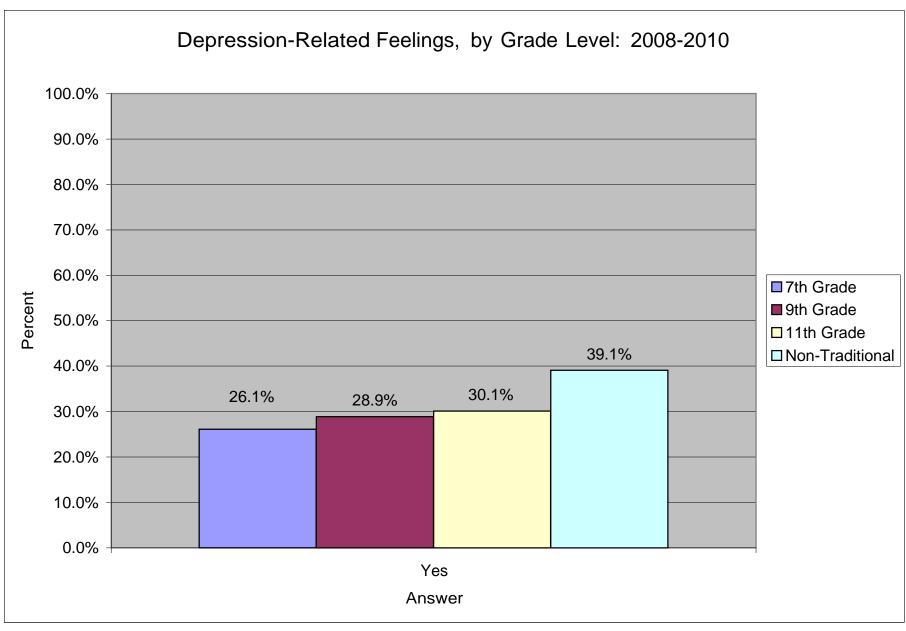
<u>California Dept. of Education, Free/Reduced Price Meals Program & CalWORKS Data Files (Feb. 2014); U.S. Dept. of Education, NCES Digest of Education Statistics (Feb. 2014).</u>

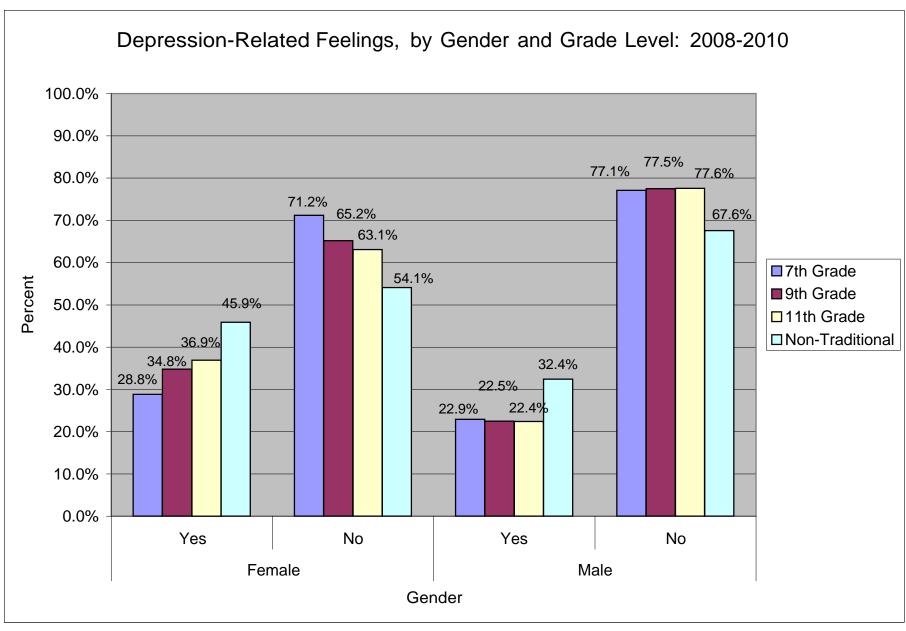
Overall Health

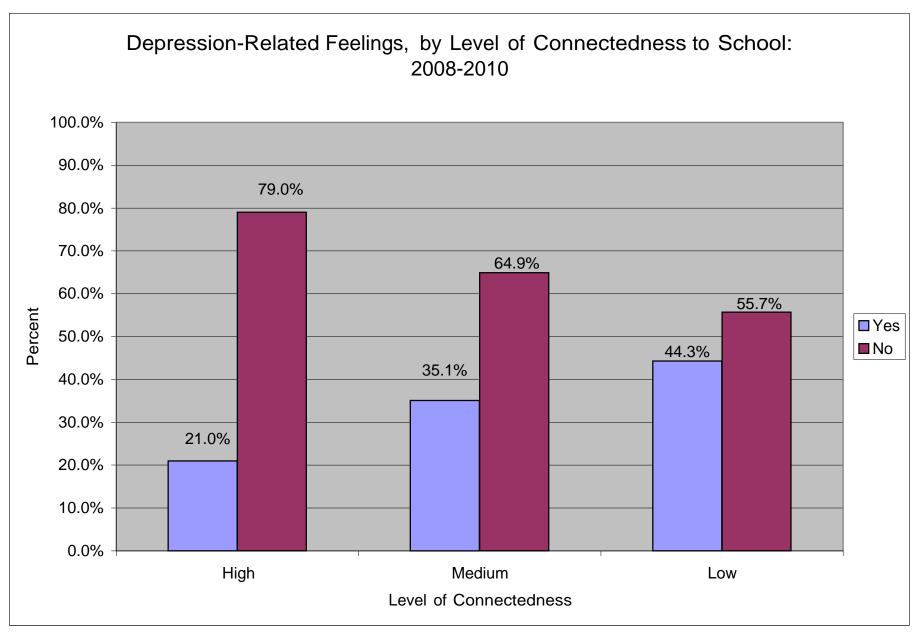
Questions 4 through 53

Q4: In the past month, have you felt nervous, depressed or emotionally stressed?

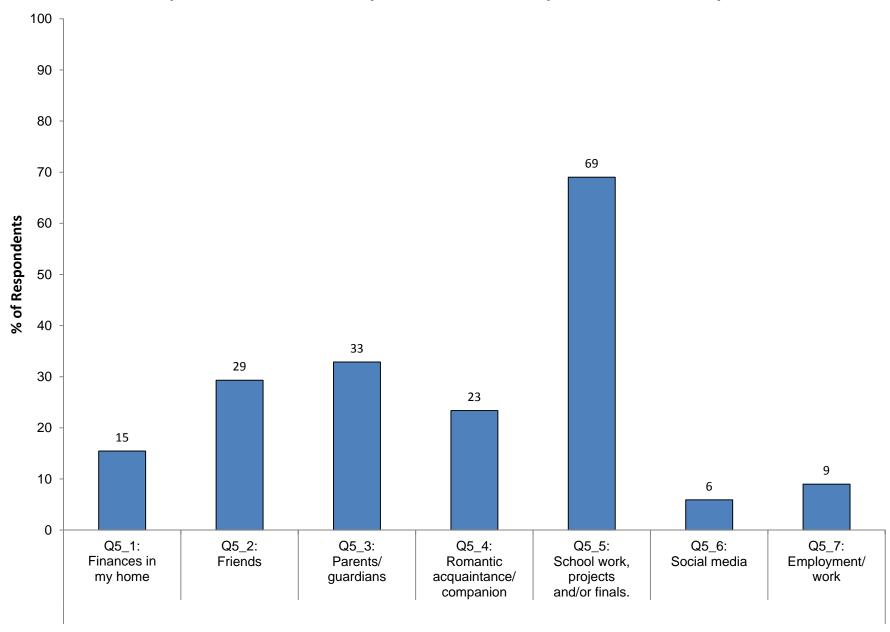




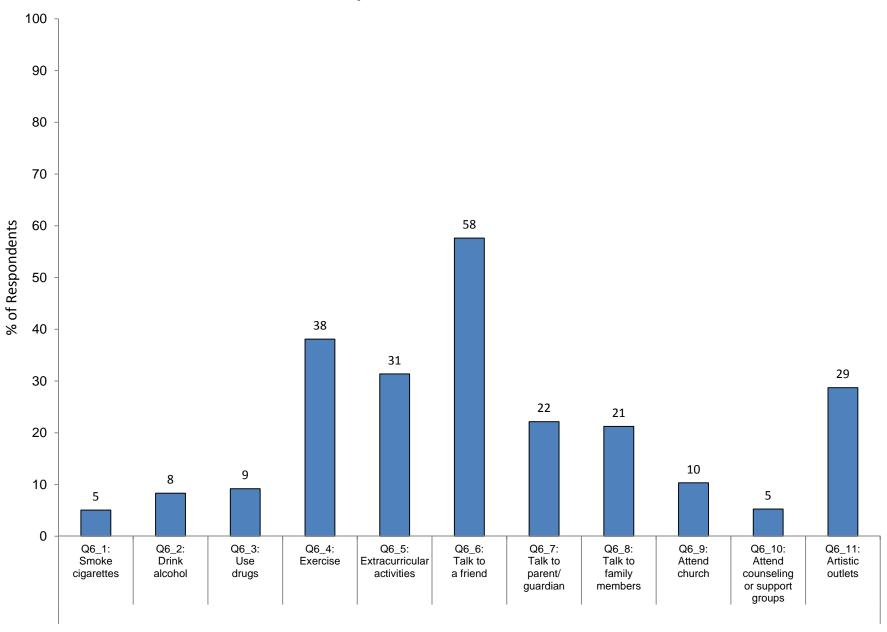




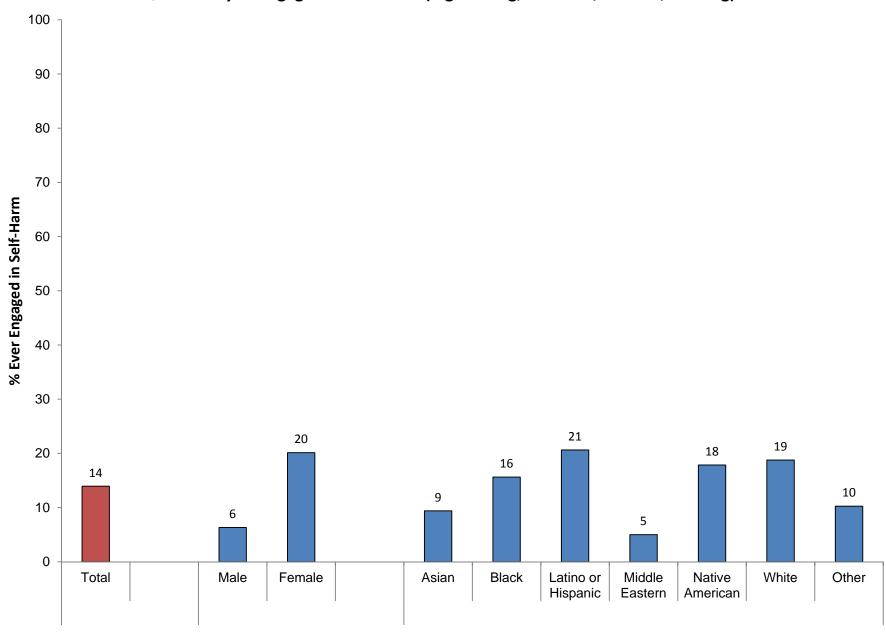
Q5: In the past month, what caused you to feel nervous, depressed or emotionally stressed?



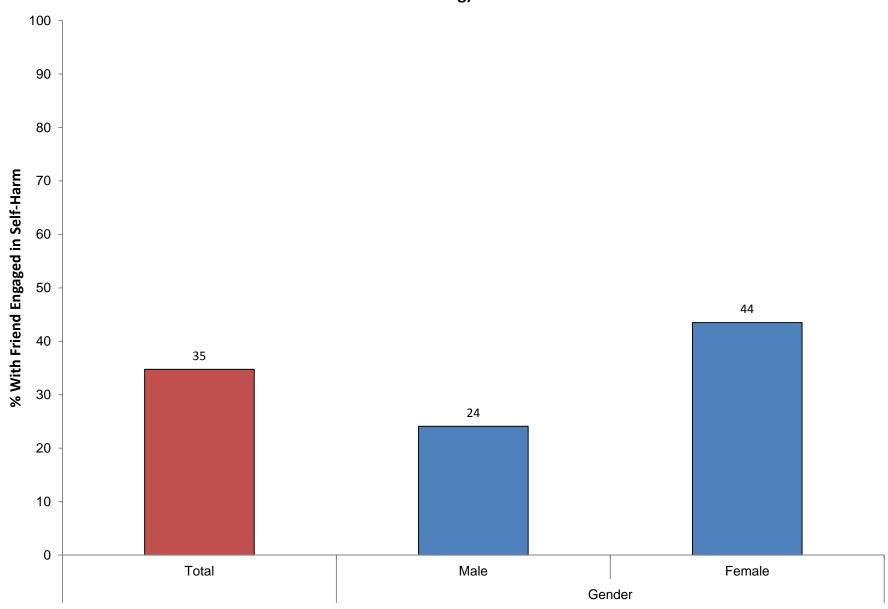
Q6: What do you do to relieve emotional stress?



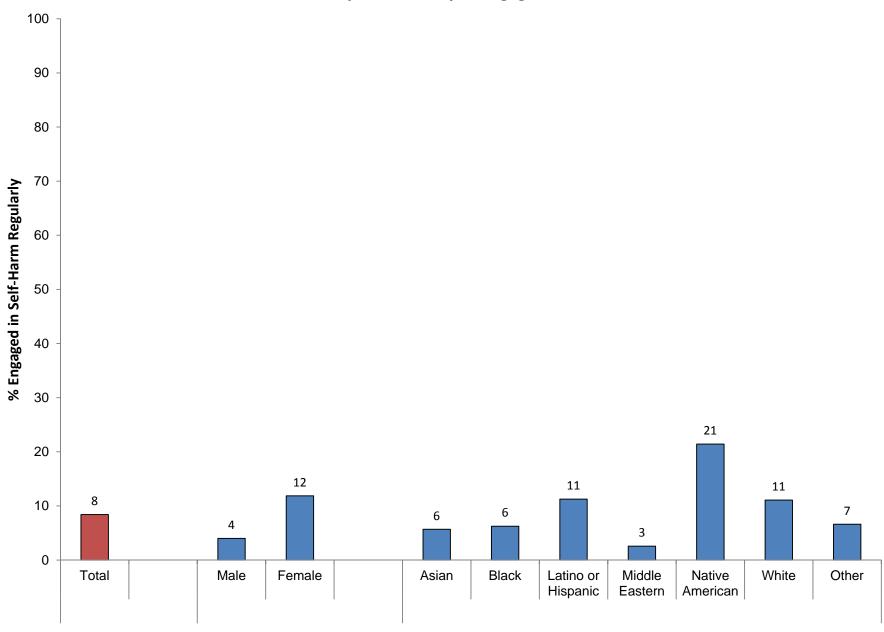
Q12: Have you engaged in self-harm (e.g. cutting, anorexia, bulimia, burning)?



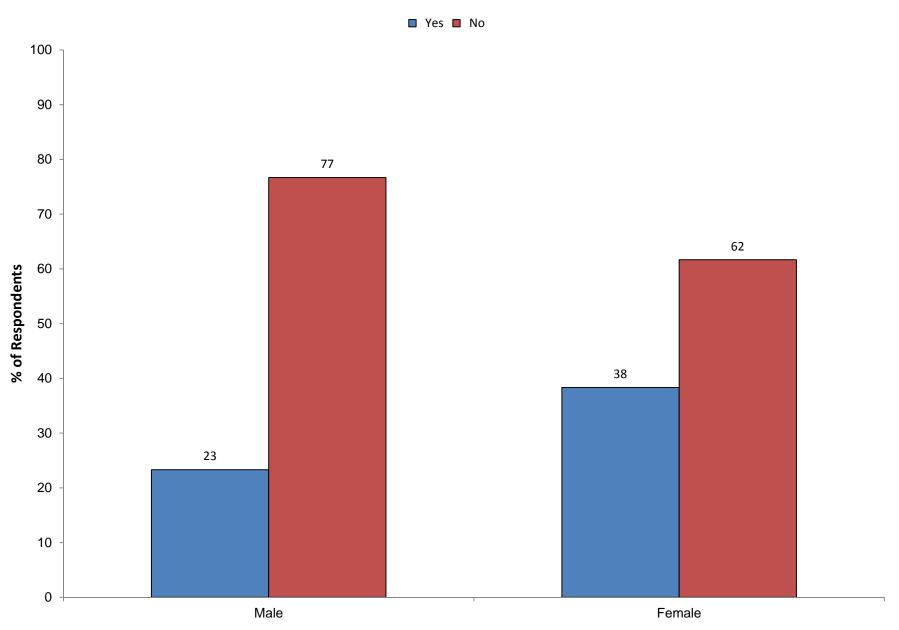
Q13: Do you have a friend who has engaged in self-harm (e.g. cutting, anorexia, bulimia, burning)?



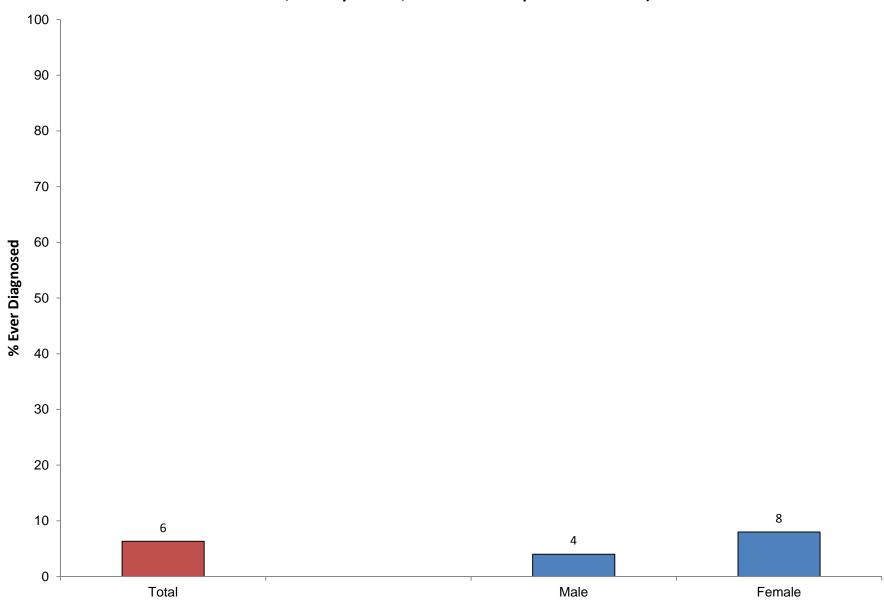
Q15: How many times have you engaged in self-harm?

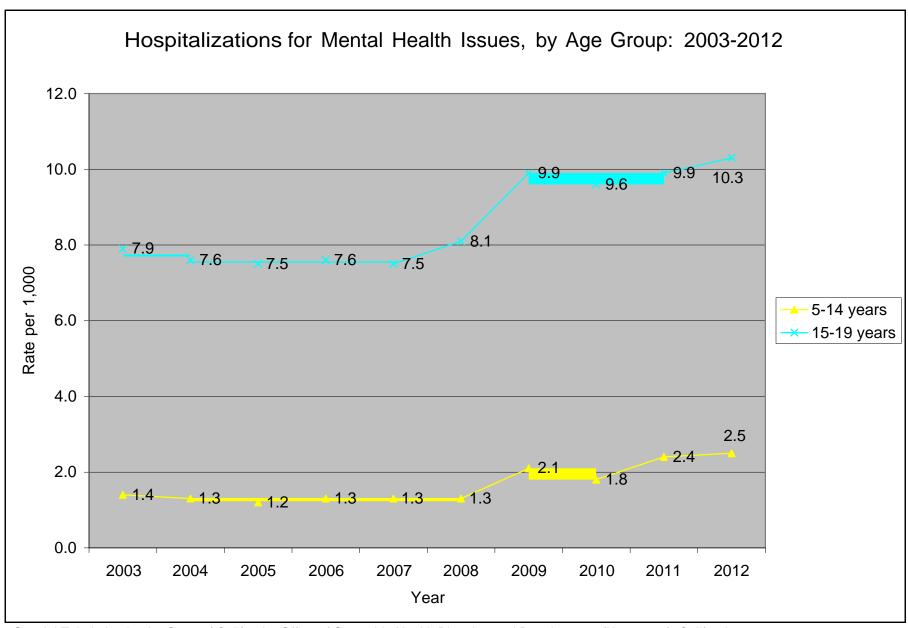


Q17: Have you had suicidal thoughts?



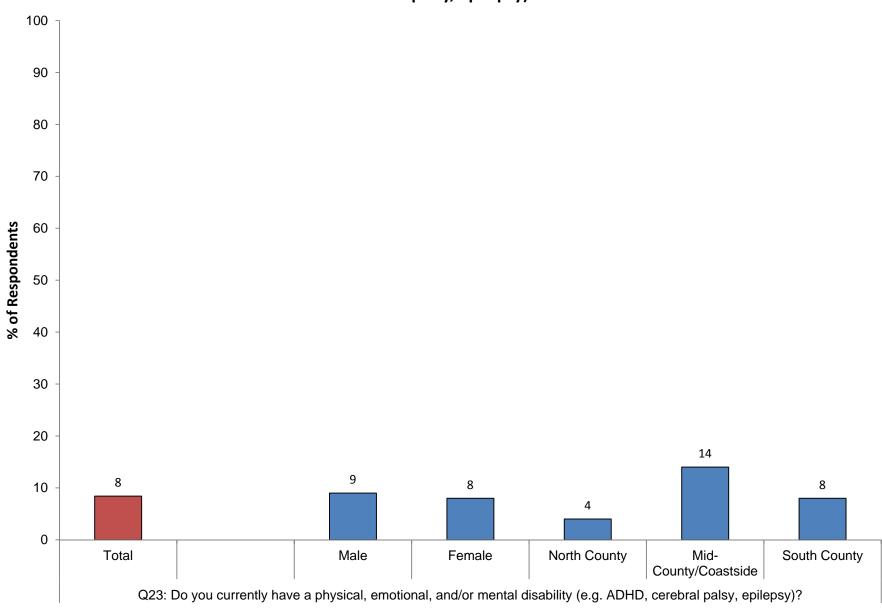
Q22: Have you ever been diagnosed with a mental health condition/ disorder (e.g. bipolar disorder, schizophrenia, obsessive compulsive disorder)?



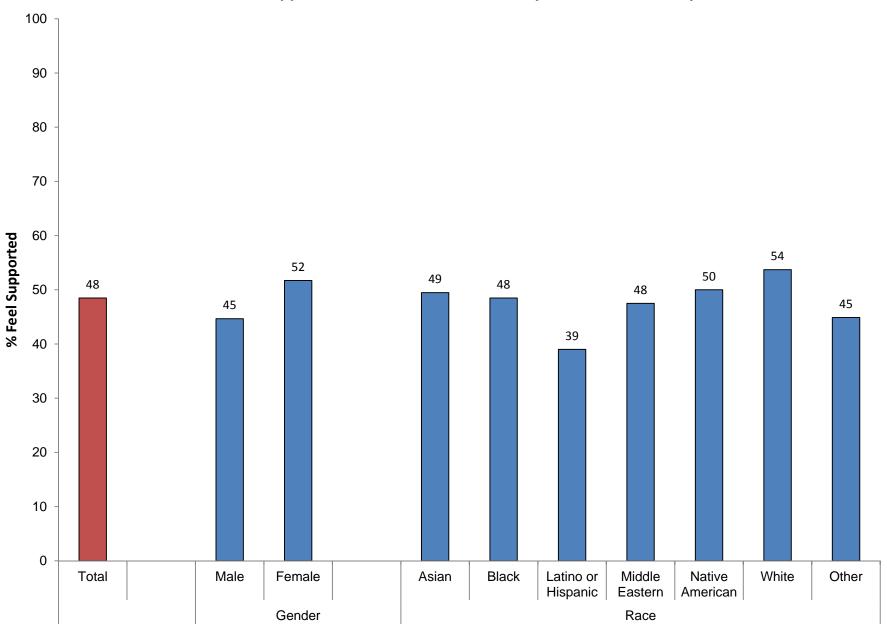


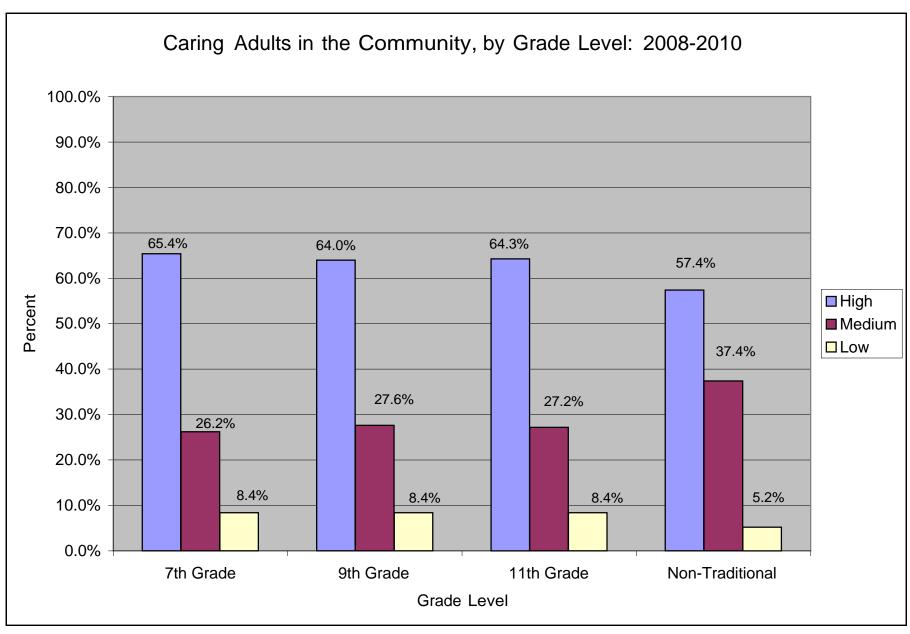
Special Tabulation by the State of California, Office of Statewide Health Planning and Development (Nov. 2013); California Department of Finance, 2000-2010 Estimates of Population by Race/Ethnicity with Age and Gender Detail and State and County Population Projections by Race/Ethnicity and 5-year Age Groups, 2010-2060 (by year). Accessed at: http://www.dof.ca.gov (May 2013).

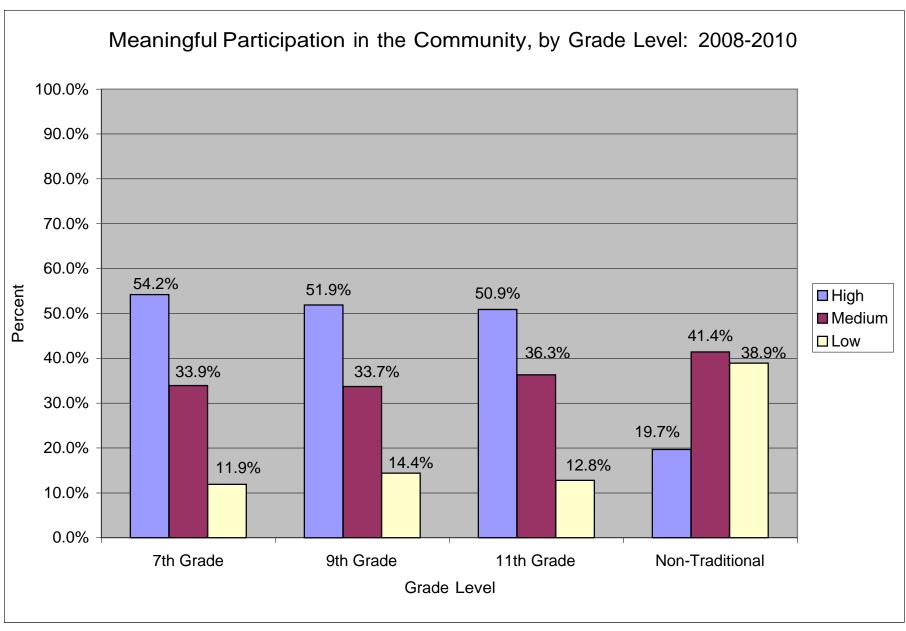
Q23: Do you currently have a physical, emotional, and/or mental disability (e.g. ADHD, cerebral palsy, epilepsy)?



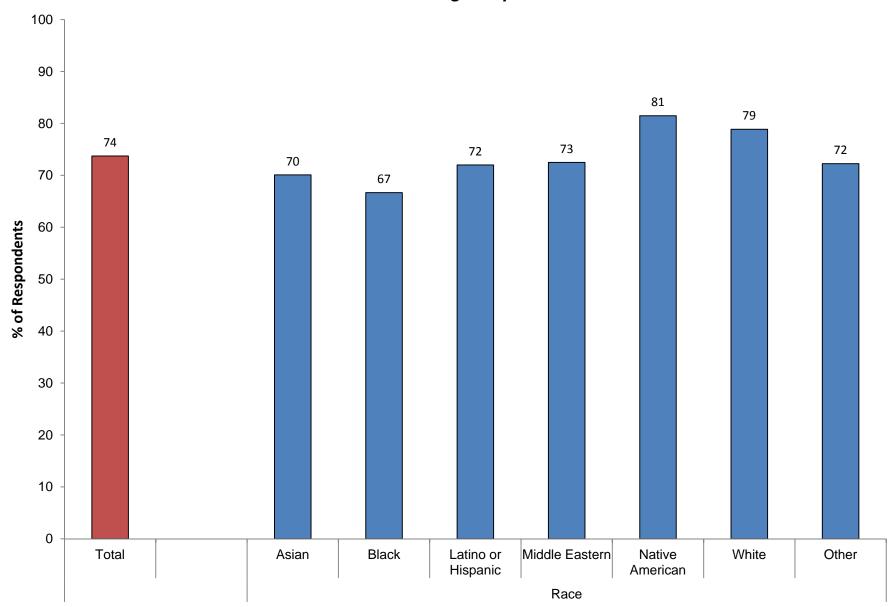
Q32: I feel supported to become a leader in my school/ community.



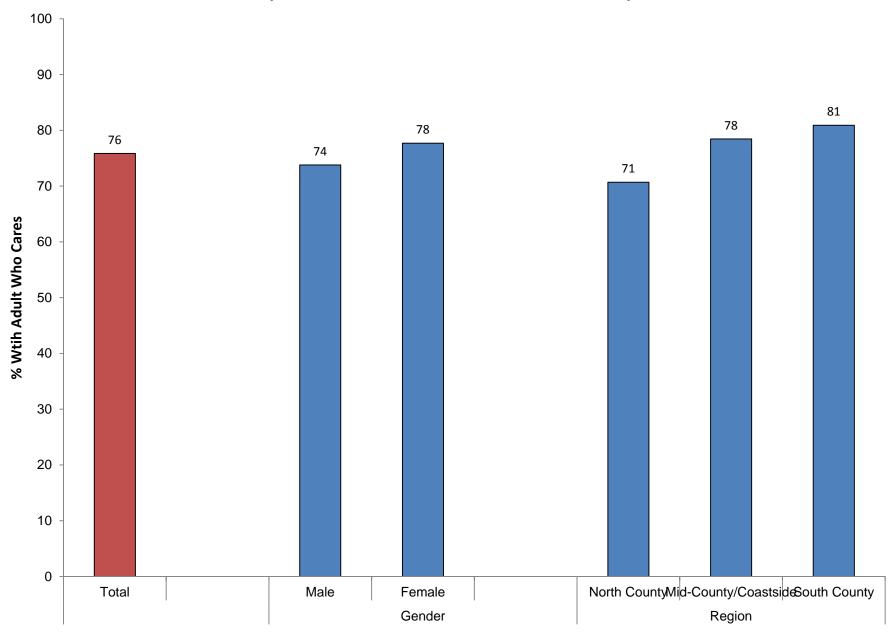


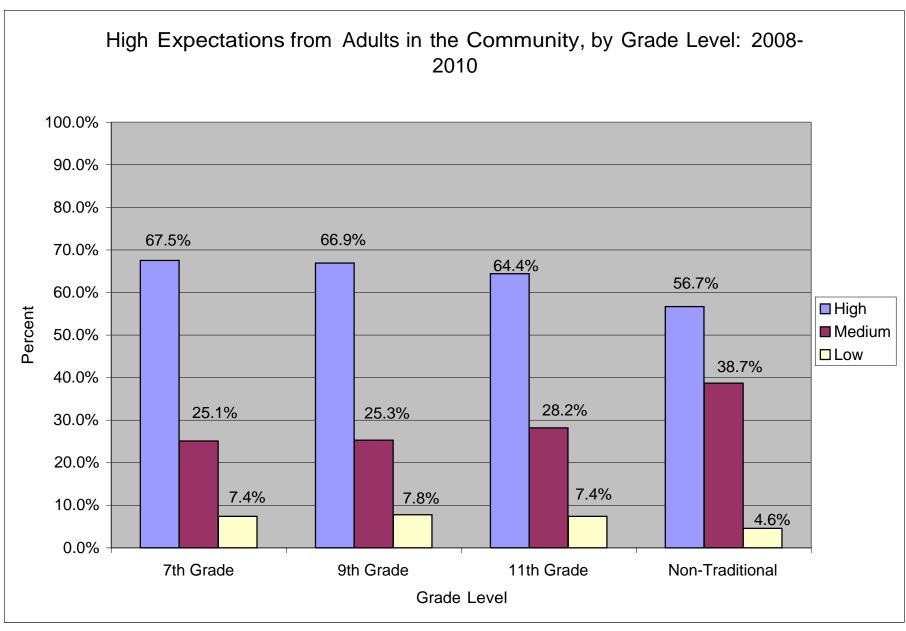


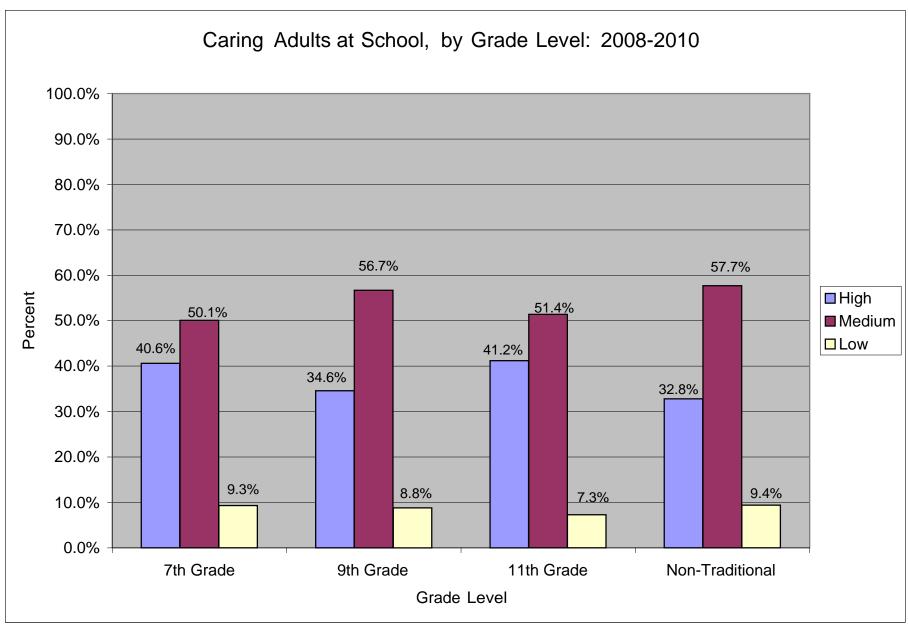
Q47: In my home, there is a parent or some other adult who listens to me when I have something to say.



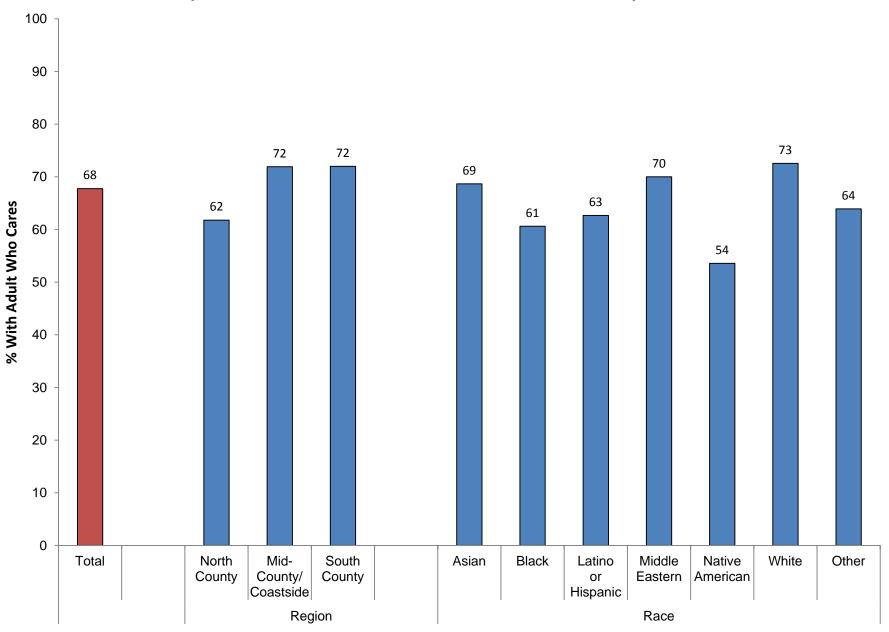
Q50: Outside of my home and school, there is an adult who really cares about me.

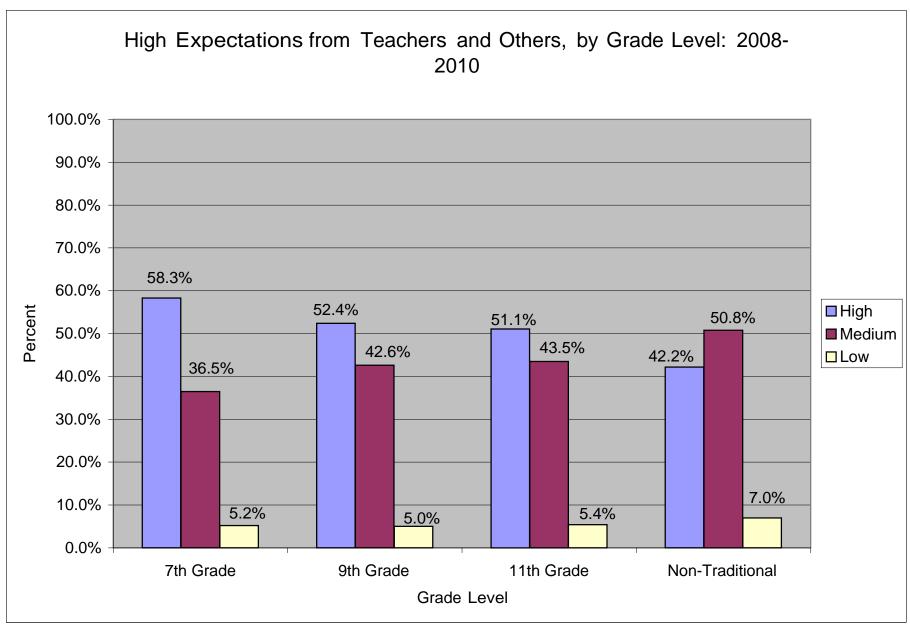






Q52: At my school, there is a teacher or some other adult who really cares about me.

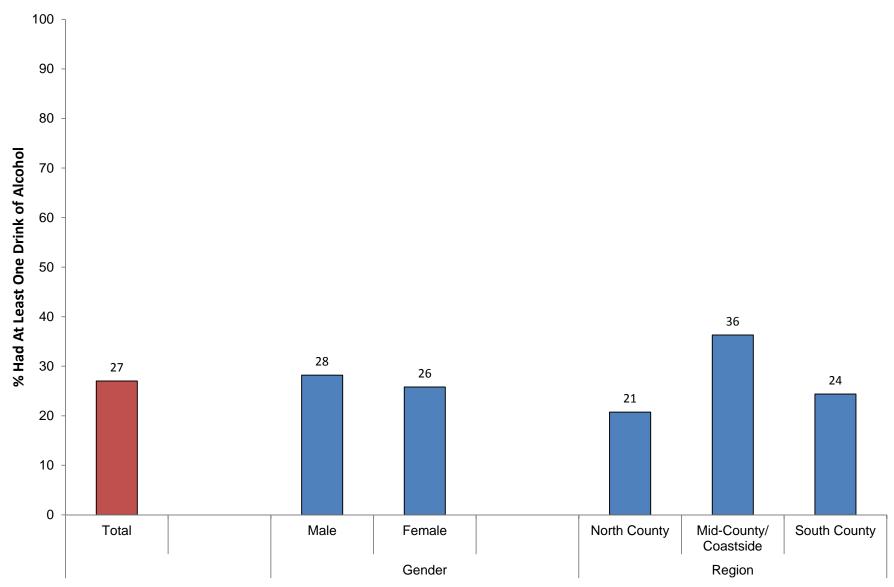


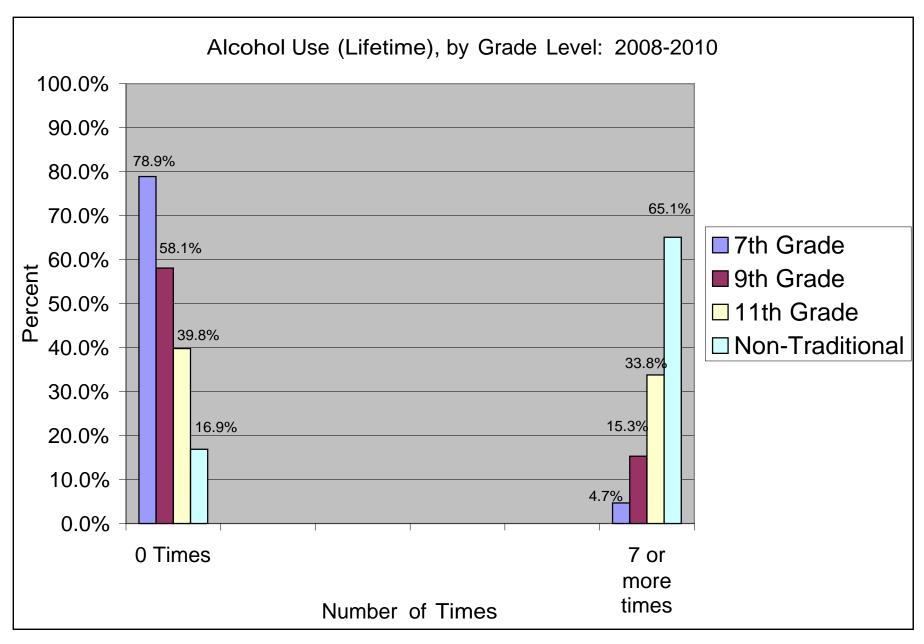


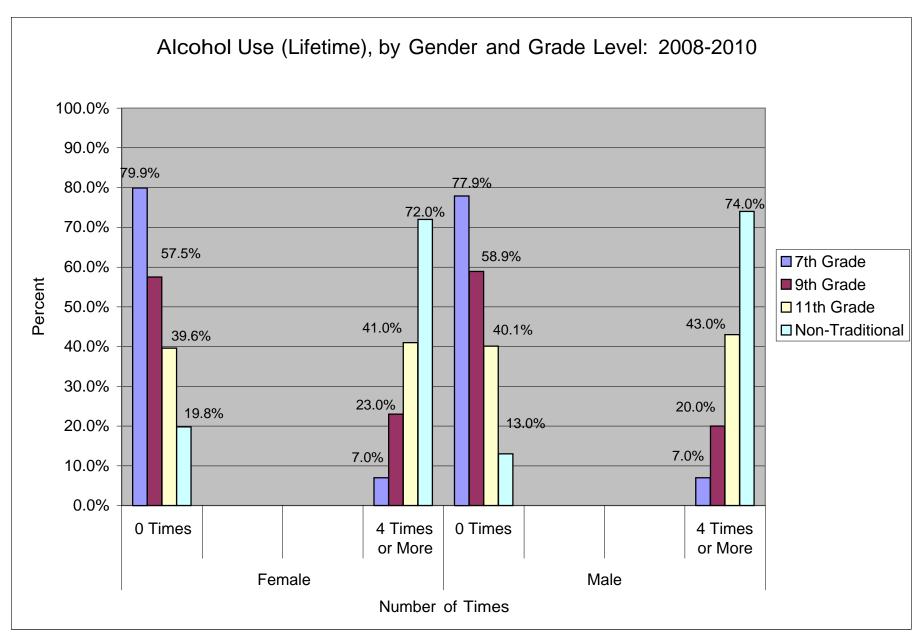
Alcohol, Tobacco, and Other Drugs

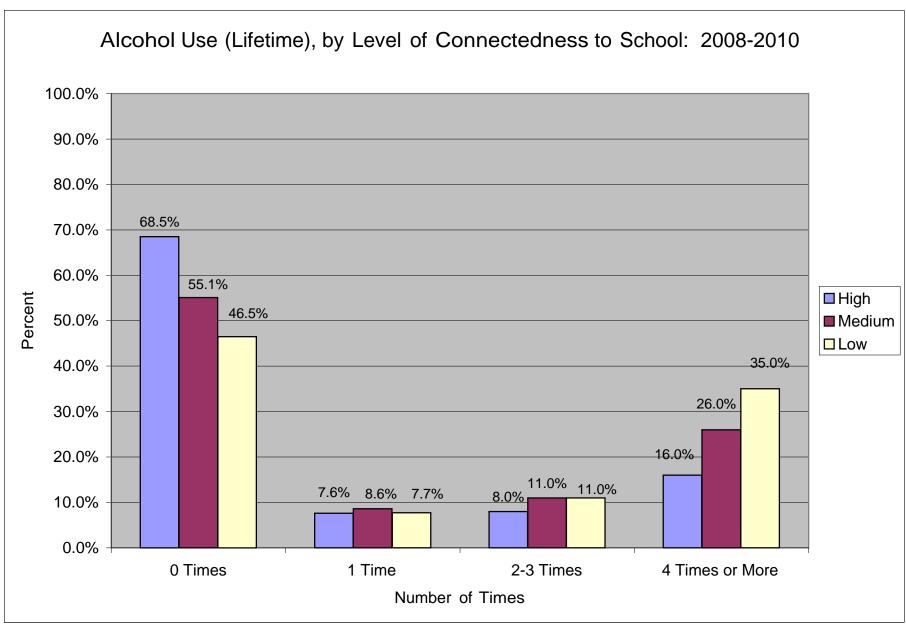
Questions 54 through 80

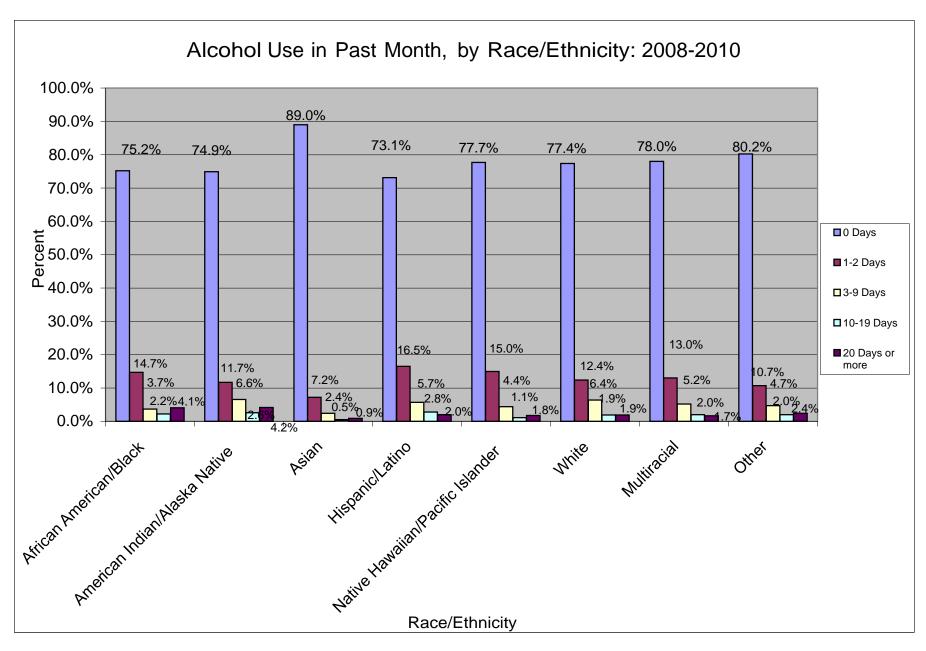
Q55: If we consider one drink to be a can or bottle of beer, a glass of wine, a shot of liquor, or one mixed drink, on how many days in the past 30 days did you have at least one drink of alcohol?



