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**2007 Prevention Needs
Assessment Survey Report
For:**

Chesterfield County, Virginia

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Introduction

2007 Prevention Needs Assessment Survey

School Summary Report for Safe INC.

This report summarizes the findings from the Youth Survey that was conducted during the fall of 2007 in grades 8, 10, and 12. The results for your schools are presented along with comparisons to the results from the National Survey, Monitoring the Future, your 2005 results, and the Bach Harrison 8-State Norm.

The survey was designed to assess adolescent substance use, anti-social behavior, and the risk and protective factors that predict these adolescent problem behaviors.

This year the cutpoints have been modified to make a more current comparison. The data from 2005 has been reanalyzed in order to have the best possible comparison. Because of this, a few values from 2005 in the risk and protective profiles will change slightly from last year. This does not affect past results or conclusions; it just makes the two years data as comparable as possible.

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The Risk and Protective Factor Model of Substance Abuse Prevention

Many states and local agencies have adopted the Risk and Protective Factor Model to guide their prevention efforts. The Risk and Protective Factor Model of Prevention is based on the simple premise that to prevent a problem from happening, we need to identify the factors that increase the risk of that problem developing and then find ways to reduce the risks. Just as medical researchers have found risk factors for heart disease such as diets high in fat, lack of exercise, and smoking; a team of researchers at the University of Washington have defined a set of risk factors for youth problem behaviors.

Risk factors are characteristics of school, community, and family environments, as well as characteristics of students and their peer groups that are known to predict increased likelihood of drug use, delinquency, school dropout, teen pregnancy, and violent behavior among youth. Dr. J. David Hawkins, Dr. Richard F. Catalano, and their colleagues at the University of Washington, Social Development Research Group have investigated the relationship between risk and protective factors and youth problem behavior. For example, they have found that children who live in families with high levels of conflict are more likely to become involved in problem behaviors such as delinquency and drug use than children who live in families with low levels of family conflict.

Table 1. Characteristics of Participants

Student Totals				
Total Students	Chesterfield County			
	2005		2007	
	Number	Percent	Number	Percent
	2501	100	4025	100
Grade				
8	1138	45.5	1324	32.9
10	790	31.6	1376	34.2
12	573	22.9	1325	32.9
Gender				
Male	1177	48.9	1838	46.6
Female	1232	51.1	2102	53.4
Ethnicity				
Native American	41	1.7	214	4.8
African American	359	14.6	1277	28.4
Hispanic	64	2.6	307	6.8
White	1817	74.0	2440	54.3
Asian	46	1.9	198	4.4
Pacific Islander	10	0.4	55	1.2
Multi Racial or Other	118	4.8	*	*

* In 2007 ethnicity was multiple choice and did NOT include an "Other" category

Risk and Protective Factors

The Risk and Protective Factor Model of Substance Abuse Prevention (Continued)

Protective factors exert a positive influence or buffer against the negative influence of risk, thus reducing the likelihood that adolescents will engage in problem behaviors. Protective factors identified through research reviewed by Drs. Hawkins and Catalano include social bonding to family, school, community and peers; healthy beliefs and clear standards for behavior; and individual characteristics. For bonding to serve as a protective influence, it must occur through involvement with peers and adults who communicate healthy values and set clear standards for behavior. Research on risk and protective factors has important implications for prevention efforts.

The premise of this approach is that in order to promote positive youth development and prevent problem behaviors, it is necessary to address those factors that predict the problem.

By measuring risk and protective factors in a population, prevention programs can be implemented that will reduce the elevated risk factors and increase the protective factors. For example, if academic failure is identified as an elevated risk factor in a community, then mentoring, tutoring, and increased opportunities and rewards for classroom participation can be provided to improve academic performance.

The chart to the right shows the links between the 19 risk factors and the five problem behaviors. The check marks have been placed in the chart to indicate where at least two well designed, published research studies have shown a link between the risk factor and the problem behavior.

Risk Factors	Problem Behaviors				
	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence
Community					
Availability of Drugs and Firearms	ü	ü			ü
Community Laws and Norms Favorable Toward Drug Use, Firearms and Crime	ü	ü			ü
Media Portrayals of Violence					ü
Transitions and Mobility	ü	ü			ü
Low Neighborhood Attachment and Community Disorganization	ü	ü			ü
Extreme Economic and Social Deprivation	ü	ü	ü	ü	ü
Family					
Family History of the Problem Behavior	ü	ü	ü	ü	
Family Management Problems	ü	ü	ü	ü	ü
Family Conflict	ü	ü	ü	ü	ü
Favorable Parental Attitudes and Involvement in the Problem Behavior	ü	ü			ü
School					
Academic Failure in Elementary School	ü	ü	ü	ü	ü
Lack of Commitment to School	ü	ü	ü	ü	ü
Peer / Individual					
Early and Persistent Antisocial Behavior	ü	ü	ü	ü	ü
Alienation and Rebelliousness	ü	ü		ü	
Friends Who Engage in a Problem Behavior	ü	ü	ü	ü	ü
Gang Involvement	ü	ü			ü
Favorable Attitudes Toward the Problem Behavior	ü	ü	ü	ü	
Early Initiation of the Problem Behavior	ü	ü	ü	ü	ü
Constitutional Factors	ü	ü			ü

Building a Strategic Prevention Framework

The Prevention Needs Assessment Survey is an important part of the Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Prevention (CSAP) Strategic Prevention Framework Process. CSAP created this 5-step model to guide states and communities through the process of creating a planned, data-driven, effective, and sustainable prevention program. The information presented in this section is taken from CSAP's Strategic Prevention Framework State Incentive Grants Request for Application.

Step 1: Profile Population Needs, Resources, and Readiness to Address the Problems and Gaps in Service Delivery

- **Community Needs Assessment:** The results of this survey (presented in this Profile Report and in results reported at the State level) will help you to identify needs for prevention. States should consider administering a survey such as the Prevention Needs Assessment Survey biannually to assess adolescent substance use, anti-social behavior, and many of the risk and protective factors that predict adolescent problem behaviors. While planning prevention services, communities are urged to collect and use multiple data sources, including archival and social indicators, assessment of existing resources, key informant interviews, as well as data from this survey.
- **Community Resource Assessment:** It is likely that existing agencies and programs are already addressing some of the prioritized risk and protective factors. It is important to identify the assets and resources already available in the community and the gaps in services and capacity.
- **Community Readiness Assessment:** It is very important for states and communities to have the commitment and support of their members and ample resources to implement effective prevention efforts. Therefore, the readiness and capacity of communities and resources to act should also be assessed.

Step 2: Mobilize and/or Build Capacity to Address Needs: Engagement of key stakeholders at the State and community levels is critical to plan and implement successful prevention activities that will be sustained over time. Some of the key tasks to mobilize the state and communities are to work with leaders and stakeholders to build coalitions, provide training, leverage resources, and help sustain prevention activities.

Step 3: Develop a Comprehensive Strategic Plan: States and communities should develop a strategic plan that articulates not only a vision for the prevention activities, but also strategies for organizing and implementing prevention efforts. The strategic plan should be based on documented needs, build on identified resources/strengths, set measurable objectives, and identify how progress will be monitored. Plans should be adjusted with ongoing needs assessment and monitoring activities. The issue of sustainability should be kept in mind throughout each step of planning and implementation.

Step 4: Implement Evidence-based Prevention Programs and Infrastructure Development Activities: By measuring risk and protective factors in a population, prevention programs can be implemented that will reduce the elevated risk factors and increase the protective factors. For example, if academic failure is identified as a prioritized risk factor in a community, then mentoring, tutoring, and increased opportunities and rewards for classroom participation can be provided to improve academic performance. After completing Steps 1, 2, and 3, communities will be able to choose prevention programs that fit the Strategic Framework of the community, match the population served, and are scientifically proven to work. The Western Center for the Application of Prevention Technology website (www.westcapt.org) contains a search engine for identifying Best Practice Programs.

Step 5: Monitor Process, Evaluate Effectiveness, Sustain Effective Programs/Activities, and Improve or Replace Those That Fail: Finally, ongoing monitoring and evaluation are essential to determine if the outcomes desired are achieved and to assess program effectiveness, assess service delivery quality, identify successes, encourage needed improvement, and promote sustainability of effective policies, programs, and practices.

Tools for Assessment and Planning

School and Community Improvement Using Survey Data

Why Conduct the Prevention Needs Assessment Survey?

Data from the Prevention Needs Assessment Survey can be used to help school and community planners assess current conditions and prioritize areas of greatest need.

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

What are the numbers telling you?

Review the charts and data tables presented in this report. Using the table below, note your findings as you discuss the following questions.

- Which 3-5 risk factors appear to be higher than you would want?
- Which 3-5 protective factors appear to be lower than you would want?
- Which levels of 30-day drug use are increasing and/or unacceptably high?
 - Which substances are your students using the most?
 - At which grades do you see unacceptable usage levels?
- Which levels of antisocial behaviors are increasing and/or unacceptably high?
 - Which behaviors are your students exhibiting the most?
 - At which grades do you see unacceptable behavior levels?

How to decide if a rate is “unacceptable.”

- Look across the charts – which items stand out as either much higher or much lower than the other?
- Compare your data with statewide, and/or national data – differences of 5% between local and other data are probably significant.
- Determine the standards and values held within your community – For example: Is it acceptable in your community for 40% of high school seniors to drink alcohol regularly even when the national percentage is 50%?

Use these data for planning.

- Substance use and antisocial behavior data – raise awareness about the problems and promote dialogue
- Risk and protective factor data – identify exactly where the community needs to take action
- Promising approaches – access resources listed on the last page of this report for ideas about programs that have proven effective in addressing the risk factors that are high in your community, and improving the protective factors that are low

MEASURE

Risk Factors
Protective Factors
Substance Use
Antisocial Behaviors

Unacceptable Rate #1	Unacceptable Rate #2	Unacceptable Rate #3	Unacceptable Rate #4

Practical Implications of the PNA

No Child Left Behind

The Safe and Drug Free Schools and Communities section of the No Child Left Behind Act (NCLB) requires that schools and communities use six Principles of Effectiveness to guide their decisions and spending on federally funded prevention and intervention programs. First introduced in 1998 by the Department of Education, the Principles of Effectiveness outline a data-driven process for ensuring that prevention programs achieve the desired results. The Principles of Effectiveness stipulate that local prevention programs and activities must:

1. be based on a needs assessment using objective data regarding the incidence of drug use and violence,
2. target specific performance objectives,
3. be based on scientific research and be proven to reduce violence or drug use,
4. be based on the analysis of predictor variables such as risk and protective factors,
5. include meaningful and on-going parental input in program implementation, and
6. have periodic evaluations of established performance measures.