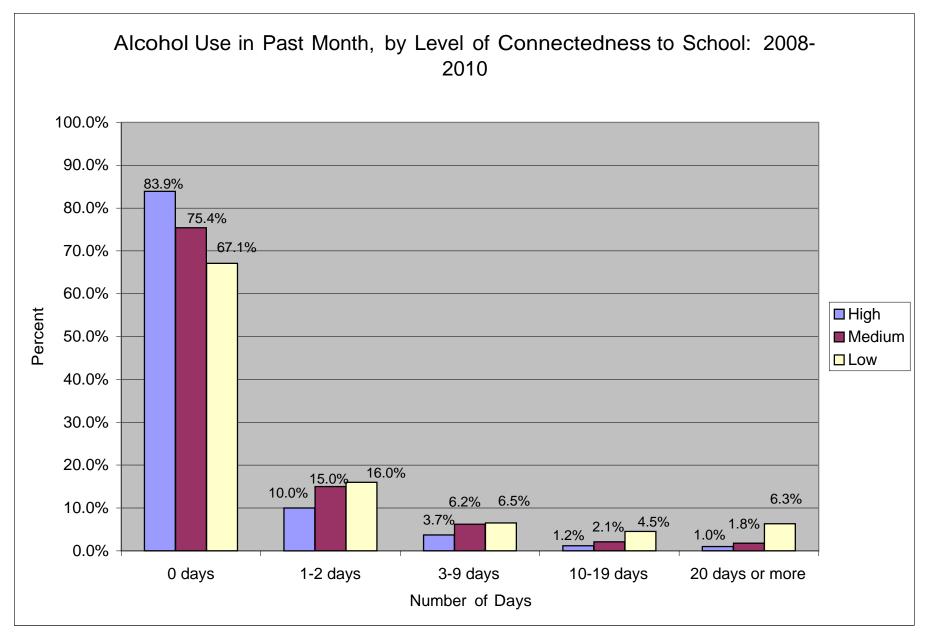


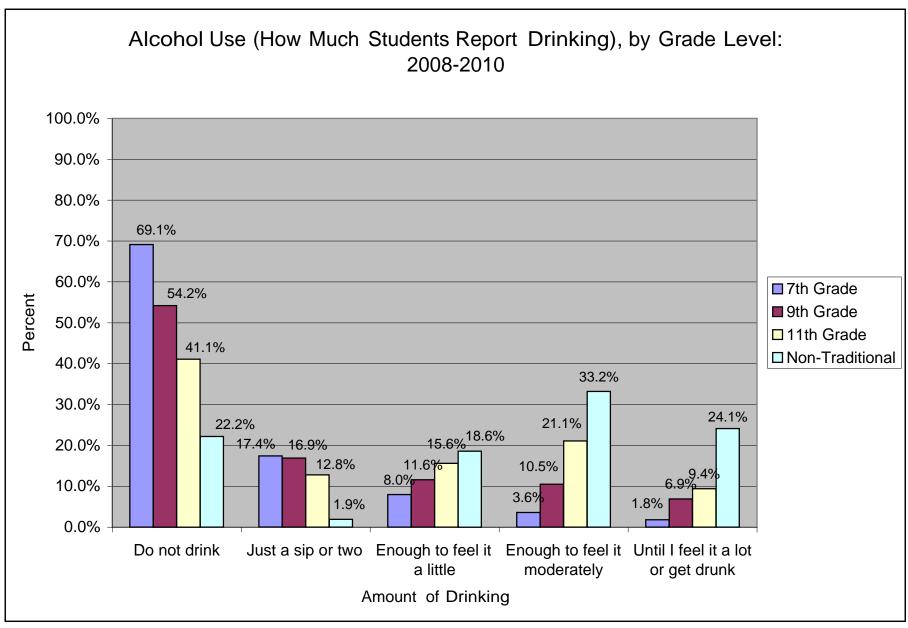


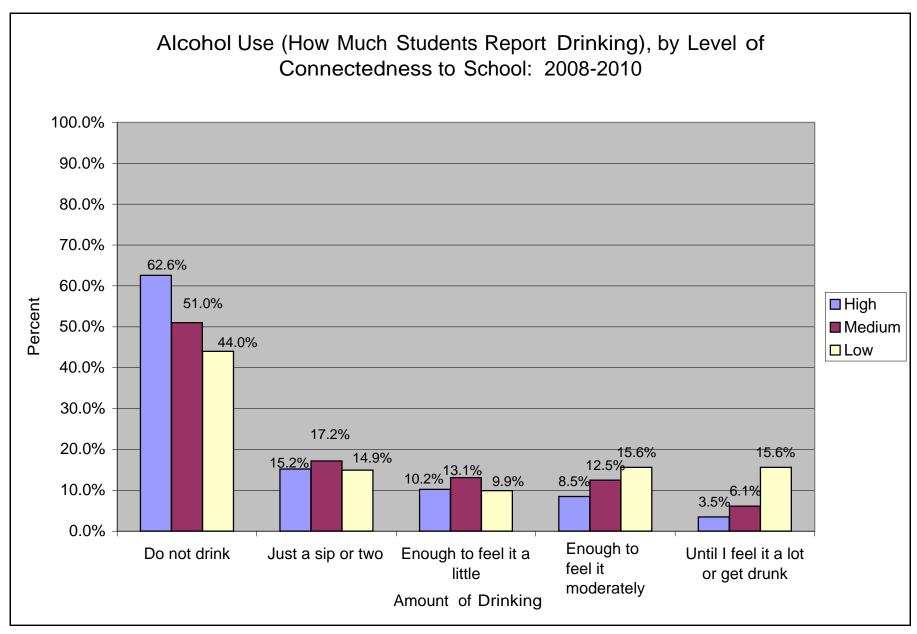


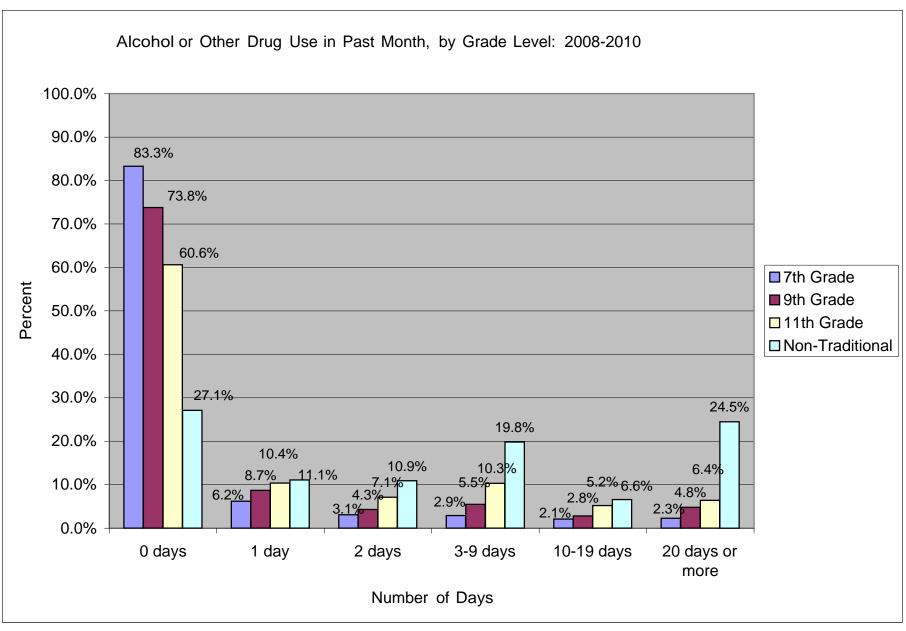


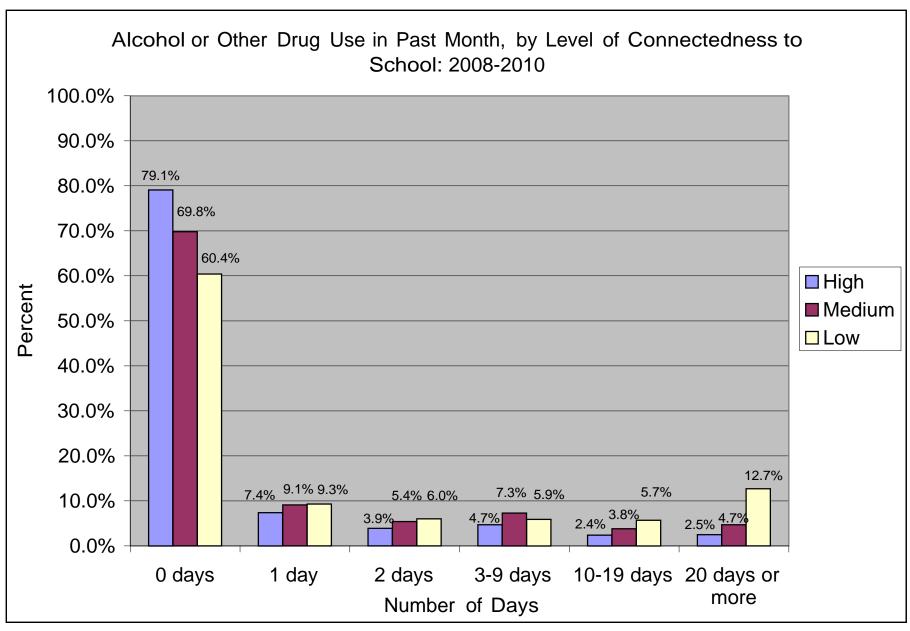
 $California\ Department\ of\ Education,\ \underline{California\ Healthy\ Kids\ Survey}\ (WestEd).$



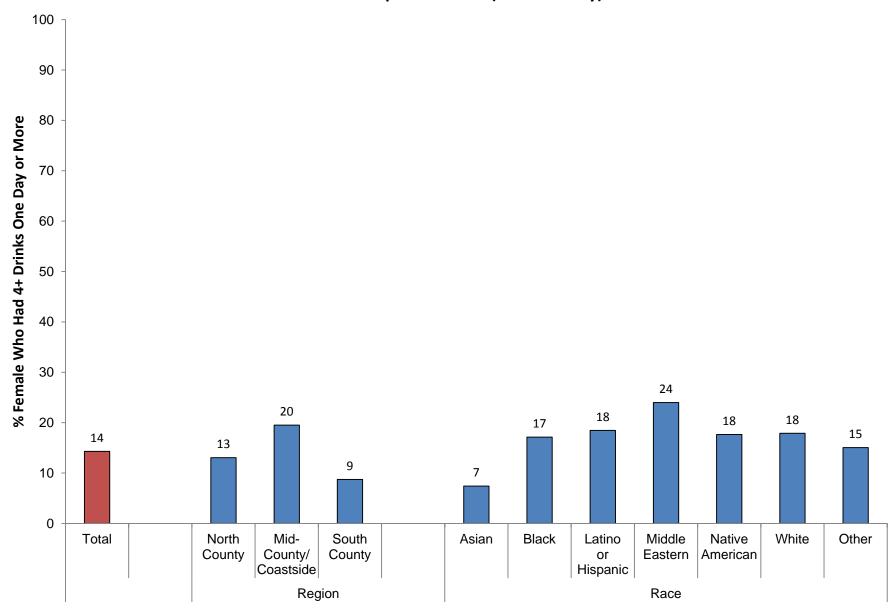




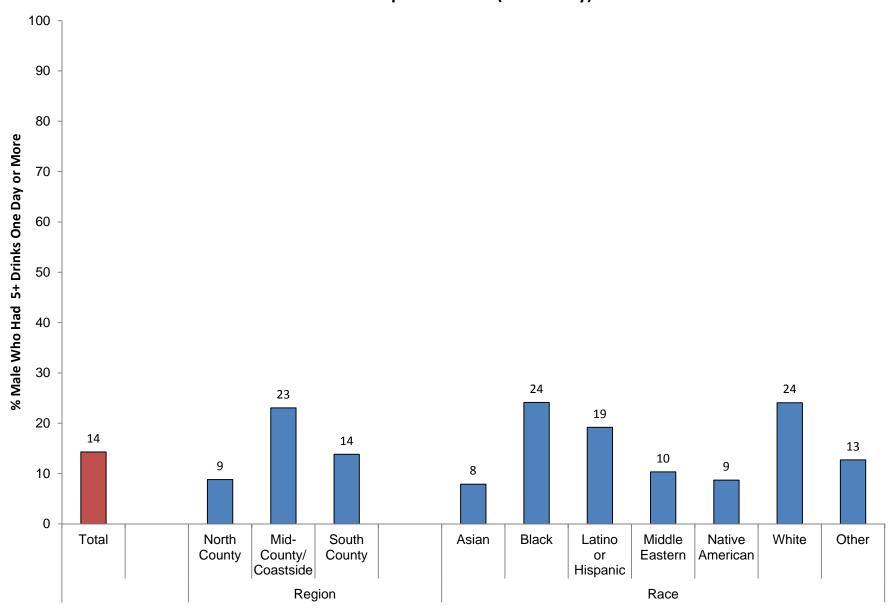


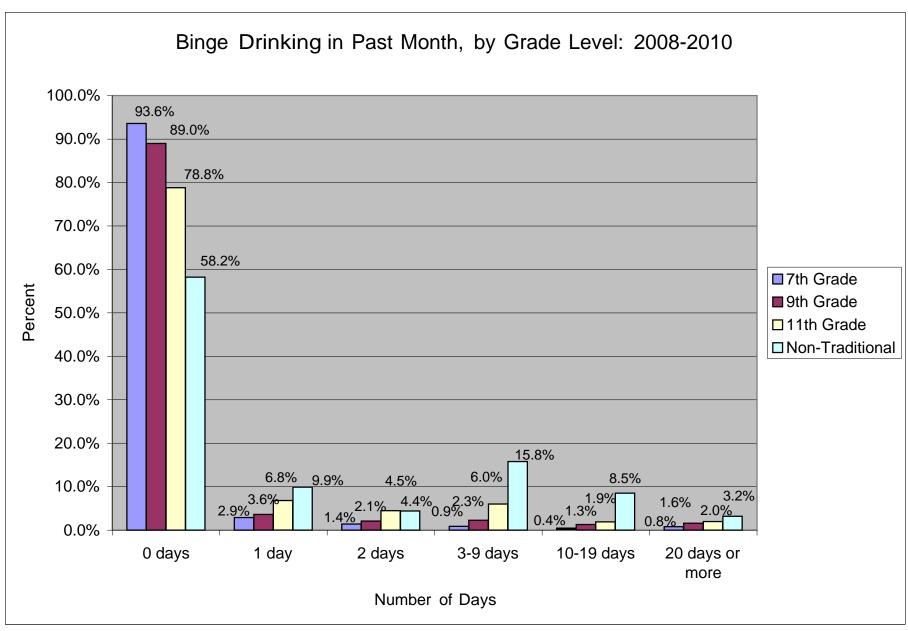


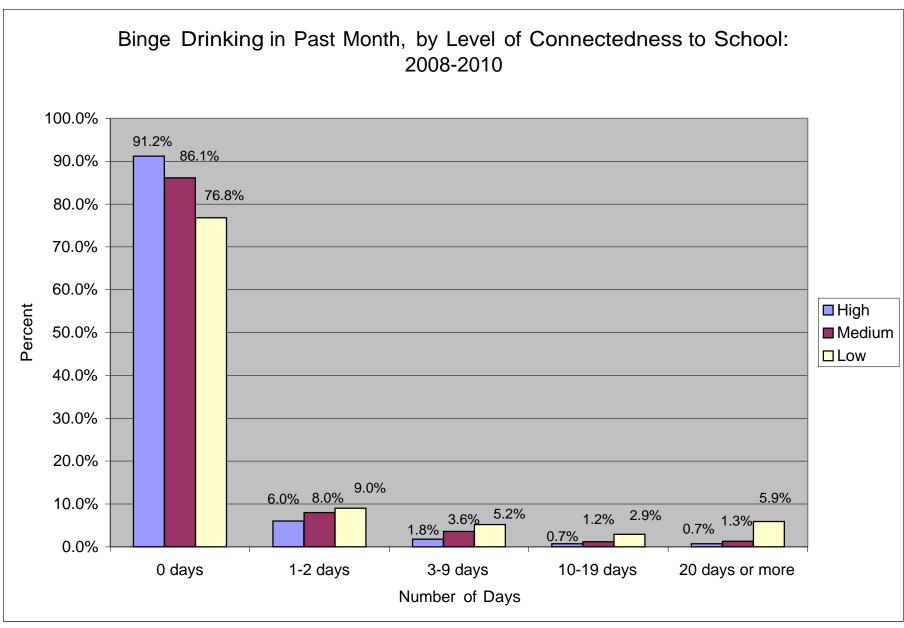
Q56: How many days in the past 30 days did you have four or more drinks in a row, that is within a couple of hours? (Females only)



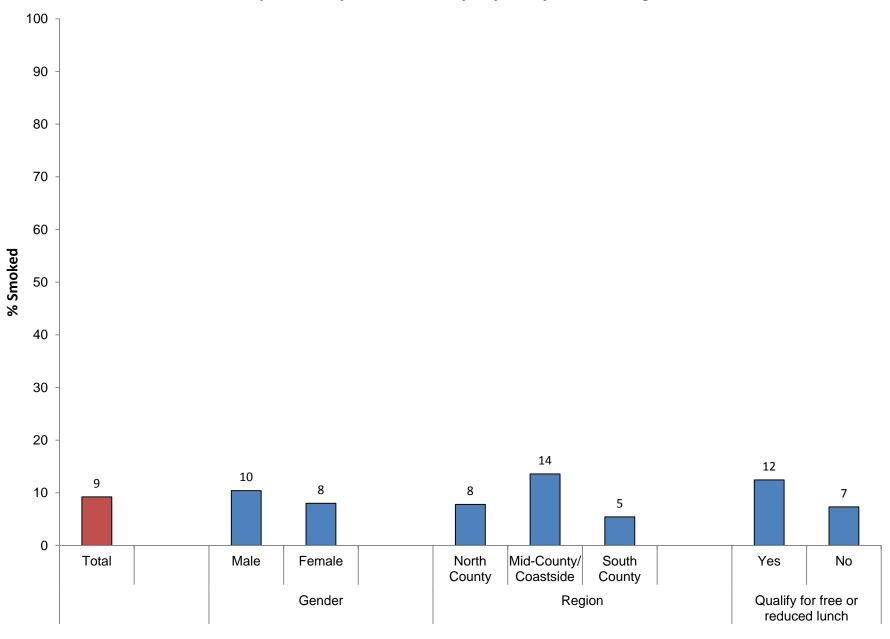
Q57: How many days in the past 30 days did you have four or more drinks in a row, that is within a couple of hours? (Males only)

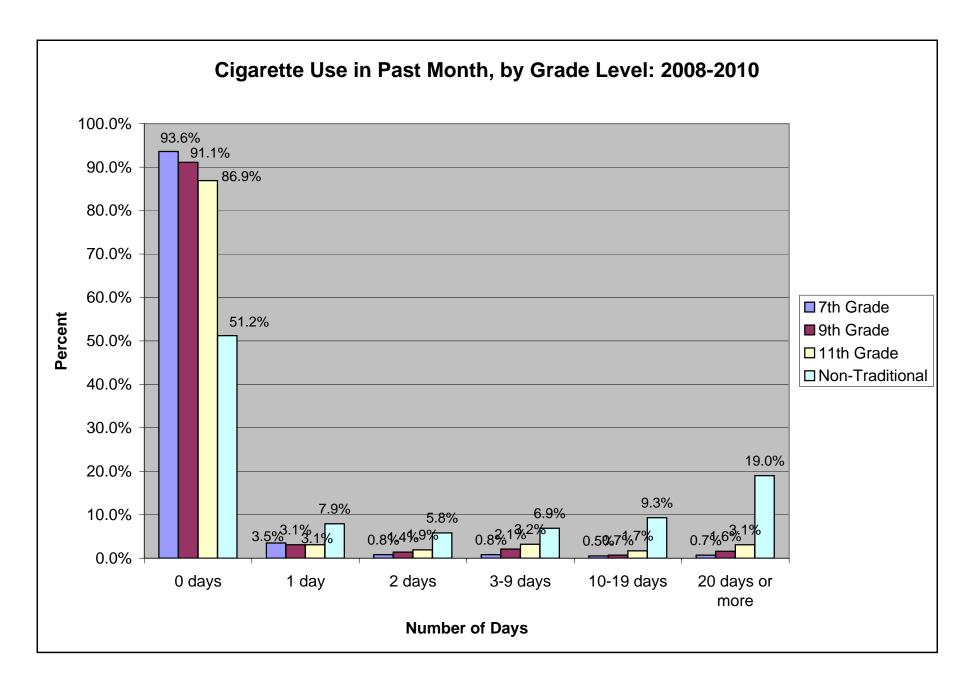


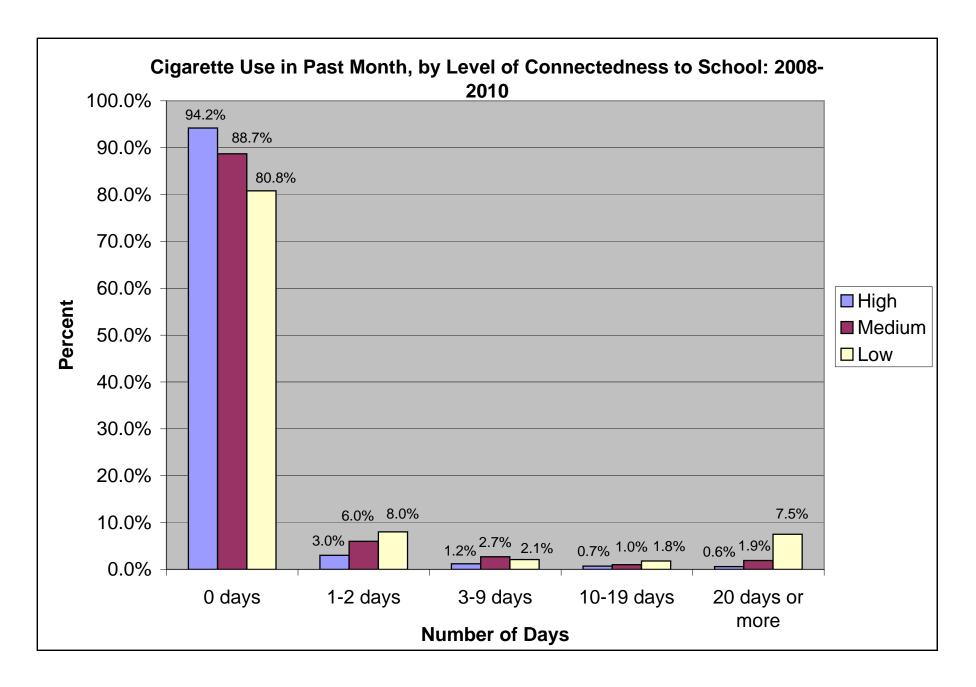


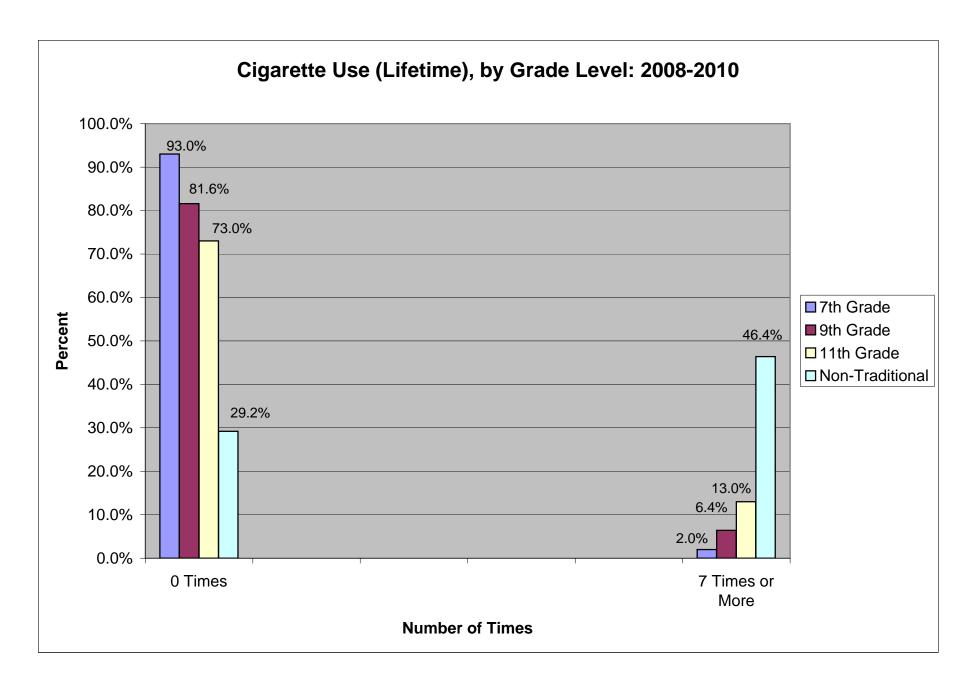


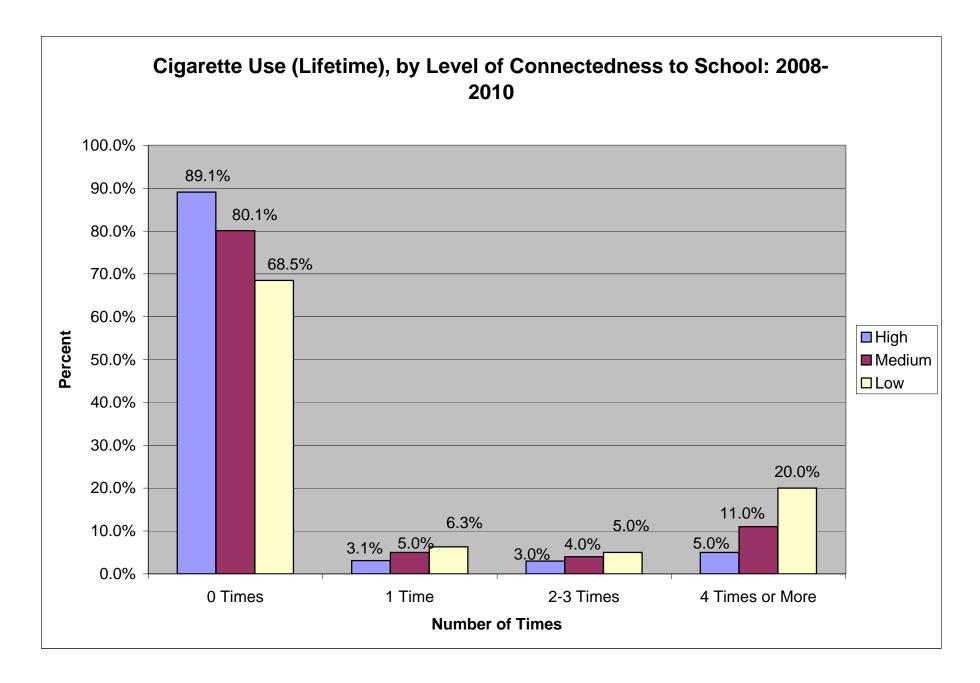
Q59: In the past 30 days, on how many days did you smoke cigarettes?



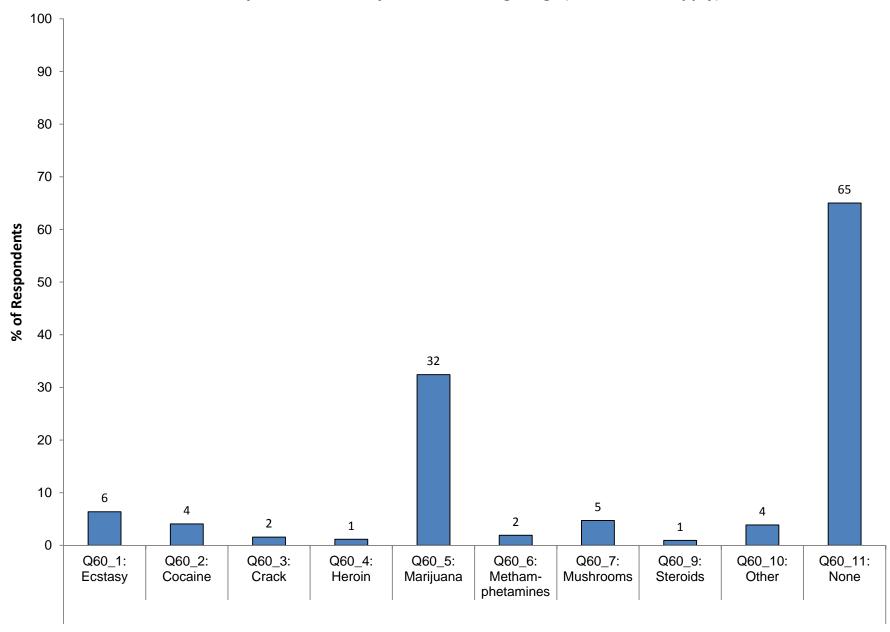


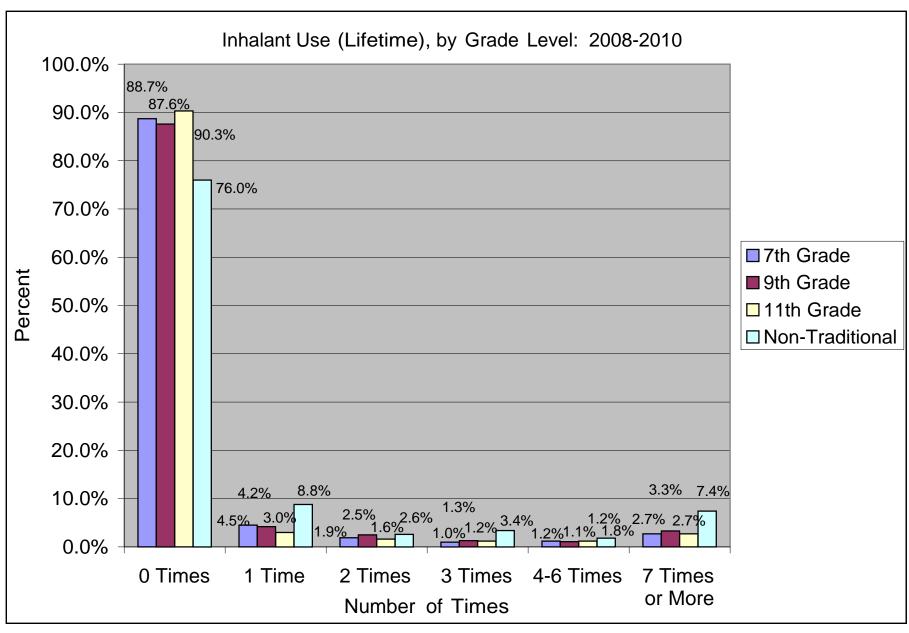


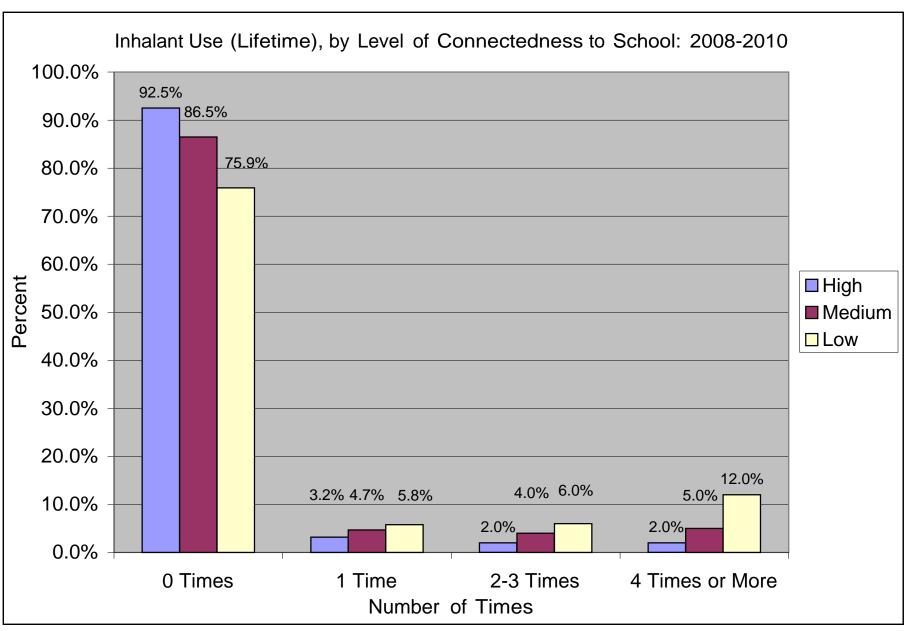


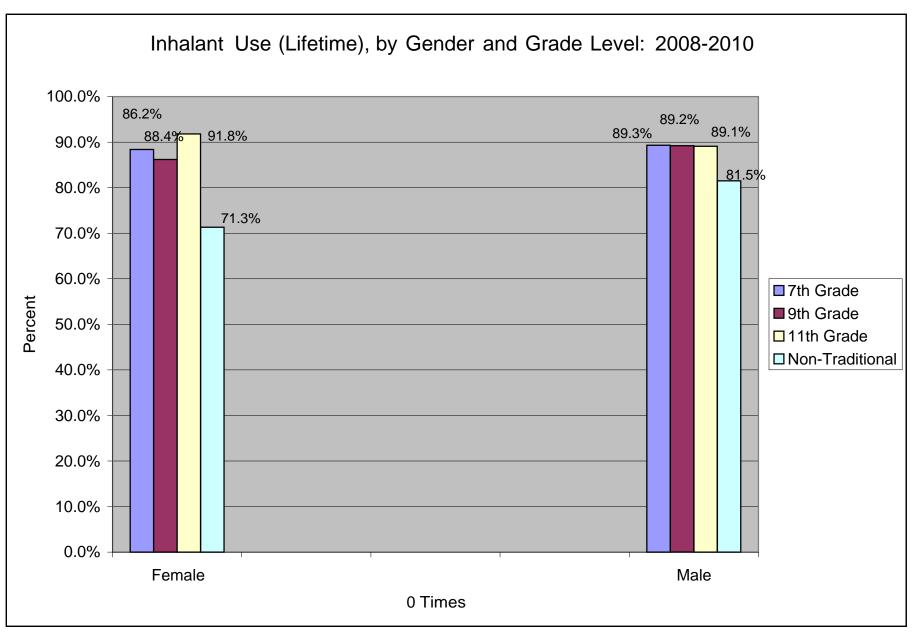


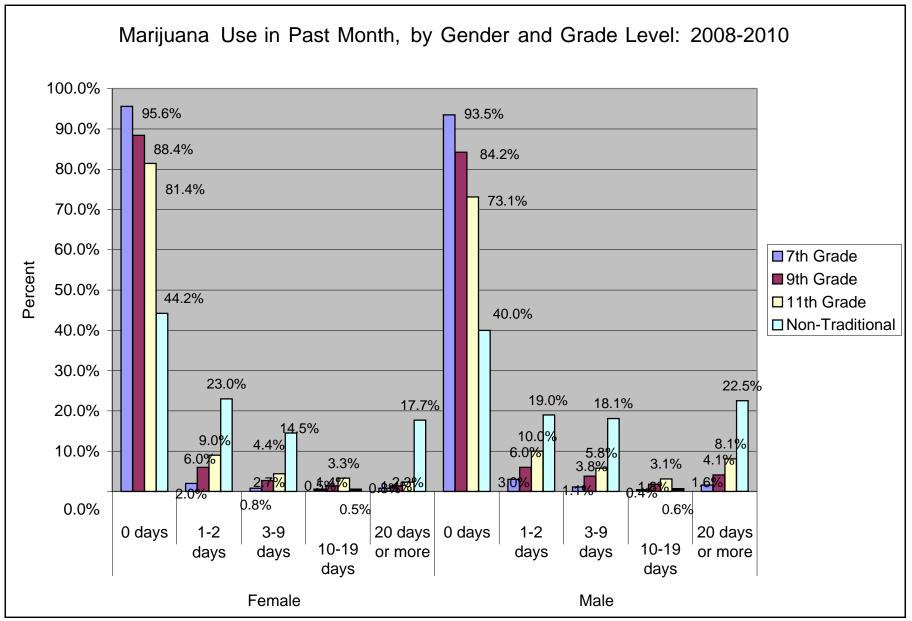
Q60: Have you ever tried any of the following drugs (mark all that apply)?



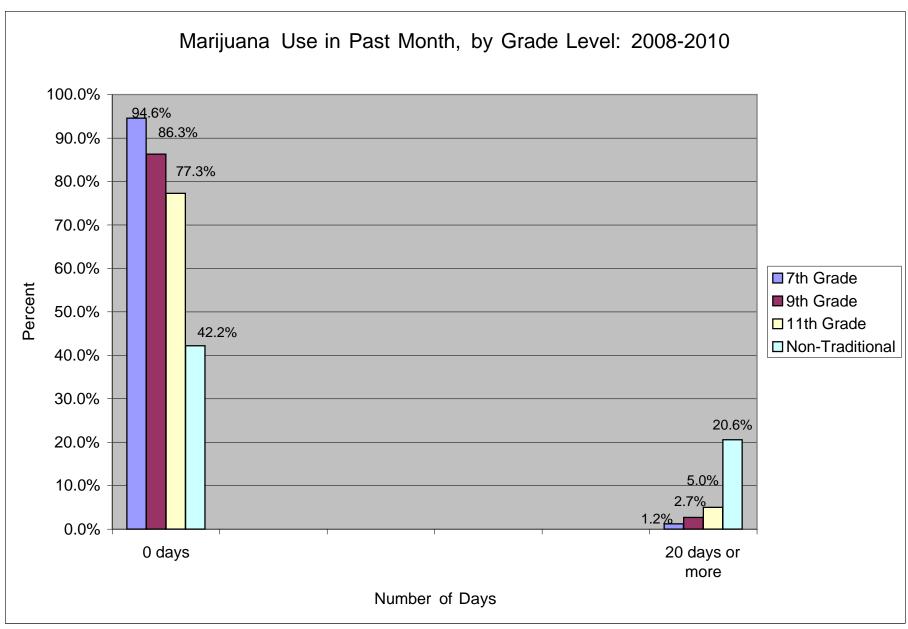


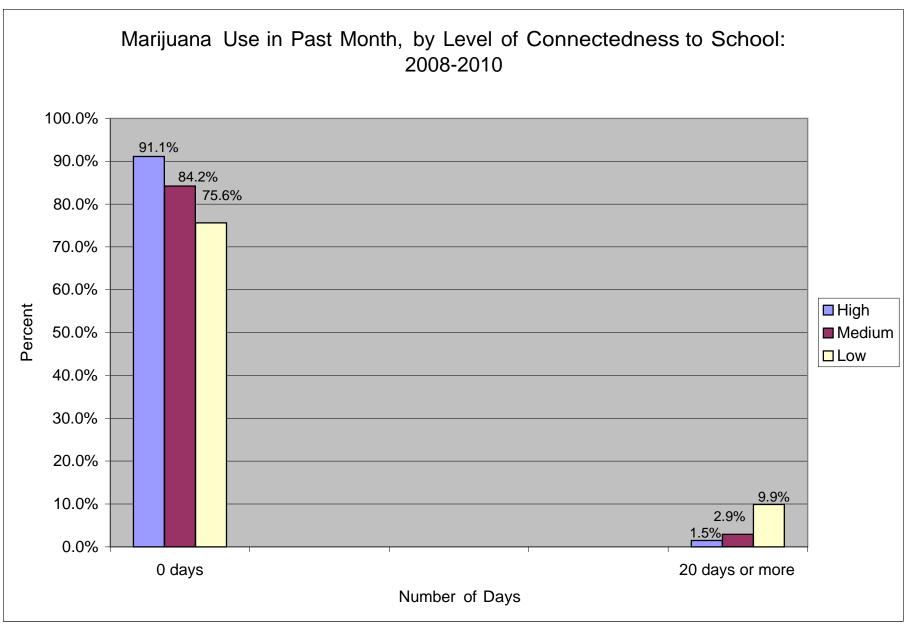


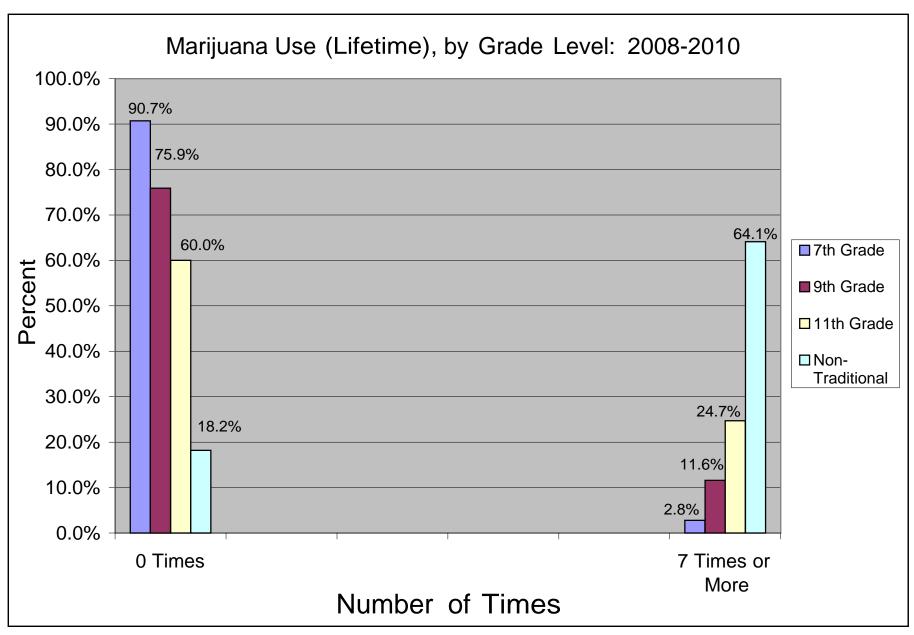


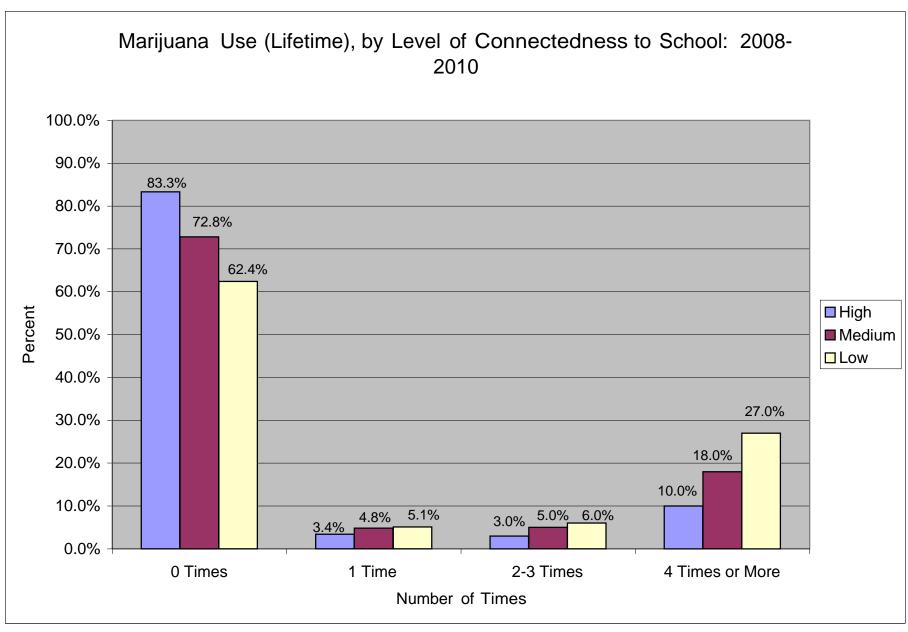


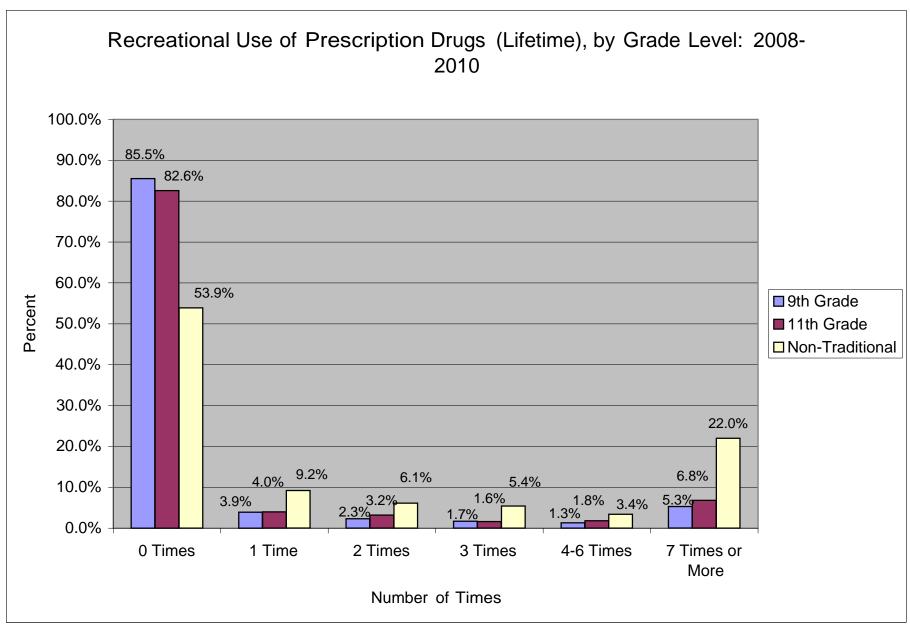
Number of Days

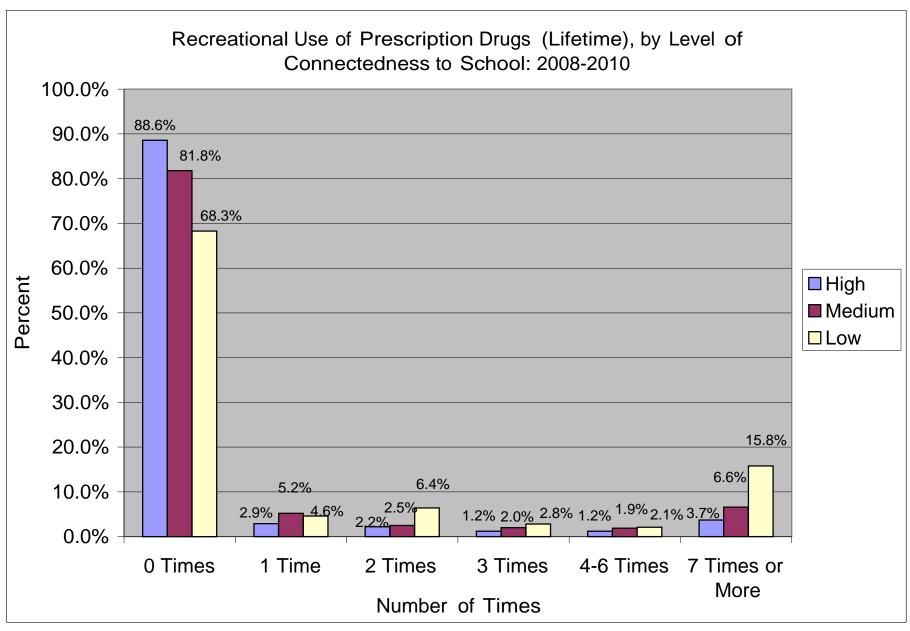




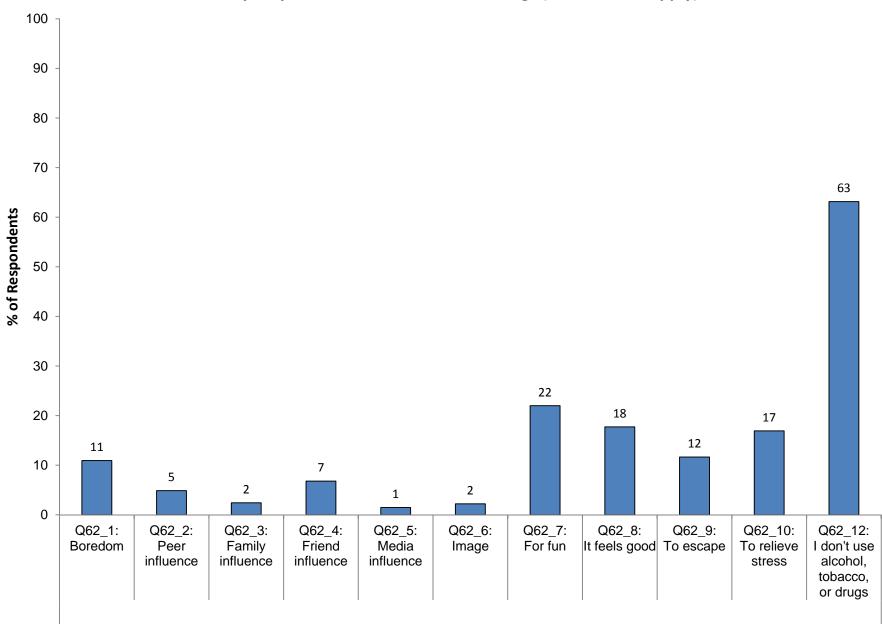




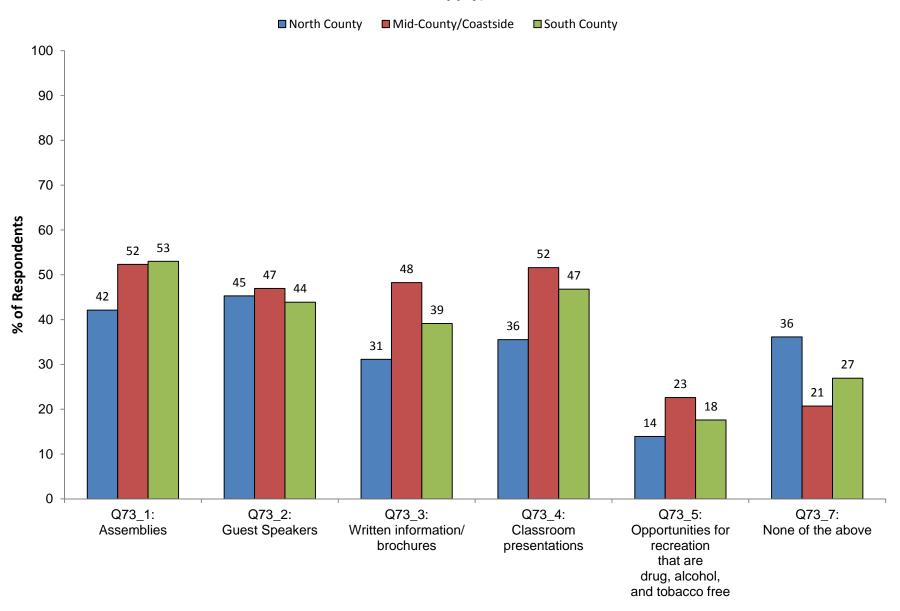




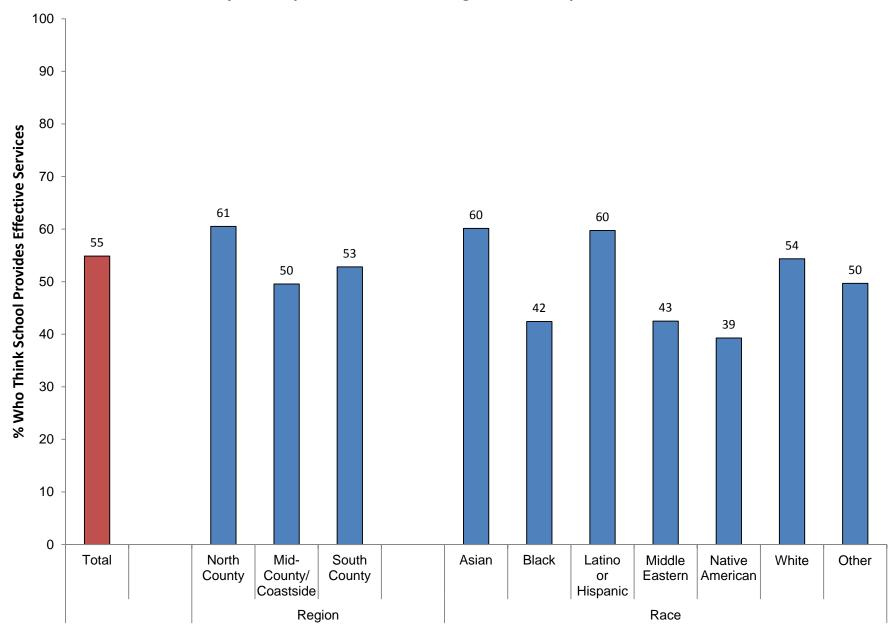
Q62: Why do you use alcohol, tobacco or drugs (mark all that apply)?



Q73: I have received the following substance use/prevention education at school (mark all that apply).



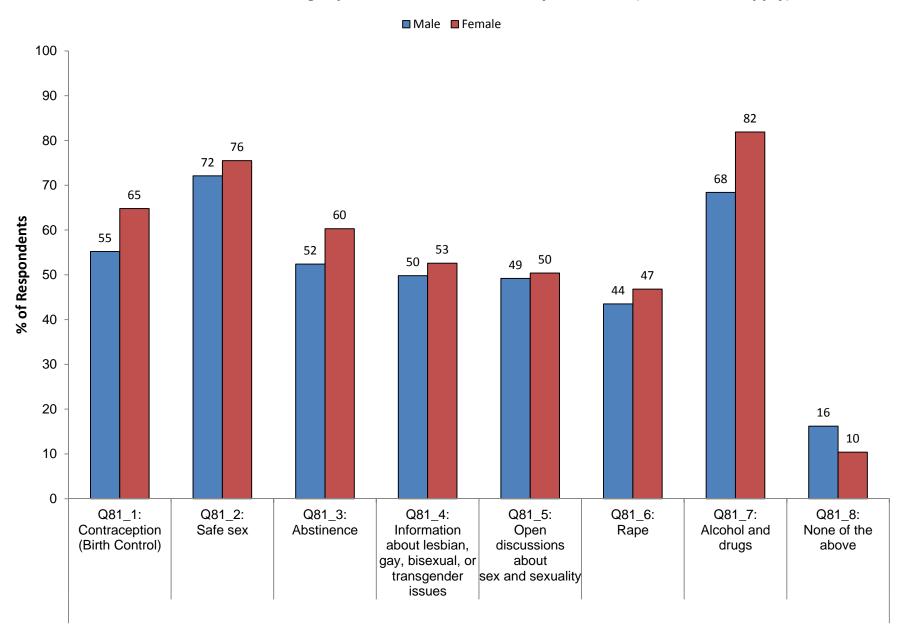
Q75: My school provides effective drug and alcohol prevention services.



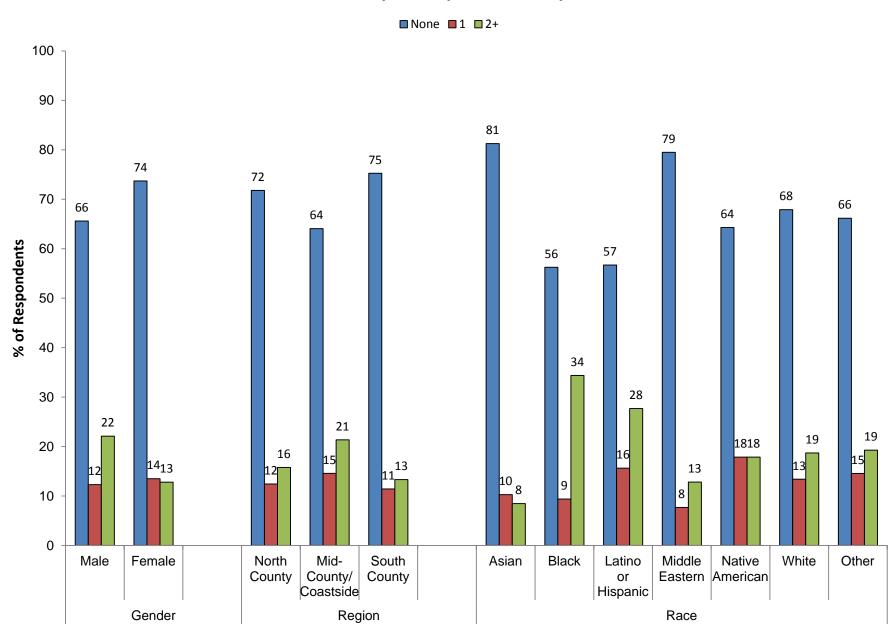
Sex and Sexuality

Questions 81 through 104

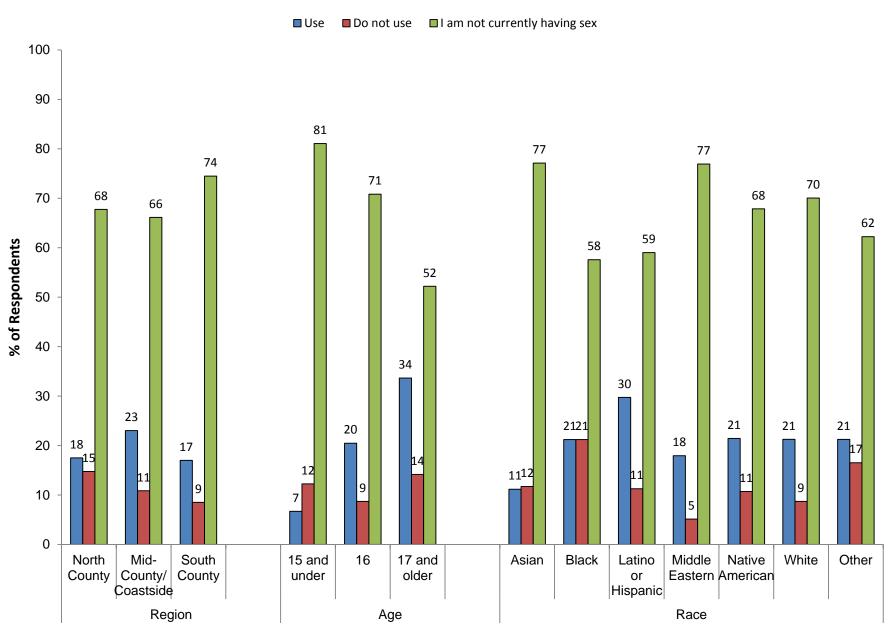
Q81: Which of the following topics have been covered at your school (mark all that apply)?



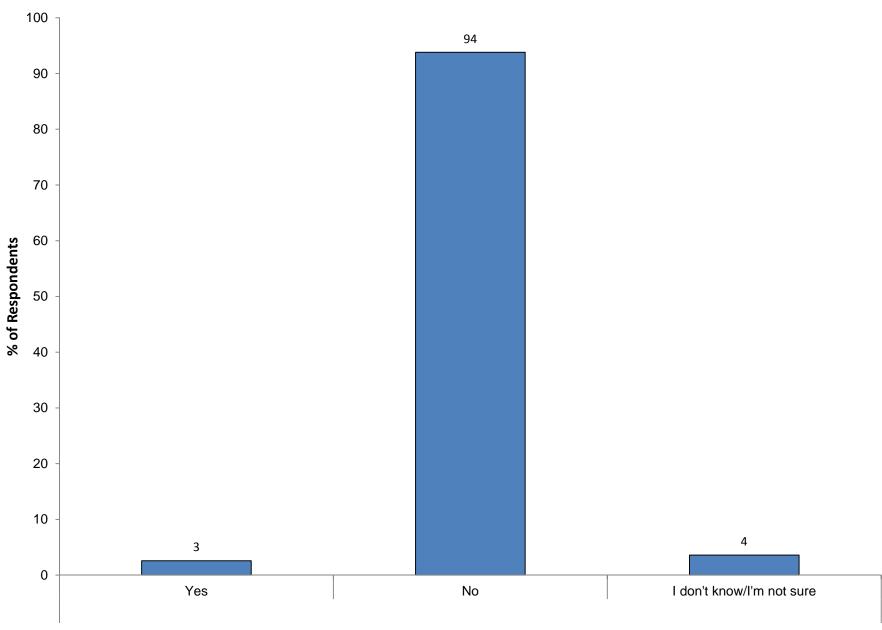
Q85: How many sexual partners have you had?

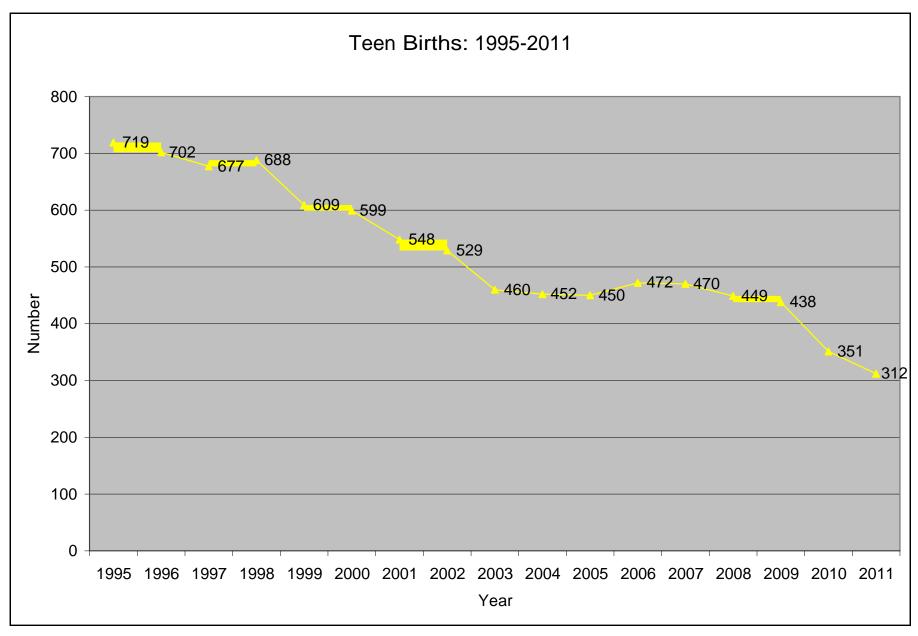


Q86: How often do you use a condom when having sex?

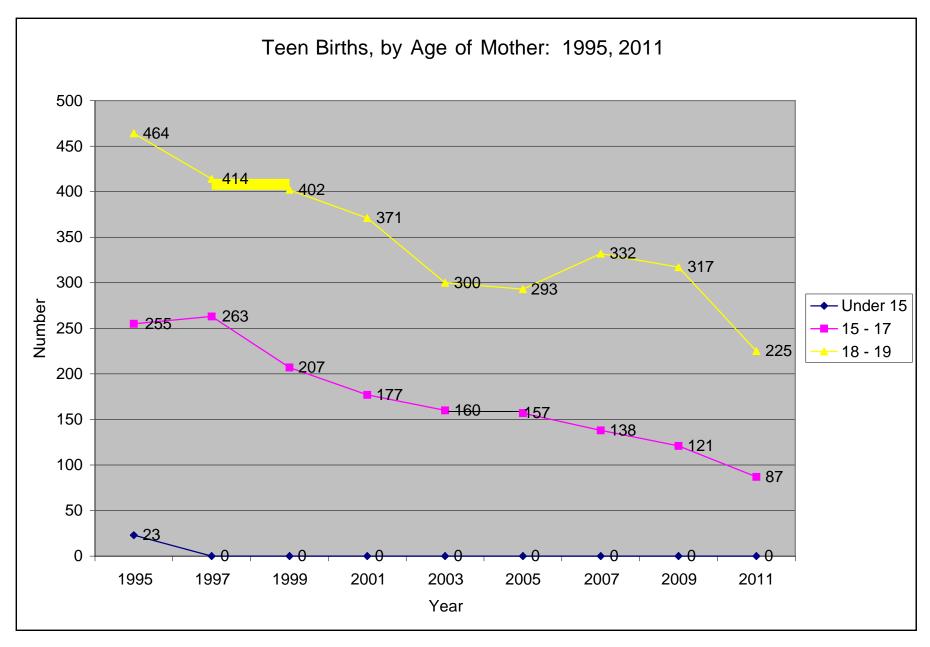


Q91: Have you ever been raped or forced to have sex against your will?

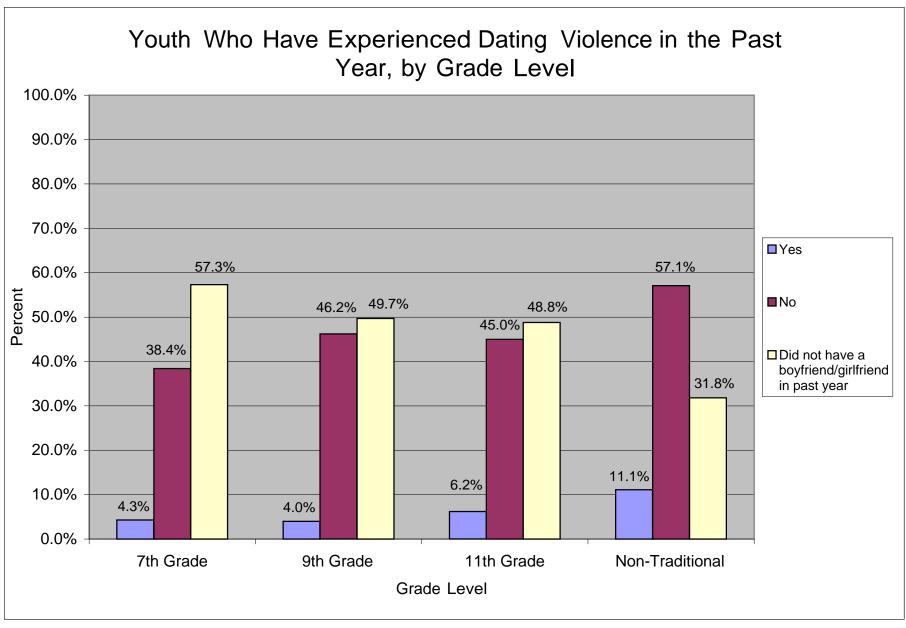


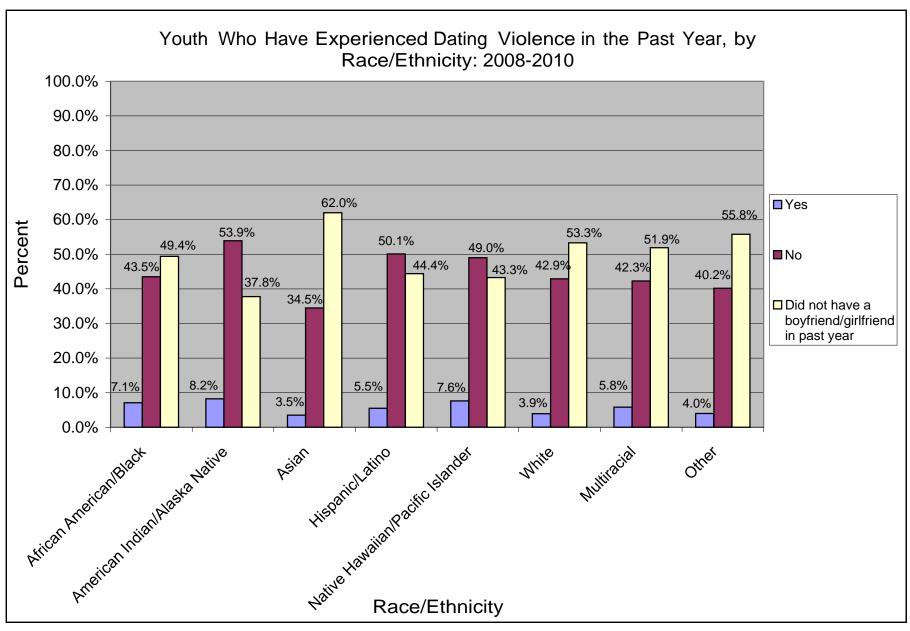


California Dept. of Finance, Race/Ethnic Population with Age and Sex Detail, 1990-1999, 2000-2010, 2010-2060; California Dept. of Public Health, Center for Health Statistics, Birth Statistical Master Files; Centers for Disease Control & Prevention, Natality data on CDC WONDER; Martin et al. (2013), Births: Final Data for 2012. National Vital Statistics Reports, 62(9) (Mar. 2014).

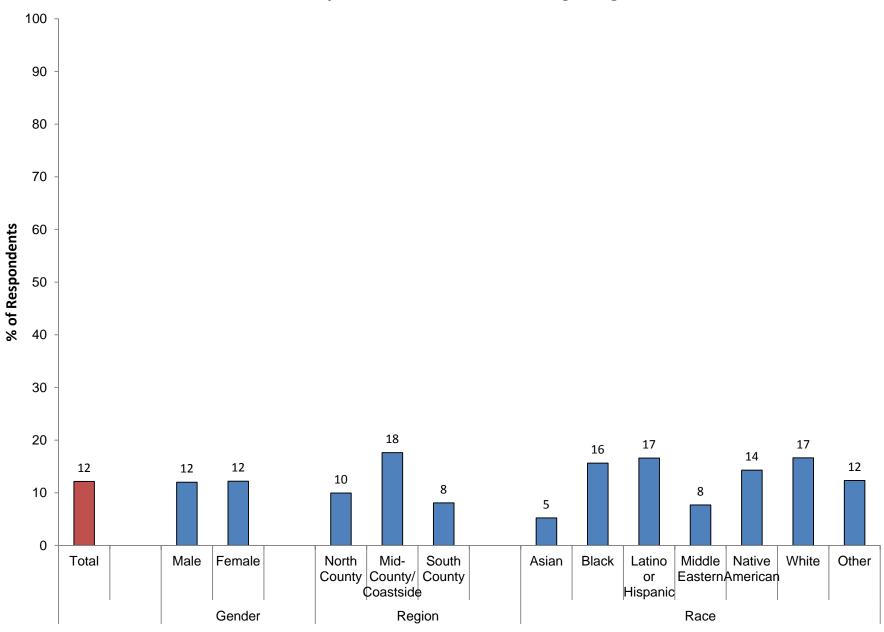


California Dept. of Finance, Race/Ethnic Population with Age and Sex Detail, 1990-1999, 2000-2010, 2010-2060; California Dept. of Public Health, Center for Health Statistics, Birth Statistical Master Files; Centers for Disease Control & Prevention, Natality data on CDC WONDER; Martin et al. (2013), Births: Final Data for 2012. National Vital Statistics Reports, 62(9) (Mar. 2014).

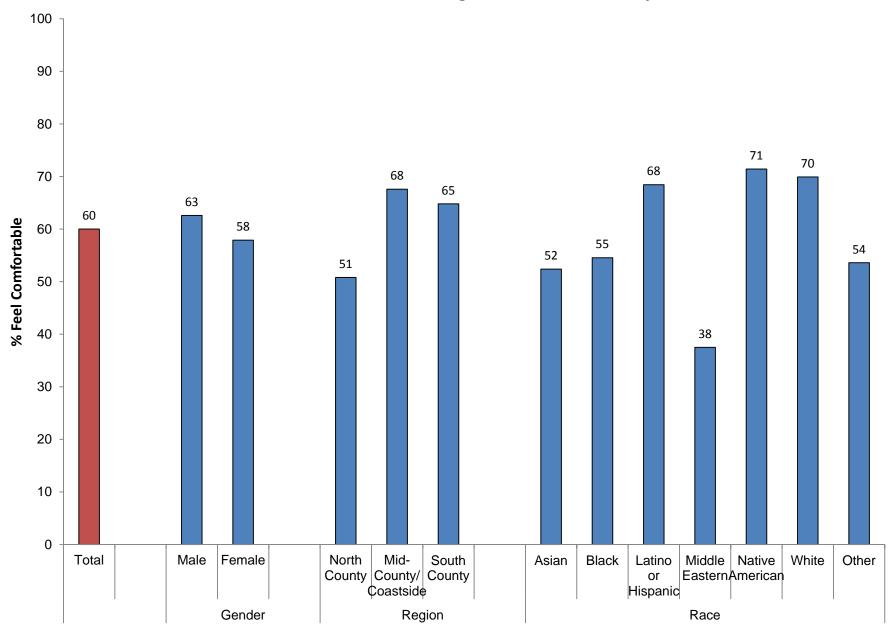




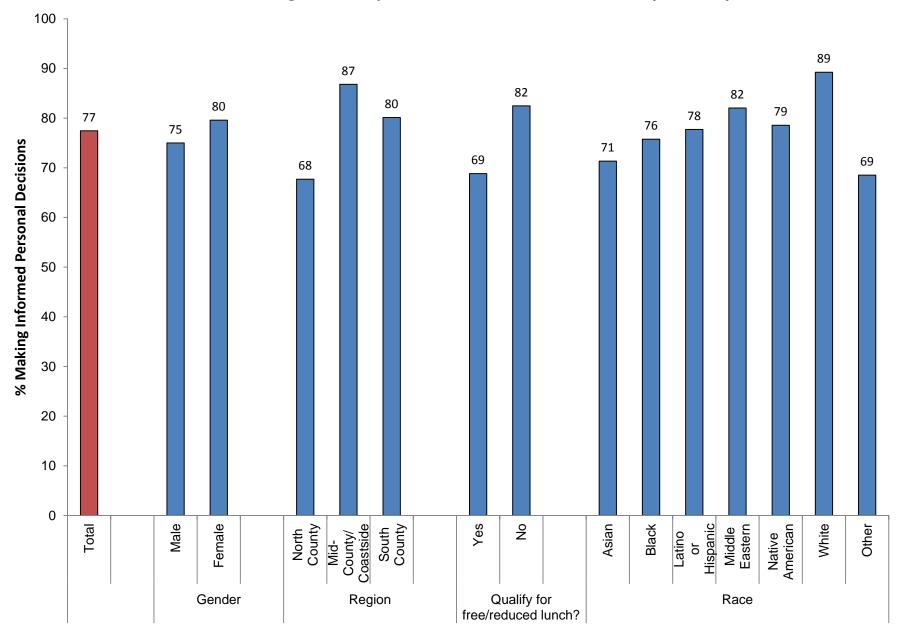
Q92: Have you ever had sex while drinking or high?



Q97: I feel comfortable talking about sex and sexuality.



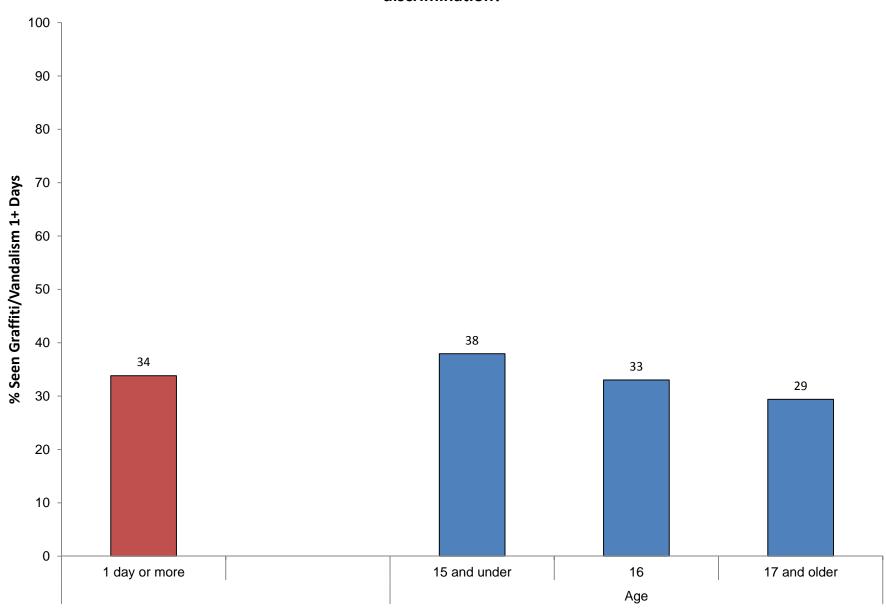
Q98: I am making informed personal decisions about sex and my sexuality.



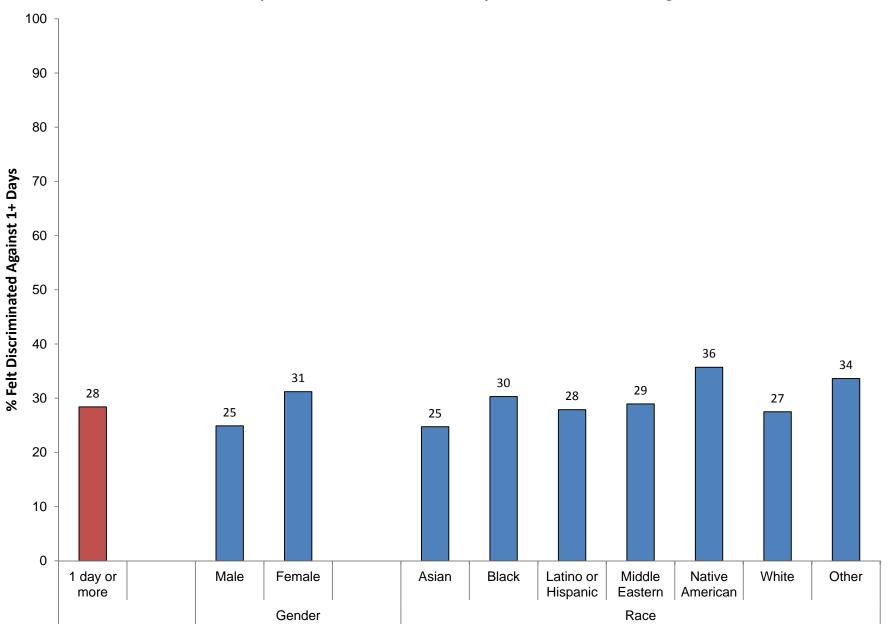
Discrimination

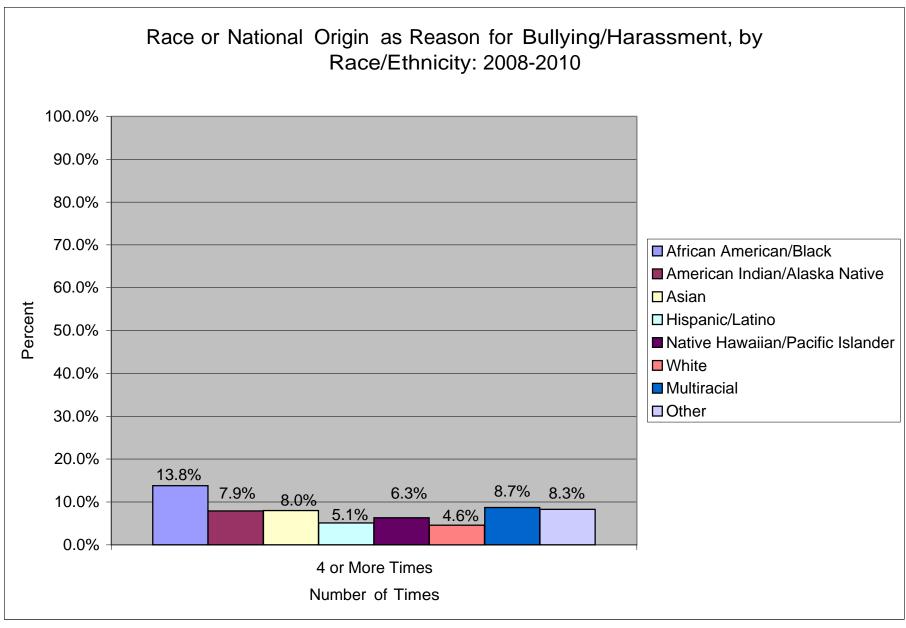
Questions 105 through 111

Q105: In the past month, how many days, have you seen graffiti and/or vandalism related to discrimination?

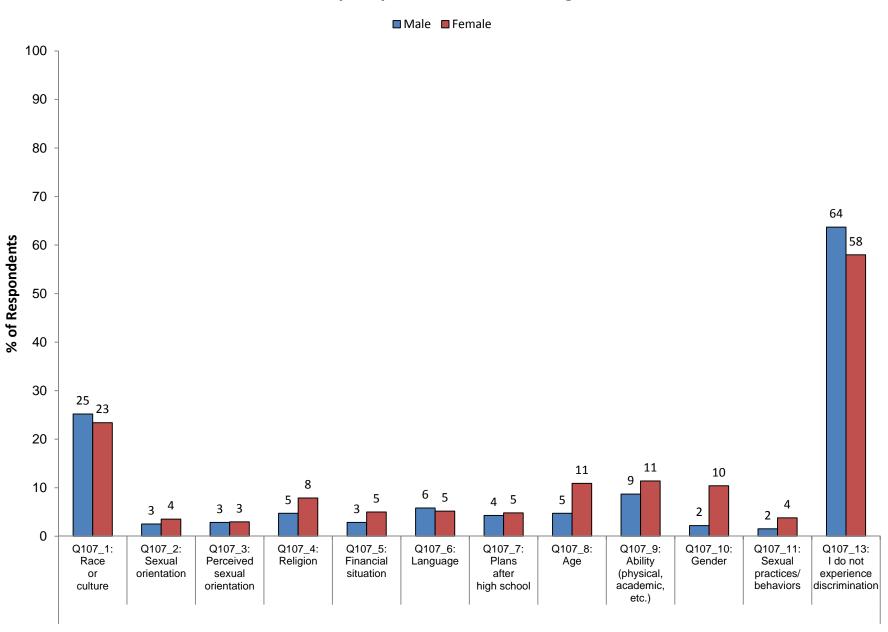


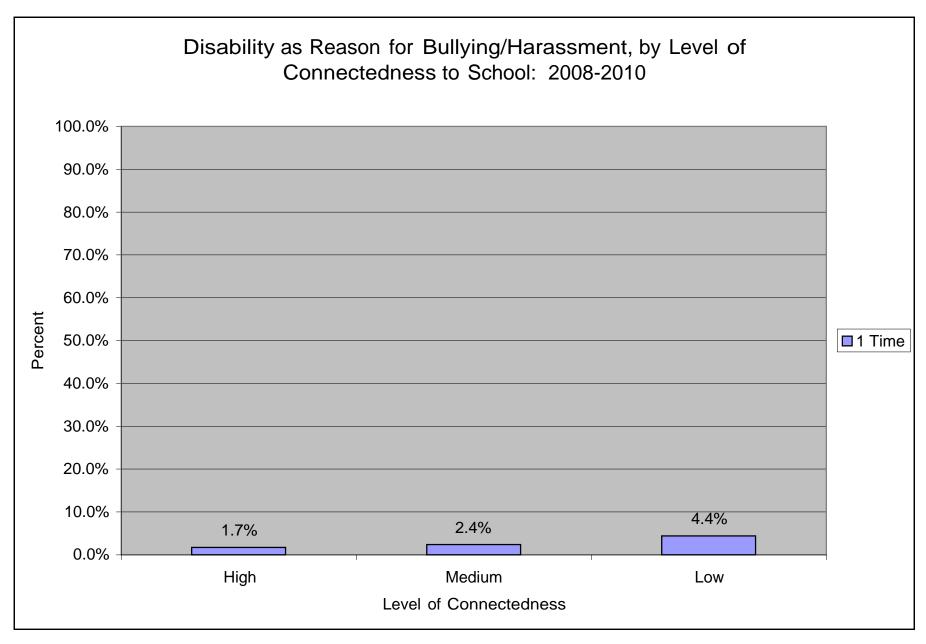
Q106: In the past month, how often have you felt discriminated against?



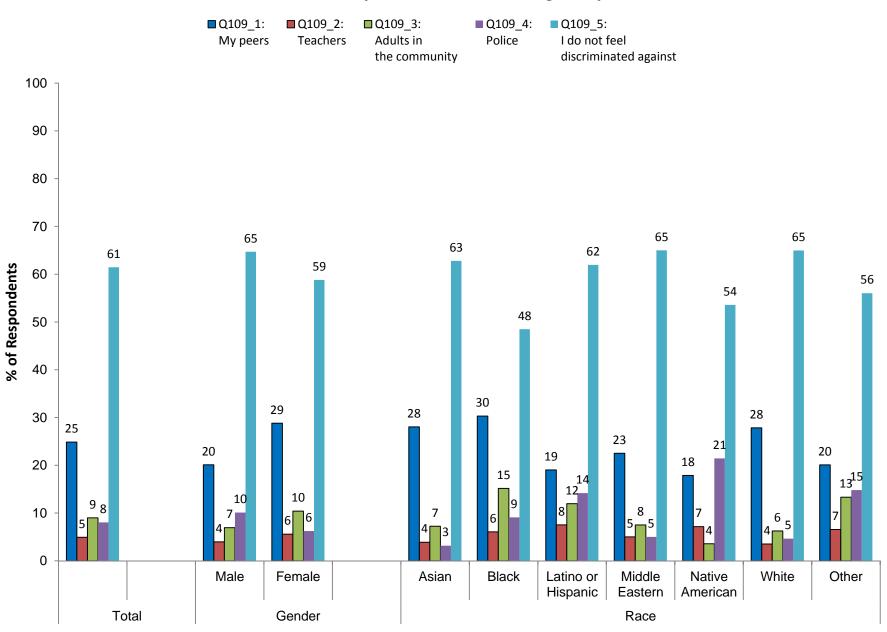


Q107: Why did you feel discriminated against?





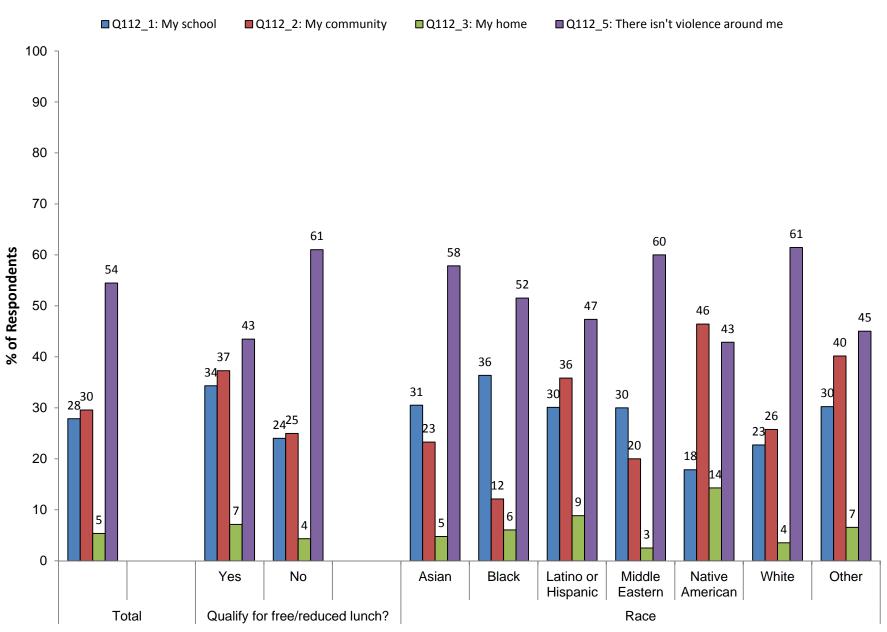
Q109: Who do you feel discriminates against you?