The results of the Prevention Needs Assessment Survey presented in this report can help your school and community comply with the NCLB Act. The Substance Use and Antisocial Behavior charts provide information related to Principle 1 above. The Risk and Protective Factor charts provide information related to Principle 4. Overall, using the Risk and Protective factors planning framework helps schools meet all of the Principles of Effectiveness, and thereby assists schools in complying with the NCLB Act.

How to Read the Charts

There are four types of charts presented in this report: 1) substance use charts, 2) antisocial behavior and gambling charts, 3) risk factor charts, and 4) protective factor charts. All the charts show the results of the 2007 PNA Survey compared to the 2005 results. The actual percentages from the charts are presented in Tables 3 through 10. Tables 11 and 13 contain information for the Drug Free Communities Report, and Tables 12 and 14 contain additional data for prevention planning and reporting to state and federal agencies.

Substance Use, Antisocial Behavior, and Gambling Charts

This report contains information about alcohol, tobacco and other drug use (referred to as ATOD use throughout this report) and other problem behaviors of students. The bars on each chart represent the percentage of students in that grade who reported the behavior. The four sections in the charts represent different types of problem behaviors. The definitions of each of the types of behavior are provided below.

- Ever-used is a measure of the percentage of students who tried the particular substance at least once in their lifetime and is used to show the percentage of students who have had experience with a particular substance.
- 30-day use is a measure of the percentage of students who used the substance at least once in the 30 days prior to taking the survey and is a more sensitive indicator of the level of current use of the substance.
- Heavy use includes binge drinking (having five or more drinks in a row during the two weeks prior to the survey), use of one-half a pack or more of cigarettes per day, and need for alcohol, drug, and a combined scale for students that need either alcohol OR drug treatment. The need for treatment is defined as students who have used alcohol or drugs on ten or more occasions in their lifetime and marked three or more of the following six items related to their past year drug or alcohol use: 1) spent more time using than intended,

How to Read the Charts: Continued

- 2) neglected some of your usual responsibilities because of use, 3) wanted to cut down on use, 4) others objected to your use, 5) frequently thought about using, 6) used alcohol or drugs to relieve feeling such as sadness, anger, or boredom. Students could mark whether these items related to their drug use and/or their alcohol use.
- Antisocial behavior (ASB) is a measure of the percentage of students who report any involvement during the past year with the eight antisocial behaviors listed in the charts. In the charts, antisocial behavior is abbreviated as ASB.
- Gambling behavior charts show the percentage of students who engaged in each of the 10 types of gambling along with the percentage for any gambling behavior during the past year.
- Diamonds. The diamonds represent national data from either the Monitoring the Future Survey or the 8-State Norm (See The 8-State Norm). A comparison to the state-wide and national results provides additional information for your community in determining the relative importance of levels of ATOD use, antisocial behavior, risk, and protection. Information about other students in the state and the nation can be helpful in determining the seriousness of a given level of problem behavior. Scanning across the charts, you can easily determine which factors are most (or least) prevalent for your community. This is the first step in identifying the levels of risk and protection that are operating in your community and which factors your community may choose to address.

Risk and Protective Factor Charts

The risk and protective factor charts show the percentage of students at risk and with protection for each of the risk and protective factor scales. The risk and protective factor scales measure specific aspects of a youth's life experience that predict whether he/she will engage in problem behaviors. A definition of each risk and protective factor scale is contained in Table 2. The factors are grouped into four domains: community, family, school, and peer/individual.

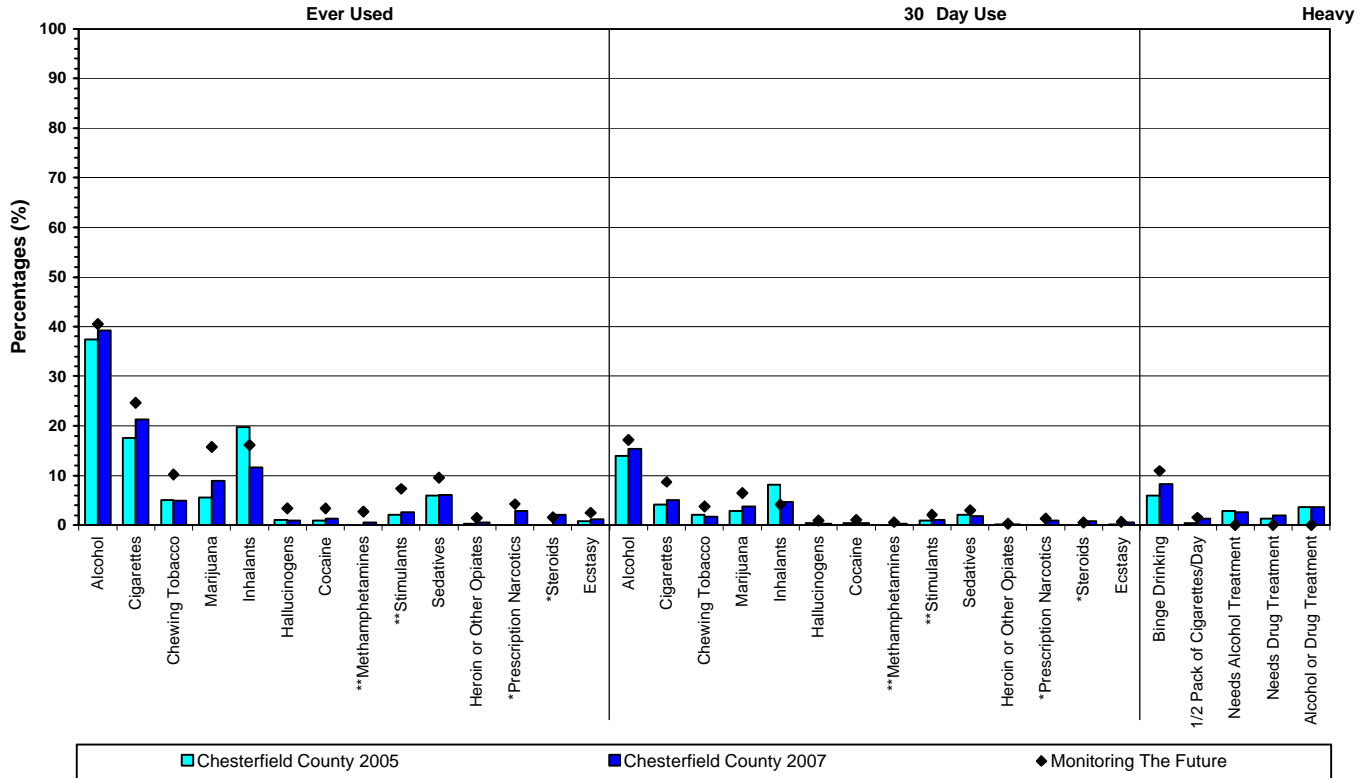
The Bars on the risk and protective factor charts, represent the percentage of students whose answers reflect significant risk or protection. There are bars for the last two administrations of the PNA. By looking at the percentage of youth at risk and with protection over time, it is possible to determine whether the percentage of students at risk or with protection is increasing, decreasing, or staying the same. This information is important when deciding which risk and protective factors warrant attention.

The 8-State Norm diamond on the charts allows a comparison between the levels of risk and protection in your community and a more national sample. The 8-State Norm value for each risk and protective factor scale represents the percentage of youth at risk or with protection for eight states across the country. In developing the 8-State Norm, the contribution of each of eight states was proportional to its percentage of the national population which helps to make the results more representative of youth nation-wide. A comparison between the ATOD use rates from the 8-State database and those from the national Monitoring the Future survey showed the rates to be very similar, which provides added confidence in the validity of the 8-State Norm. Brief definitions of the risk and protective factors scales are provided in Table 2 following the profile charts. For more information about risk and protective factors, please refer to the resources listed on the last page of this report under Contacts for Prevention.