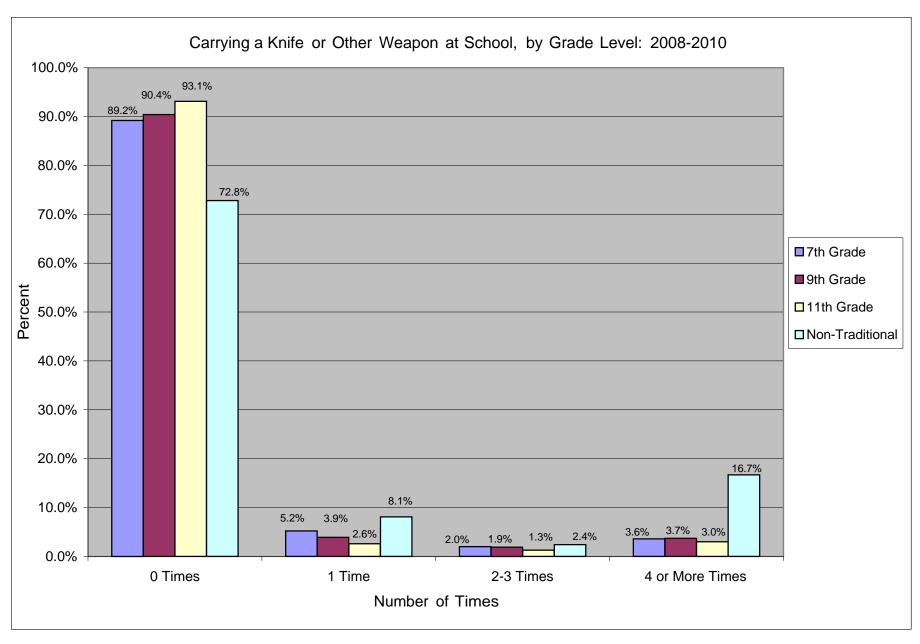


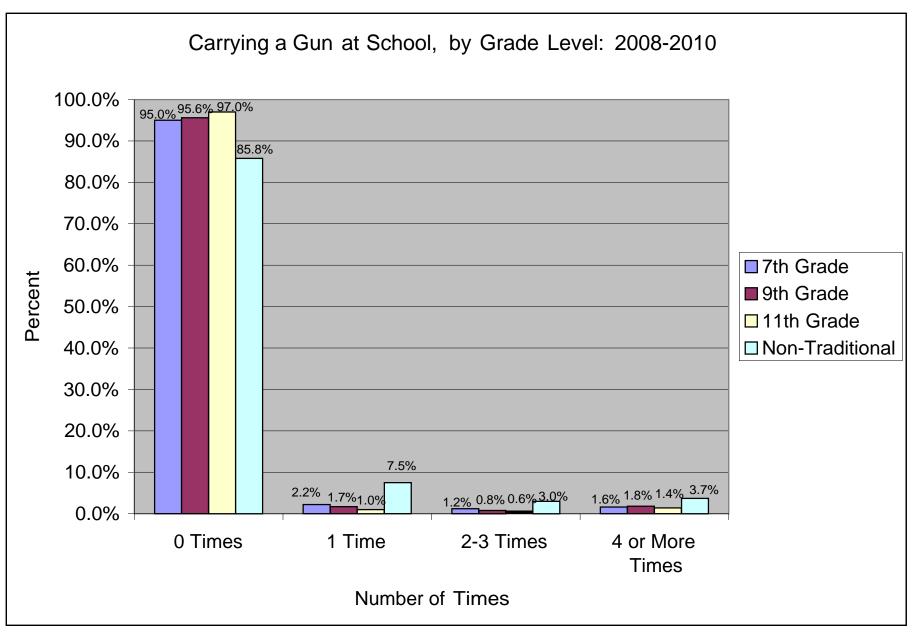
Violence

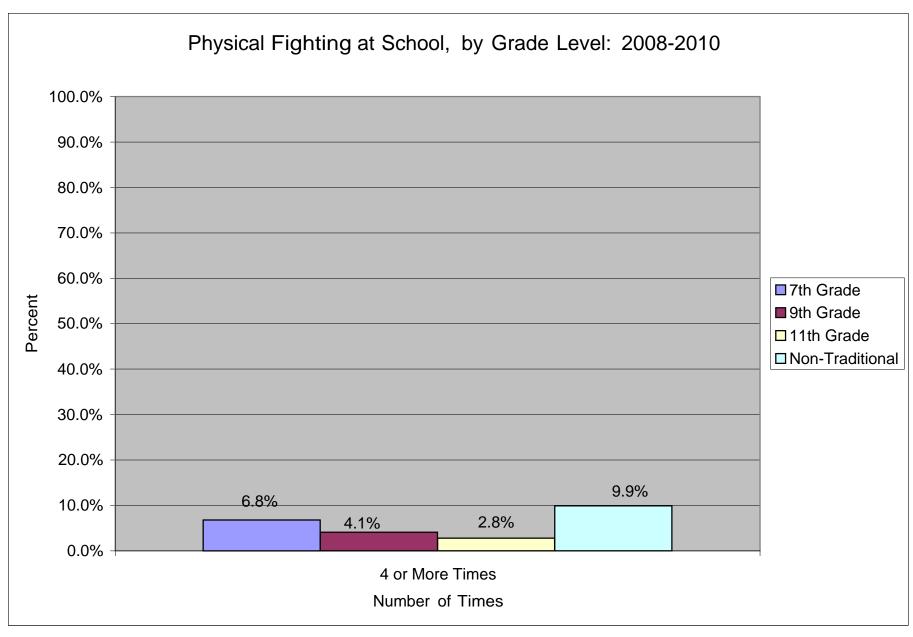
Questions 112 through 133

Q112: I see violence in/at

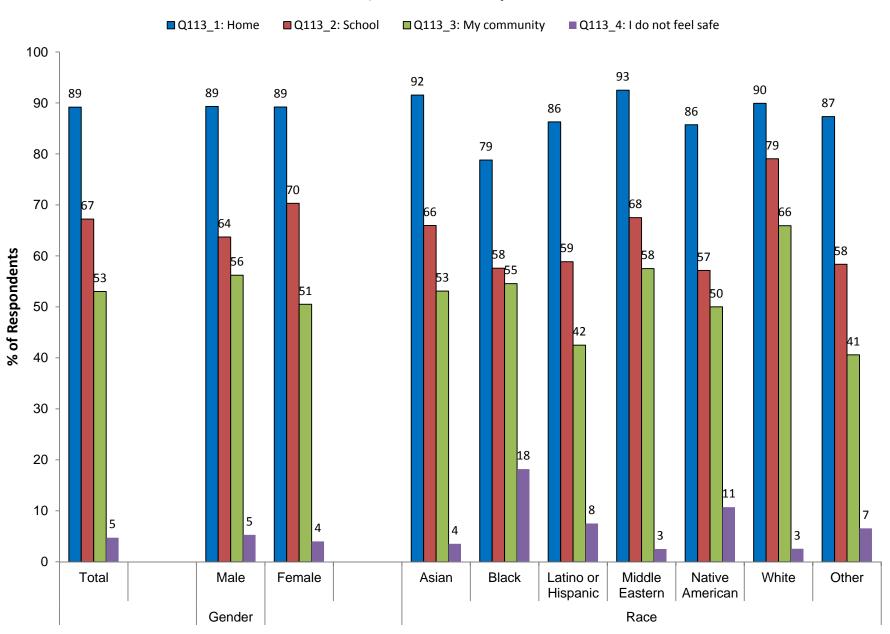


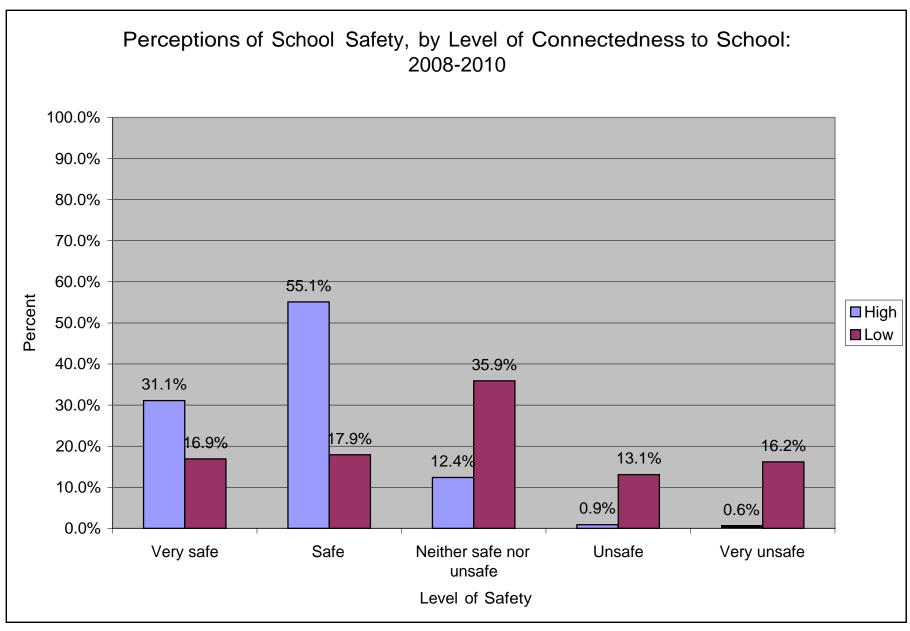




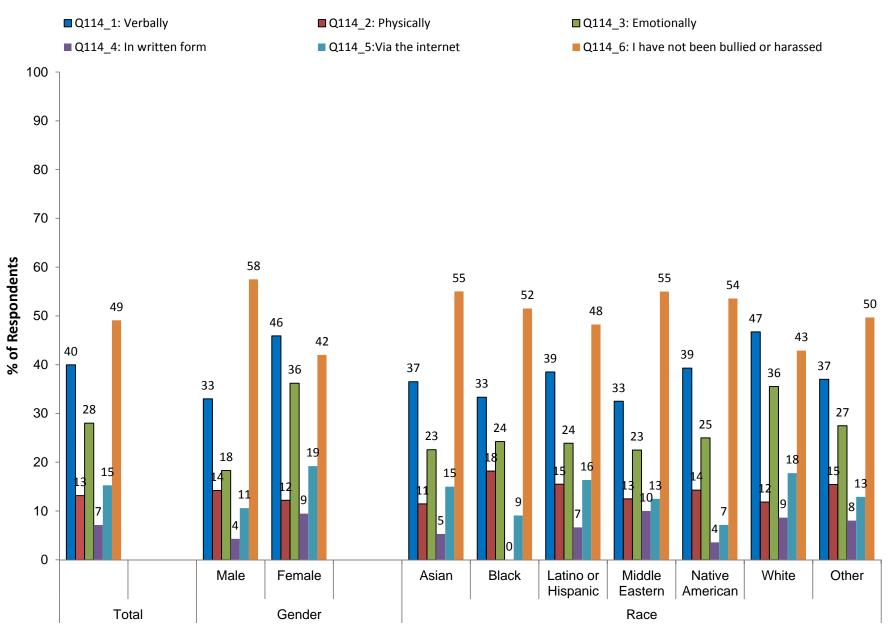


Q113: I feel safe in/at

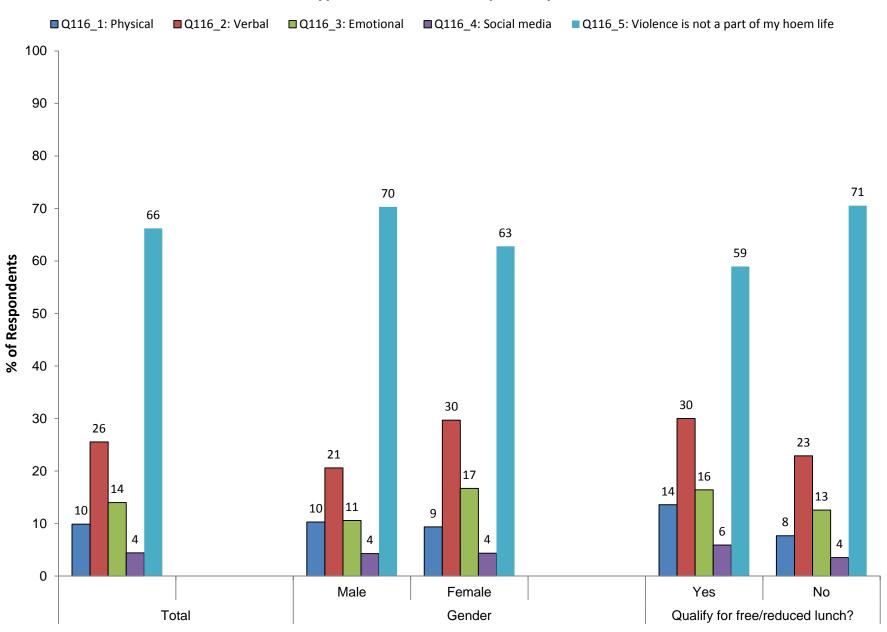




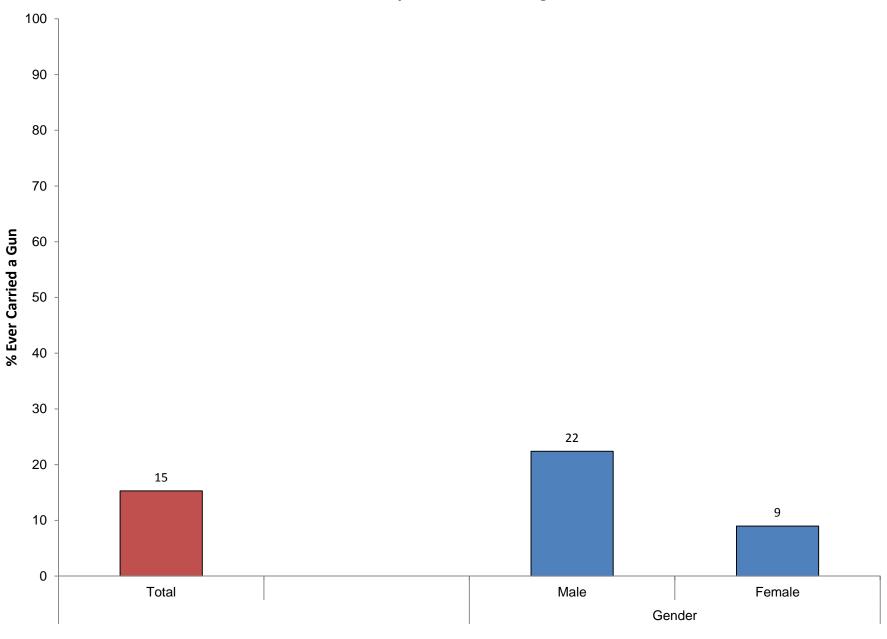
Q114: In what ways have you been bullied or harassed?



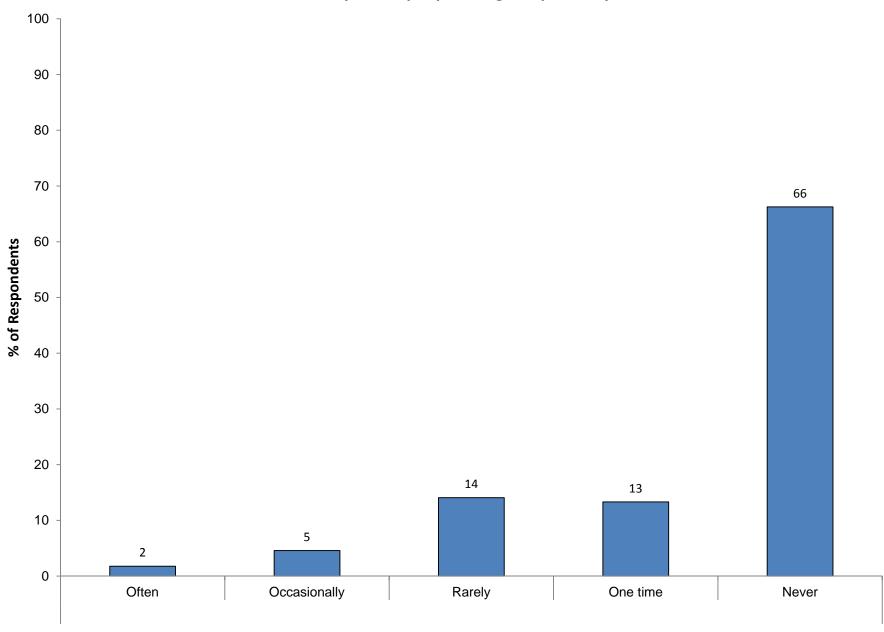
Q116: What types of violence are a part of your home life?



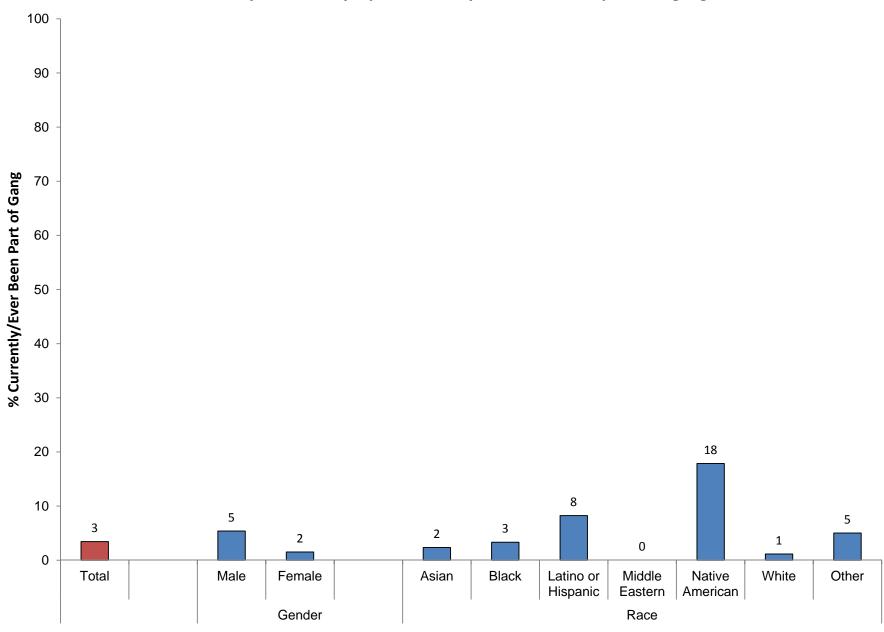
Q120: Have you ever carried a gun?

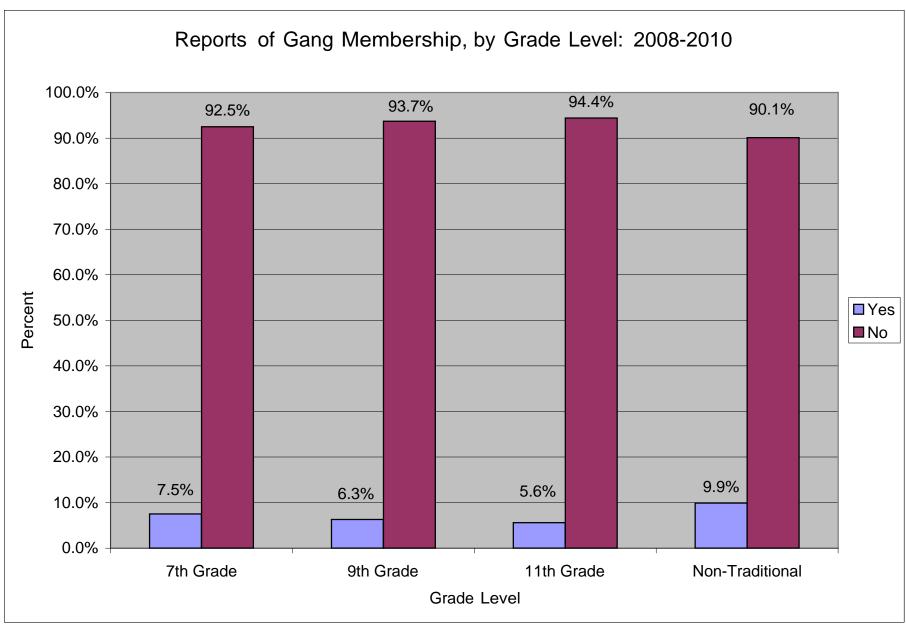


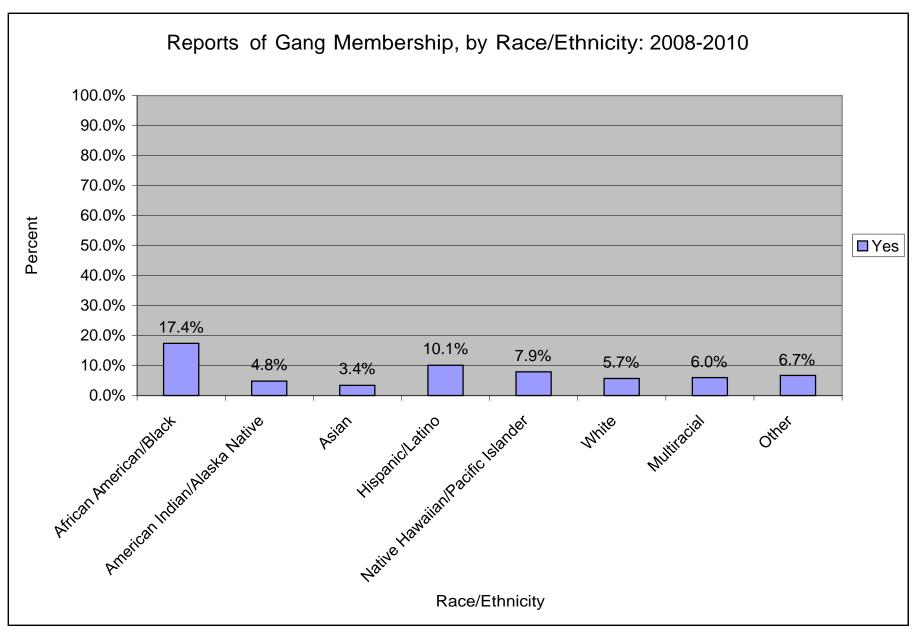
Q121: How often do you see people bring weapons to your school?

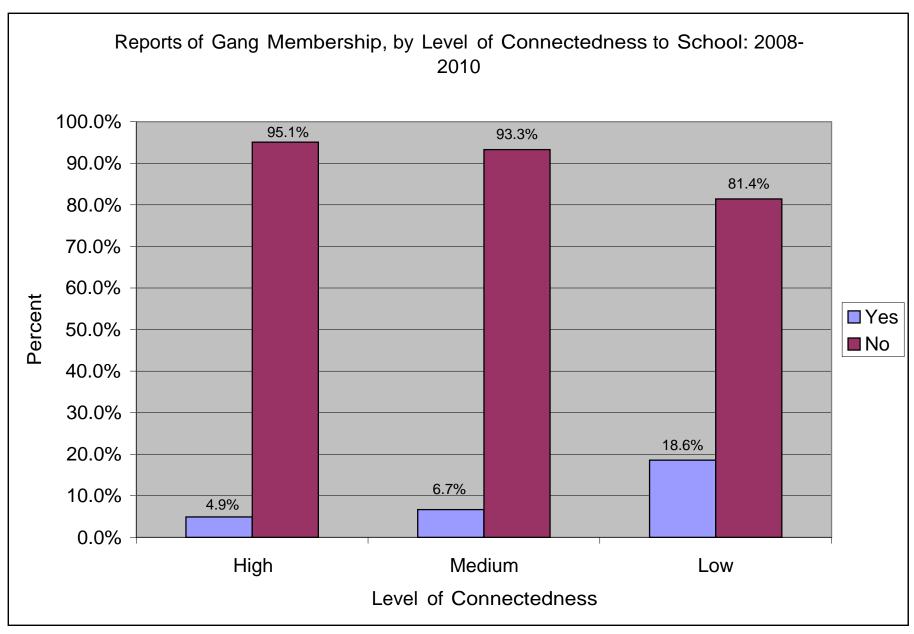


Q122: Are you currently a part or have your ever been a part of a gang?

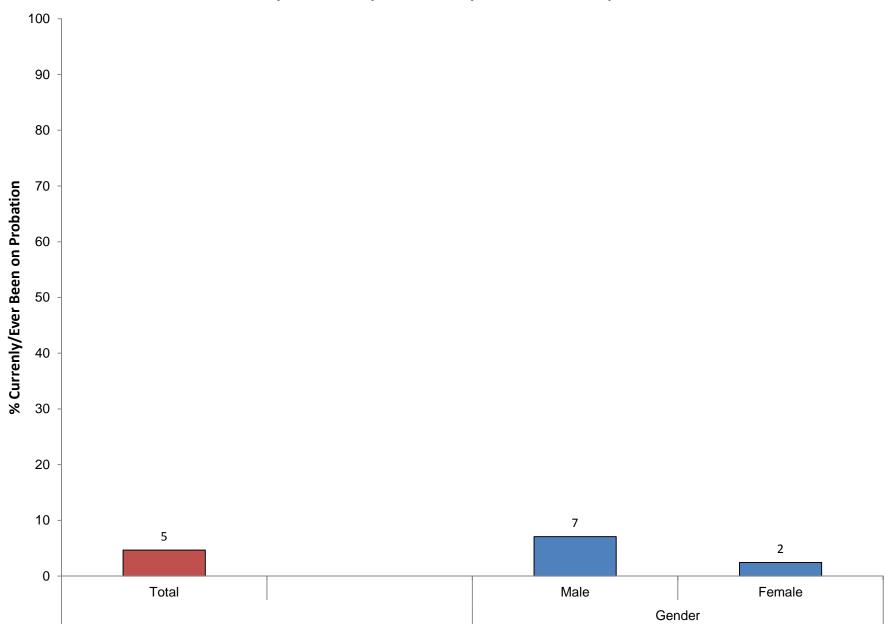




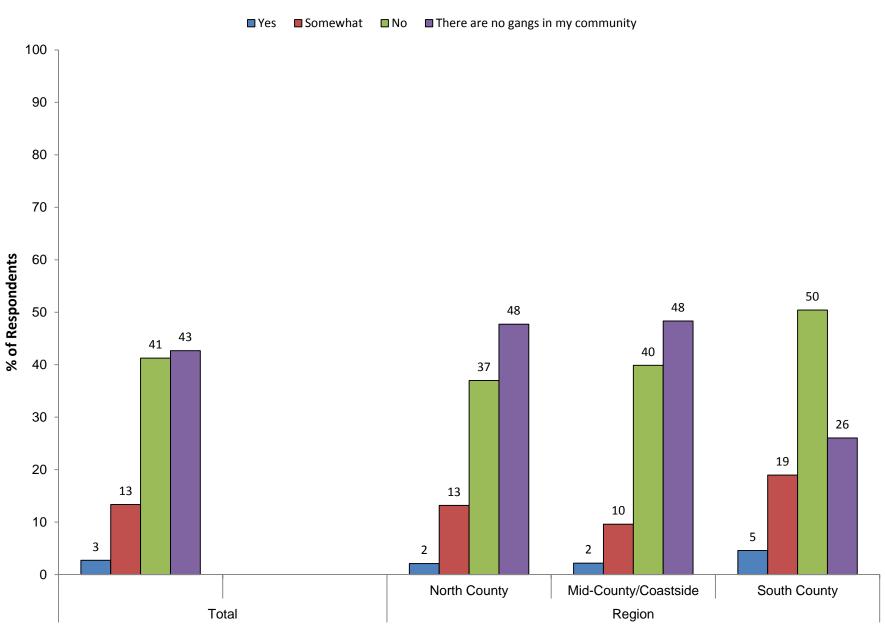




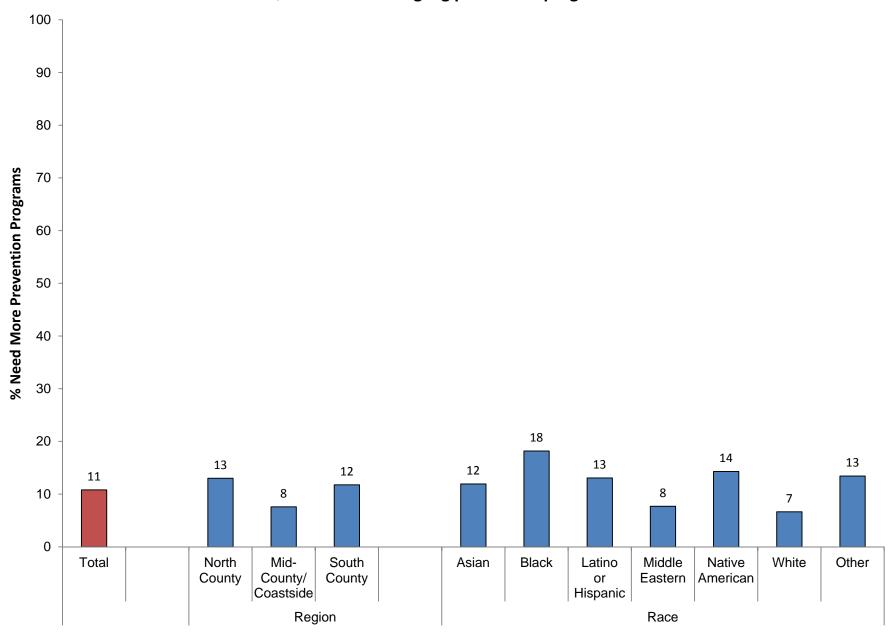
Q126: Are you currently on or have you ever been on probation?



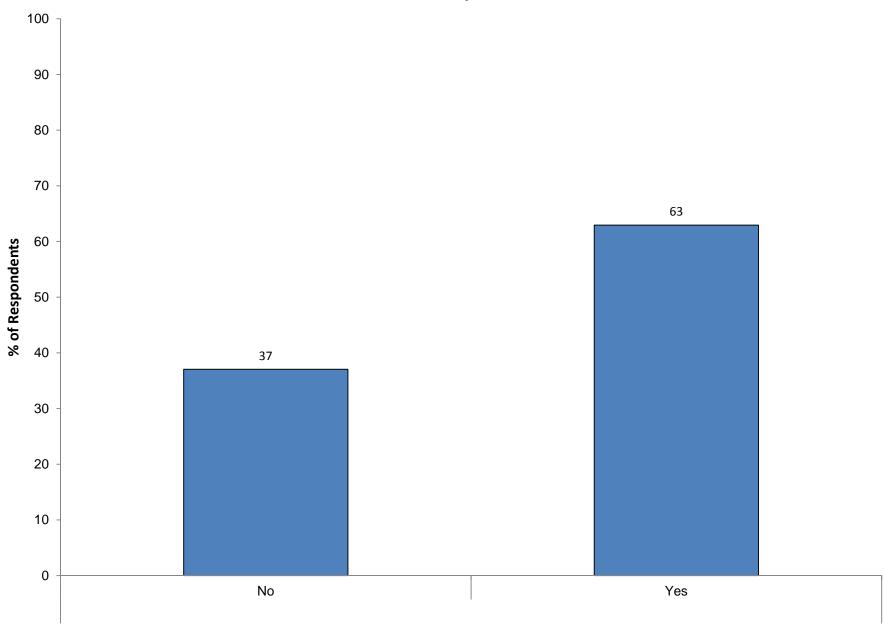
Q125: Do gangs in your community make you feel threatened?



Q128: I need more gang prevention programs.



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APPENDIX 4: HYPOTHESIS TESTING

(Chapter 2)

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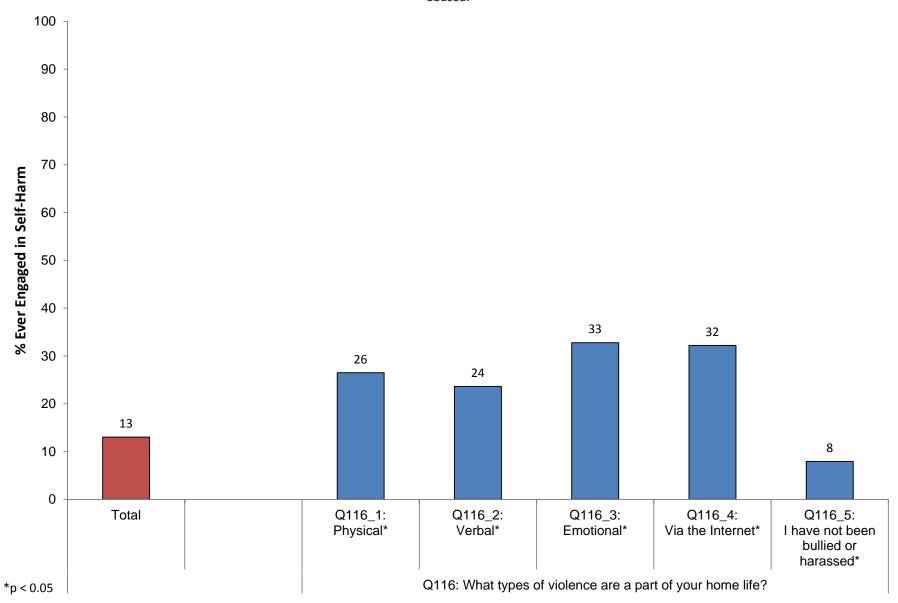
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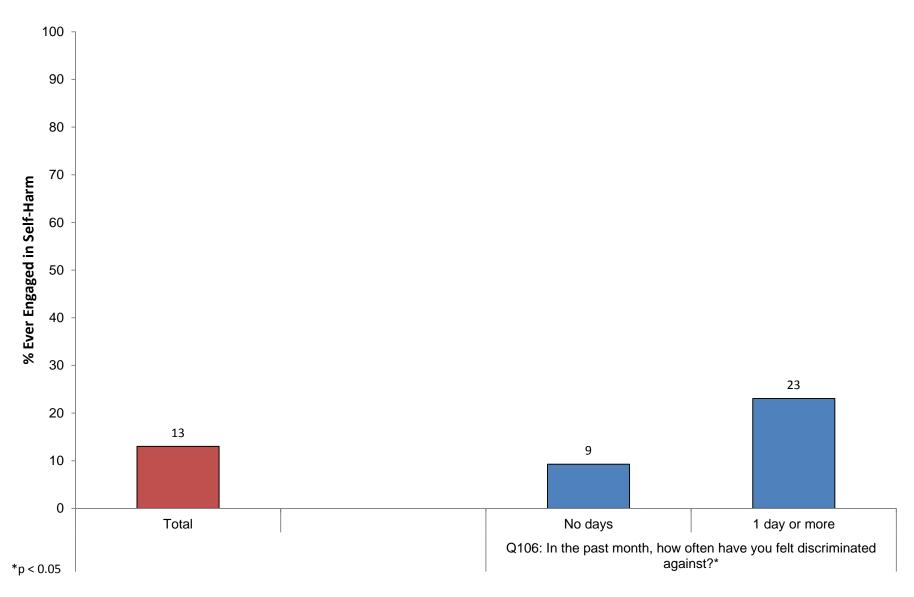
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Overall Health

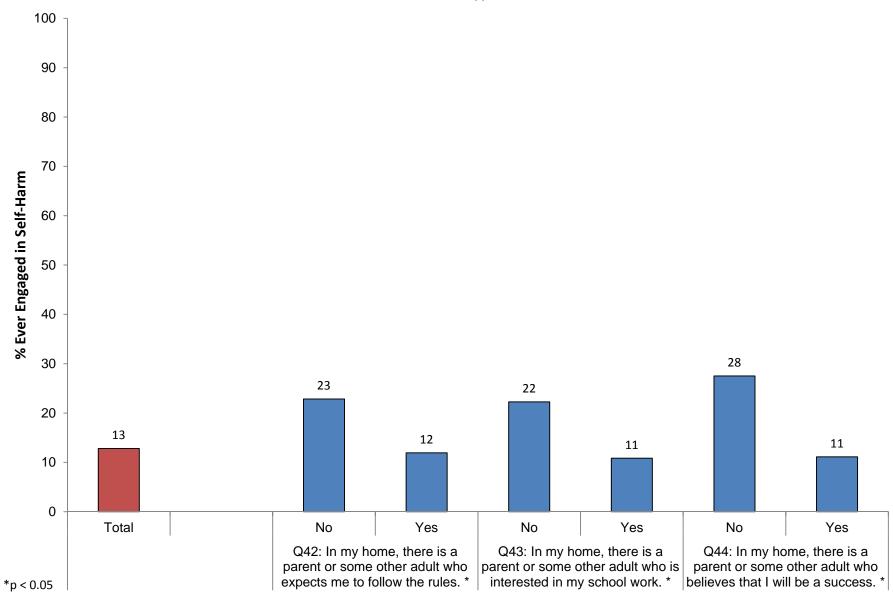
Hypothesis 1: Youth who have been abused or raped are more likely to harm (or think about harming) themselves than those not abused.



Hypothesis 2: Youth who have been a target of discrimination are more likely to harm themselves or think about harming themselves than those not experiencing discrimination.

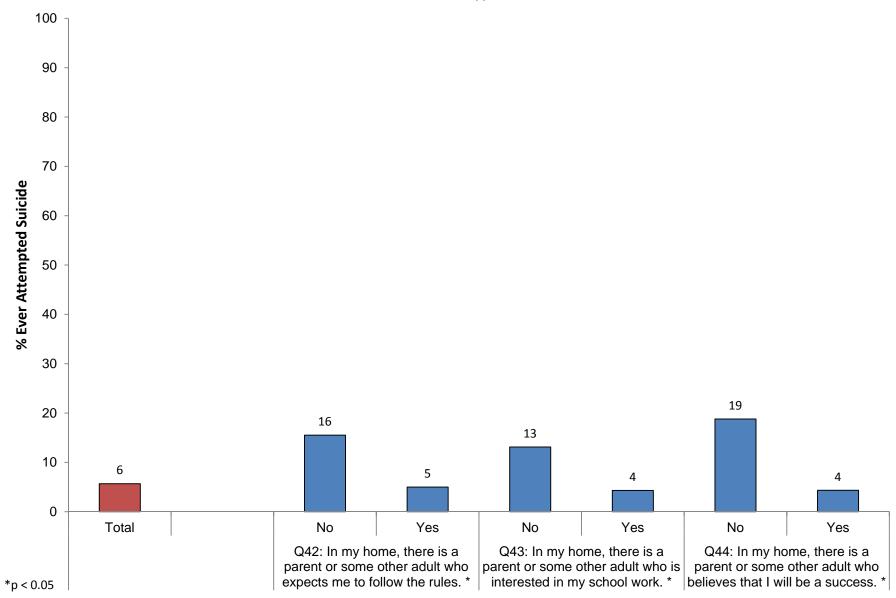


Hypothesis 3: Youth who do not have emotional support or stress outlets are more likely to contemplate/attempt suicide/self-harm than those who have support/outlets.



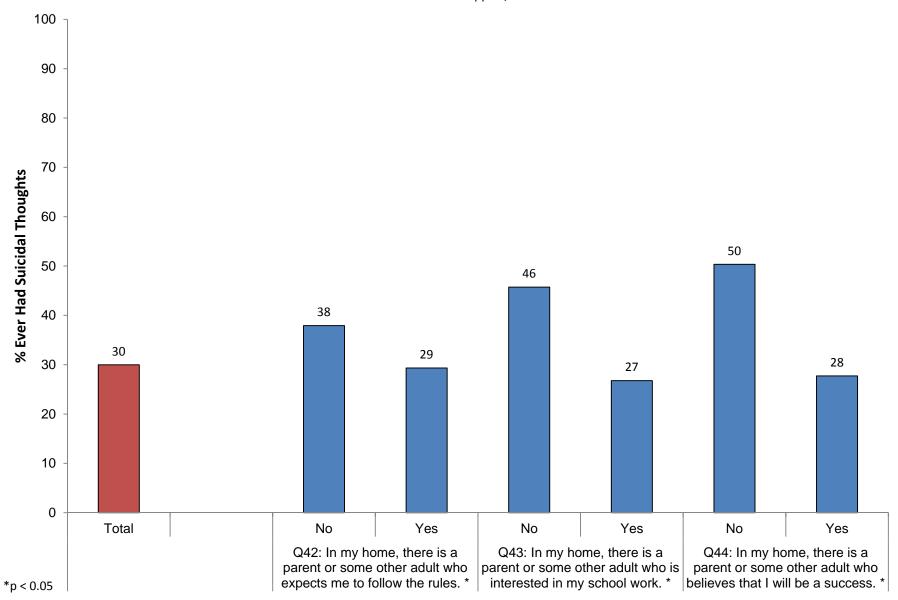
#16: Have you ever attempted suicide?

Hypothesis 3: Youth who do not have emotional support or stress outlets are more likely to contemplate/attempt suicide/self-harm than those who have support/outlets.

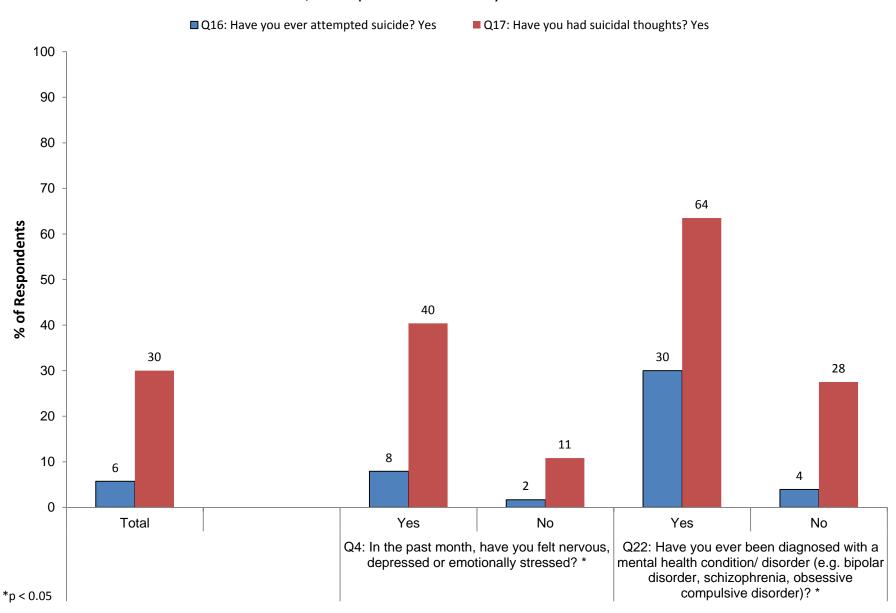


#17: Have you had suicidal thoughts?

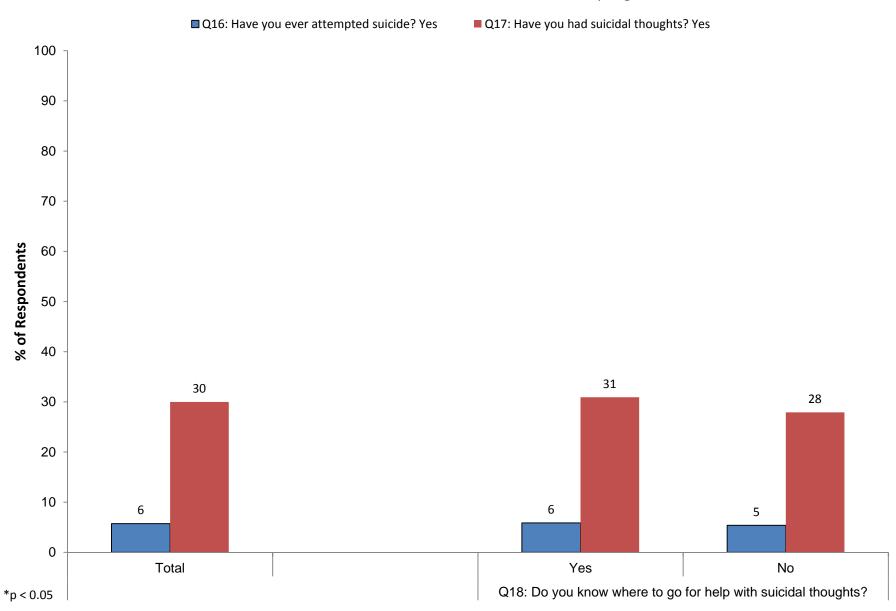
Hypothesis 3: Youth who do not have emotional support or stress outlets are more likely to contemplate/attempt suicide/self-harm than those who have support/outlets.



Hypothesis 4: Youth who have mental health problems are more likely to have thought about/attempted suicide than youth who do not.

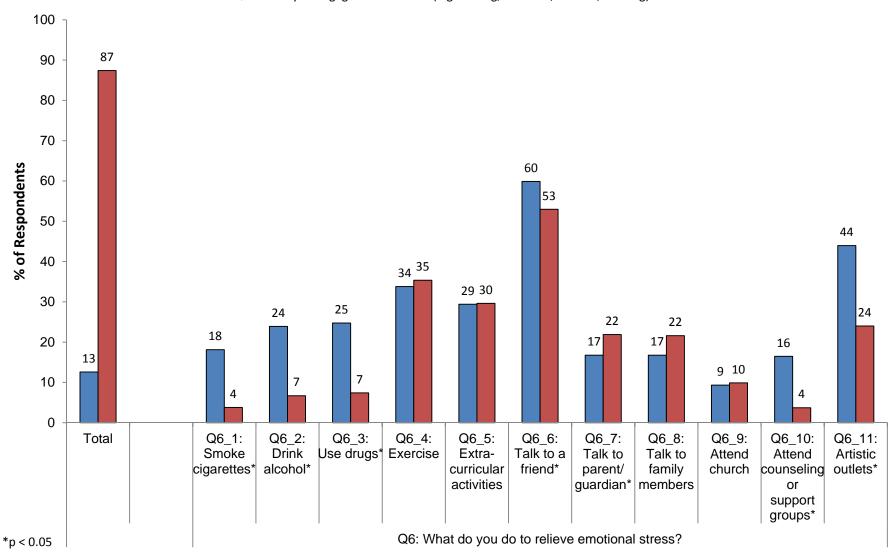


Hypothesis 5: Youth who know of suicide prevention programs are less likely to attempt suicide than those who do not know about these programs.



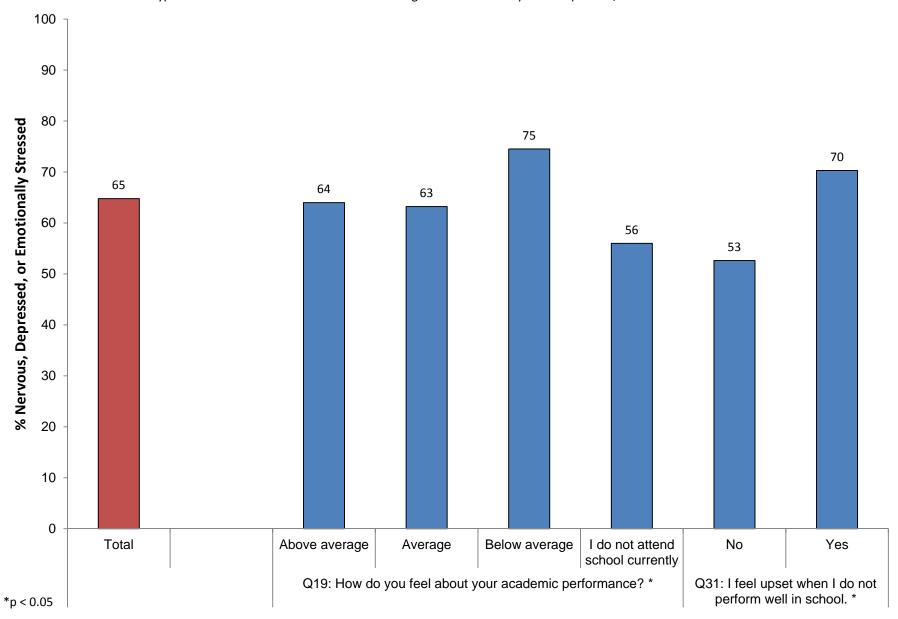
Hypothesis 6: Youth in a bad mental state are less likely to have adequate stress relief than those not in a bad mental state.

■ Q12: Have you engaged in self-harm (e.g. cutting, anorexia, bulimia, burning)? No

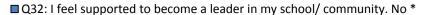


#4: In the past month, have you felt nervous, depressed or emotionally stressed?

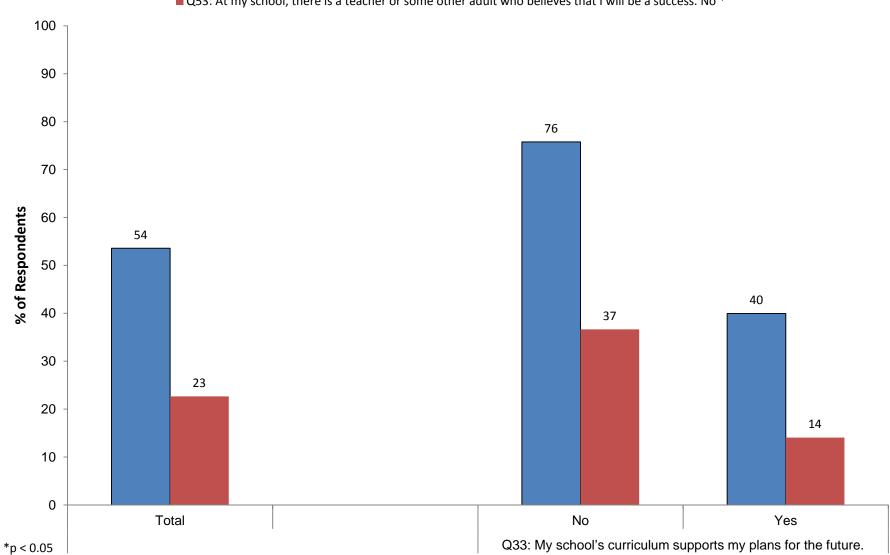
Hypothesis 7: Youth who do not meet academic goals are more likely to be depressed/have lower self esteem.



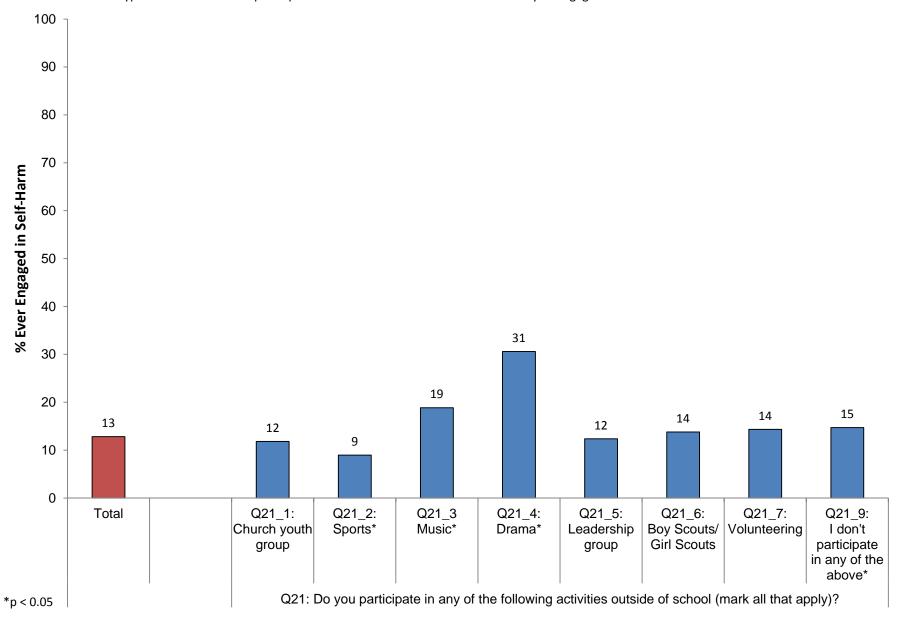
Hypothesis 8: Students with interest outside the core curriculum do not feel supported within school



■ Q53: At my school, there is a teacher or some other adult who believes that I will be a success. No *

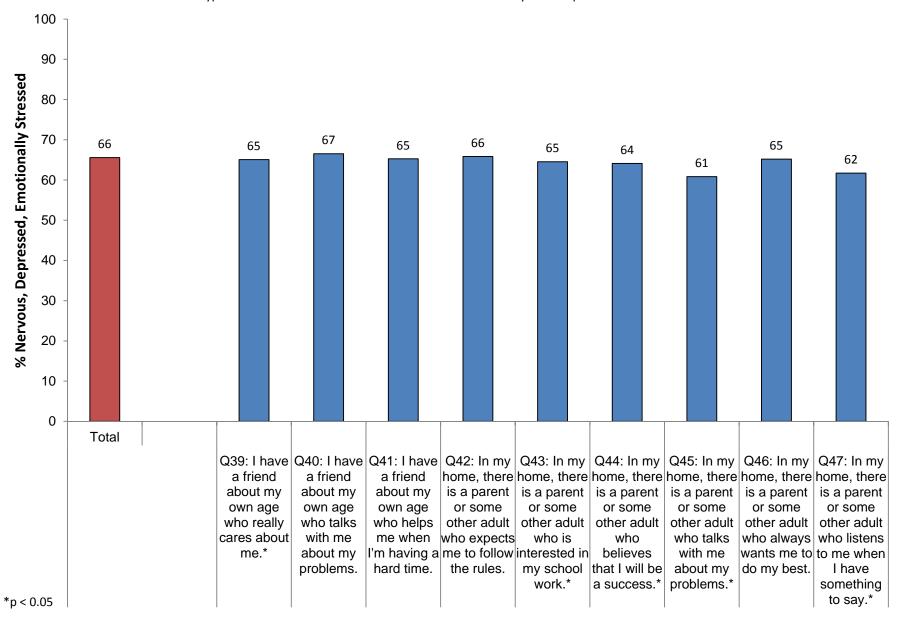


Hypothesis 9: Those who participate in extra-curricular activities are less likely to engage in suicidal or self-harm behaviors.



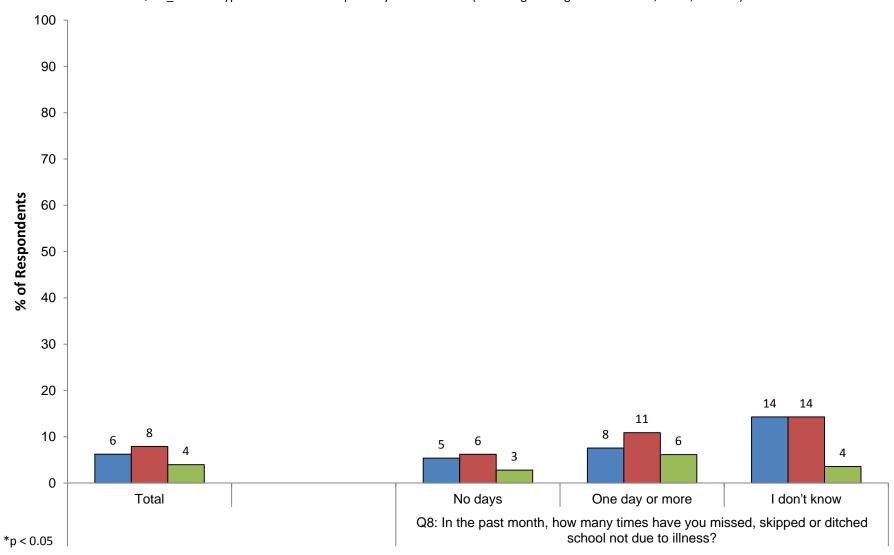
#4: In the past month, have you felt nervous, depressed or emotionally stressed?

Hypothesis 10: Youth in bad emotional states are more likely to trust peers than trust adults.



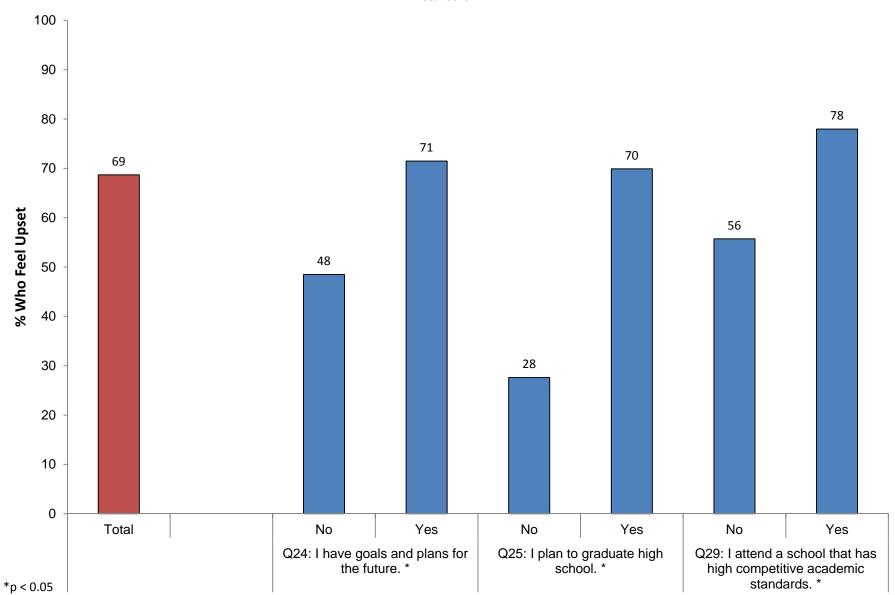
Hypothesis 11: Youth who are bullied online are less likely to attend school regularly.

- Q114_4: In what ways have you been bullied or harassed? In written form. Yes*
- Q115_4: Have you ever bullied or harassed? Via the internet. Yes*
- Q116_4: What types of violence are a part of your home life? (harassing messages on Facebook, email,. Twitter). Yes*

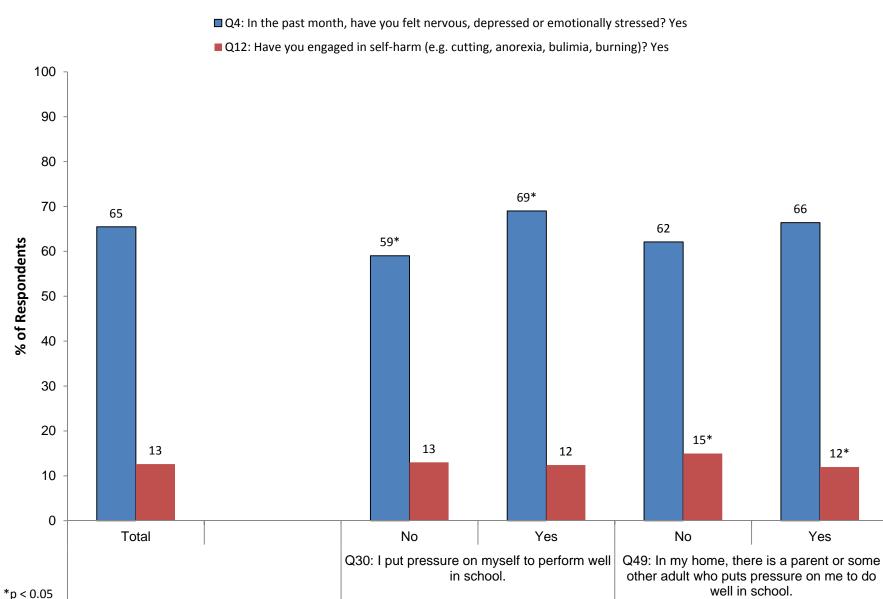


#31: I feel upset when I do not perform well in school.

Hypothesis 12: Youth in a highly competitive academic environment feel they are disadvantaged if they don't perform to a high standard.

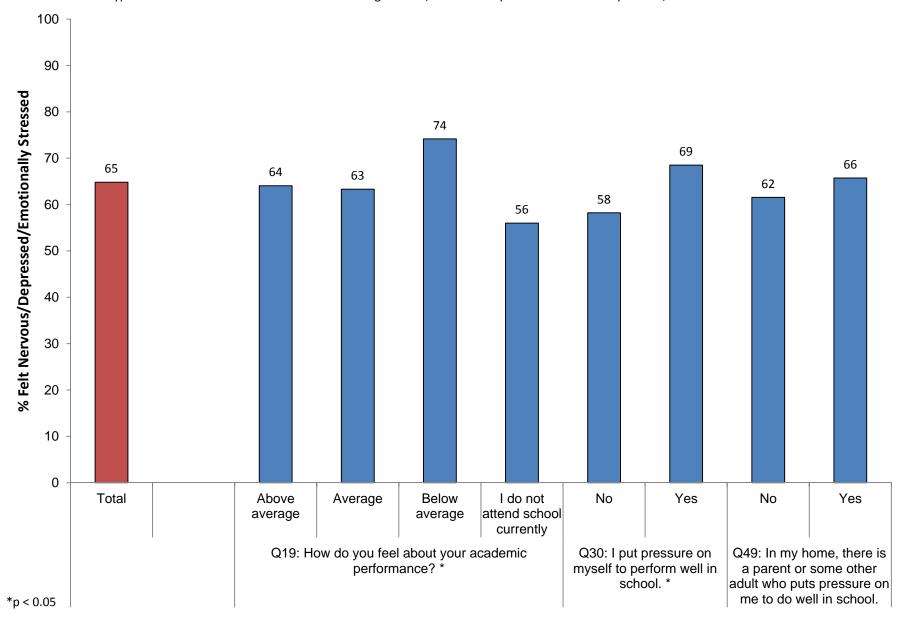


Hypothesis 13: Youth who feel pressured from academic performance are more likely to have abnormal amount of stress and engage in self harm.



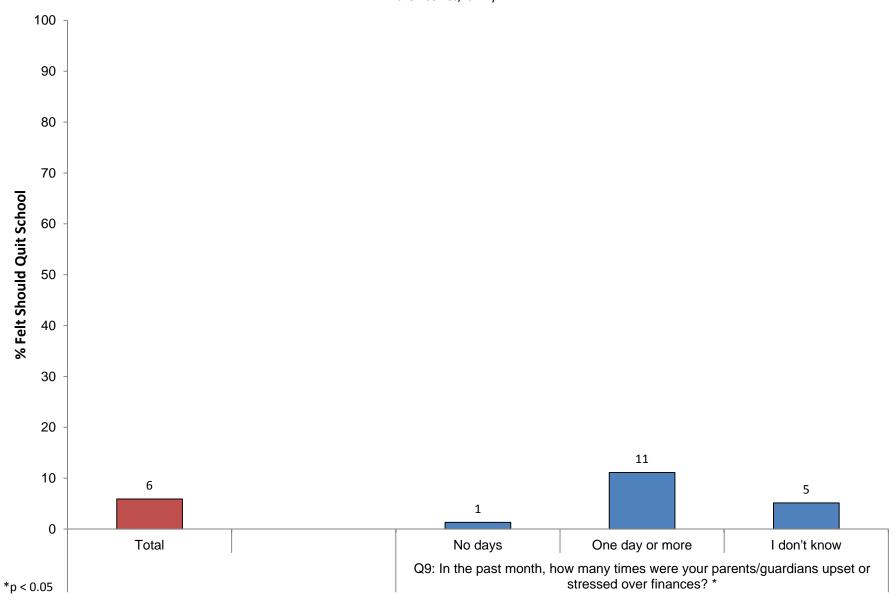
Q4: In the past month, have you felt nervous, depressed or emotionally stressed?

Hypothesis 14: Youth who do not meet academic goals and/or other's expectations fall into depression/have lower self esteem.



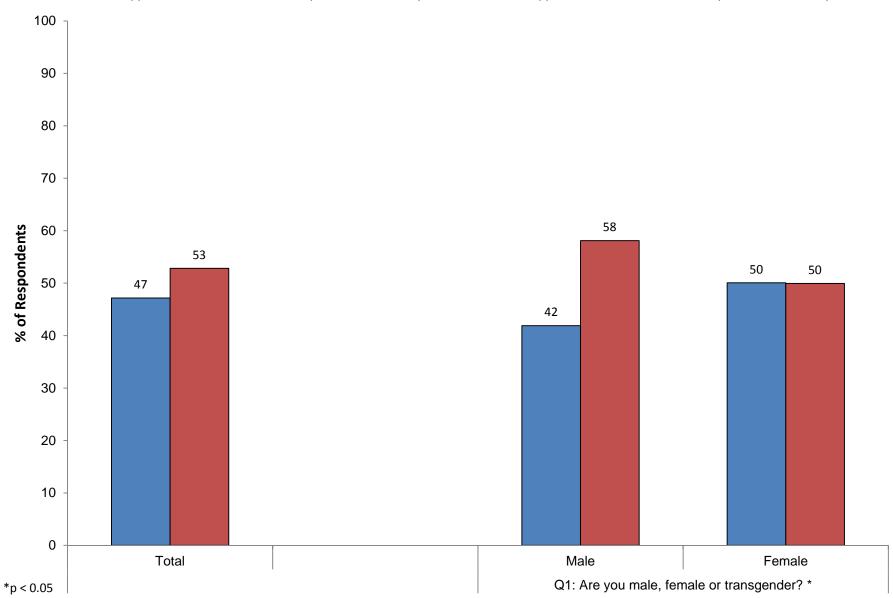
#7: In the past 12 months, did you feel you should quit school to help your family financially?

Hypothesis 15: Youth who feel financial pressure are more likely to have contemplated quitting school to support themselves/family.



Hypothesis 16: Young women do not feel supported to take on leadership roles.

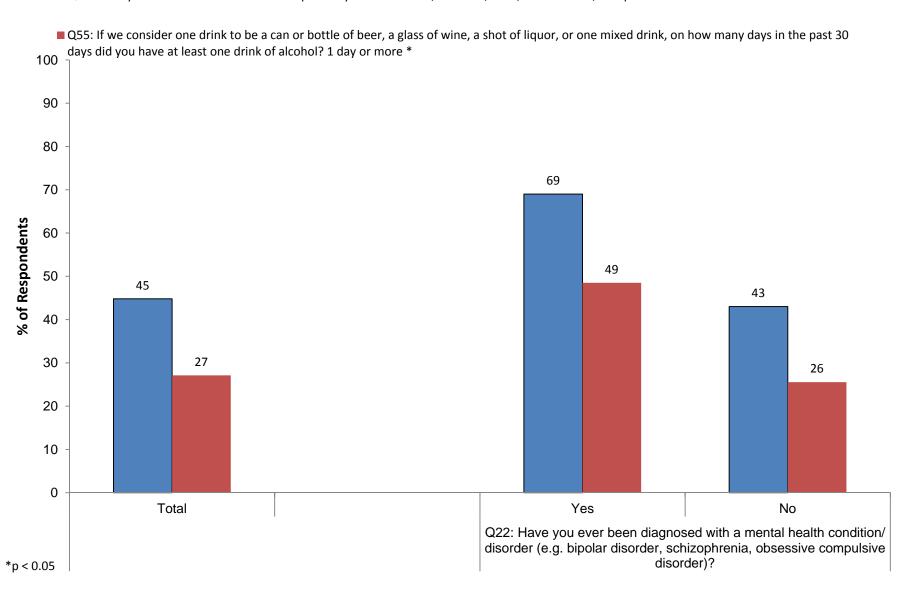
■ Q32: I feel supported to become a leader in my school/ community. Yes ■ Q32: I feel supported to become a leader in my school/ community. No



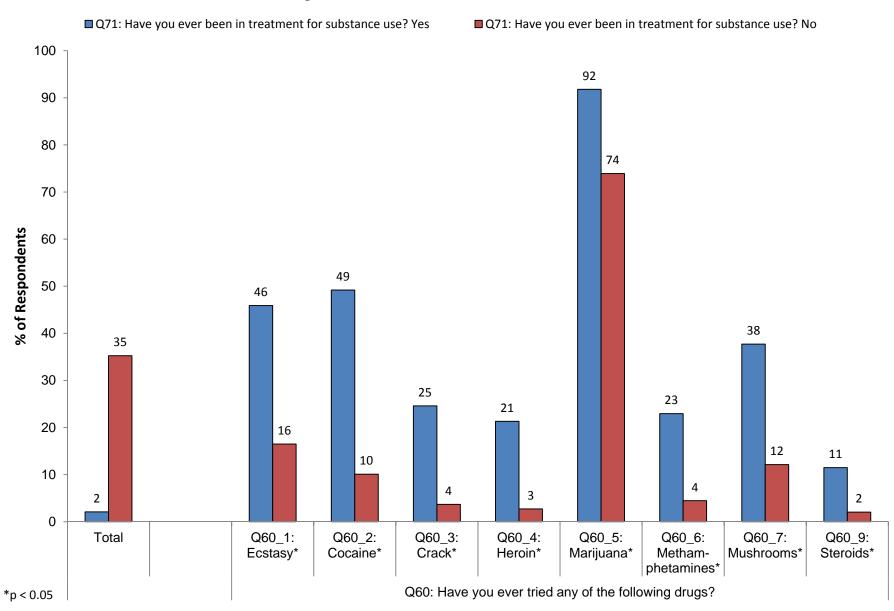
Alcohol, Tobacco and Other Drugs

Hypothesis 1: Youth who have mental health problems are more likely to drink than those who do not have mental health problems.

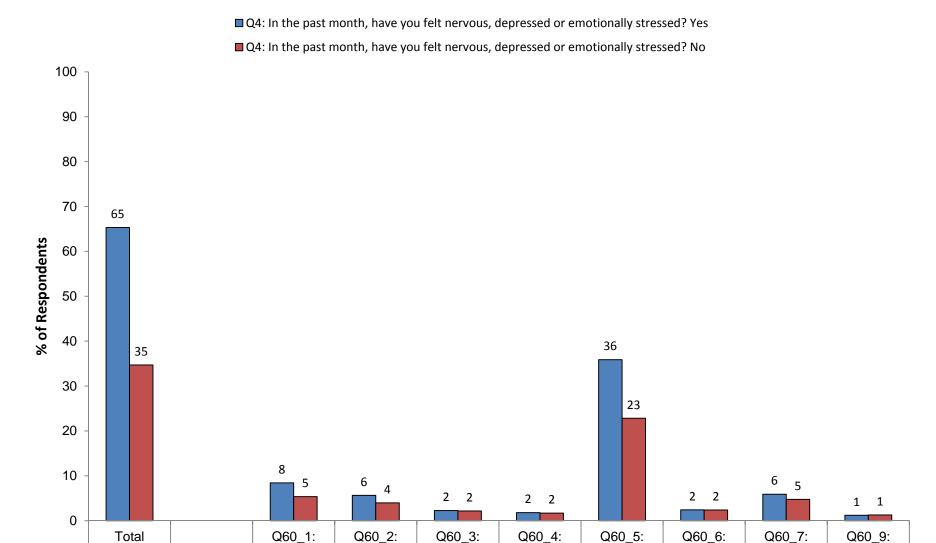
■ Q54: Have you ever had more than a few sips of any alcoholic drink, like beer, wine, mixed drinks, or liquor? Yes *



Hypothesis 2: Youth who do not receive drug education/substance abuse issues are more likely to abuse drugs than those who have received such information.



Hypothesis 3: Youth in a bad mental state are more likely to use drugs than those not in a bad mental state.



Steroids

Mushrooms

Crack

Marijuana*

Heroin

Q60: Have you ever tried any of the following drugs?

Metham-

phetamines

Ecstasy*

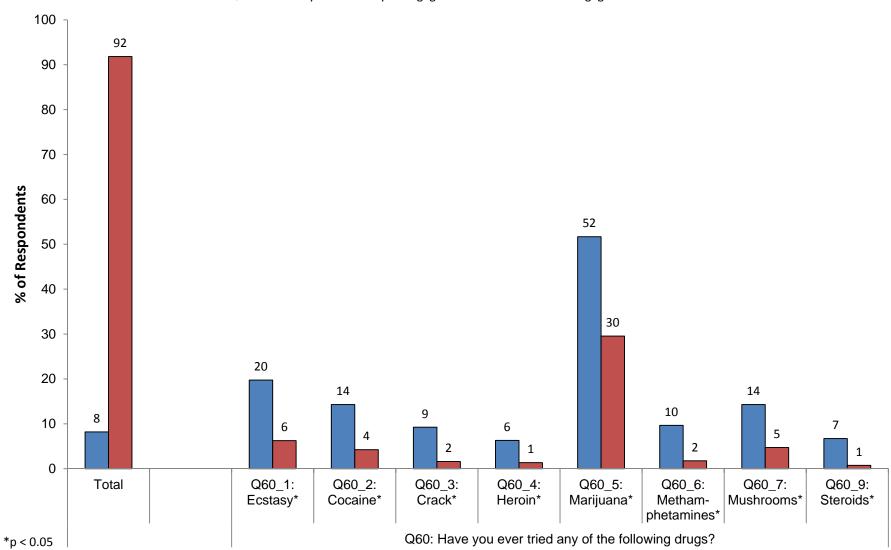
*p < 0.05

Cocaine*

Hypothesis 3: Youth in a bad mental state are more likely to use drugs than those not in a bad mental state.

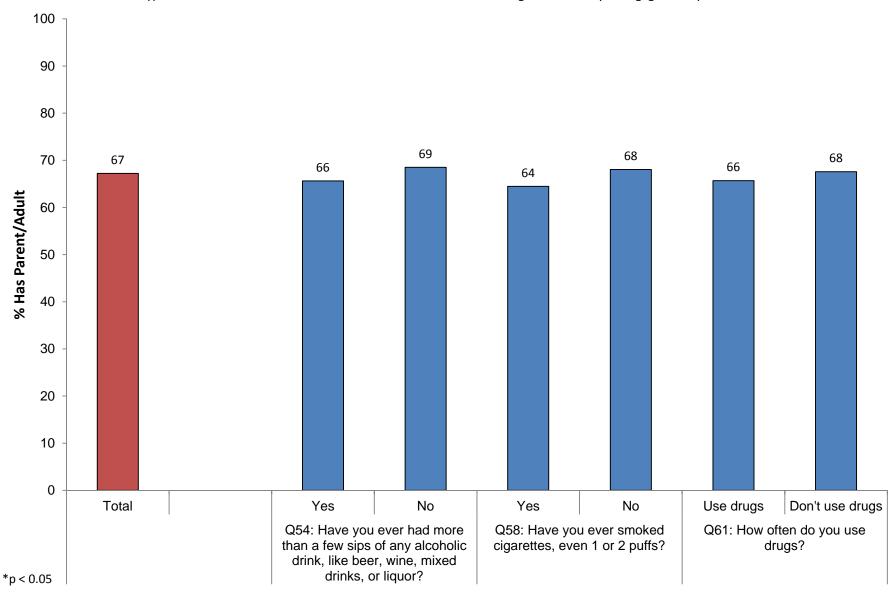


■ Q15: How many times have you engaged in self-harm? I do not engage in self-harm



#80: In my home, there is parent or some other adult who talks to me about the dangers of alcohol, cigarettes and/or drugs.

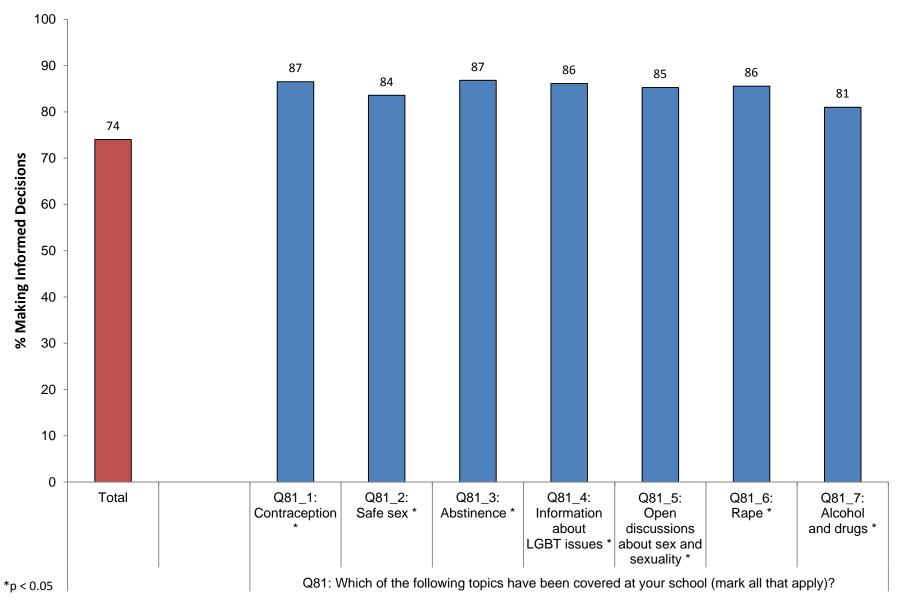
Hypothesis 4: Youth who are educated at home about alcohol and drugs are less likely to engage in risky behavior.



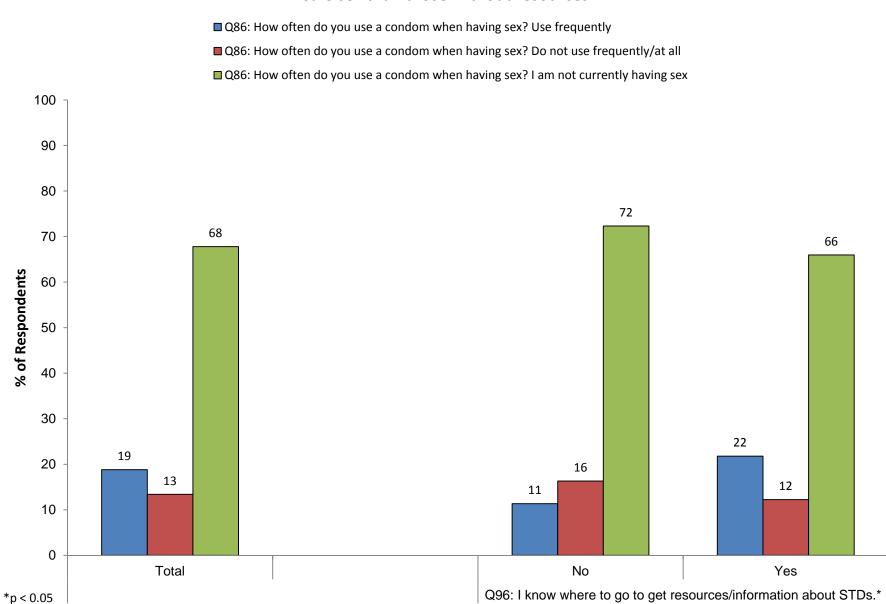
Sex and Sexuality

#98: I am making informed personal decisions about sex and my sexuality.

Hypothesis 1: Youth who receive sex education are more likely to make informed decisions about sex than those without sex education.

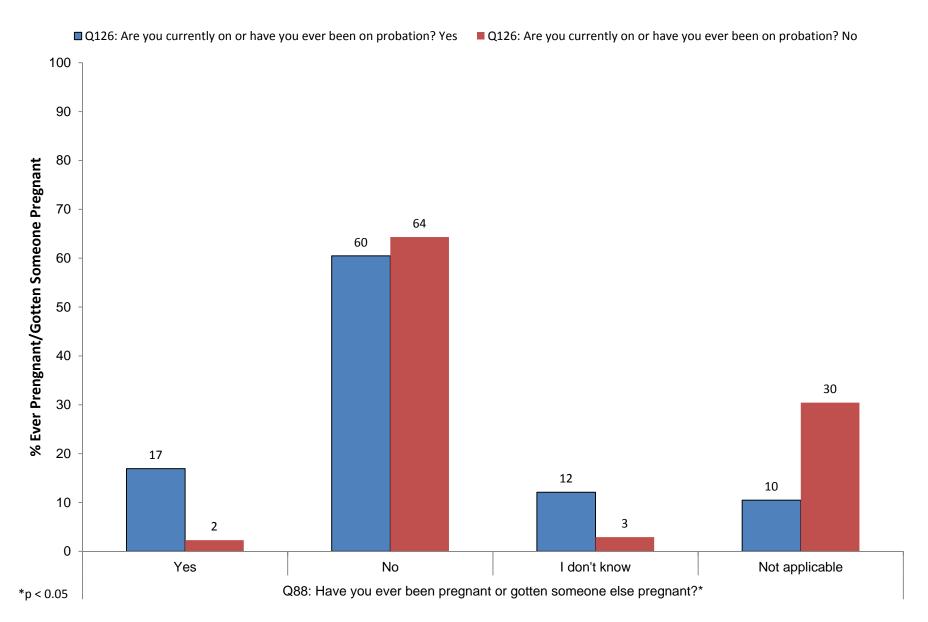


Hypothesis 2: Youth with knowledge / access to community resources are more likely to have safe sex than those without resources.

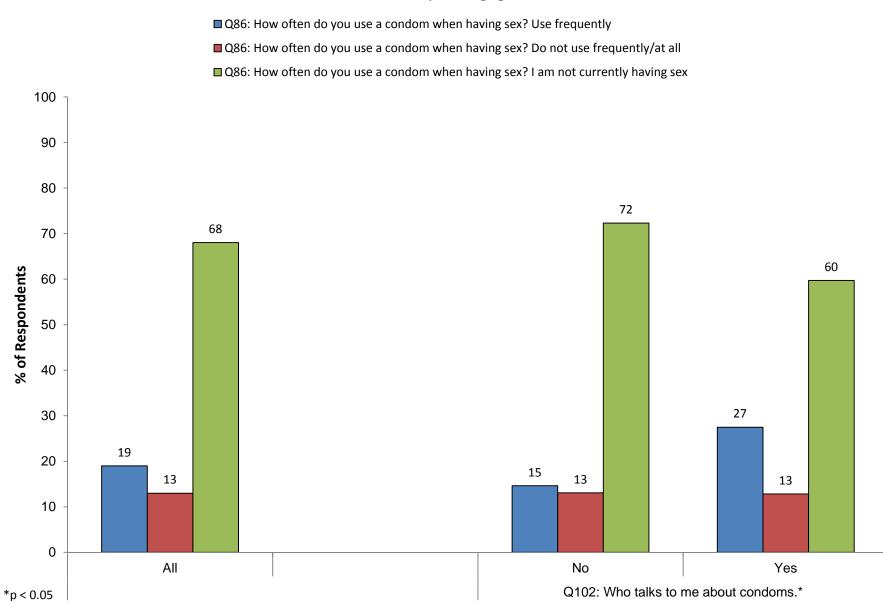


#88: Have you ever been pregnant or gotten someone else pregnant?

Hypothesis 3: Females who have been or are currently on probation are more likely to have been pregnant.



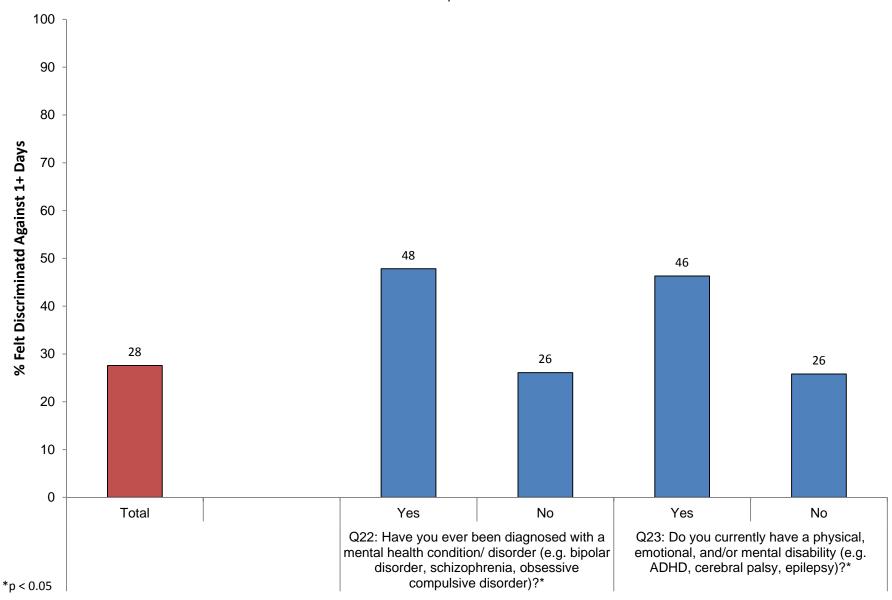
Hypothesis 4: Youth who have open communication with parents or some other adult about sex are more likely to engage in safe sex.



Discrimination

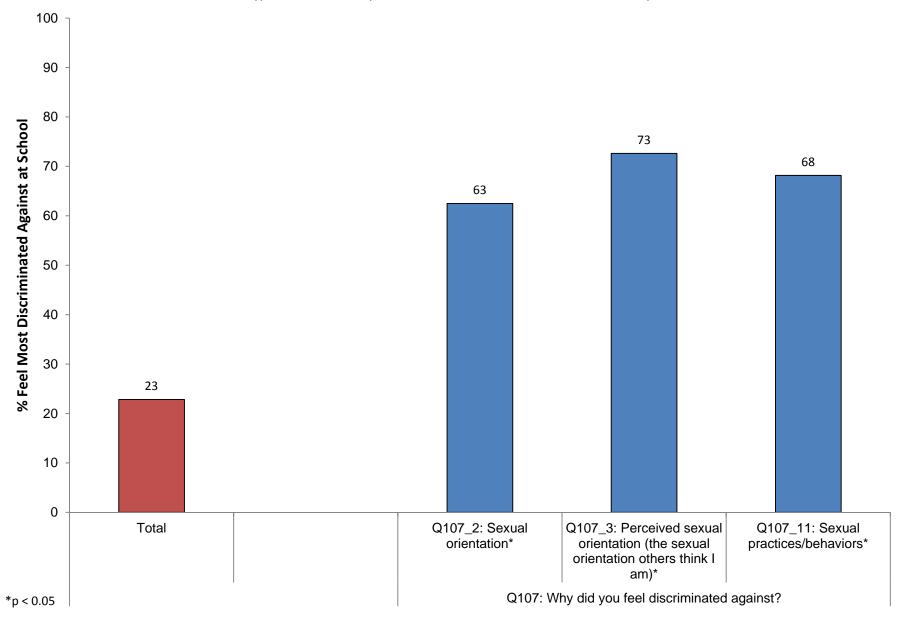
Q106: In the past month, how often have you felt discriminated against?

Hypothesis 1: Youth who have mental health problems or disabilities are more likely to be a target of discrimination than youth who are not mentally ill or disabled.

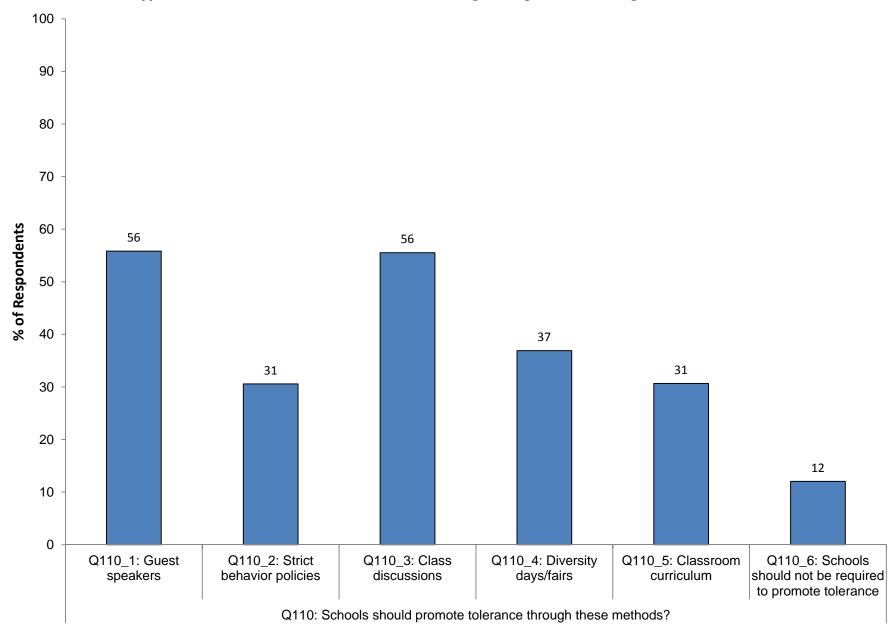


Q108_1: Where do you feel the most discriminated against? At school.

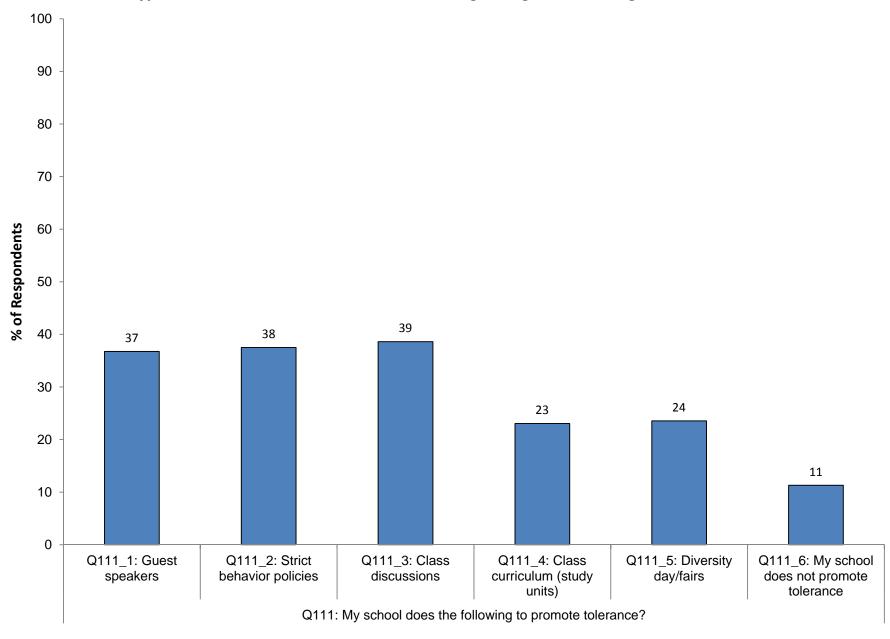
Hypothesis 2: Youth experience discrimination at school based on sexuality.



Hypothesis 3: Youth think schools aren't doing enough to discourage discrimination.

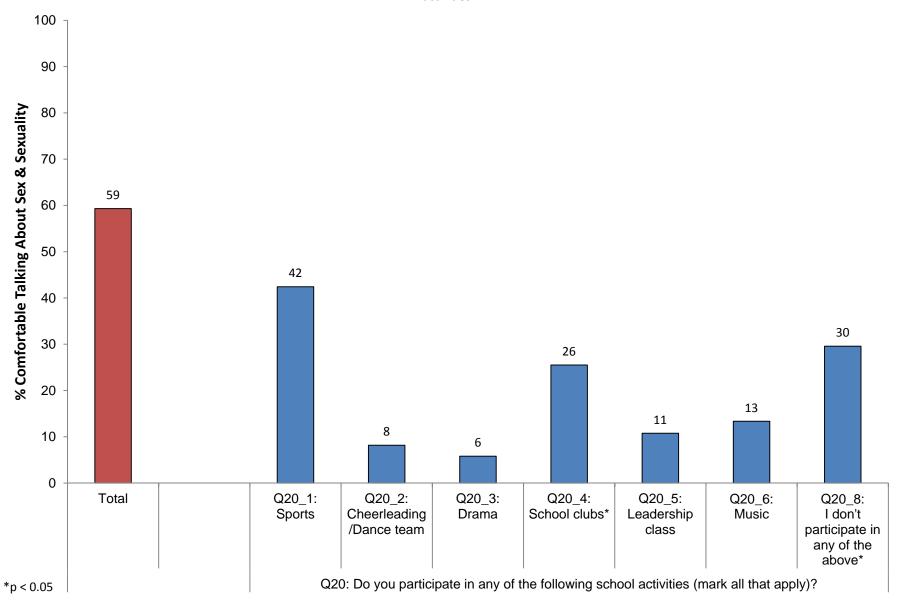


Hypothesis 3: Youth think schools aren't doing enough to discourage discrimination.



Q97: I feel comfortable talking about sex and sexuality.

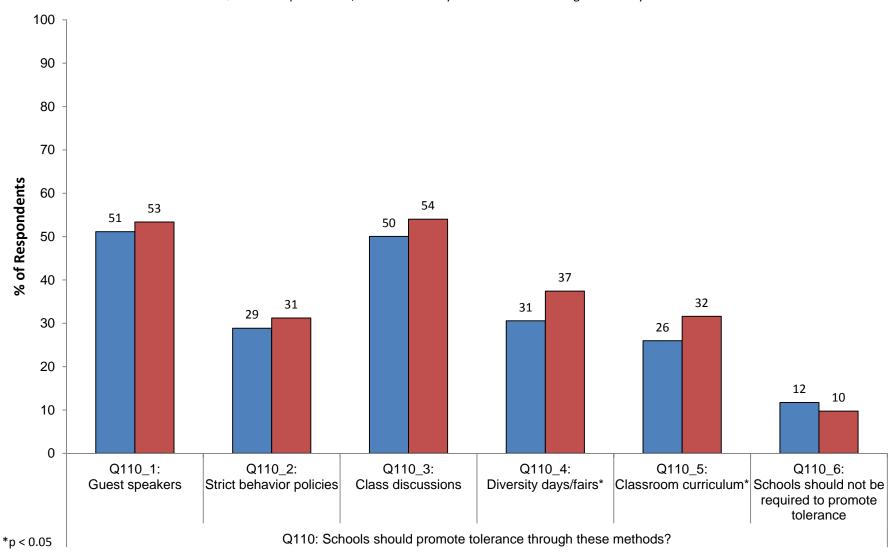
Hypothesis 4: Students comfortable expressing their sexual orientation at school are more likely to become active in school activities.



Hypothesis 5: Youth who have experienced discrimination will have different views about how schools should promote tolerance than youth who have not.

■ Q106: In the past month, how often have you felt discriminated against? No days

■ Q106: In the past month, how often have you felt discriminated against? 1 day or more



Hypothesis 6: Youth from ethnic backgrounds experience more discrimination by law enforcement.

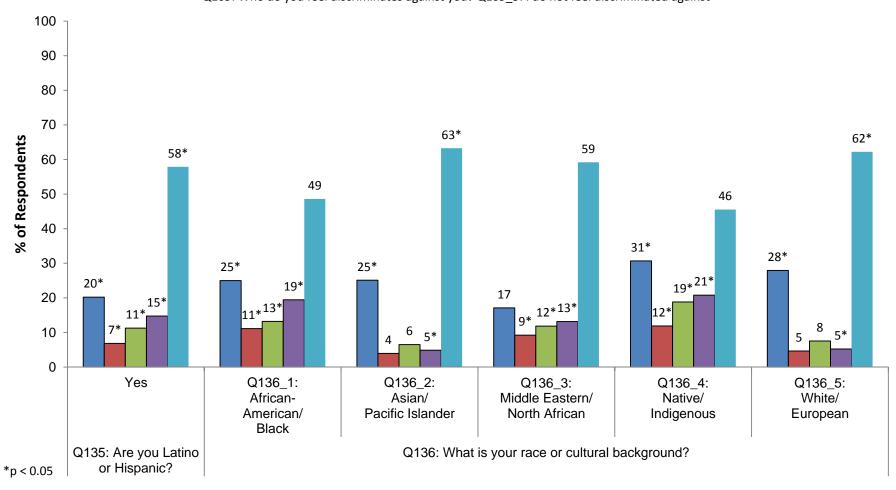
■ Q109: Who do you feel discriminates against you? Q109_1: My peers

■ Q109: Who do you feel discriminates against you? Q109_2: Teachers

■ Q109: Who do you feel discriminates against you? Q109_3: Adults in the community

■ Q109: Who do you feel discriminates against you? Q109_4: Police

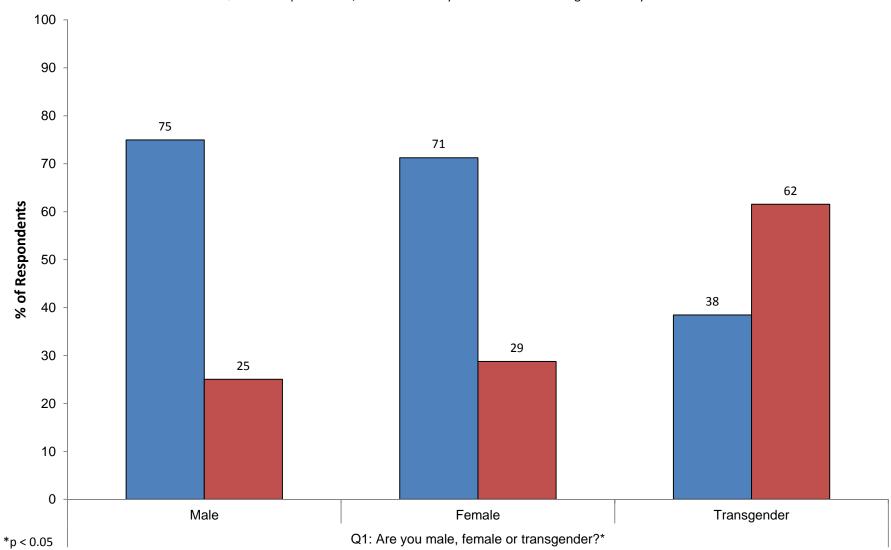
■ Q109: Who do you feel discriminates against you? Q109 5: I do not feel discriminated against



Hypothesis 7: Youth who have nontraditional gender performance feel discriminated against/isolated.

■ Q106: In the past month, how often have you felt discriminated against? No days

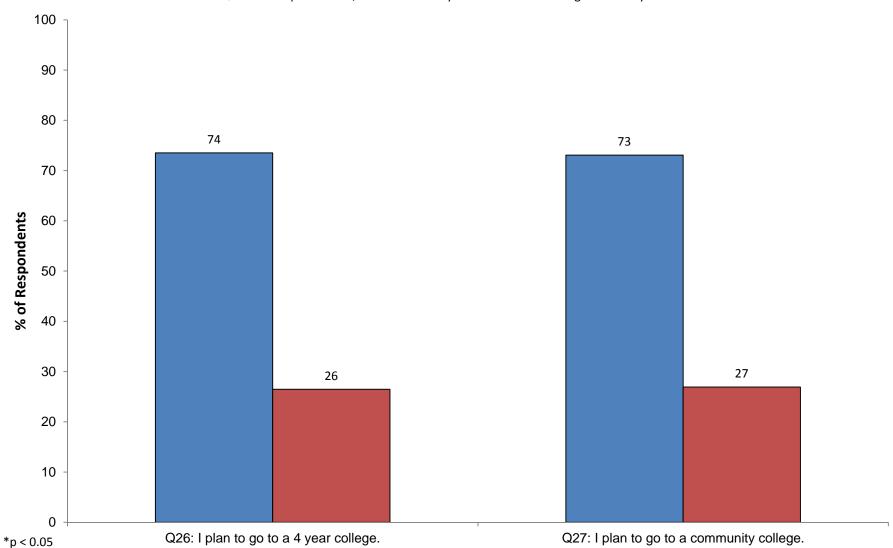
■ Q106: In the past month, how often have you felt discriminated against? 1 day or more



Hypothesis 8: Youth who attended or plan to attend a community college feel inferior/insecure/more discriminated against.