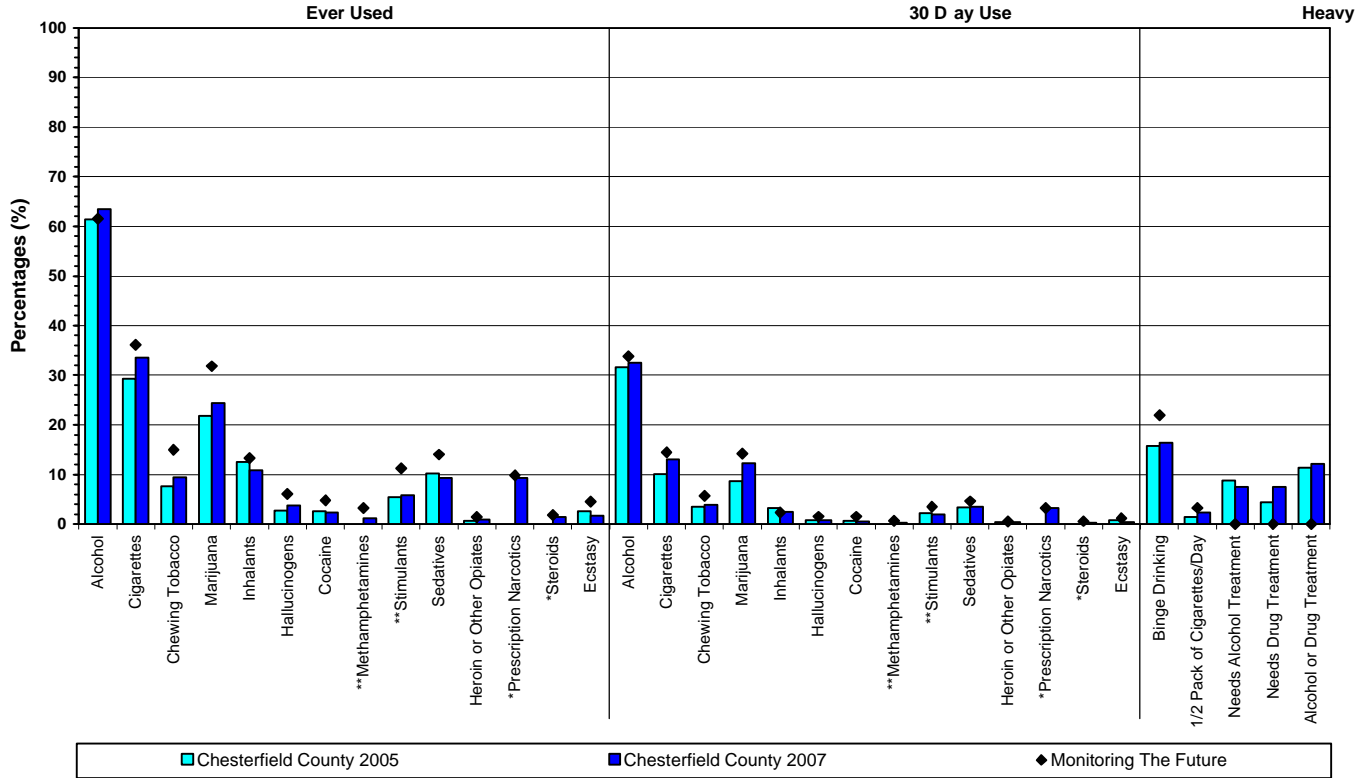
Youth with High Risk and Protection

Along with the risk and protective factor scales, there is a bar for each chart that shows the percentage of students at high risk for each risk factor chart and the percentage of students with high protection for each protective factor chart. The percentage of youth at high risk is defined as the percentage of students who have more than a specified number of risk factors operating in their lives. For 6th grade students, it is the percentage of students who have 7 or more risk factors, for 7th and 8th grades it is 8 or more risk factors, and for 9th through 12th grades it is 9 or more risk factors. The percentage of youth with high protection is defined as the percentage of students in 6th grade with 4 or more protective factors and in 7th through 12th grades who have 5 or more protective factors operating in their lives.

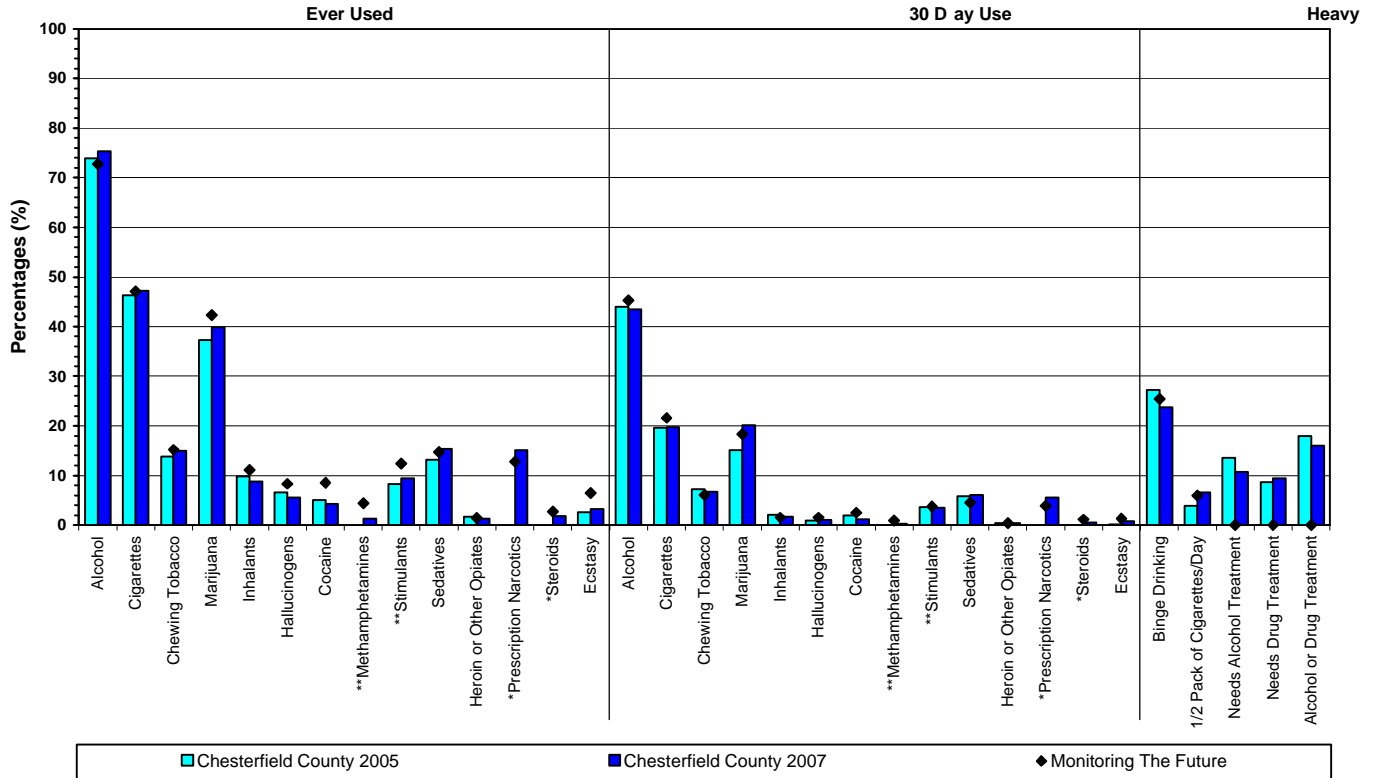
LIFETIME, 30 DAY & HEAVY A TOD USE
2007 Chesterfield County Student Survey, Grade 8



LIFETIME, 30 DAY & HEAVY A TOD USE
2007 Chesterfield County Student Survey, Grade 10

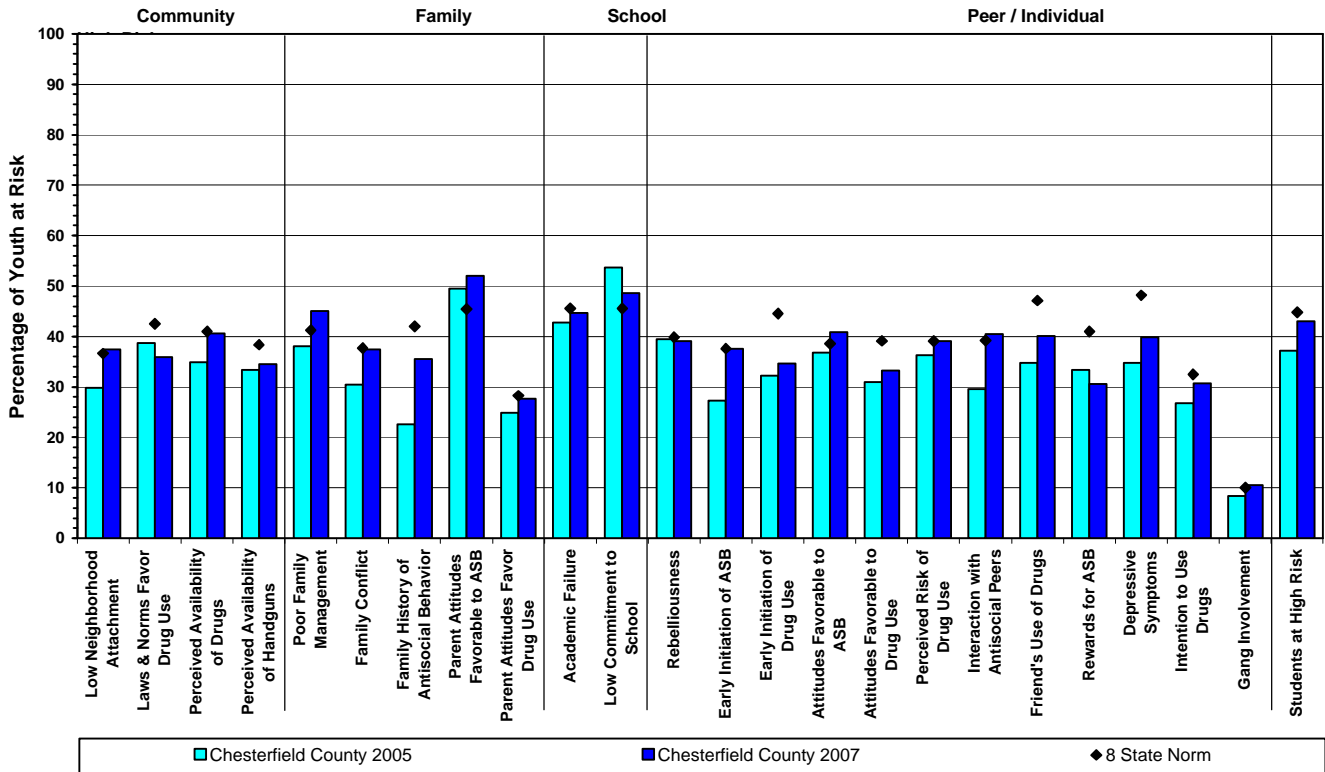


LIFETIME, 30 DAY & HEAVY A TOD USE 2007 Chesterfield County Student Survey, Grade 12