■ Q106: In the past month, how often have you felt discriminated against? No days

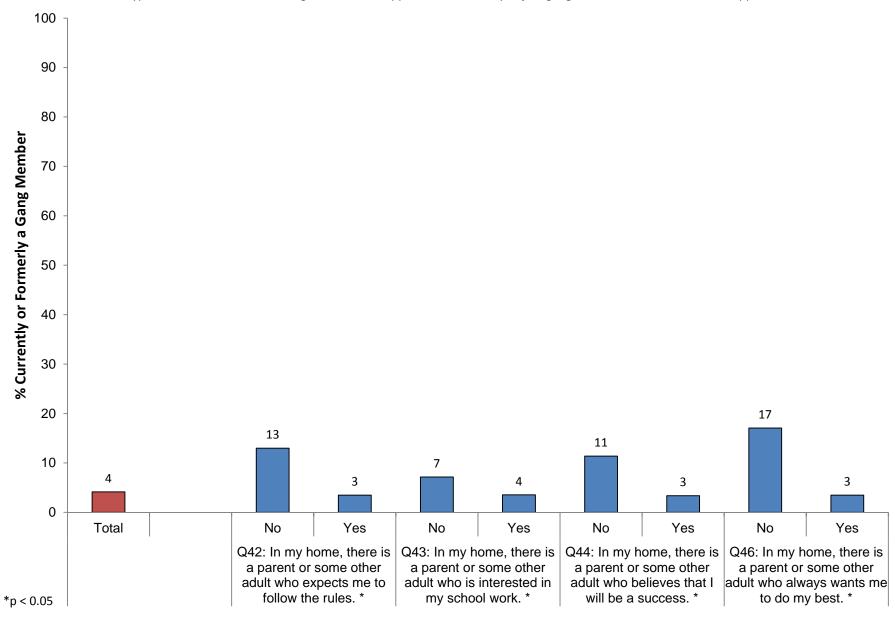
■ Q106: In the past month, how often have you felt discriminated against? 1 day or more



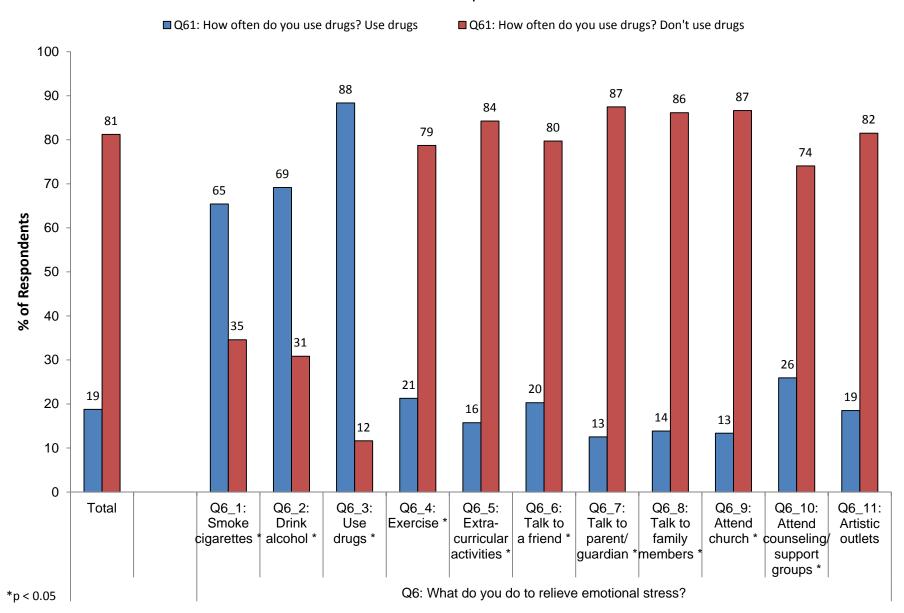
Violence

#122: Are you currently apart or have your ever been a part of a gang?

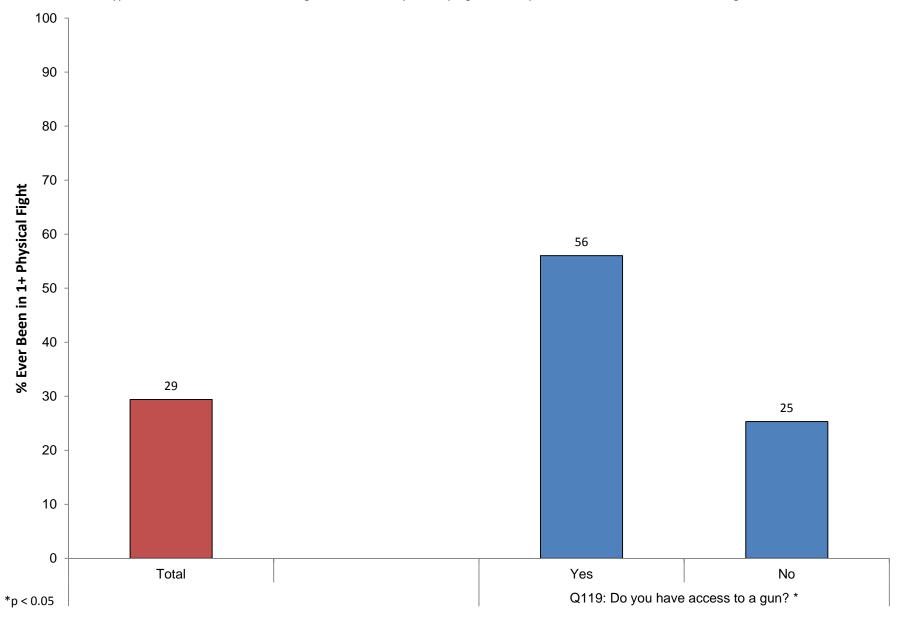
Hypothesis 1: Youth who do not get emotional support are more likely to join gangs than those with emotional support.



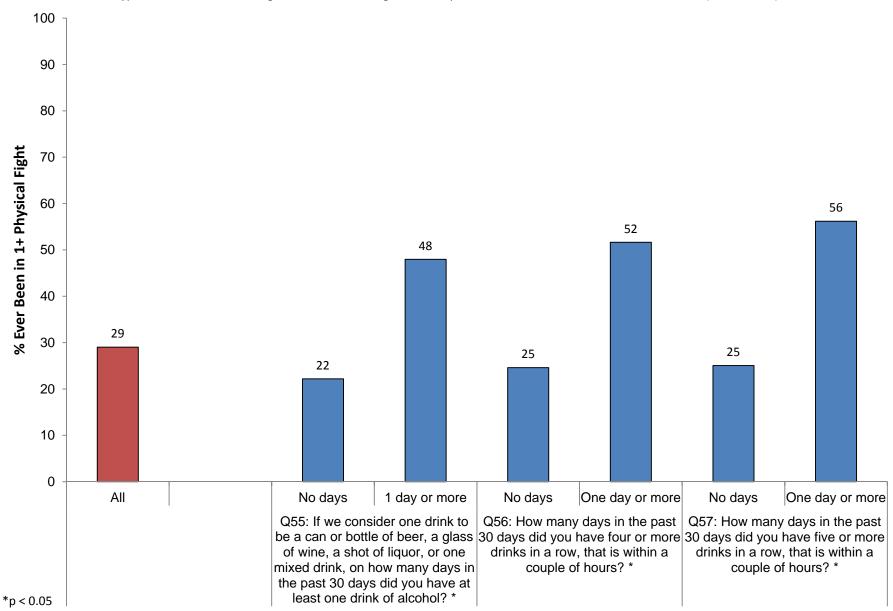
Hypothesis 2: Youth who do not have positive ways to reduce stress will engage in riskier behavior than those with positive stress relief.



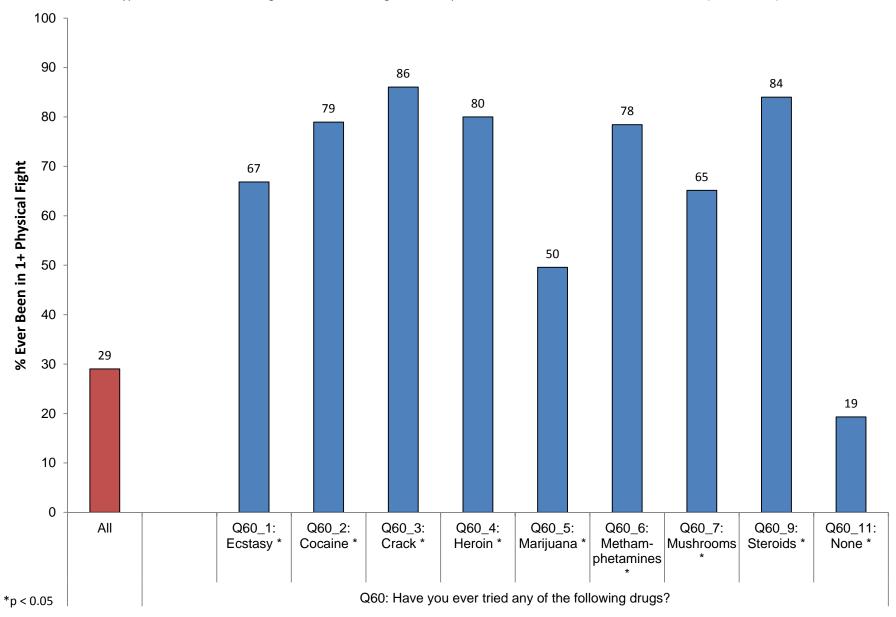
Hypothesis 3: Youth with access to a gun are more likely to carry a gun and be prone to violence than those without gun access.



Hypothesis 4: Youth who binge drink or abuse drugs are more prone to violence than those who do not drink (or drink less).

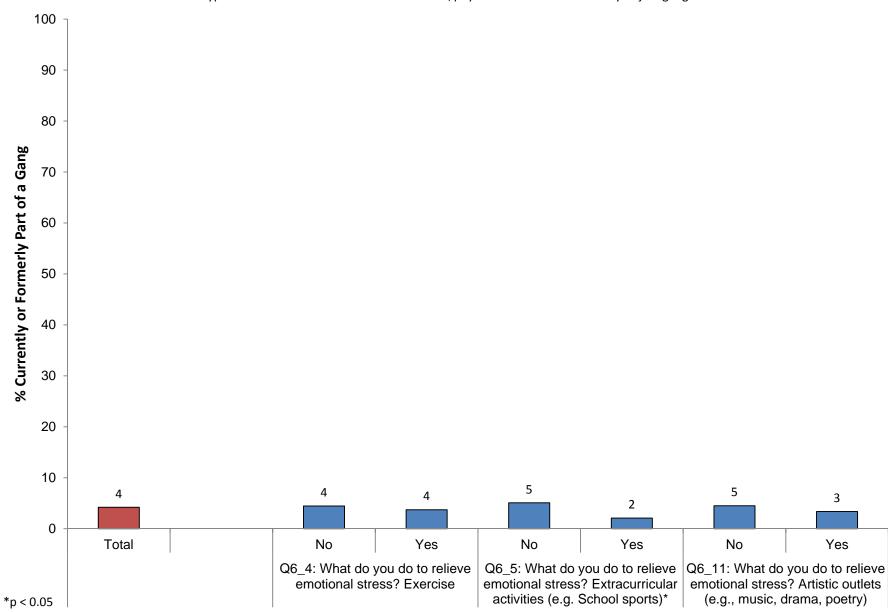


Hypothesis 4: Youth who binge drink or abuse drugs are more prone to violence than those who do not drink (or drink less).

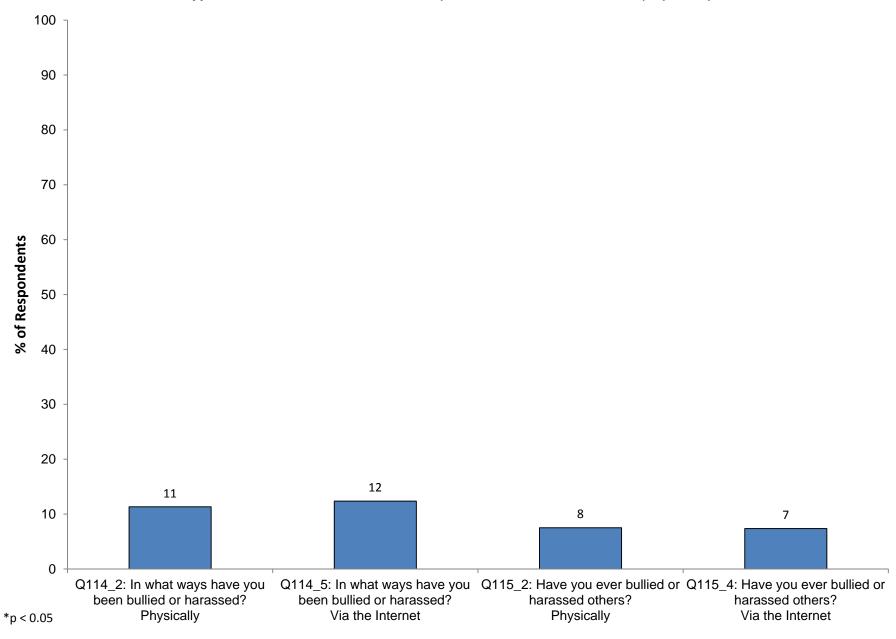


#122: Are you currently apart or have your ever been a part of a gang?

Hypothesis 5: Youth who do not have creative/physical outlets are more likely to join gangs.



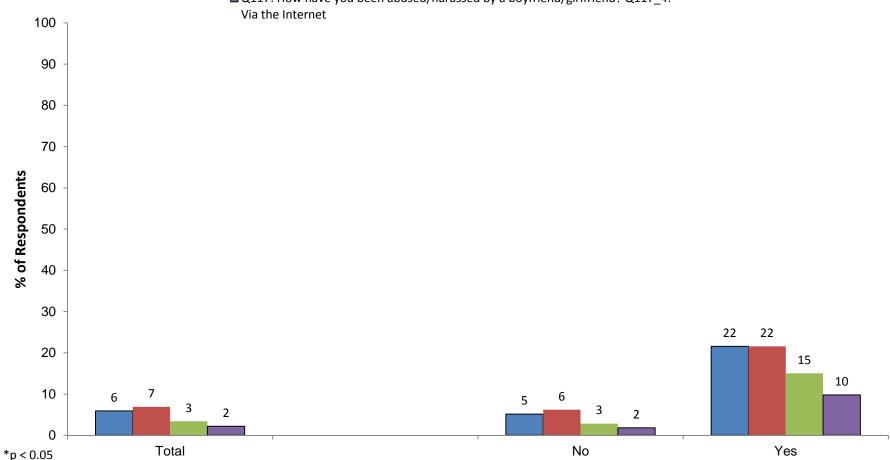
Hypothesis 6: Youth are more likely to be bullied online then physically.



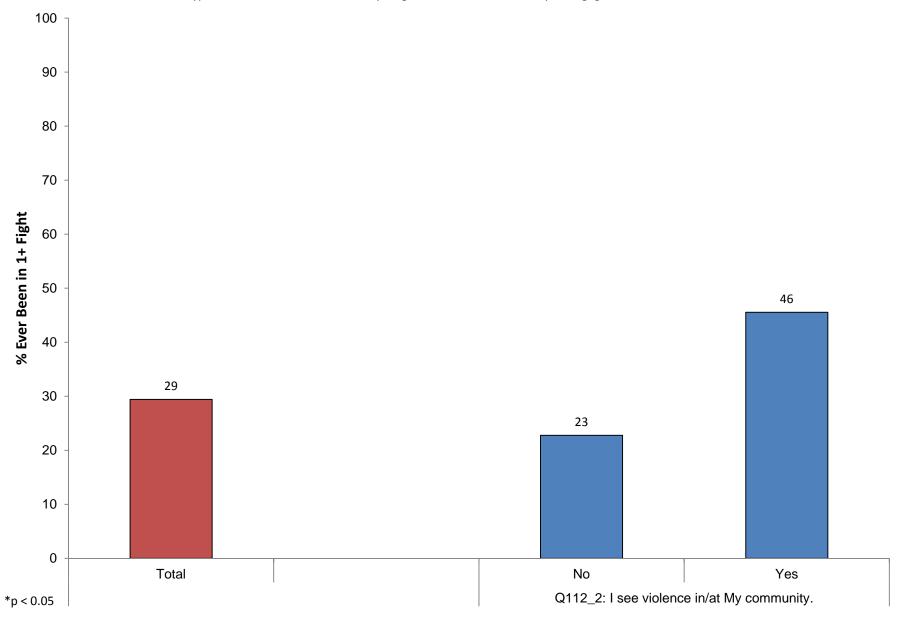
#112_3: I see violence in/at: My home.

Hypothesis 7: Youth who have domestic violence in their household are more likely to be in an abusive relationship.

- Q117: How have you been abused/harassed by a boyfriend/girlfriend? Q117_1: Verbally
- Q117: How have you been abused/harassed by a boyfriend/girlfriend? Q117_2: Emotionally
- Q117: How have you been abused/harassed by a boyfriend/girlfriend? Q117_3: Physically
- Q117: How have you been abused/harassed by a boyfriend/girlfriend? Q117_4:



Hypothesis 8: Youth who live in risky neighborhoods are more likely to engage in violent behavior.

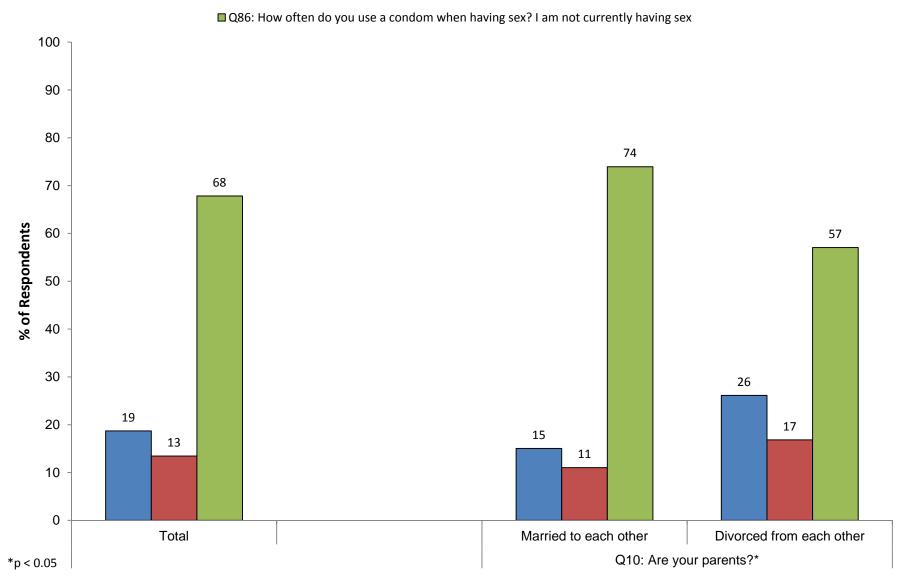


Relationships

Hypothesis 1: Youth with divorced parents are more likely to practice unsafe sex.

■ Q86: How often do you use a condom when having sex? Use frequently

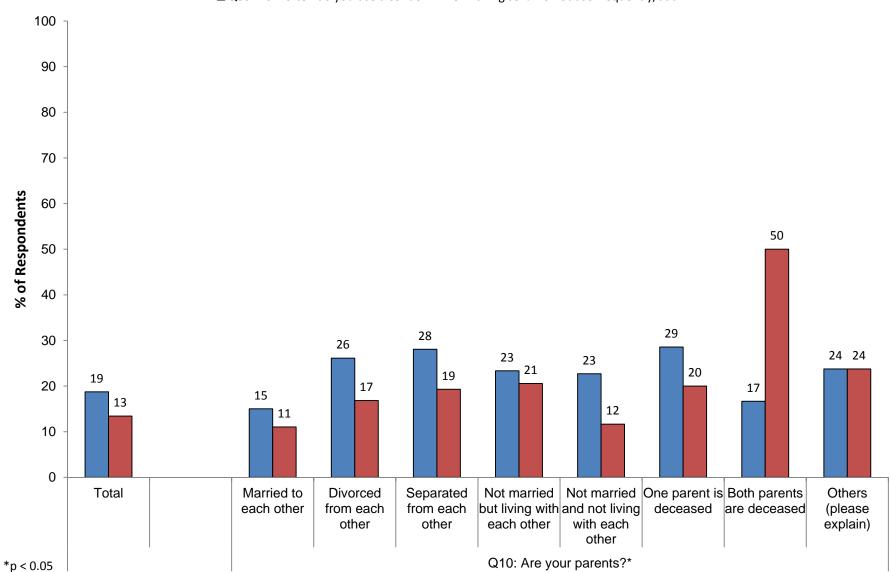
■ Q86: How often do you use a condom when having sex? Do not use frequently/at all



Hypothesis 2: Youth with a single parent are more likely to practice unsafe sex.

■ Q86: How often do you use a condom when having sex? Use frequently

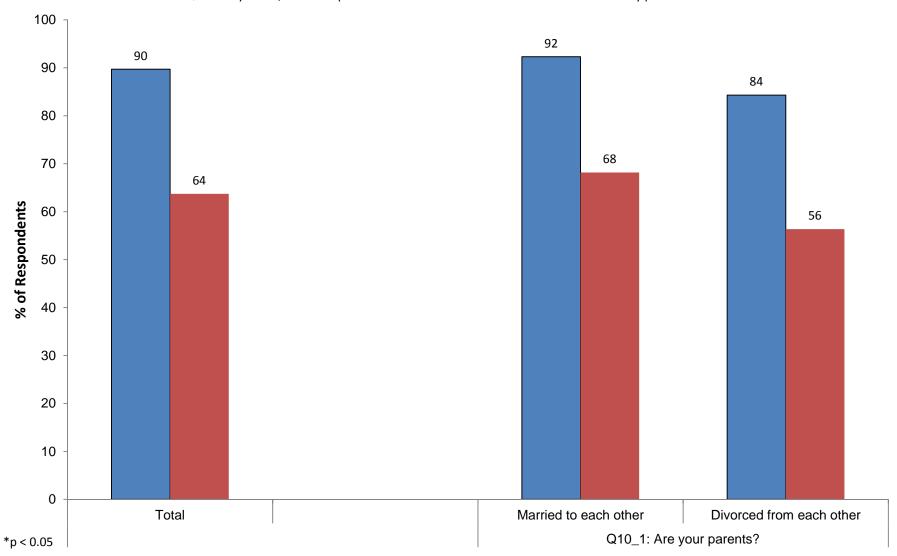
■ Q86: How often do you use a condom when having sex? Do not use frequently/at all



Hypothesis 3: Youth in divorced households receive less emotional support from family members.

■ Q44: In my home, there is a parent or some other adult who believes that I will be a success. Yes*

■ Q45: In my home, there is a parent or some other adult who talks with me about my problems. Yes*



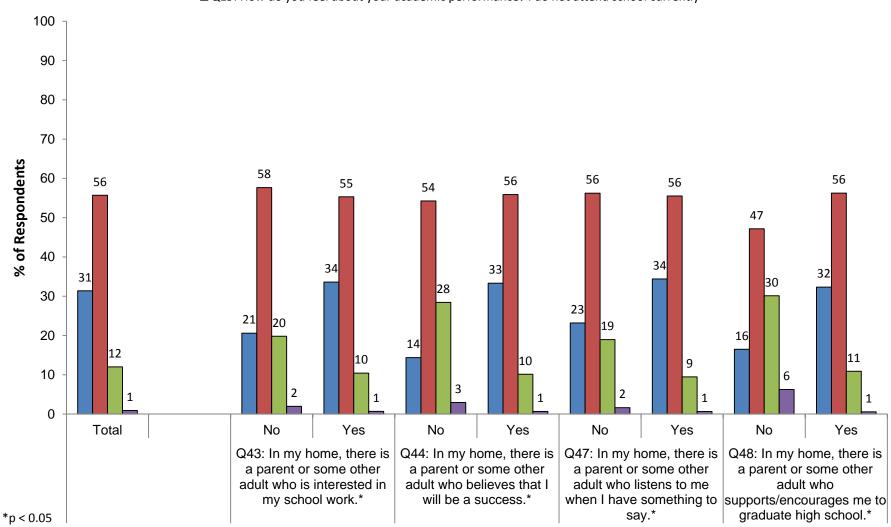
Hypothesis 4: Youth who receive higher quality of support have higher academic performance.

■ Q19: How do you feel about your academic performance? Above average

■ Q19: How do you feel about your academic performance? Average

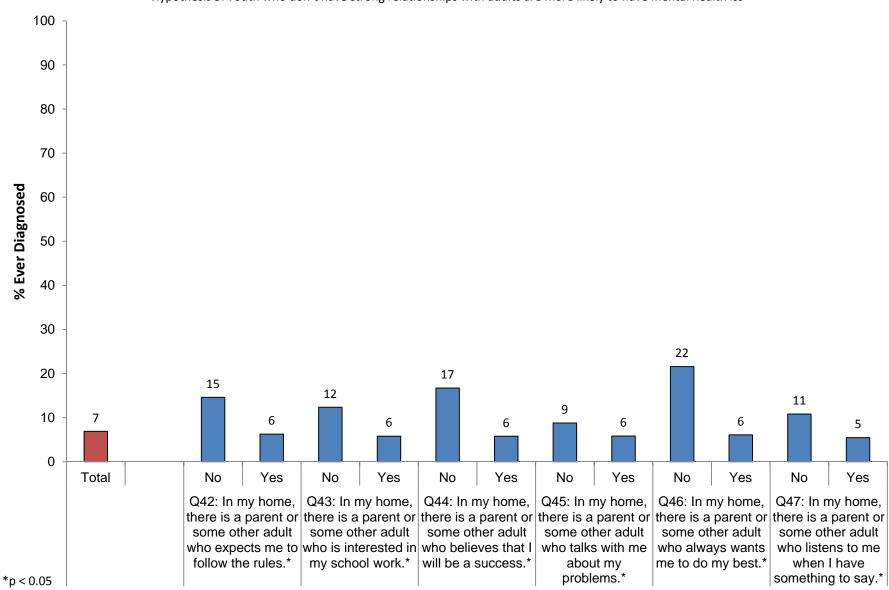
■ Q19: How do you feel about your academic performance? Below average

■ Q19: How do you feel about your academic performance? I do not attend school currently



#22: Have you ever been diagnosed with a mental health condition/ disorder (e.g. bipolar disorder, schizophrenia, obsessive compulsive disorder)?

Hypothesis 5: Youth who don't have strong relationships with adults are more likely to have mental health iss



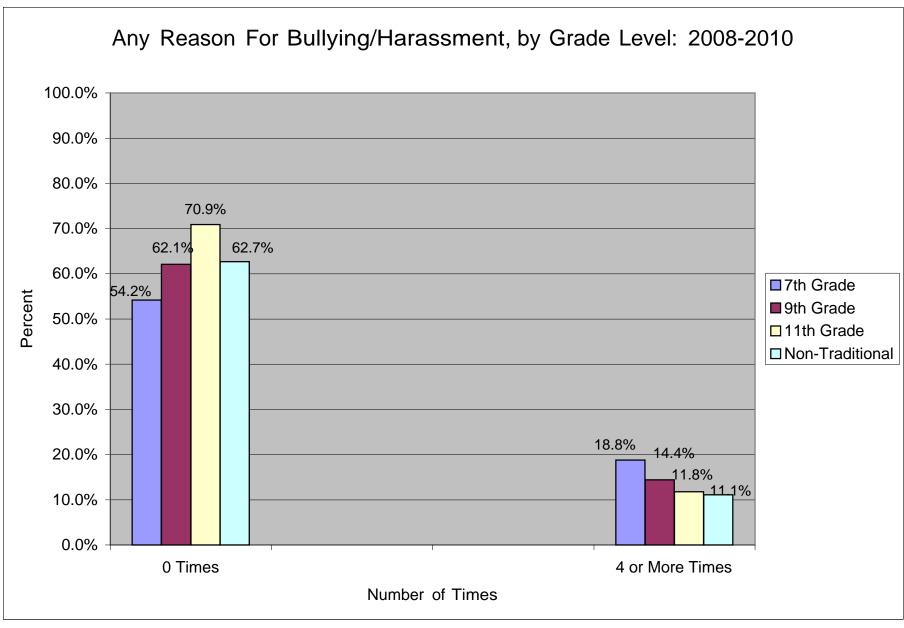
APPENDIX 5: SUPPLEMENTAL GRAPHS

(Chapter 3)

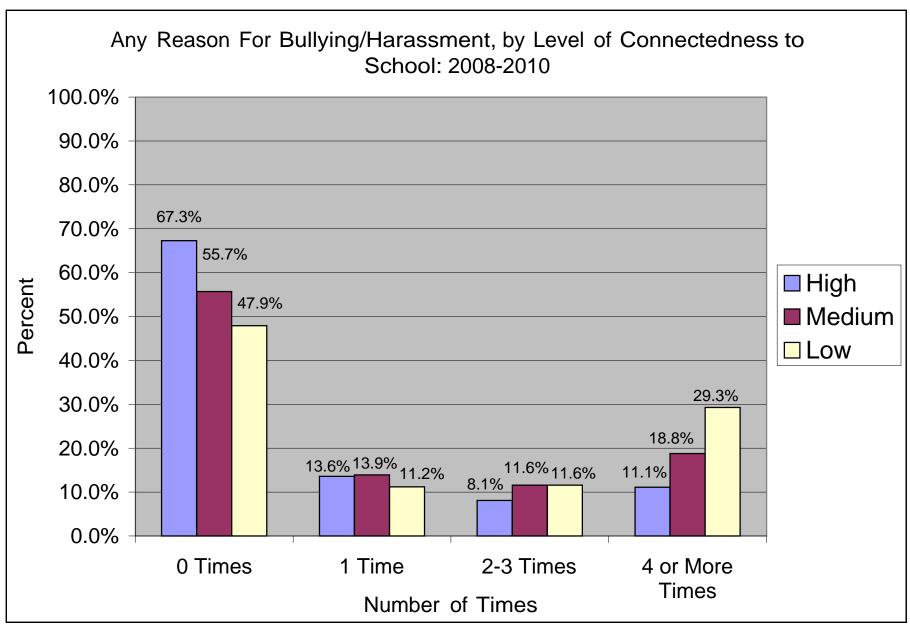
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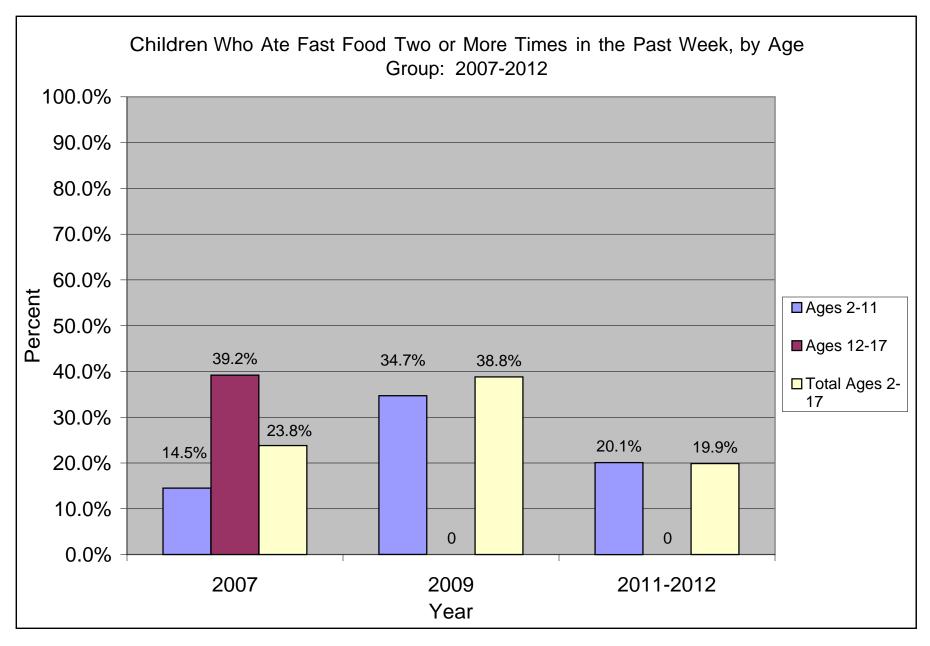
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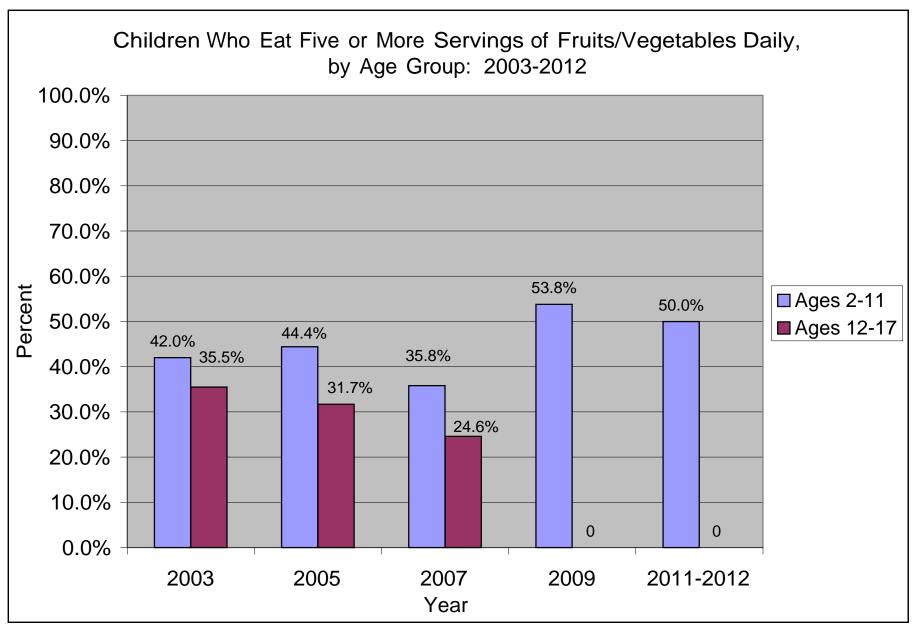
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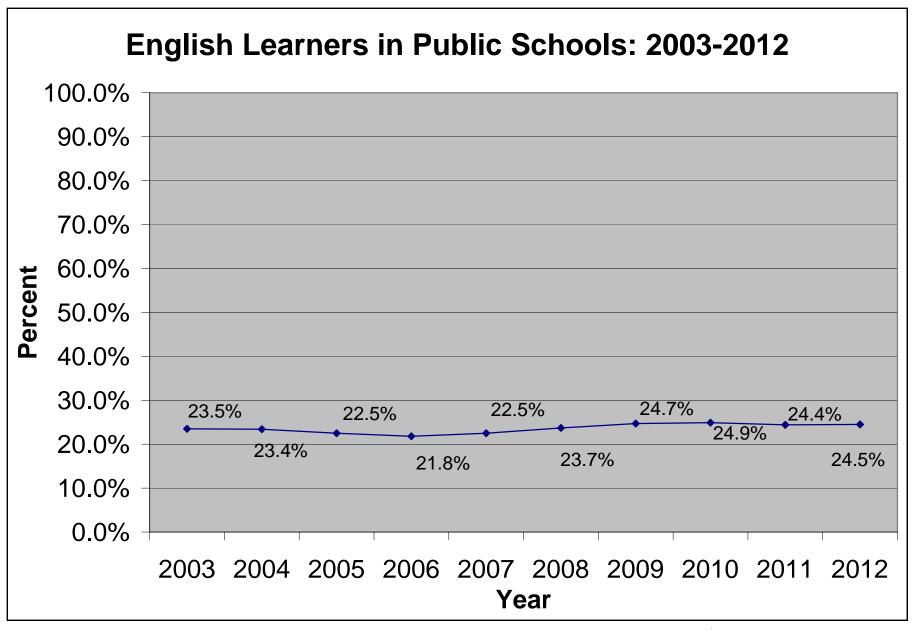
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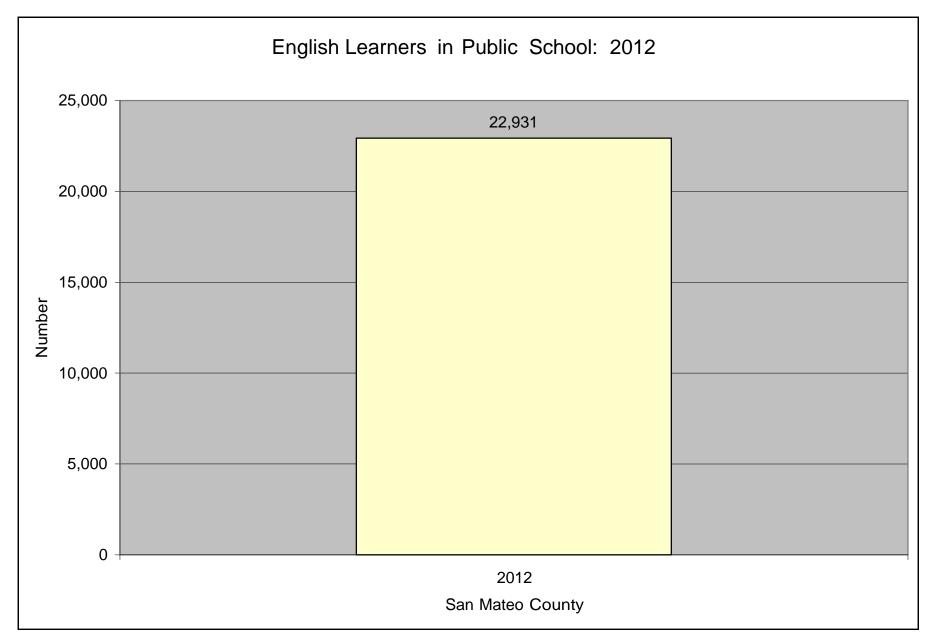


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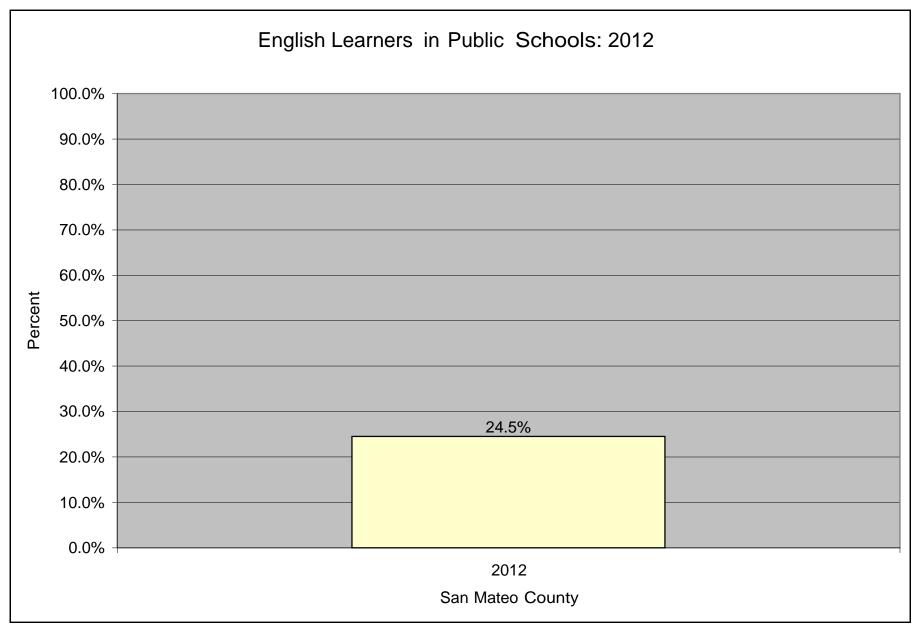


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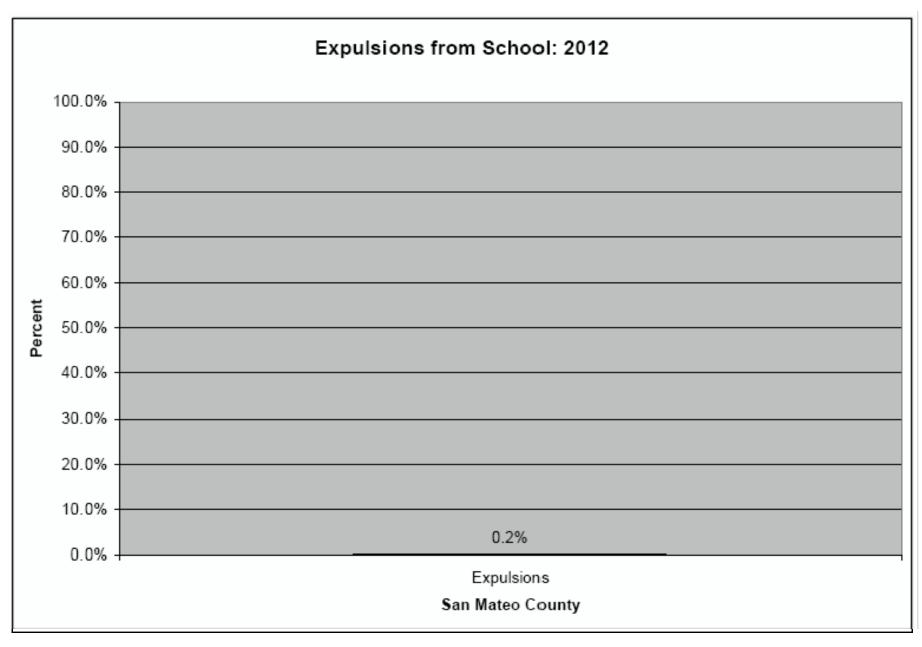