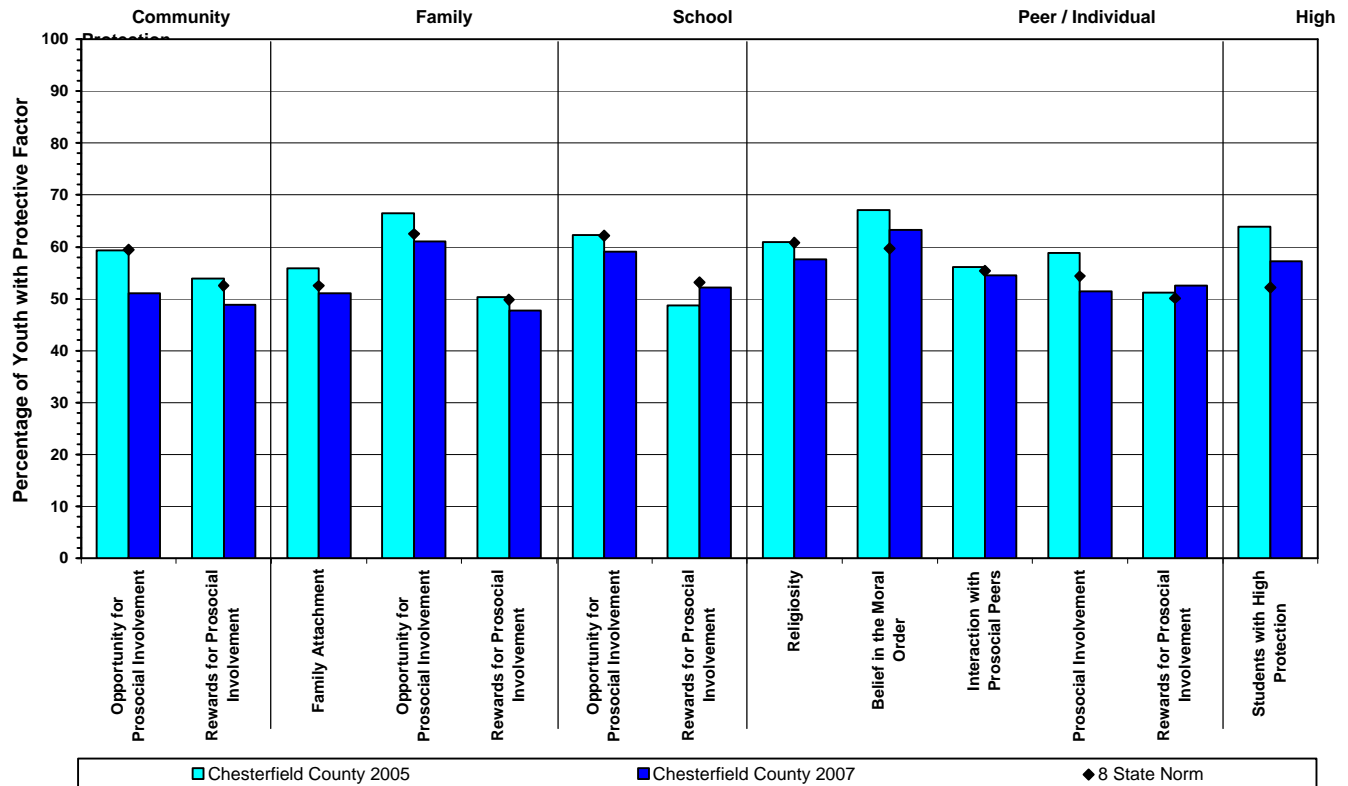
RISK PROFILE

2007 Chesterfield County Student Survey, Grade 8



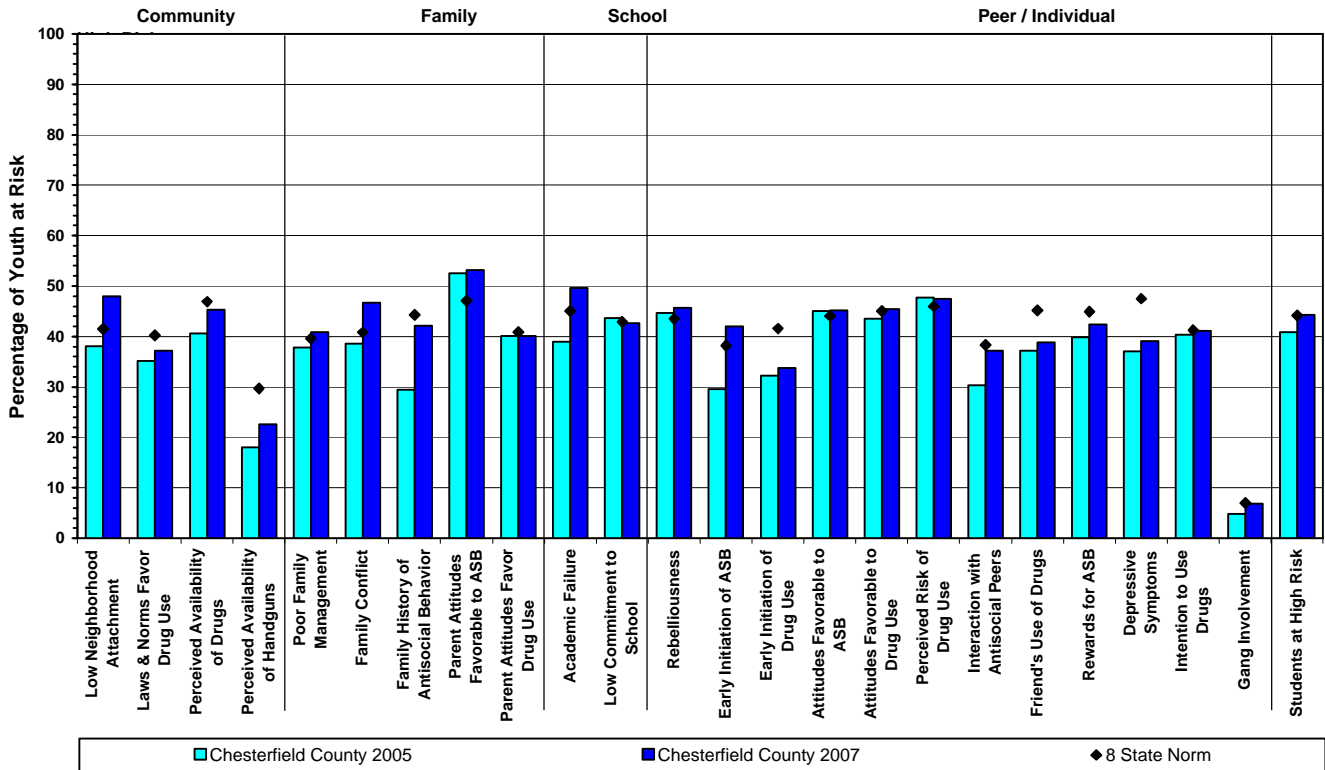
PROTECTIVE PROFILE

2007 Chesterfield County Student Survey, Grade 8



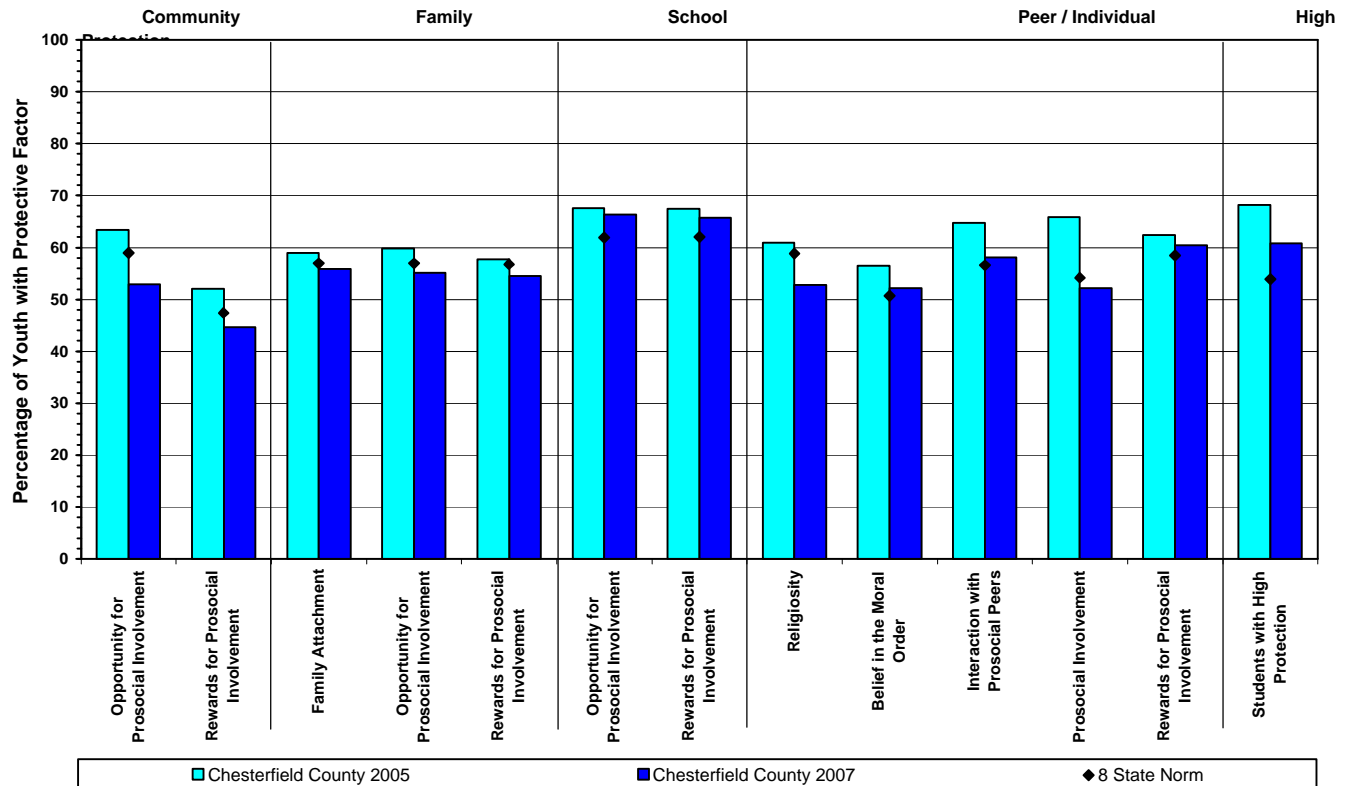
RISK PROFILE

2007 Chesterfield County Student Survey, Grade 10



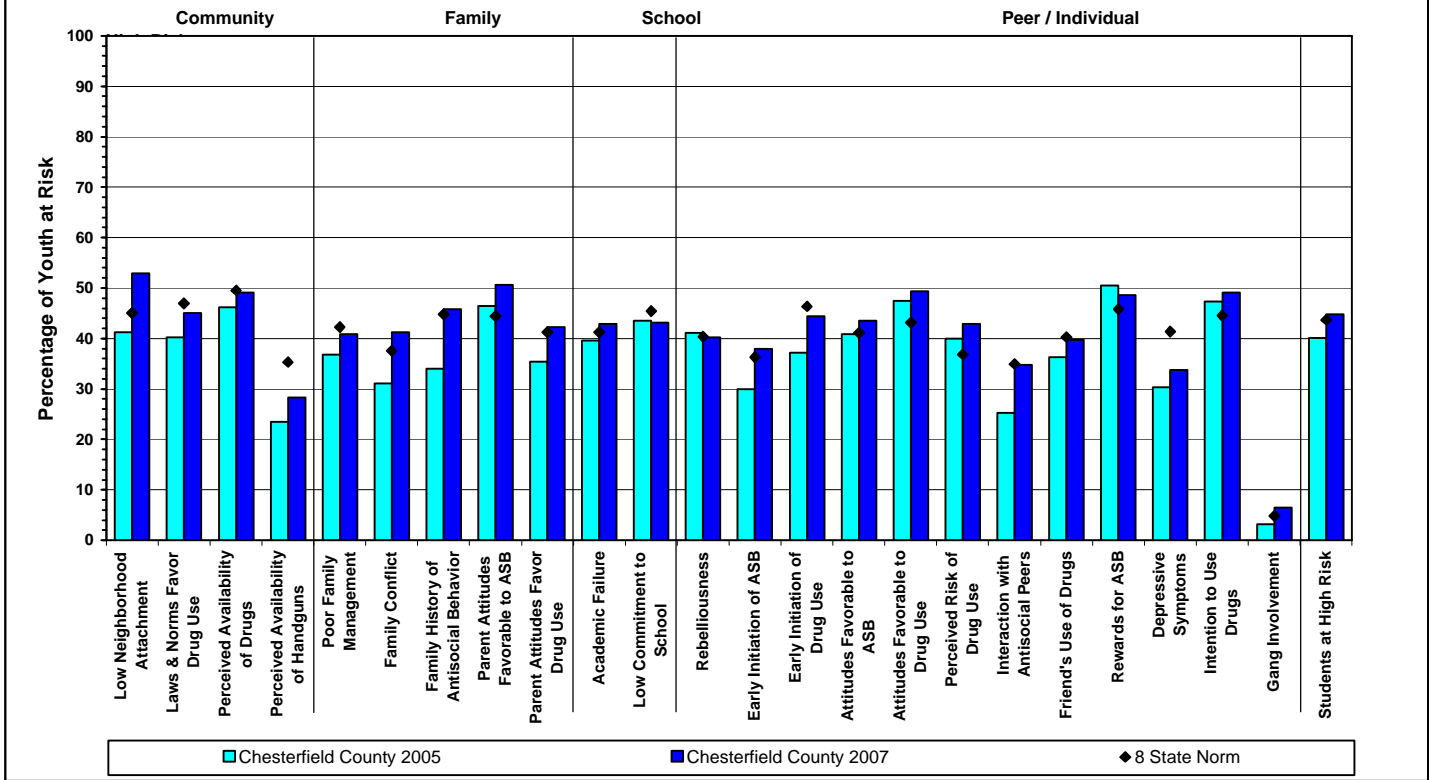
PROTECTIVE PROFILE

2007 Chesterfield County Student Survey, Grade 10



RISK PROFILE

2007 Chesterfield County Student Survey, Grade 12



PROTECTIVE PROFILE

2007 Chesterfield County Student Survey, Grade 12

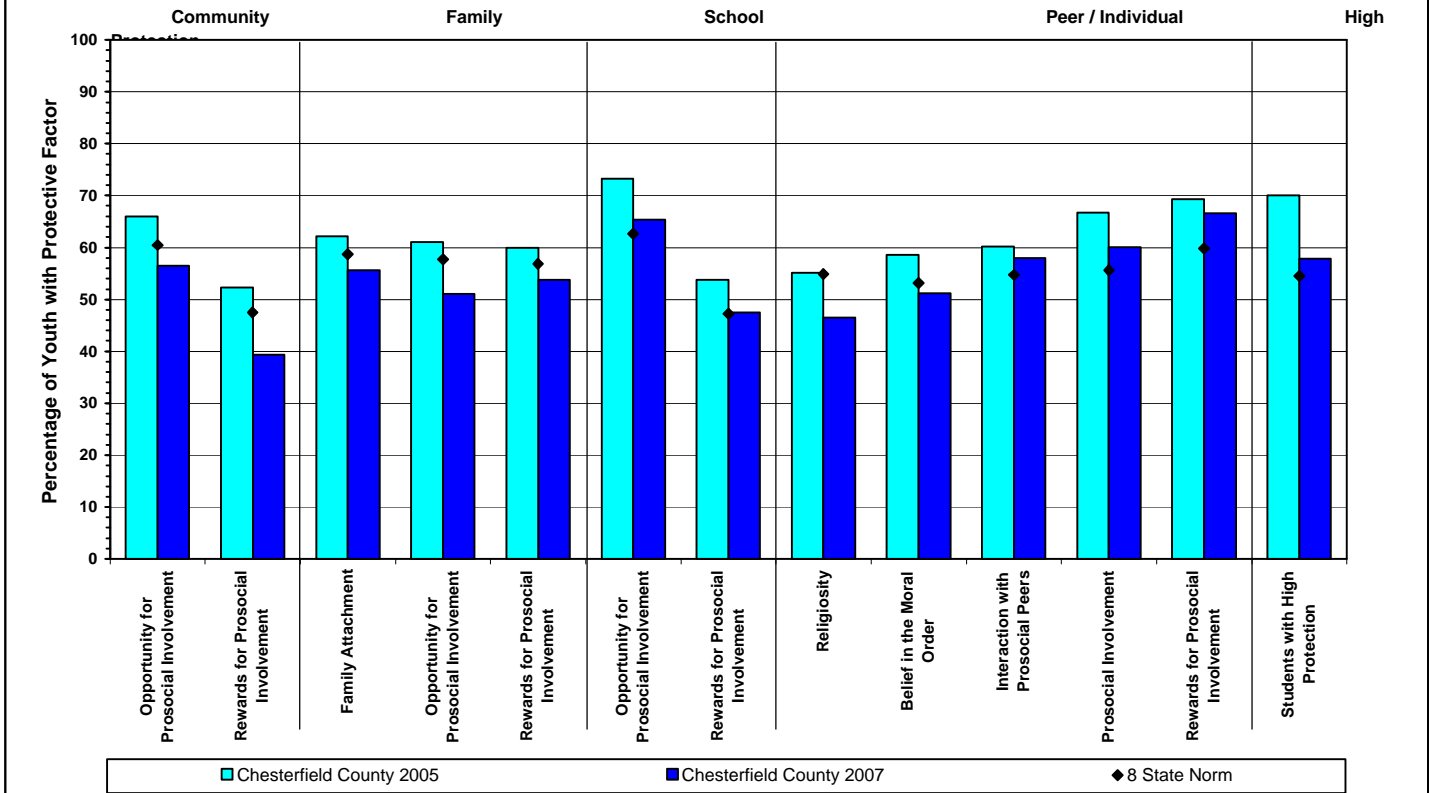


Table 2. Risk and Protective Factor Scale Definitions

<i>Community Domain Risk Factors</i>	
<i>Community Disorganization</i>	Research has shown that neighborhoods with high population density, lack of natural surveillance of public places, physical deterioration, and high rates of adult crime also have higher rates of juvenile crime and drug selling.
<i>Low Neighborhood Attachment</i>	A low level of bonding to the neighborhood is related to higher levels of juvenile crime and drug selling.
<i>Laws and Norms Favorable Toward Drug Use</i>	Research has shown that legal restrictions on alcohol and tobacco use, such as raising the legal drinking age, restricting smoking in public places, and increased taxation have been followed by decreases in consumption. Moreover, national surveys of high school seniors have shown that shifts in normative attitudes toward drug use have preceded changes in prevalence of use.
<i>Perceived Availability of Drugs and Handguns</i>	The availability of cigarettes, alcohol, marijuana, and other illegal drugs has been related to the use of these substances by adolescents. The availability of handguns is also related to a higher risk of crime and substance use by adolescents.
<i>Community Domain Protective Factors</i>	
<i>Opportunities for Positive Involvement</i>	When opportunities are available in a community for positive participation, children are less likely to engage in substance use and other problem behaviors.
<i>Rewards for Positive Involvement</i>	Rewards for positive participation in activities helps children bond to the community, thus lowering their risk for substance use.
<i>Family Domain Risk Factors</i>	
<i>Family History of Antisocial Behavior</i>	When children are raised in a family with a history of problem behaviors (e.g., violence or ATOD use), the children are more likely to engage in these behaviors.