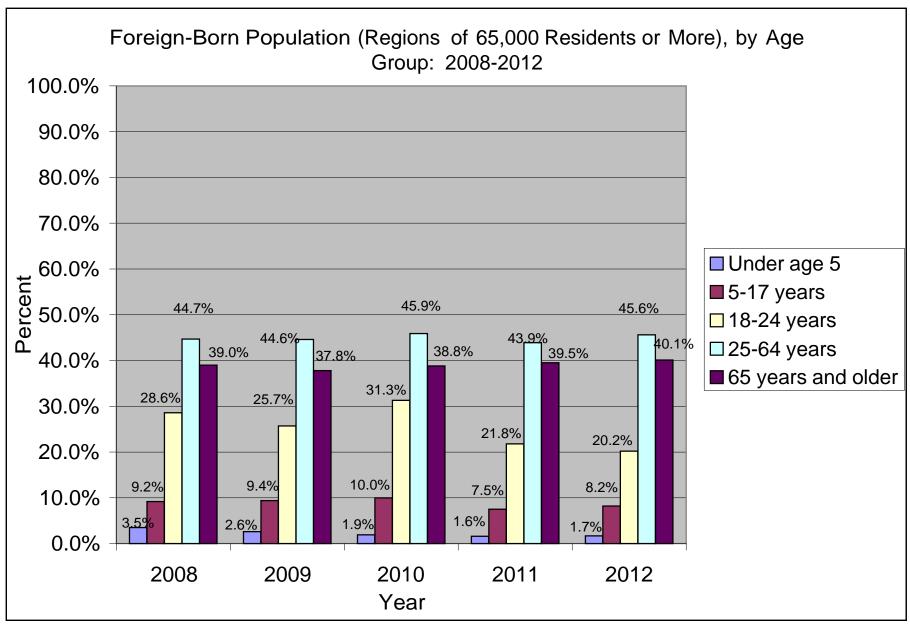
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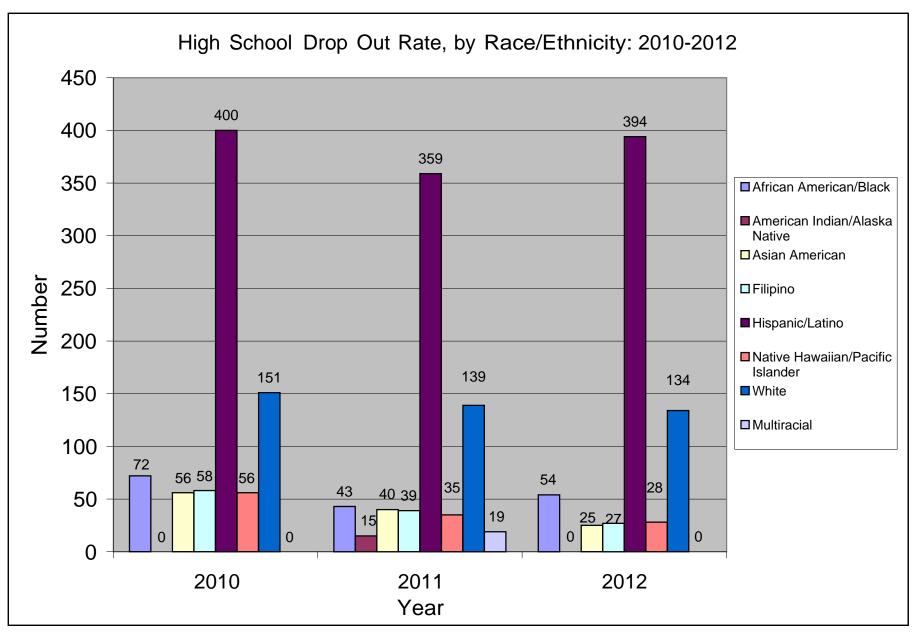
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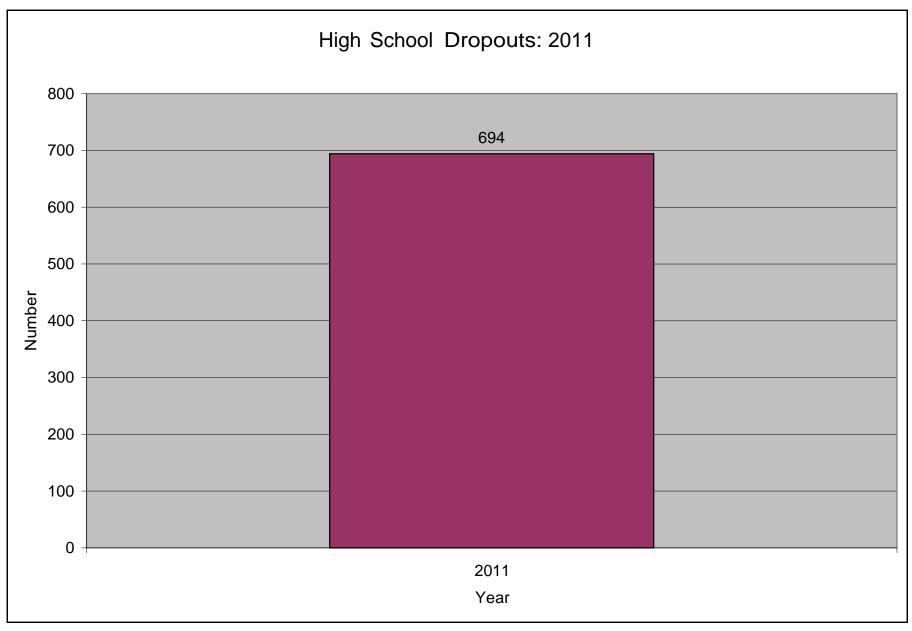
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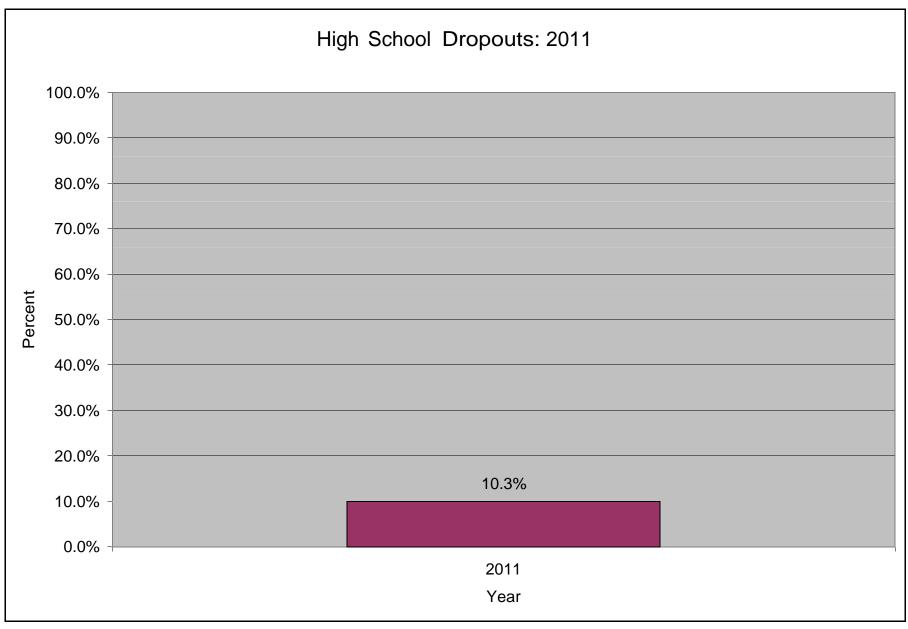
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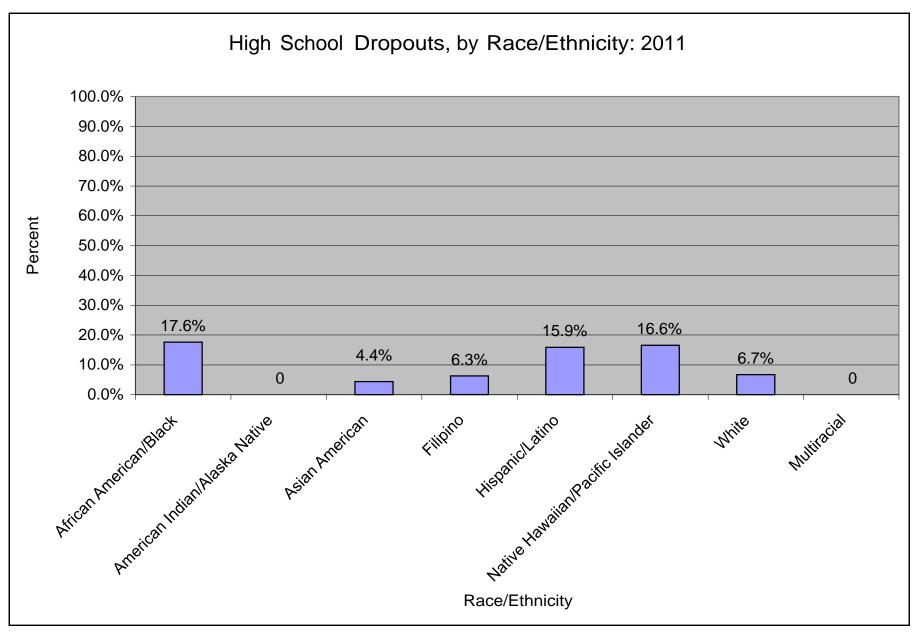
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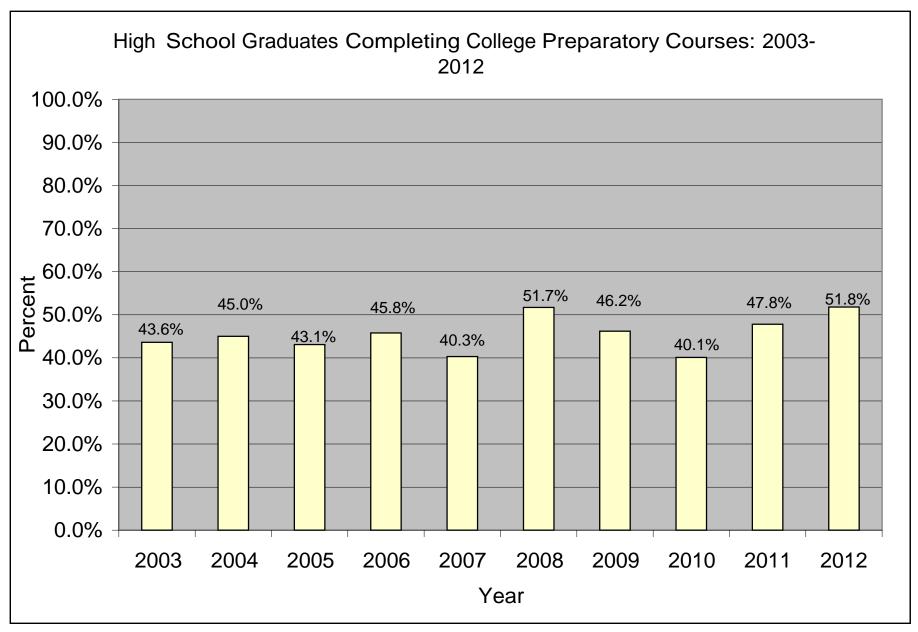
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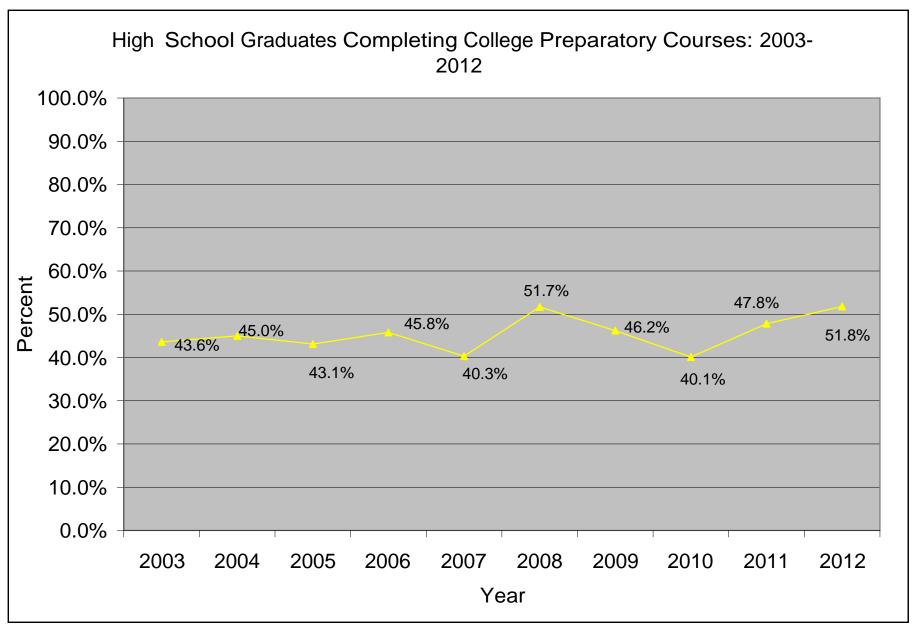
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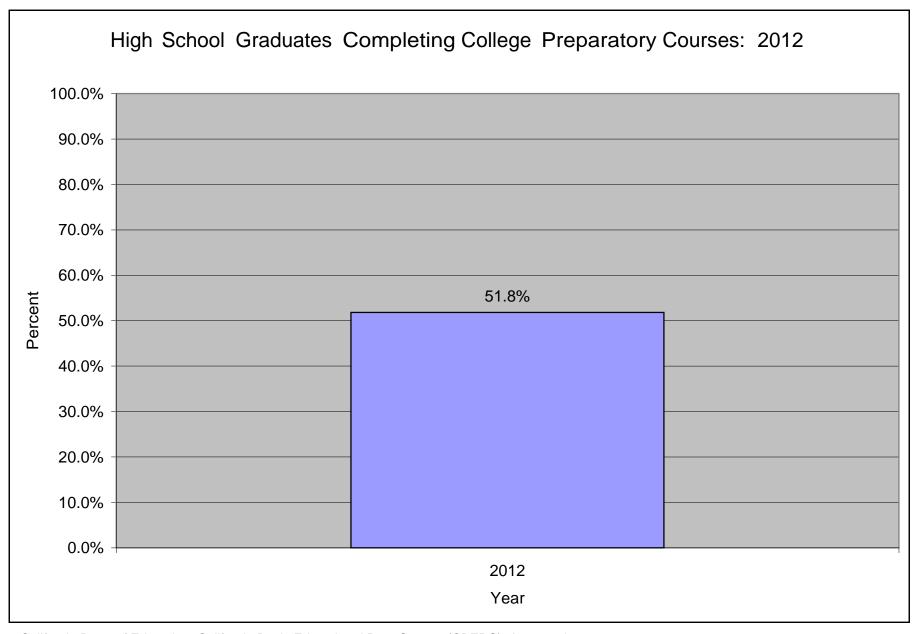
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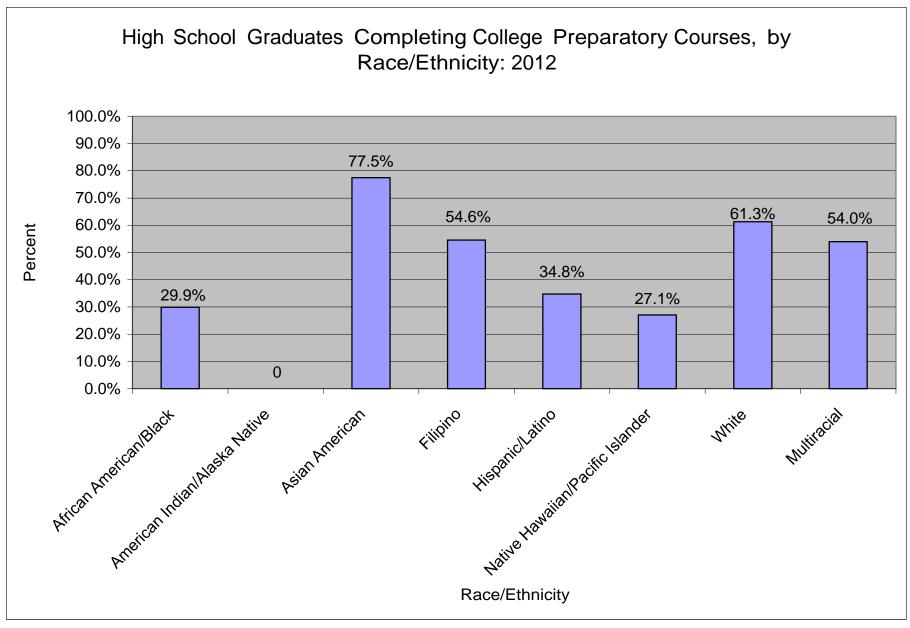
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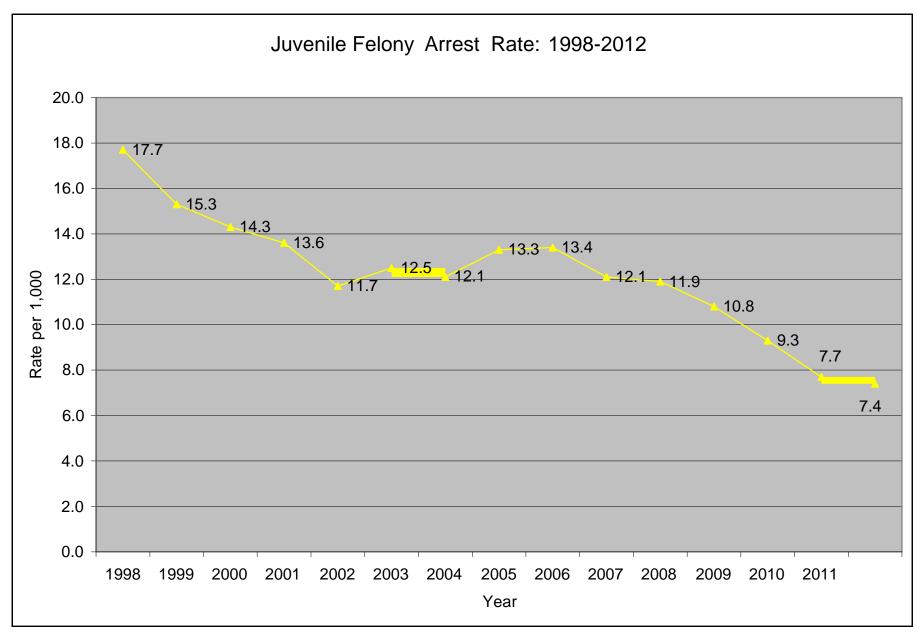
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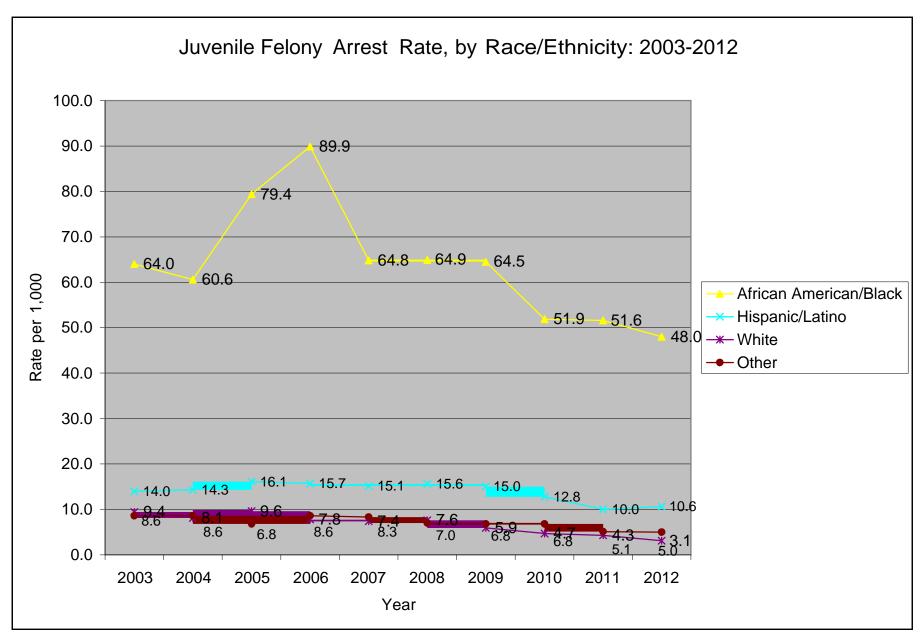
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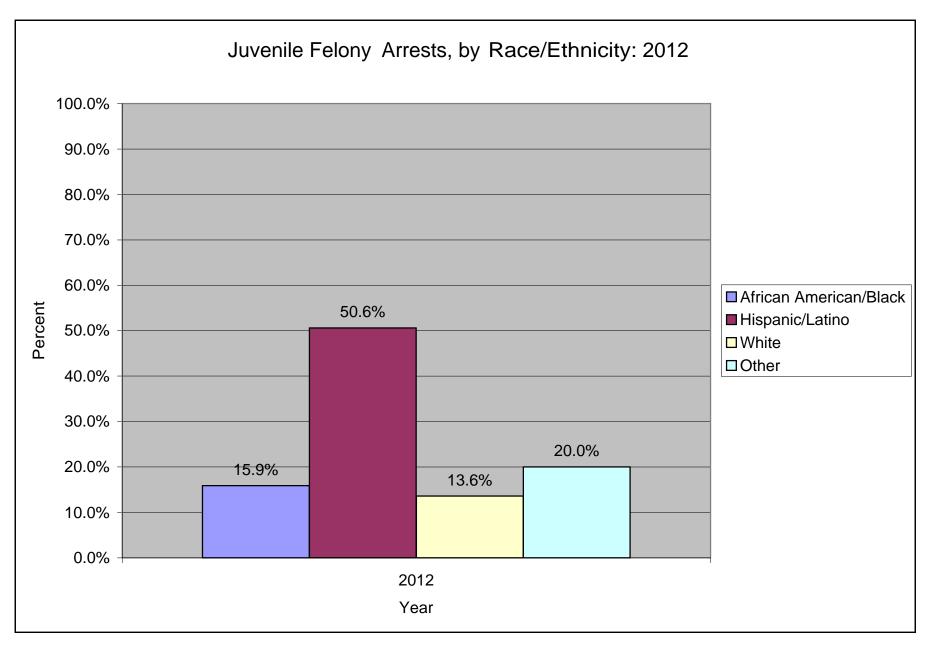
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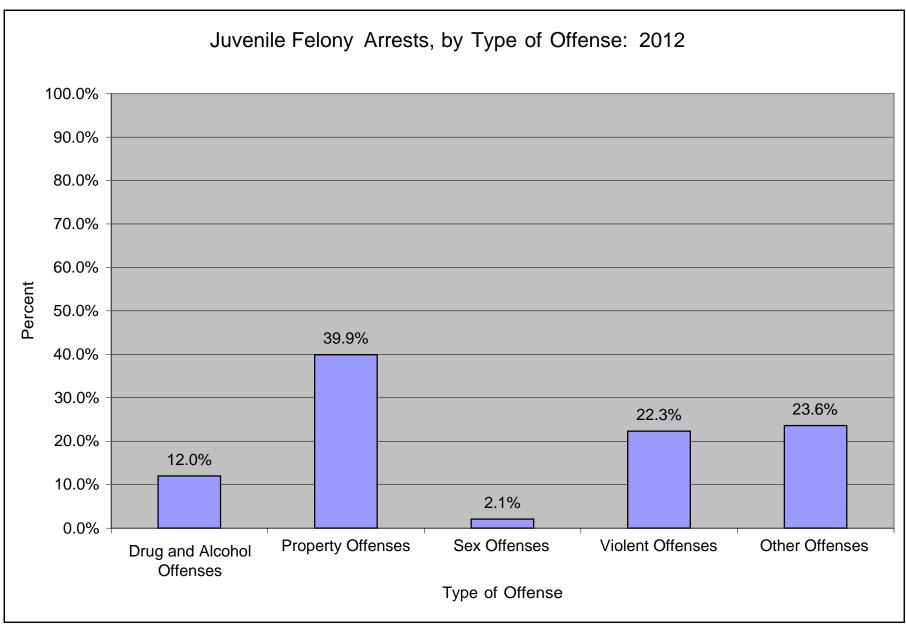
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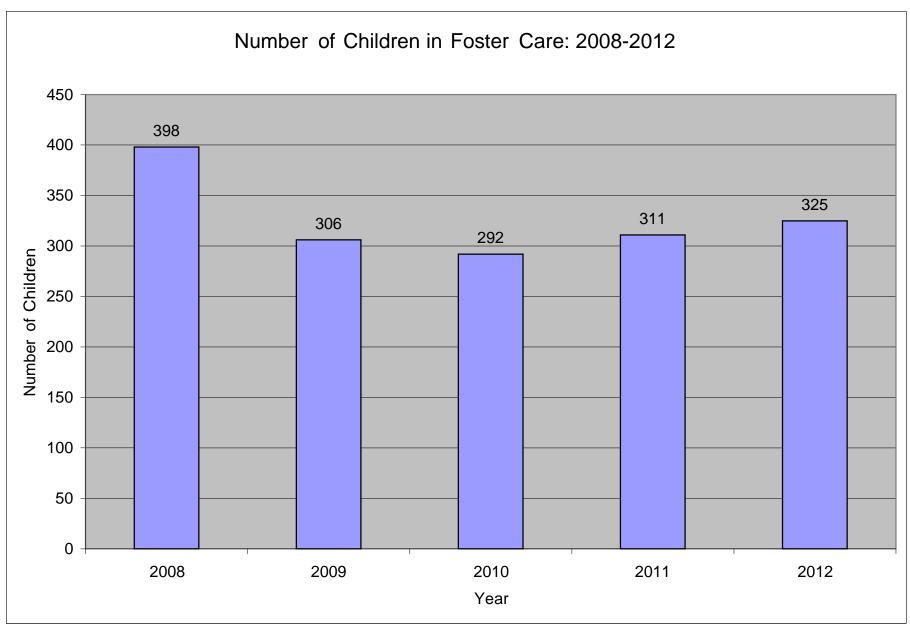
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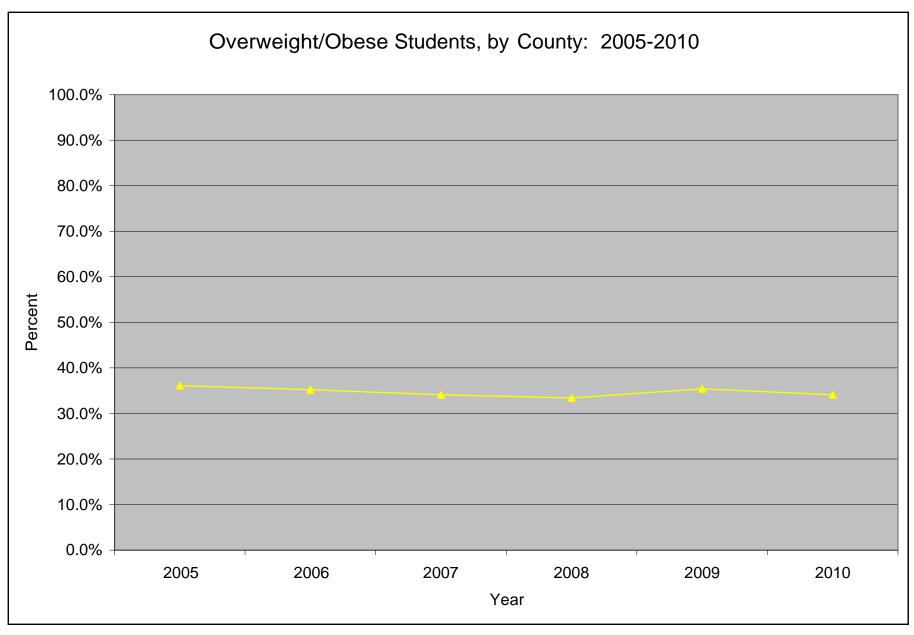
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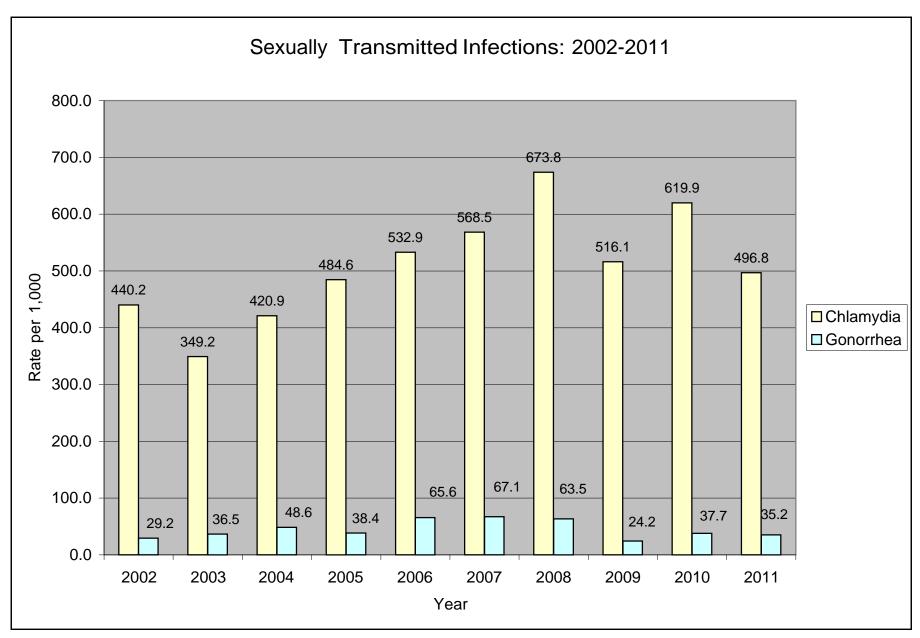
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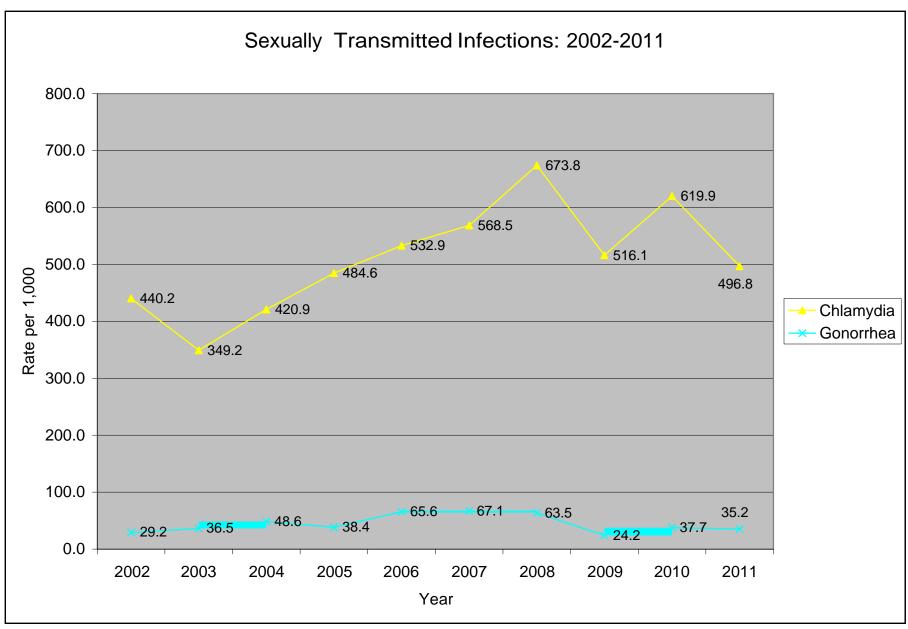
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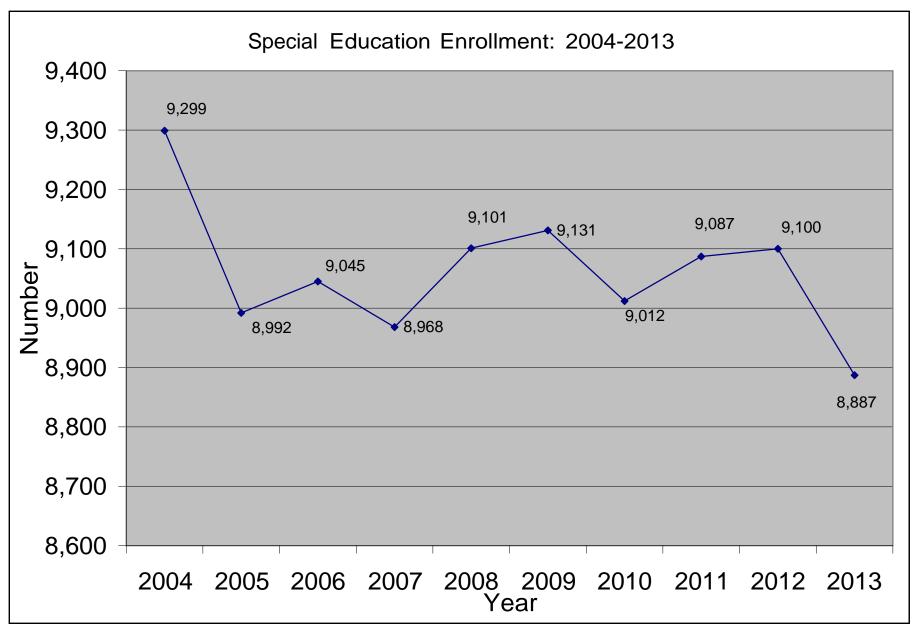
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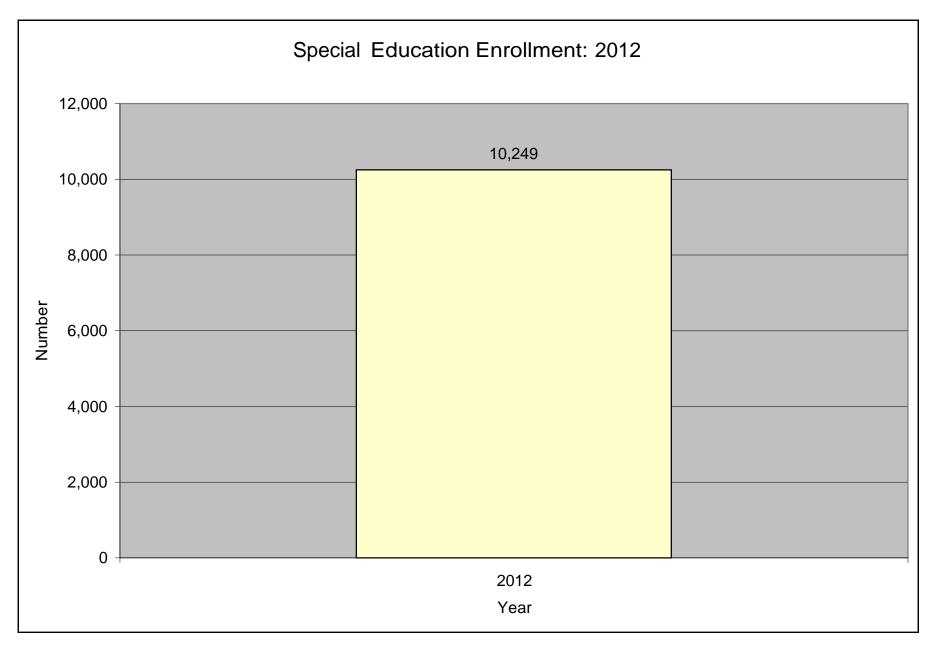
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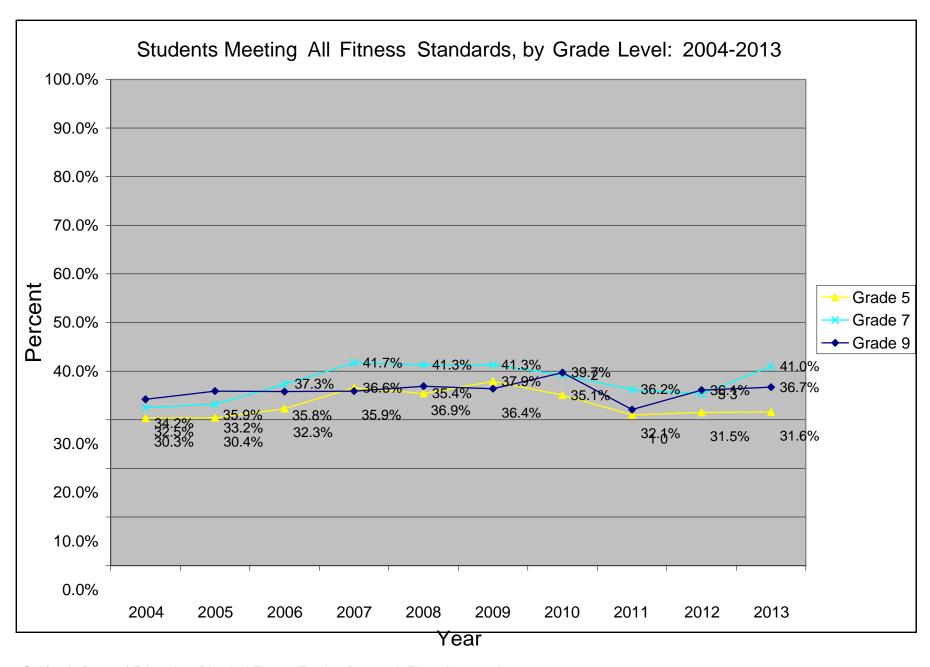
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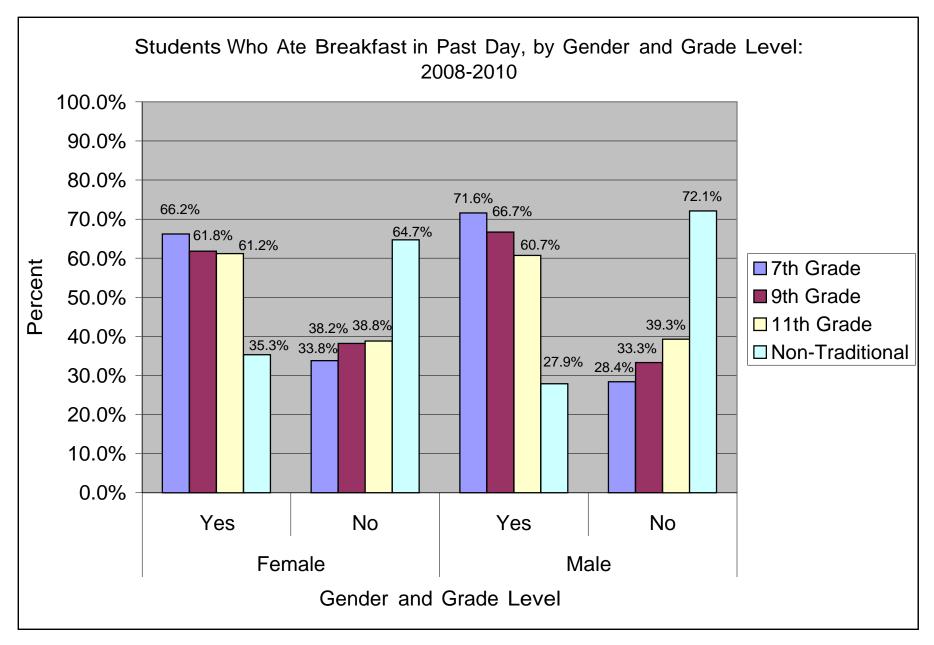


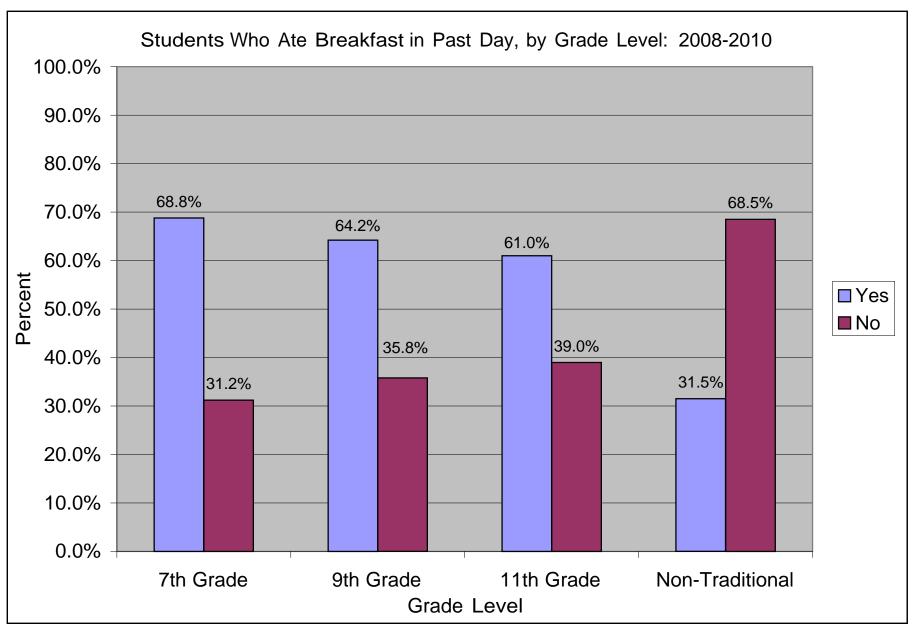
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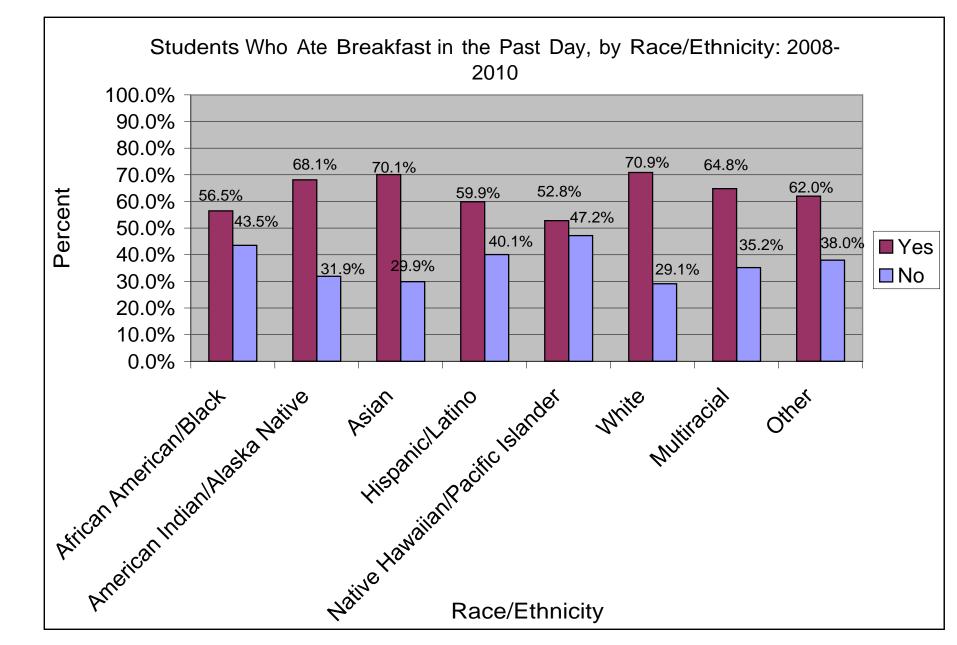
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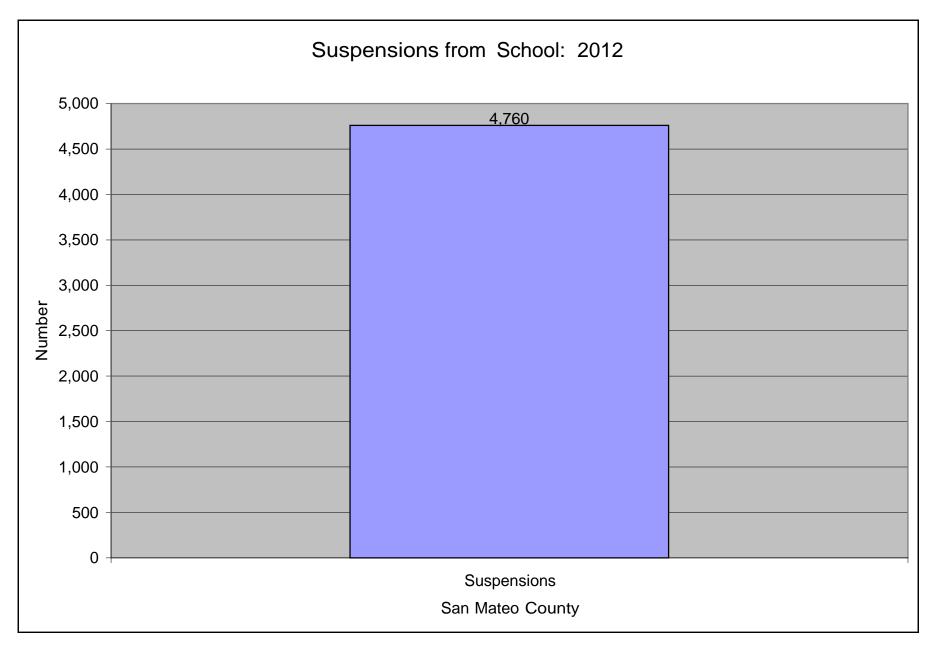




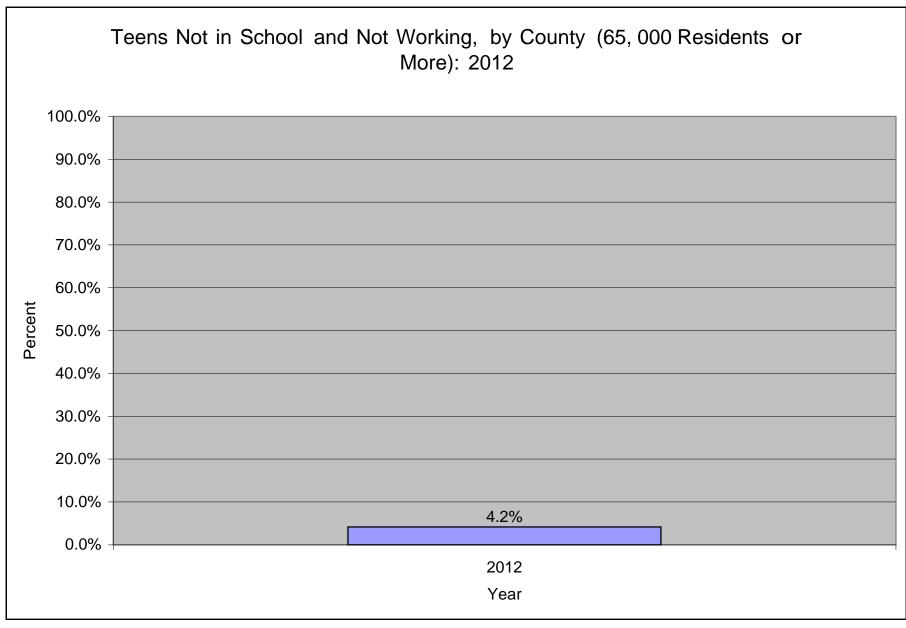


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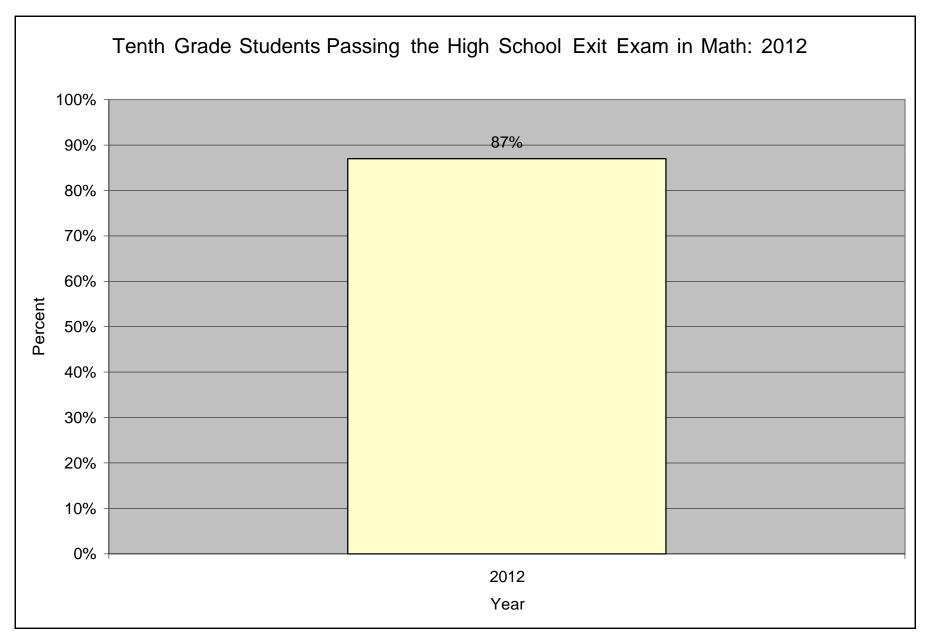


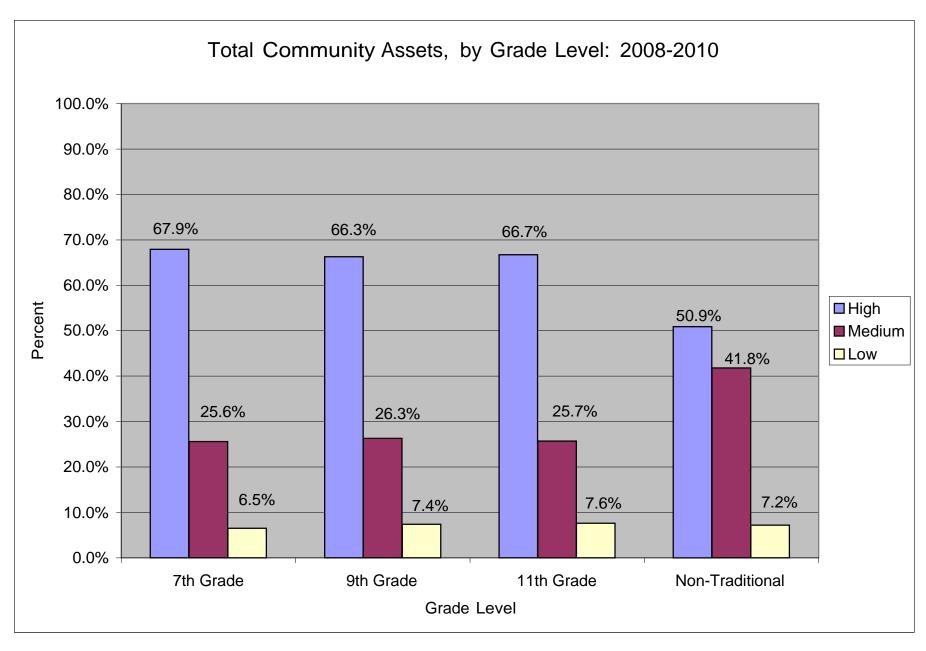


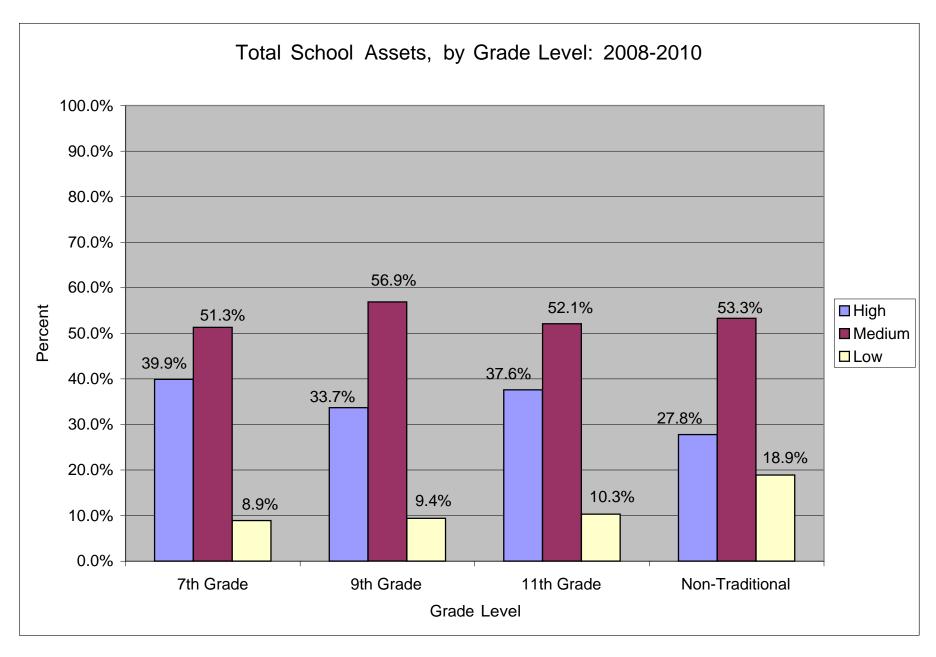
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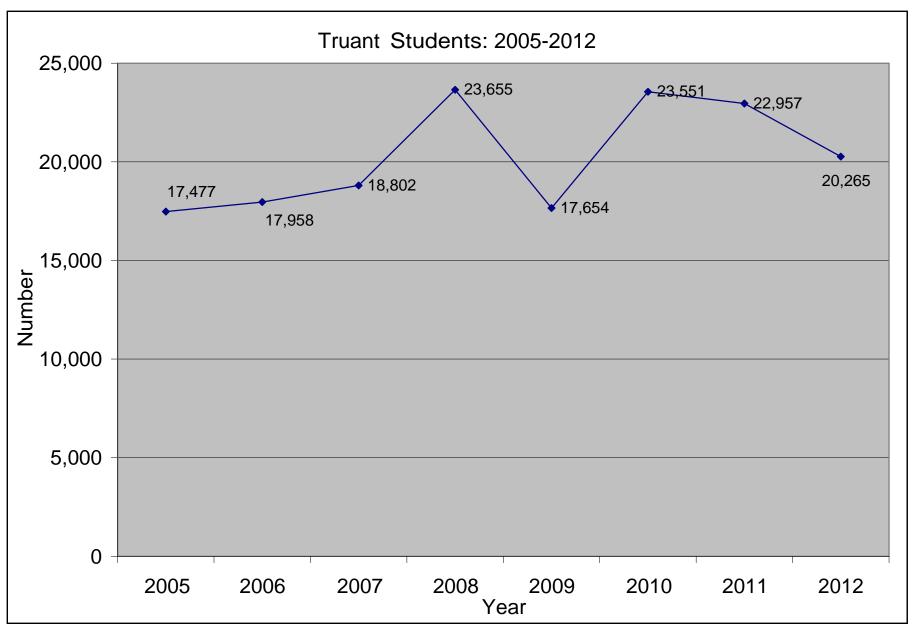