<i>Family Conflict</i>	Children raised in families high in conflict, whether or not the child is directly involved in the conflict, appear at risk for both delinquency and drug use.
<i>Parental Attitudes Favorable Toward Antisocial Behavior & Drugs</i>	In families where parents use illegal drugs, are heavy users of alcohol, or are tolerant of children's use, children are more likely to become drug abusers during adolescence. The risk is further increased if parents involve children in their own drug (or alcohol) using behavior, for example, asking the child to light the parent's cigarette or get the parent a beer from the refrigerator.
<i>Poor Family Management</i>	Parents' use of inconsistent and/or unusually harsh or severe punishment with their children places them at higher risk for substance use and other problem behaviors. Also, parents' failure to provide clear expectations and to monitor their children's behavior makes it more likely that they will engage in drug abuse whether or not there are family drug problems
<i>Family Domain Protective Factors</i>	
<i>Family Attachment</i>	Young people who feel that they are a valued part of their family are less likely to engage in substance use and other problem behaviors.
<i>Opportunities for Positive Involvement</i>	Young people who are exposed to more opportunities to participate meaningfully in the responsibilities and activities of the family are less likely to engage in drug use and other problem behaviors.
<i>Rewards for Positive Involvement</i>	When parents, siblings, and other family members praise, encourage, and attend to things done well by their child, children are less likely to engage in substance use and problem behaviors.
<i>School Domain Risk Factors</i>	
<i>Academic Failure</i>	Beginning in the late elementary grades (grades 4-6) academic failure increases the risk of both drug abuse and delinquency. It appears that the experience of failure itself, for whatever reasons, increases the risk of problem behaviors.
<i>Low Commitment to School</i>	Surveys of high school seniors have shown that the use of hallucinogens, cocaine, heroin, stimulants, and sedatives or non-medically prescribed tranquilizers is significantly lower among students who expect to attend college than among those who do not. Factors such as liking school, spending time on homework, and perceiving the coursework as relevant are also negatively related to drug use.

Table 2. Risk and Protective Factor Scale Definitions (Continued)

<i>School Domain Protective Factors</i>	
<i>Opportunities for Positive Involvement</i>	When young people are given more opportunities to participate meaningfully in important activities at school, they are less likely to engage in drug use and other problem behaviors.
<i>Rewards for Positive Involvement</i>	When young people are recognized and rewarded for their contributions at school, they are less likely to be involved in substance use and other problem behaviors
<i>Peer-Individual Risk Factors</i>	
<i>Early Initiation of Antisocial Behavior and Drug Use</i>	Early onset of drug use predicts misuse of drugs. The earlier the onset of any drug use, the greater the involvement in other drug use and the greater frequency of use. Onset of drug use prior to the age of 15 is a consistent predictor of drug abuse, and a later age of onset of drug use has been shown to predict lower drug involvement and a greater probability of discontinuation of use.
<i>Attitudes Favorable Toward Antisocial Behavior and Drug Use</i>	During the elementary school years, most children express anti-drug, anti-crime, and pro-social attitudes and have difficulty imagining why people use drugs or engage in antisocial behaviors. However, in middle school, as more youth are exposed to others who use drugs and engage in antisocial behavior, their attitudes often shift toward greater acceptance of these behaviors. Youth who express positive attitudes toward drug use and antisocial behavior are more likely to engage in a variety of problem behaviors, including drug use.
<i>Friends' Use of Drugs</i>	Young people who associate with peers who engage in alcohol or substance abuse are much more likely to engage in the same behavior. Peer drug use has consistently been found to be among the strongest predictors of substance use among youth. Even when young people come from well-managed families and do not experience other risk factors, spending time with friends who use drugs greatly increases the risk of that problem developing.
<i>Interaction with Antisocial Peers</i>	Young people who associate with peers who engage in problem behaviors are at higher risk for engaging in antisocial behavior themselves.
<i>Perceived Risk of Drug Use</i>	Young people who do not perceive drug use to be risky are far more likely to engage in drug use.
<i>Rewards for Antisocial Behavior</i>	Young people who receive rewards for their antisocial behavior are at higher risk for engaging further in antisocial behavior and substance use.
<i>Rebelliousness</i>	Young people who do not feel part of society, are not bound by rules, don't believe in trying to be successful or responsible, or who take an active rebellious stance toward society, are at higher risk of abusing drugs. In addition, high tolerance for deviance, a strong need for independence and normlessness have all been linked with drug use.
<i>Intention to Use ATODs</i>	Many prevention programs focus on reducing the intention of participants to use ATODs later in life. Reduction of intention to use ATODs often follows successful prevention interventions.
<i>Depressive Symptoms</i>	Young people who are depressed are overrepresented in the criminal justice system and are more likely to use drugs. Survey research and other studies have shown a link between depression and other youth problem behaviors.
<i>Gang Involvement</i>	Youth who belong to gangs are more at risk for antisocial behavior and drug use.
<i>Peer-Individual Protective Factors</i>	
<i>Religiosity</i>	Young people who regularly attend religious services are less likely to engage in problem behaviors.
<i>Social Skills</i>	Young people who are socially competent and engage in positive interpersonal relations with their peers are less likely to use drugs and engage in other problem behaviors.
<i>Belief in the Moral Order</i>	Young people who have a belief in what is "right" or "wrong" are less likely to use drugs.
<i>Prosocial Involvement</i>	Participation in positive school and community activities helps provide protection for youth.
<i>Prosocial Norms</i>	Young people who view working hard in school and the community are less likely to engage in problem behavior.
<i>Involvement with Prosocial Peers</i>	Young people who associate with peers who engage in prosocial behavior are more protected from engaging in antisocial behavior and substance use.

Table 3. Number of Students Who Completed the Survey

Number of Youth	Grade 8			Grade 10			Grade 12		
	2005	2007	MTF	2005	2007	MTF	2005	2007	MTF
	1138	1324	†	790	1376	†	573	1325	†

Table 4. Percentage of Student s Who Used ATODs During Their Lifetime

In your lifetime, on how many occasions (if any) have you (One or more occasions)		Grade 8			Grade 10			Grade 12		
		2005	2007	MTF	2005	2007	MTF	2005	2007	MTF
Alcohol	had alcoholic beverages (beer, wine or hard liquor) to drink - more than just a few sips?	37.3	39.3	40.5	61.4	63.4	61.5	73.9	75.2	72.7
Cigarettes	smoked cigarettes?	17.6	21.3	24.6	29.4	33.6	36.1	46.3	47.2	47.1
Chewing Tobacco	used smokeless tobacco (chew, snuff, plug, dipping tobacco, chewing tobacco)?	5.1	4.9	10.2	7.6	9.4	15.0	13.8	15.0	15.2
Marijuana	used marijuana (grass, pot) or hashish (hash, hash oil)?	5.6	8.9	15.7	21.9	24.4	31.8	37.3	39.8	42.3
Inhalants	sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high?	19.8	11.7	16.1	12.5	10.8	13.3	9.8	8.8	11.1
Hallucinogens	used LSD or other hallucinogens?	1.1	0.9	3.4	2.7	3.8	6.1	6.6	5.6	8.3
Cocaine	used cocaine or crack?	0.9	1.2	3.4	2.6	2.3	4.8	5.1	4.2	8.5
**Methamphetamines	used methamphetamines (meth, speed, crank, crystal meth)?	n/a	0.5	2.7	n/a	1.1	3.2	n/a	1.3	4.4
**Stimulants	used stimulants, other than methamphetamines (such as amphetamines, Ritalin, Dexedrine) without a doctor telling you to take them?	2.1	2.6	7.3	5.4	5.8	11.2	8.2	9.4	12.4
Sedatives	used sedatives (tranquilizers, such as Valium or Xanax, barbiturates, or sleeping pills) without a doctor telling you to take them?	6.0	6.0	9.5	10.2	9.3	14.0	13.1	15.4	14.7
Heroin or Other Opiates	used heroin or other opiates?	0.3	0.5	1.4	0.6	1.0	1.4	1.7	1.3	1.4
*Prescription Narcotics	used narcotic prescription drugs (such as OxyContin, methadone, morphine, codine, Demerol, Vicodin, Percocet) without a doctor telling you to take them?	n/a	2.8	4.2	n/a	9.3	9.8	n/a	15.1	12.8
*Steroids	used steroids or anabolic steroids (such as Anadrol, Oxandrin, Durabolin, Equipoise or Depotesterone)?	n/a	2.1	1.6	n/a	1.4	1.8	n/a	1.8	2.7
Ecstasy	used MDMA ('X', 'E', or ecstasy)?	0.7	1.2	2.5	2.6	1.7	4.5	2.6	3.2	6.5

** Before 2007, Methamphetamines was combined with Stimulants

* Substances not included before 2007

† See the Monitoring the Future website (<http://www.monitoringthefuture.org/>)

Table 5. Percentage of Students Who Used ATODs During Their Lifetime

In the past 30 days, on how many occasions (if any) have you (One or more occasions)		Grade 8			Grade 10			Grade 12		
		2005	2007	MTF	2005	2007	MTF	2005	2007	MTF
Alcohol	had alcoholic beverages (beer, wine or hard liquor) to drink - more than just a few sips?	13.9	15.3	17.2	31.6	32.5	33.8	43.9	43.4	45.3
Cigarettes	smoked cigarettes?	4.1	5.0	8.7	10.1	13.0	14.5	19.6	19.8	21.6
Chewing Tobacco	used smokeless tobacco (chew, snuff, plug, dipping tobacco, chewing tobacco)?	2.1	1.6	3.7	3.5	3.9	5.7	7.2	6.8	6.1
Marijuana	used marijuana (grass, pot) or hashish (hash, hash oil)?	2.8	3.7	6.5	8.6	12.3	14.2	15.1	20.1	18.3
Inhalants	sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high?	8.2	4.6	4.1	3.2	2.5	2.3	2.1	1.7	1.5
Hallucinogens	used LSD or other hallucinogens?	0.4	0.2	0.9	0.8	0.8	1.5	0.9	1.0	1.5
Cocaine	used cocaine or crack?	0.4	0.4	1.0	0.6	0.5	1.5	1.9	1.2	2.5
**Methamphetamines	used methamphetamines (meth, speed, crank, crystal meth)?	n/a	0.2	0.6	n/a	0.2	0.7	n/a	0.2	0.9
**Stimulants	used stimulants, other than methamphetamines (such as amphetamines, Ritalin, Dexedrine) without a doctor telling you to take them?	1.0	1.0	2.1	2.2	1.9	3.5	3.7	3.5	3.7
Sedatives	used sedatives (tranquilizers, such as Valium or Xanax, barbiturates, or sleeping pills) without a doctor telling you to take them?	2.1	1.8	3.0	3.3	3.5	4.6	5.8	6.1	4.5
Heroin or Other Opiates	used heroin or other opiates?	0.2	0.1	0.3	0.4	0.5	0.5	0.3	0.3	0.4
*Prescription Narcotics	used narcotic prescription drugs (such as OxyContin, methadone, morphine, codine, Demerol, Vicodin, Percocet) without a doctor telling you to take them?	n/a	0.9	1.3	n/a	3.3	3.2	n/a	5.5	3.9
*Steroids	used steroids or anabolic steroids (such as Anadrol, Oxandrin, Durabolin, Equipoise or Depotesterone)?	n/a	0.8	0.5	n/a	0.2	0.6	n/a	0.5	1.1
Ecstasy	used MDMA ('X', 'E', or ecstasy)?	0.2	0.5	0.7	0.8	0.4	1.2	0.2	0.8	1.3