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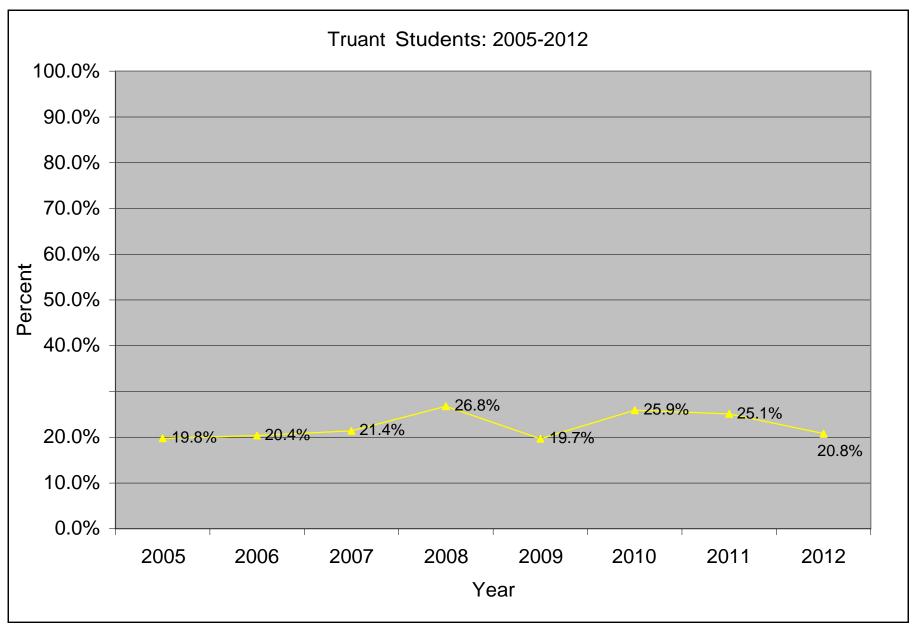




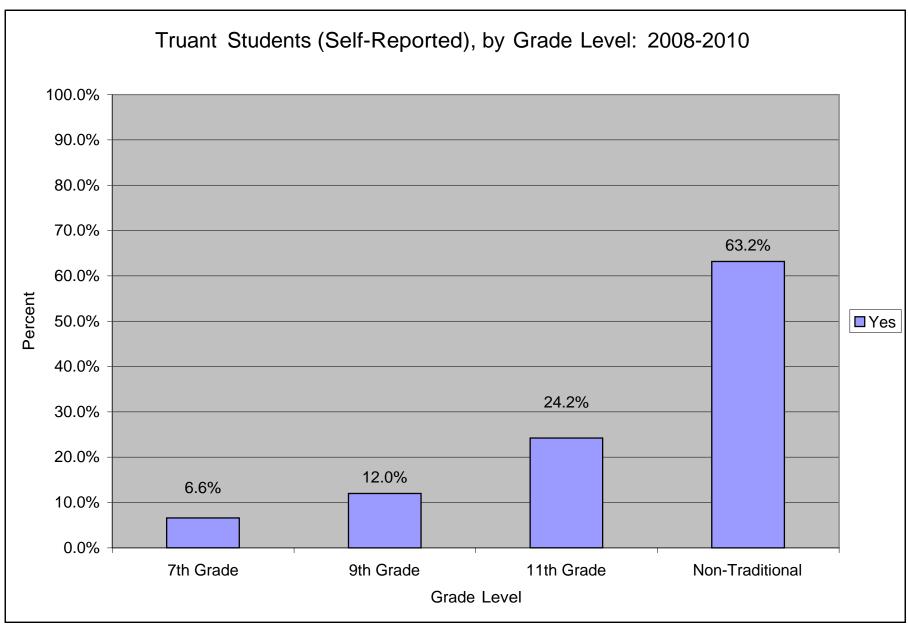


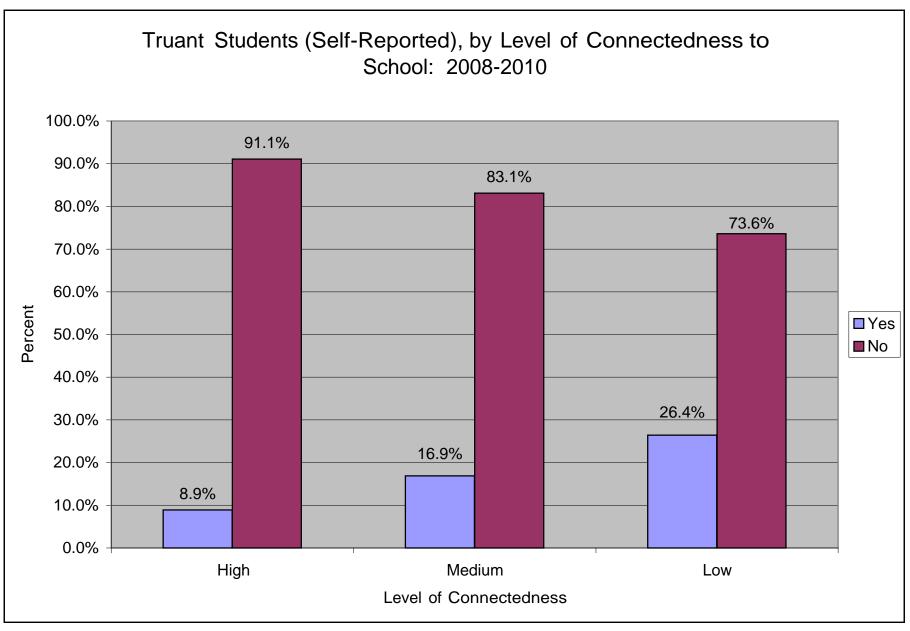


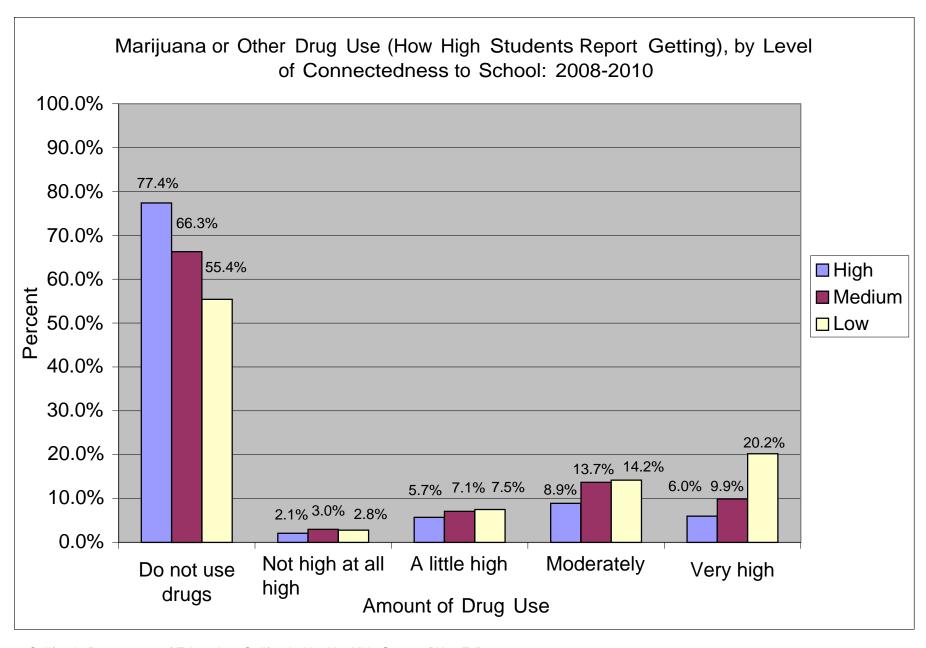
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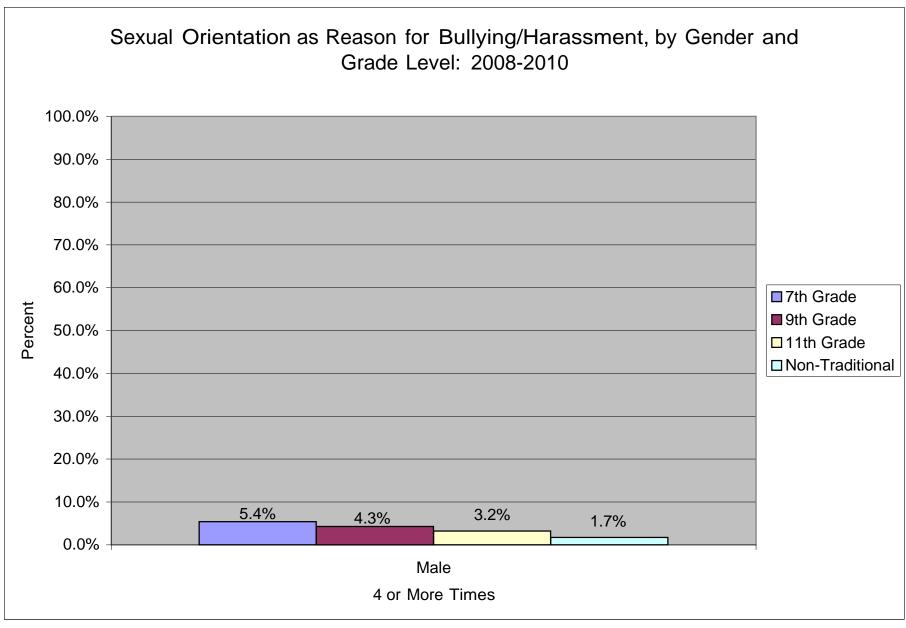


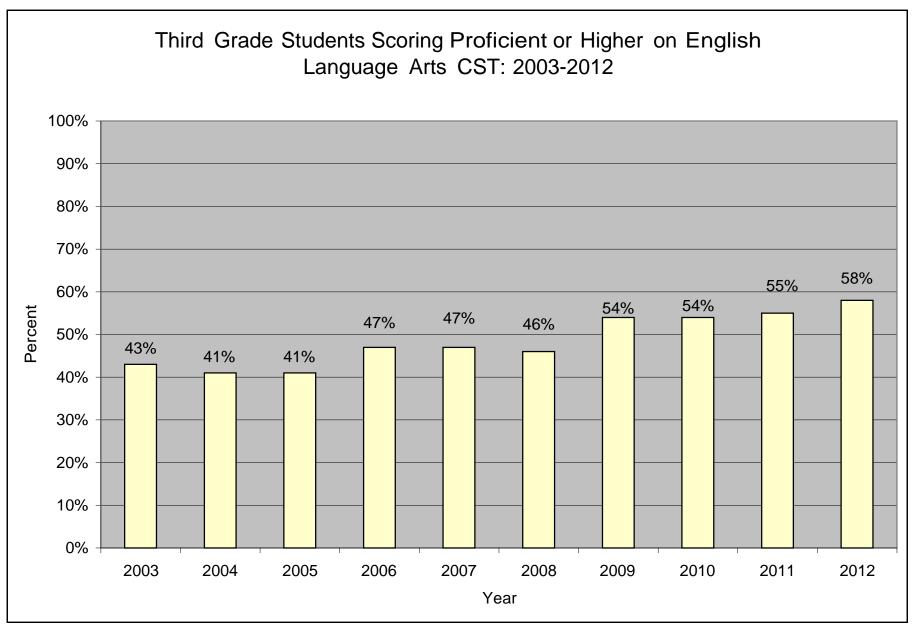
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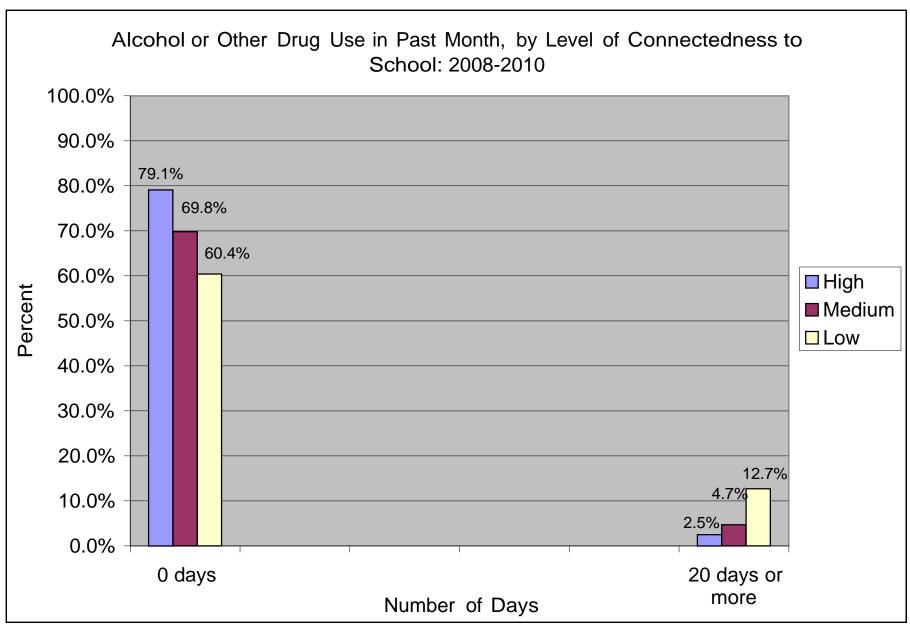


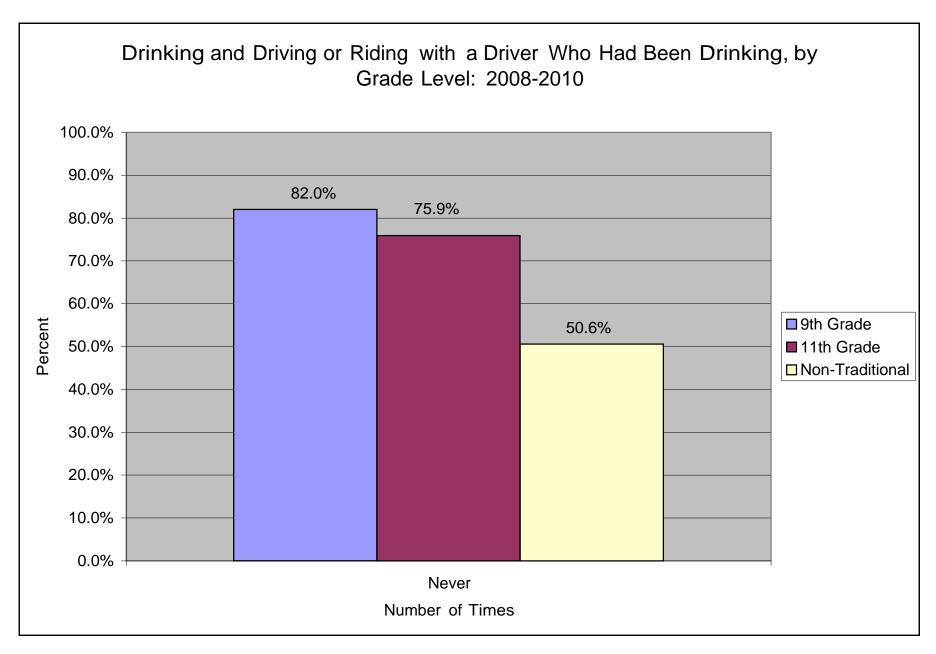


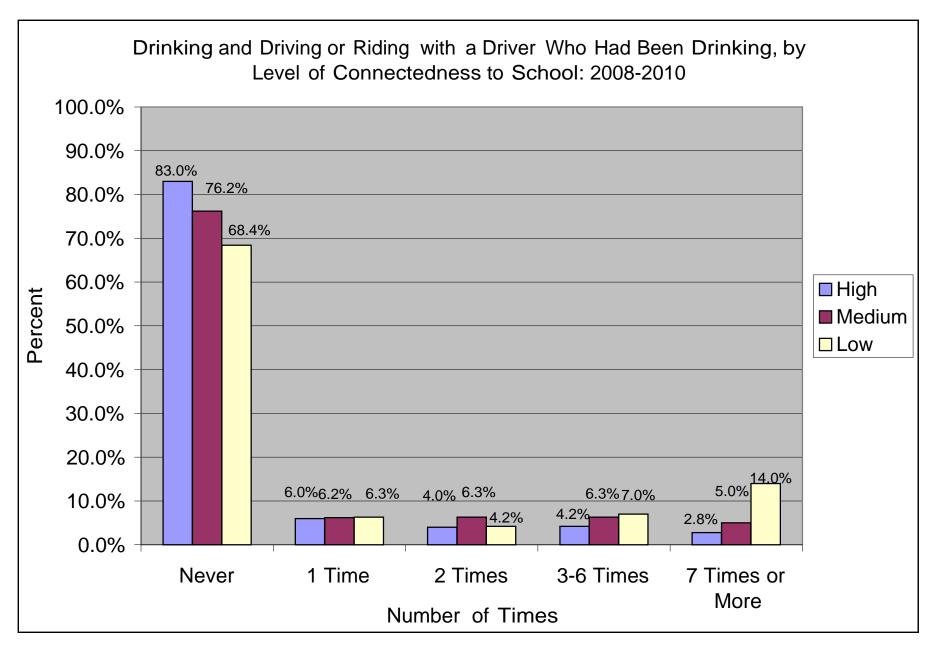




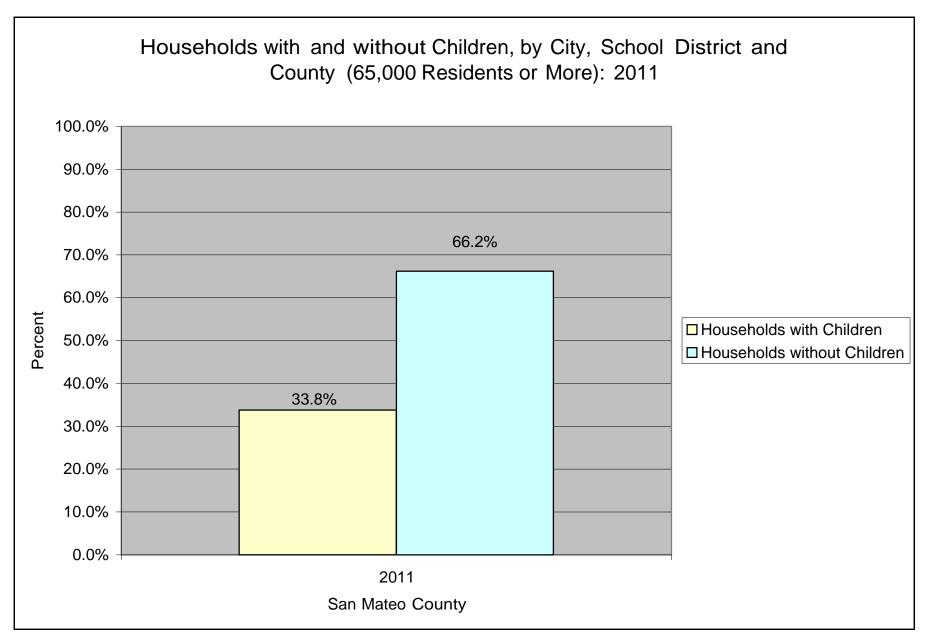
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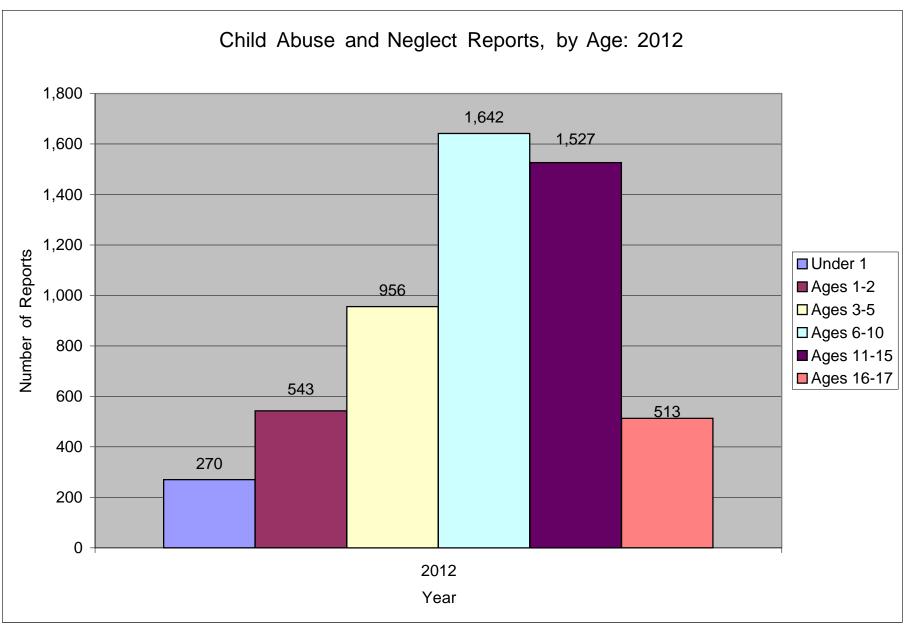




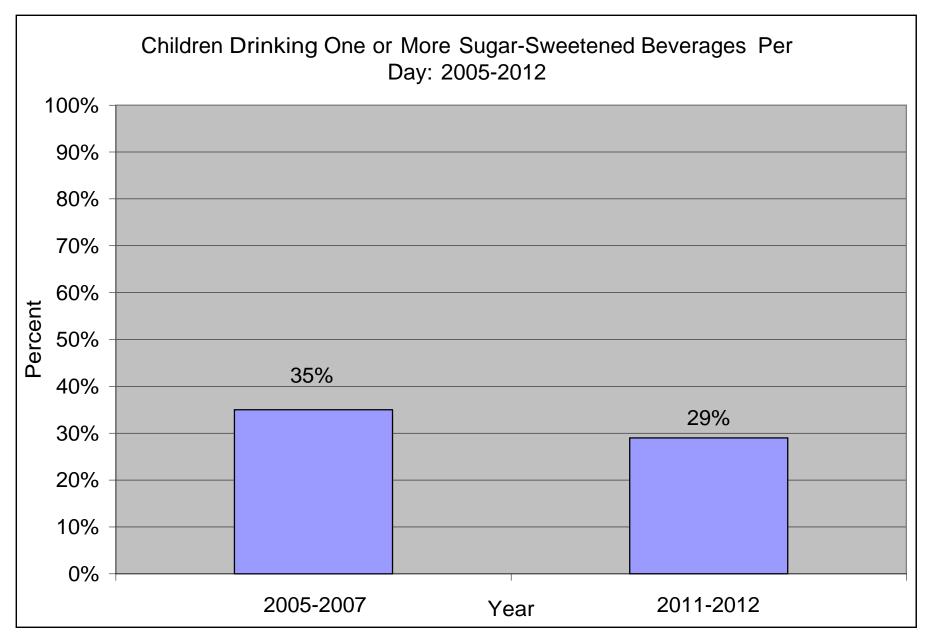


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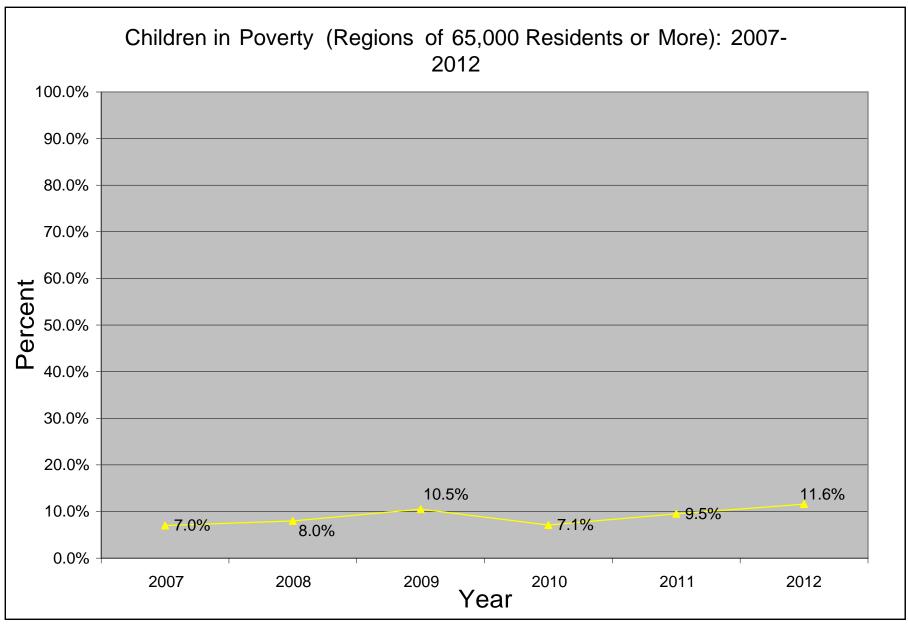




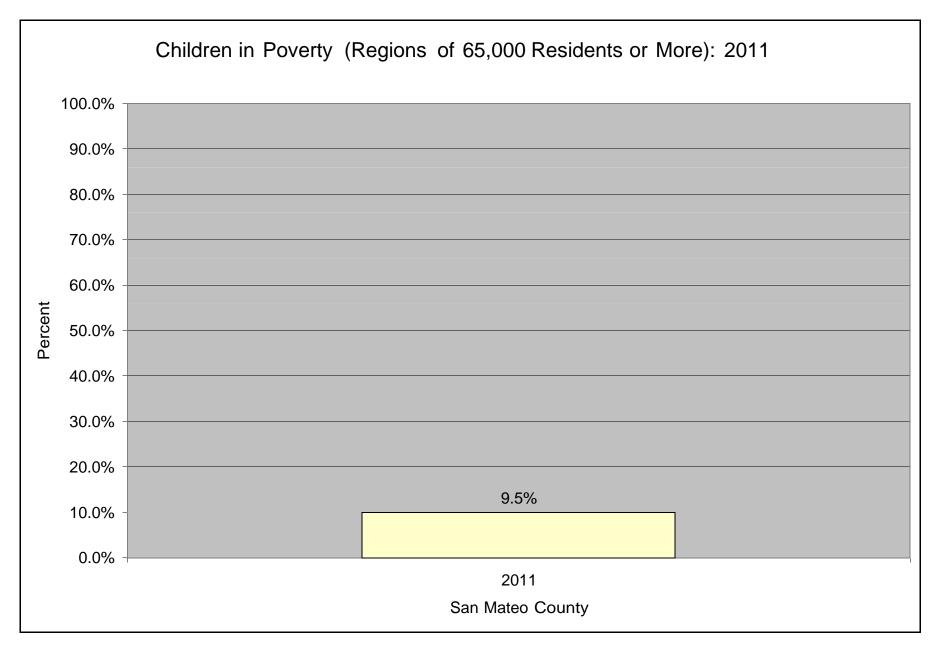
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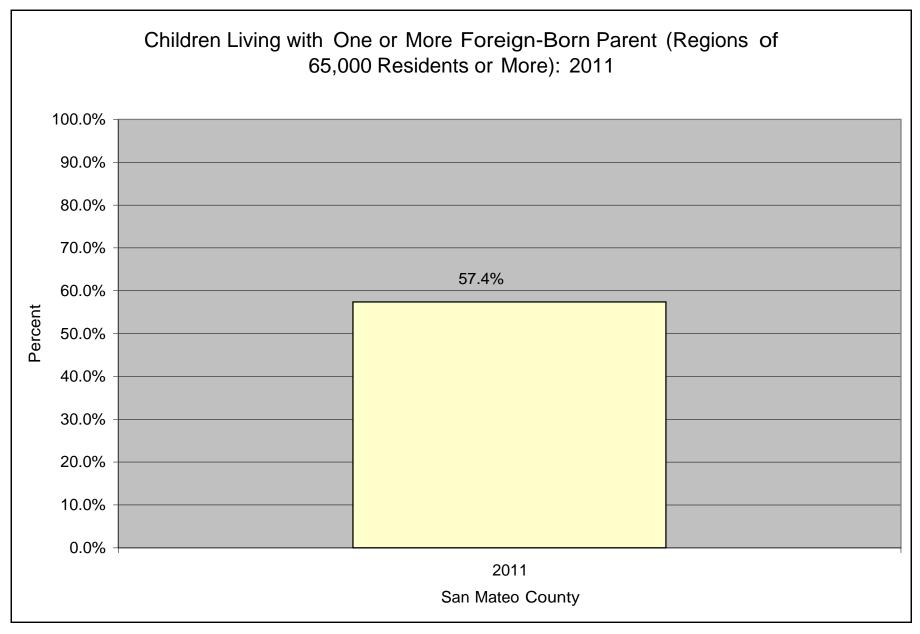


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SAN MATEO COUNTY YOUTH NEEDS ASSESSMENT

Conducted by the San Mateo County Youth Commission DEMOGRAPHICS – PART 1

1.	Are you male, female or transgender? Male
	Male Female
	Tennate Transgender
2.	Are you in school?
	Yes
	No
	Home schooled
3.	What is the name of the school you go to or last attended?
O	VERALL HEALTH
	In the past month, have you felt nervous, depressed or emotionally stressed?
	Yes
	No
5.	In the past month, what caused you to feel nervous, depressed or emotionally stressed?
٠.	(mark all that apply)
	Finances in my home
	Friends
	Parents/ guardians
	Romantic acquaintance/companion (e.g. boyfriend/girlfriend)
	School work, projects and/or finals
	Social media (e.g. Facebook)
	Employment/ Work
	Other (please explain):
6	What do you do to relieve emotional stress? (mark all that apply)
0.	Smoke cigarettes
	Drink alcohol
	Use drugs
	Exercise
	Extracurricular activities (e.g. School sports)
	Talk to friend
	Talk to parent/guardian
	Talk to family members (e.g., aunt, uncle, sibling, cousin)
	Attend church
	Attend counseling or support groups
	Artistic outlets (e.g., music, drama, poetry)
	Other (please explain)
7.	In the past 12 months, did you feel you should quit school to help your family financially?
	Yes
	No
	Does not apply

2

8.	In the past month, how many times have you missed, skipped or ditched school not due to illness?
	None
	1 day
	1 day 2 days
	2 days 3 - 5 days
	$\underline{}$ 6 – 9 days
	10 - 19 days
	20 days or more
9.	In the past month, how many times were your parents/guardians upset or stressed over
	finances?
	None
	1 day
	2 days
	$\underline{}$ 3 – 5 days
	$\underline{}$ 6 – 9 days
	10 – 19 days
	20 days or more
	I don't know
10	. Are your parents?
10	Married to each other
	Divorced from each other
	Separated from each other
	Not married but living with each other
	Not married and not living with each other
	One parent is deceased
	Both parents are deceased
	Other (please explain)
11	. Do you live with both your parents in the same house or apartment?
	Yes
	No
12	. Have you engaged in self-harm (e.g. cutting, anorexia, bulimia, burning)?
	Yes
	No
	<u> </u>
13	Do you have a friend who has engaged in self-harm (e.g. cutting, anorexia, bulimia,
	burning)?
	Yes
	No

14. How many times has your friend engaged in self-harm?
Daily
At least once a week
2-3 times a week
2-3 times a month
2-3 times a year
$\underline{}$ 1 – 2 times in their life
I do not have a friend who has engaged in self-harm.
15. How many times have you engaged in self-harm?
Daily
At least once a week
2-3 times a week
2-3 times a month
2-3 times a year
$\underline{}$ 1 – 2 times in my life
I do not engage in self-harm.
16. Have you ever attempted suicide?
Yes
No
17. Have you had suicidal thoughts?
Yes
No
18. Do you know where to go for help with suicidal thoughts?
Yes
No
19. How do you feel about your academic performance?
Above Average
Average
Below Average
I do not attend school currently
I do not attend sensor currently
20. Do you participate in any of the following school activities (mark all that apply)
Sports
Cheerleading/Dance team
Drama
School clubs
Leadership class (i.e. American Red Cross, Student Counsel)
Music (i.e. Choir, Band, Orchestra)
Other (please explain)
I don't participate in any of the above

21. Do you participate in any of the following activities outside of school (mark all that apply)? Church youth group
Sports
Music
Drama
Leadership group (i.e. Prevention Partnerships, Youth Commission)
Boys Scouts/ Girl Scouts
Volunteering
Other (please explain)
I don't participate in any of the above
22. Have you ever been diagnosed with a mental health condition/ disorder (e.g. bipolar disorder schizophrenia, obsessive compulsive disorder)?YesNo
23. Do you currently have a physical, emotional, and/or mental disability (e.g. ADHD, cerebral palsy, epilepsy)? Yes No

	Not At All True	A Little True	Pretty Much True	Very Much True
How true do you feel these statements a	re about you			
24. I have goals and plans for the future.	A	В	С	D
25. I plan to graduate high school.	A	В	С	D
26. I plan to go to a 4 year college.	A	В	C	D
27. I plan to go to a community college.	A	В	C	D
28. I plan to go to a trade school	A	В	C	D
29. I attend a school that has high competitive academic				
standards.	A	В	C	D
30. I put pressure on myself to perform well in school.	A	В	C	D
31. I feel upset when I do not perform well in school.	A	В	C	D
32. I feel supported to become a leader in my school/				
community.	A	В	C	D
33. My school's curriculum supports my plans for the future.	A	В	C	D
34. I know where to go for help with a problem.	A	В	C	D
35. I can do most things if I try.	A	В	С	D
36. There are many things that I do well.	A	В	С	D
37. When I need help, I find someone to talk to.	A	В	С	D
38. There is a purpose to my life.	A	В	С	D

	Not At All True	A Little True	Pretty Much True	Very Much True
How true are these statements abo	out your FRI	ENDS?		
I have a friend about my own age				
39. who really cares about me.	A	В	С	D
40. who talks with me about my problems.	A	В	C	D
41. who helps me when I'm having a hard time.	A	В	C	D
How true are these statements about your HOME or the	ne ADULTS V	WITH V	VHOM YO	U LIVE?
In my home, there is a parent or some other adult				
42. who expects me to follow the rules.	A	В	C	D
43. who is interested in my school work.	A	В	C	D
44. who believes that I will be a success.	A	В	C	D
45. who talks with me about my problems.	A	В	C	D
46. who always wants me to do my best.	A	В	C	D
47. who listens to me when I have something to say.	A	В	C	D
48. who supports/encourages me to graduate high school	A	В	C	D
49. who puts pressure on me to do well in school.	A	В	C	D
The next statements are about what might occur outs	ide your scho	ol or hor	ne, such as	in your
NEIGHBORHOOD, COMMUNITY, or with an ADU	LT other tha	n your p	arents or g	guardian.
Outside of my home and school, there is an adult				
50. who really cares about me.	A	В	С	D
51. whom I trust.	A	В	С	D
How TRUE do you feel the next statements are about your SCHOOL and things you might do there.				
At my school, there is a teacher or some other adult				
52. who really cares about me.	A	В	C	D
53. who believes that I will be a success.	A	В	С	D

ALCOHOL, TOBACCO AND OTHER DRUGS

54. Have you ever had more than a few sips of <u>any</u> alcoholic drink, like beer, wine, mixed
drinks, or liquor?
Yes
No
55. If we consider one drink to be a can or bottle of beer, a glass of wine, a shot of liquor, or one
mixed drink, on how many days in the past 30 days did you have at least one drink of
alcohol?
None
1 or 2 days
$\frac{1}{3}$ 3 - 5 days
$\underline{}$ 6 – 9 days

10 – 19 days
20 – 29 days
30 days
— ,

6

	w many days in the past 30 days did you have <u>four or more</u> drinks in a row, that is within
a c	ouple of hours?
	None
	1 day
	2 days
	$_{-}3-5$ days
	6 – 9 days
	10 – 19 days
	20 days or more
57. Ho	ow many days in the past 30 days did you have five or more drinks in a row, that is within a
CO	uple of hours?
	None
	1 day
	2 days
	=3-5 days
	6 – 9 days
	$_{-}10-19$ days
	20 days or more
58. Ha	ve you ever smoked cigarettes, even 1 or 2 puffs?
	Yes
	No
59. In	the past 30 days, on how many days did you smoke cigarettes?
	None
	1 or 2 days
	$_{-}3-5$ days
	6 – 9 days
	10 – 19 days
	20 – 29 days
	30 days
60. Ha	ve you ever tried any of the following drugs? Mark all that apply.
	Ecstasy
	Cocaine
	Crack
	Heroine
	Marijuana (Weed)
	Methamphetamines (Meth)
	Mushrooms
	Prescription drugs (please specify)
	Steroids
	Other (please specify)
	None

61. How often do you use drugs?
Daily
Once a week
2-3 times a week
2-3 times a month
2-3 times a year
I did drugs once
I do not do drugs
I do not use drugs anymore
62. Why do you use alcohol, tobacco or drugs (mark all that apply)?
Boredom
Peer influence
Family influence
Friend influence
Media Influence
Image (to fit in/look cool)
For fun
It feels good
To escape
To relieve stress
Other (please explain)
I don't use alcohol, tobacco, or drugs
63. My parent/guardian(s) know(s) that I use (mark all that apply)
Alcohol
Tobacco
Drugs
My parent/guardian does not know that I use any of the above
My parent/guardian did know, but I do not use any more
I do not use any of the above
64. My parent/guardian(s) do(es) not mind that I use (mark all that apply)
Alcohol
Tobacco
Drugs
My parent/Guardian does not approve of my use of any of the above
My parent/guardian does not know that I use any of the above
I do not use any of the above

65. How do you get alcohol, tobacco, and/or drugs that you use (mark all that apply)?
Friends my age
Older friends
I can buy it at a store
Parents/ guardian
Other adults
Stealing
I don't get alcohol, tobacco or drugs
66. If applicable, how old were you when you first tried alcohol? years old
67. If applicable, how old were you when you first smoked a cigarette? years old
68. If applicable, how old were you when you first tried drugs? years old
69. Do you think you need help with your substance use?
Yes
No
I do not use alcohol, tobacco and/or drugs
I have previous gotten help
70. Has anyone ever told you that you need help for substance use?
Yes
No
I do not use alcohol, tobacco and/or drugs
71. Have you ever been in treatment for substance use?
Yes
No
I do not use alcohol, tobacco and/or drugs
72. Has your alcohol and/or drug use negatively affected your life?
Yes
No
I do not use alcohol and/or drugs
73. I have received the following substance use/prevention education at school (mark all tha
apply)?
Assemblies
Guest speakers
Written information, brochures
Classroom presentations
Opportunities for recreation that are drug, alcohol, and tobacco free
Other (please explain)
None of the above

	Not At All True	A Little True	Pretty Much	Very Much
			True	True
How true do you feel these statements	are about yo	u personal	lly?	
74. I know how to get help for substance use if I need to.	A	В	C	D
75. My school provides effective drug and alcohol				
prevention services.	A	В	C	D
76. There are enough activities and events in my community				
for youth that are drug and alcohol free.	A	В	C	D
How true are these statements about your HOME or the ADULTS WITH WHOM YOU LIVE?				
In my home, there is a parent or some other adult				
77. who encourages me to use alcohol, tobacco or drugs.	A	В	С	D
78. who drinks alcohol with me.	A	В	С	D
79. who does drugs with me.	A	В	С	D
80. who talks to me about the dangers of alcohol, cigarettes				
and/or drugs.	A	В	С	D

SEX AND SEXUALITY
81. Which of the following topics have been covered at your school (mark all that apply)?
Contraception (Birth Control)
Safe sex
Abstinence
Information about lesbian, gay, bisexual, or transgender issues
Open discussions about sex and sexuality
Rape
Alcohol and drugs
None of the above
82. What pressures youth to hide their sexual orientation (mark all that apply)?
Fear of discrimination
Fear of violence
Uncertainty about orientation
Family acceptance
Friend acceptance
Co-worker/ workplace acceptance
Other
83. What do you consider "sexually active" (mark all that apply)?
Oral sex
Anal sex
Vaginal sex
Other insertion (penetration)
Making out without insertion (penetration)
Touching in a sexual way

84. If applicable, how old were you when you first had sexual intercourse?	years old
85. How many sexual partners have you had?	
None	
1	
$\frac{1}{2} - 4$	
$\frac{-}{-}$ 5-7	
$\frac{2}{8} = \frac{3}{10}$	
10 +	
10 +	
86. How often do you use a condom when having sex?	
Always	
Usually	
Occasionally	
Never	
I am not currently having sex	
87. Are you currently on birth control or is your partner on birth control?	
Yes	
No	
I don't know	
I am not currently having sex	
88. Have you ever been pregnant or gotten someone else pregnant?	
Yes	
No	
I do not know	
90. Have you ever had an aboution?	
89. Have you ever had an abortion?	
Yes	
No	
I am a male	
90. Have you ever used the morning after pill?	
Yes	
No	
I am a male	
91. Have you ever been raped or forced to have sex against your will?	
Yes	
No	
I'm not sure	
92. Have you ever had sex while drinking or high?	
Yes	
No	
I don't know	

93. Have you ever been tested for HIV, the virus that causes AIDS? Yes
No I don't know
94. Now thinking about other sexually transmitted diseases (STDs), besides HIV, in the past 12 months, have you been tested for a sexually transmitted disease?
Yes
No
I don't know

	Not At All True	A Little True	Pretty Much True	Very Much True
How true do you feel these statements	are about yo			
95. I know where to go to get resources/information about			<u> </u>	
HIV.	A	В	C	D
96. I know where to go to get resources/information about				
STDs.	A	В	C	D
97. I feel comfortable talking about sex and sexuality.	A	В	С	D
98. I am making informed personal decisions about sex and				
my sexuality.	A	В	C	D
99. Sexually active youth should get tested for STDs/HIV.	A	В	C	D
100. Birth control and contraception are easily available.	A	В	C	D
How true are these statements about your HOME or the ADULTS WITH WHOM YOU LIVE?				
In my home, there is a parent or some other adult				
101. who talks to me about birth control.	A	В	C	D
102. who talks to me about condoms.	A	В	С	D
103. who talks to me about STDs/HIV.	A	В	С	D
104. who talks to me about sex.	A	В	С	D

IMINATION
In the past month, how many days, have you seen graffiti and/or vandalism related to
erimination?
None
1 or 2 days
$_{2}$ 3 – 5 days
6 – 9 days
10 – 19 days
20 – 29 days
30 days

106.	In the past month, how often have you felt discriminated against?
	None
	1 or 2 days
	3 – 5 days
	6 – 9 days
	10 – 19 days
	20 – 29 days
	30 days
107.	Why did you feel discriminated against (mark all that apply)?
107.	Race or culture
	Sexual orientation
	Perceived sexual orientation (the sexual orientation others think I am)
	Religion
	Financial situation
	Language
	Plans after high school
	Age
	Ability (physical, academic, etc.) Gender
	Sexual practices/ behaviors
	Other (please explain)
	I do not experience discrimination
108.	Where do you feel the most discriminated against (mark all that apply)?
	At school
	In my community/public
	At home
	At my place of work
	I do not feel discriminated against
109.	Who do you feel discriminates against you (mark all that apply)?
	My peers
	Teachers
	Adults in the community
	Police
	Other (please explain)
	I do not feel discriminated against
110.	Schools should promote tolerance through these methods (mark all that apply).
110.	Guest speakers
	Strict behavior policies
	Class discussions
	Diversity days/fairs
	Classroom curriculum
	Schools should not be required to promote tolerance
	Other (please explain)
	· · · · · · · · · · · · · · · · · ·

111.	My school does the following to promote tolerance (mark all that apply). Guest speakers Strict behavior policies Class discussions Class curriculum (study units) Diversity Days/fairs Other (please explain)
	My school does not promote tolerance
VIOI	ENCE
	LENCE I see violence in/at (mark all that apply)
112.	My school
	My community
	My home
	Other (Please explain)
	There isn't violence around me.
113.	I feel safe in/at (mark all that apply)
110.	Home
	School
	My community
	I do not feel safe.
114.	In what ways have you been bullied or harassed (mark all that apply)? Verbally Physically
	Emotionally
	In written form
	Via the internet
	I have not been bullied or harassed
115.	Have you ever bullied or harassed others (mark all that apply)? Verbally Physically
	Emotionally
	Via the internet
	I have not bullied or harassed others
116.	What types of violence are a part of your home life (mark all that apply)? Physical (hitting, slapping, kicking, pushing, etc.)
	Verbal (name calling, put downs, insults, etc.)
	Emotional (threats, isolation, controlling, etc.)
	Social media (harassing messages on Facebook, email, Twitter)Violence is not a part of my home life

117.	How have you been abused/harassed by a boyfriend/girlfriend (mark all that apply)? Verbally Emotionally
	Physically
	Via the internet
	I have not been abused by a boyfriend/girlfriend
118.	Have you ever been in more than one physical fight?
	Yes No
119.	·
	Yes No
120.	Have you ever carried a gun?
	_Yes
	No
121.	How often do you see people bring weapons to your school?(e.g. knife, gun)
	Often
	Occasionally
	Rarely One time
	One time Never
	Never
122.	Are you currently apart or have your ever been a part of a gang?
	Yes
	No
123.	Have you felt pressured to join a gang?
	Yes No
124.	Has a gang ever jumped or threatened you?
	Yes
	No
125.	Do gangs in your community make you feel threatened?
	Yes
	Somewhat No
	No There are no gangs in my community
126.	Are you currently on or have you ever been on probation?
	Yes
	No

		Not At All True	A Little True	Pretty Much True	Very Much True
	How true do you feel these statements	are about y	ou persor	nally?	
127.	I need education about how to deal with anger.	A	В	С	D
128.	I need more gang prevention programs.	A	В	С	D
129.	I know non-violent ways to deal with conflict.	A	В	C	D
130.	I feel violence is acceptable.	A	В	С	D
How true are these statements about your HOME or the ADULTS WITH WHOM YOU LIVE?					
In my	home, there is a parent or some other adult				
131.	who I can talk to if I experience violence at school	A	В	C	D
132.	who I can talk to if I experience violence with my				
	partner.	A	В	C	D
133.	who I can talk to if I get bullied online.	A	В	C	D

DEM	OGRAPHICS – PART 2
134.	What city do you live in?
135.	Are you Latino or Hispanic? Yes No
136.	What is your race or cultural background? (mark all that apply) African- American/ Black Asian /Pacific Islander (please specify) Middle Eastern / North African Native / Indigenous White / European Other (please specify)
137.	What is your current age?
138.	What primary language do you speak at home?
139.	Do you qualify for free or reduced lunch? Yes No
140.	What city did you live in during 3 rd grade?
141.	What Elementary school(s) did you attend in the 3 rd grade?

THANK YOU FOR YOUR TIME AND INPUT!!!!