** Before 2007, Methamphetamines was combined with Stimulants

* Substances not included before 2007

Table 6. Percentage of Students With Heavy ATOD Use

		Grade 8			Grade 10			Grade 12		
		2005	2007	MTF	2005	2007	MTF	2005	2007	MTF
Binge Drinking	How many times have you had 5 or more alcoholic drinks in a row in the past 2 weeks?	6.0	8.2	10.9	15.8	16.4	21.9	27.2	23.8	25.4
1/2 Pack of Cigarettes/Day	During the past 30 days, have you smoked 1/2 Pack of cigarettes a day or more?	0.4	1.3	1.5	1.4	2.3	3.3	3.9	6.6	5.9
Needs Alcohol Treatment	Answered "Yes" to at least 3 alcohol treatment questions and has used alcohol on 10 or more occasions	2.8	2.6	n/a	8.8	7.5	n/a	13.6	10.7	n/a
Needs Drug Treatment	Answered "Yes" to at least 3 drug treatment questions and has used any drug on 10 or more occasions	1.3	1.9	n/a	4.4	7.5	n/a	8.7	9.5	n/a
Alcohol or Drug Treatment	Needs alcohol and/or drug treatment	3.6	3.7	n/a	11.3	12.1	n/a	17.9	16.0	n/a

Table 7. Percentage of Students With Antisocial Behavior in the Past Year

How many times in the past year (12 months) have you: <i>(One or more times)</i>	Grade 8			Grade 10			Grade 12		
	2005	2007	8-State	2005	2007	8-State	2005	2007	8-State
Been Suspended from School	9.2	16.9	17.5	8.2	13.0	12.8	8.2	12.7	9.3
Been Drunk or High at School	4.8	5.8	10.3	9.2	14.1	17.7	12.5	16.7	19.2
Sold Illegal Drugs	1.4	2.6	3.6	5.6	6.9	7.4	6.5	9.6	8.4
Stolen or Tried to Steal a Motor Vehicle	1.9	2.2	3.7	2.1	2.2	3.8	0.5	2.1	2.1
Been Arrested	3.5	5.5	7.1	3.8	5.3	8.0	4.6	6.2	7.2
Attacked Someone with the Idea of Seriously Hurting Them	13.1	17.3	16.7	12.0	14.9	15.5	10.4	13.4	12.7
Carried a Handgun	3.6	4.2	5.9	3.0	4.6	5.3	2.6	5.1	5.1
Carried a Handgun to School	0.8	0.5	0.9	0.9	0.6	1.1	0.5	0.5	1.0

Table 8. Percentage of Students Gambling in the Past Year

How many times in the past year (12 months) have you: (<i>'A few times' or more</i>)	Grade 8			Grade 10			Grade 12		
	2005	2007	8-State	2005	2007	8-State	2005	2007	8-State
Gambled in the Past Year	n/a	55.9	n/a	n/a	55.5	n/a	n/a	52.8	n/a
Gambled at a Casino	n/a	23.5	n/a	n/a	25.1	n/a	n/a	23.1	n/a
Played the Lottery	n/a	25.0	n/a	n/a	26.1	n/a	n/a	24.3	n/a
Bet on Sports	n/a	26.4	n/a	n/a	24.1	n/a	n/a	23.8	n/a
Bet on Cards	n/a	20.6	n/a	n/a	23.8	n/a	n/a	26.9	n/a
Bet on Horses	n/a	3.5	n/a	n/a	3.0	n/a	n/a	3.4	n/a
Played Bingo for money	n/a	24.6	n/a	n/a	18.5	n/a	n/a	11.5	n/a
Gambled on the Internet	n/a	3.4	n/a	n/a	3.0	n/a	n/a	3.3	n/a
Bet on Dice	n/a	5.2	n/a	n/a	7.7	n/a	n/a	9.1	n/a
Bet on Games of Skill	n/a	17.3	n/a	n/a	19.5	n/a	n/a	17.9	n/a
Bet on Video Poker	n/a	2.9	n/a	n/a	2.1	n/a	n/a	1.8	n/a

Table 9. Percentage of Students Reporting Protection

Protective Factors	Grade 8			Grade 10			Grade 12		
	2005	2007	8-State	2005	2007	8-State	2005	2007	8-State
Community Domain									
Opportunity for Prosocial Involvement	59.3	51.0	59.4	63.4	52.9	58.9	65.9	56.5	60.5
Rewards for Prosocial Involvement	53.9	48.8	52.6	52.1	44.7	47.4	52.3	39.4	47.5
Family Domain									
Family Attachment	55.9	51.0	52.5	59.0	55.9	56.9	62.2	55.7	58.7
Opportunity for Prosocial Involvement	66.5	61.0	62.5	59.8	55.2	56.9	61.1	51.1	57.7
Rewards for Prosocial Involvement	50.3	47.7	49.9	57.7	54.6	56.8	60.0	53.8	56.9
School Domain									
Opportunity for Prosocial Involvement	62.3	59.0	62.2	67.6	66.4	61.9	73.3	65.3	62.6
Rewards for Prosocial Involvement	48.8	52.1	53.1	67.4	65.7	62.1	53.8	47.5	47.2
Peer-Individual Domain									
Religiosity	60.9	57.6	60.7	61.0	52.8	58.8	55.1	46.5	54.8
Belief in the Moral Order	67.1	63.3	59.7	56.5	52.1	50.7	58.6	51.3	53.2
Interaction with Prosocial Peers	56.1	54.5	55.4	64.7	58.0	56.6	60.2	58.0	54.7
Prosocial Involvement	58.8	51.5	54.3	65.9	52.2	54.2	66.7	60.0	55.6
Rewards for Prosocial Involvement	51.1	52.5	50.1	62.4	60.5	58.4	69.3	66.6	59.8
High Protection									
Students with High Protection	63.9	57.2	52.2	68.2	60.8	53.9	70.1	57.9	54.5

Table 10. Percentage of Students Reporting Risk

Risk Factors	Grade 8			Grade 10			Grade 12		
	2005	2007	8-State	2005	2007	8-State	2005	2007	8-State
Community Domain									
Low Neighborhood Attachment	29.8	37.4	36.6	38.1	47.9	41.5	41.3	52.9	45.1
Laws & Norms Favor Drug Use	38.7	35.9	42.5	35.1	37.2	40.2	40.3	45.1	46.9
Perceived Availability of Drugs	34.9	40.5	41.0	40.6	45.3	46.9	46.1	49.2	49.6
Perceived Availability of Handguns	33.3	34.6	38.4	18.0	22.6	29.7	23.5	28.2	35.3
Family Domain									
Poor Family Management	38.1	45.0	41.3	37.9	40.8	39.6	36.8	40.9	42.3
Family Conflict	30.4	37.4	37.7	38.6	46.6	40.8	31.0	41.3	37.5
Family History of Antisocial Behavior	22.6	35.5	42.0	29.5	42.1	44.3	33.9	45.7	44.8
Parent Attitudes Favorable to ASB	49.5	52.1	45.4	52.5	53.1	47.0	46.5	50.7	44.4
Parent Attitudes Favor Drug Use	24.8	27.7	28.3	40.1	40.1	40.8	35.4	42.2	41.3
School Domain									
Academic Failure	42.7	44.7	45.5	38.9	49.6	45.0	39.6	42.9	41.2
Low Commitment to School	53.7	48.7	45.5	43.7	42.6	42.9	43.5	43.2	45.4
Peer-Individual Domain									
Rebelliousness	39.4	39.1	39.8	44.6	45.7	43.5	41.1	40.3	40.4
Early Initiation of ASB	27.3	37.5	37.6	29.6	42.0	38.2	29.9	38.0	36.3
Early Initiation of Drug Use	32.2	34.6	44.5	32.3	33.7	41.6	37.2	44.4	46.4
Attitudes Favorable to ASB	36.8	40.8	38.6	45.0	45.1	44.1	40.9	43.4	41.1
Attitudes Favorable to Drug Use	30.9	33.2	39.1	43.5	45.5	45.0	47.5	49.3	43.2
Perceived Risk of Drug Use	36.3	39.1	39.1	47.8	47.4	46.0	40.0	42.9	36.9
Interaction with Antisocial Peers	29.5	40.5	39.2	30.4	37.2	38.3	25.3	34.8	34.9
Friend's Use of Drugs	34.8	40.1	47.1	37.2	38.9	45.2	36.3	39.7	40.3
Rewards for ASB	33.3	30.6	40.9	39.9	42.4	44.9	50.4	48.6	45.8
Depressive Symptoms	34.8	39.9	48.2	37.0	39.1	47.5	30.3	33.8	41.3
Intention to Use Drugs	26.8	30.8	32.5	40.4	41.2	41.2	47.4	49.1	44.5
Gang Involvement	8.4	10.5	10.0	4.9	6.8	7.0	3.2	6.4	4.8
High Risk									
Students at High Risk	37.2	43.0	44.8	40.9	44.3	44.2	40.0	44.8	43.7

Table 11. Drug Free Communities Report *

Outcomes	Definition	Substance	Chesterfield County 2005											
			Grade 8		Grade 10		Grade 12		Male		Female		Total †	
			Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number
Perception of Risk <i>(People are at Moderate or Great Risk of harming themselves if they...)</i>	drink 1 or two drinks nearly every day	Alcohol	68.5	1107	71.8	777	68.9	569	65.9	1154	73.4	1209	69.6	2453
	smoke 1 or more packs or cigarettes per day	Cigarettes	91.9	1118	93.6	781	94.2	571	92.2	1160	93.3	1220	93.0	2470
	smoke marijuana regularly	Marijuana	92.4	1098	85.4	762	80.7	564	84.1	1143	90.7	1192	87.5	2424
Perception of Parent Disapproval <i>(Parents feel it would be Wrong or Very Wrong to...)</i>	drink beer, wine, or hard liquor regularly	Alcohol	92.8	1105	89.1	772	83.8	561	88.6	1136	90.0	1215	89.5	2438
	smoke cigarettes	Cigarettes	96.8	1112	94.0	773	89.9	565	93.6	1146	94.7	1216	94.3	2450
	smoke marijuana	Marijuana	98.2	1108	96.0	767	94.5	563	95.8	1140	97.3	1210	96.6	2438
Perception of Peer Disapproval <i>(I think it is Wrong or Very Wrong for someone my age to...)</i>	drink beer, wine, or hard liquor regularly	Alcohol	84.2	1130	62.8	785	50.6	571	67.8	1167	71.9	1227	69.8	2486
	smoke cigarettes	Cigarettes	89.6	1131	77.7	788	63.7	571	78.7	1171	81.0	1228	79.9	2490
	smoke marijuana	Marijuana	93.2	1129	80.0	786	71.5	571	80.2	1168	87.9	1227	84.0	2486
Past 30-Day Use	at least one use in the Past 30 Days	Alcohol	13.9	1122	31.6	779	43.9	569	26.2	1159	26.6	1220	26.4	2470
		Cigarettes	4.1	1121	10.1	782	19.6	571	10.3	1161	9.0	1223	9.6	2474
		Marijuana	2.8	1125	8.6	777	15.1	569	9.8	1160	5.5	1221	7.5	2471
			Age	Number	Age	Number	Age	Number	Age	Number	Age	Number	Age	Number
Average Age of Onset **	average age	Alcohol	11.6	474	13.1	487	14.5	426	12.9	639	13.1	695	13.0	1387
		Cigarettes	11.6	218	12.5	253	14.0	273	12.7	362	12.9	358	12.8	744
		Marijuana	12.1	66	13.6	173	14.5	214	13.7	243	14.0	194	13.8	453

*The "Number" column represents the sample size (the number of youth who answered the question). The "Percent" column represents the percentage of youth in the sample answering the question as specified.

**For Average Age of Onset, "Number" represents the number of youth who reported any age of first use for the specified substance other than "Never Used."

†The "Total" column represents responses from students in all grades surveyed.

Table 12. Youth Perceptions of Substance Use

Now think about all the students in your grade at school. How many of them do you think:	Answer	Chesterfield County 2005							
		Grade 8		Grade 10		Grade 12		Total	
		Percent	Number	Percent	Number	Percent	Number	Percent	Number
a. smoke one or more cigarettes a day?	None (0%)	12.3	139	3.3	26	2.6	15	7.3	180
	Few (10% or less)	44.0	496	19.8	155	11.2	64	28.8	715
	Some (25%)	27.6	311	42.9	336	35.3	201	34.2	848
	About One-Half (50%)	10.2	115	21.6	169	35.1	200	19.5	484
	Most (75%)	4.2	47	9.5	74	12.5	71	7.7	192
	Almost All (90% or more)	1.7	19	2.9	23	3.2	18	2.4	60
b. drank alcohol sometime in the past month?	None (0%)	13.3	150	2.7	21	2.3	13	7.4	184
	Few (10% or less)	35.7	402	7.1	56	2.1	12	18.9	470
	Some (25%)	26.2	295	21.8	171	9.8	56	21.0	522
	About One-Half (50%)	14.9	168	30.6	240	25.7	147	22.4	555
	Most (75%)	7.2	81	27.6	216	44.3	253	22.2	550
	Almost All (90% or more)	2.8	31	10.2	80	15.8	90	8.1	201
c. used marijuana sometime in the past month?	None (0%)	26.9	302	5.4	42	2.8	16	14.5	360
	Few (10% or less)	42.3	476	26.7	209	20.0	114	32.2	799
	Some (25%)	17.5	197	31.9	250	30.6	175	25.1	622
	About One-Half (50%)	6.8	76	22.0	172	25.7	147	15.9	395
	Most (75%)	4.4	49	10.0	78	16.5	94	8.9	221
	Almost All (90% or more)	2.1	24	4.1	32	4.4	25	3.3	81
d. used an illegal drug in the past month (not including marijuana)?	None (0%)	35.3	398	9.0	70	6.0	34	20.3	502
	Few (10% or less)	44.7	503	53.0	414	56.9	325	50.1	1242
	Some (25%)	12.3	138	23.0	180	25.0	143	18.6	461
	About One-Half (50%)	4.4	49	9.9	77	7.0	40	6.7	166
	Most (75%)	2.1	24	3.7	29	3.5	20	2.9	73
	Almost All (90% or more)	1.2	14	1.4	11	1.6	9	1.4	34

Table 13. Drug Free Communities Report *

Outcomes	Definition	Substance	Chesterfield County 2007											
			Grade 8		Grade 10		Grade 12		Male		Female		Total †	
			Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number
Perception of Risk <i>(People are at Moderate or Great Risk of harming themselves if they...)</i>	drink 1 or two drinks nearly every day	Alcohol	68.7	1273	74.1	1330	69.4	1278	65.3	1770	75.8	2034	70.8	3881
	smoke 1 or more packs or cigarettes per day	Cigarettes	88.0	1285	93.5	1332	91.3	1286	89.2	1780	92.5	2046	91.0	3903
	smoke marijuana regularly	Marijuana	85.7	1253	80.7	1306	70.6	1268	74.2	1745	83.1	2005	79.0	3827
Perception of Parent Disapproval <i>(Parents feel it would be Wrong or Very Wrong to...)</i>	drink beer, wine, or hard liquor regularly	Alcohol	89.8	1231	86.0	1286	77.3	1217	84.0	1694	84.9	1968	84.4	3734
	smoke cigarettes	Cigarettes	93.9	1240	93.3	1289	84.5	1226	89.7	1697	91.3	1984	90.6	3755
	smoke marijuana	Marijuana	94.6	1236	94.8	1281	91.2	1222	93.1	1692	94.0	1973	93.6	3739
Perception of Peer Disapproval <i>(I think it is Wrong or Very Wrong for someone my age to...)</i>	drink beer, wine, or hard liquor regularly	Alcohol	83.7	1306	65.7	1363	51.7	1302	65.8	1808	68.3	2081	67.0	3971
	smoke cigarettes	Cigarettes	89.8	1303	78.6	1362	63.2	1301	74.8	1806	79.4	2077	77.2	3966
	smoke marijuana	Marijuana	90.5	1301	77.6	1358	66.5	1300	73.9	1800	81.9	2077	78.2	3959
Past 30-Day Use	at least one use in the Past 30 Days	Alcohol	15.3	1293	32.5	1334	43.4	1272	30.1	1772	30.6	2051	30.3	3899
		Cigarettes	5.0	1277	13.0	1317	19.8	1259	13.1	1757	12.0	2023	12.6	3853
		Marijuana	3.7	1293	12.3	1324	20.1	1269	14.2	1770	10.2	2040	12.0	3886
			Age	Number	Age	Number	Age	Number	Age	Number	Age	Number	Age	Number
Average Age of Onset **	average age	Alcohol	11.7	560	13.1	880	14.1	997	13.0	1111	13.3	1280	13.2	2437
		Cigarettes	11.4	279	12.6	499	13.6	650	12.8	670	12.9	733	12.9	1428
		Marijuana	12.2	103	13.6	348	14.7	541	13.9	479	14.2	495	14.1	992

*The "Number" column represents the sample size (the number of youth who answered the question). The "Percent" column represents the percentage of youth in the sample answering the question as specified.

**For Average Age of Onset, "Number" represents the number of youth who reported any age of first use for the specified substance other than "Never Used."

†The "Total" column represents responses from students in all grades surveyed.

Table 11. Youth Perceptions of Substance Use

Now think about all the students in your grade at school. How many of them do you think:	Answer	Chesterfield County 2007							
		Grade 8		Grade 10		Grade 12		Total	
		Percent	Number	Percent	Number	Percent	Number	Percent	Number
a. smoke one or more cigarettes a day?	None (0%)	15.9	207	4.1	55	2.3	30	7.4	292
	Few (1-10%)	34.5	449	14.2	192	8.1	106	18.9	747
	Some (11-30%)	24.8	322	25.5	344	23.1	301	24.5	967
	Half or less (31-50%)	12.6	164	22.8	308	27.0	351	20.8	823
	Half or more (51-70%)	8.7	113	20.9	282	24.0	312	17.9	707
	Most (71-90%)	2.8	36	10.3	139	13.5	175	8.9	350
	Almost All (91-100%)	0.8	10	2.1	29	2.0	26	1.6	65
b. drank alcohol sometime in the past month?	None (0%)	14.5	188	3.8	51	2.1	27	6.7	266
	Few (1-10%)	26.2	340	5.8	78	1.7	22	11.1	440
	Some (11-30%)	22.2	288	11.2	151	4.7	61	12.7	500
	Half or less (31-50%)	15.5	202	17.9	241	13.1	170	15.5	613
	Half or more (51-70%)	12.2	158	24.6	332	25.7	334	20.9	824
	Most (71-90%)	7.5	97	27.5	371	39.3	510	24.8	978
	Almost All (91-100%)	2.1	27	9.3	126	13.5	175	8.3	328
c. used marijuana sometime in the past month?	None (0%)	27.1	352	6.0	81	2.4	31	11.8	464
	Few (1-10%)	33.3	432	16.5	223	11.2	145	20.3	800
	Some (11-30%)	18.3	238	19.4	262	19.0	247	18.9	747
	Half or less (31-50%)	10.0	130	18.7	252	21.6	280	16.8	662
	Half or more (51-70%)	5.8	75	18.9	256	23.1	300	16.0	631
	Most (71-90%)	3.9	51	13.5	183	16.9	220	11.5	454
	Almost All (91-100%)	1.5	20	7.0	94	5.8	75	4.8	189
d. used an illegal drug in the past month (not including marijuana)?	None (0%)	34.5	449	9.5	129	4.9	64	16.2	642
	Few (1-10%)	37.5	488	36.1	489	35.4	459	36.3	1436
	Some (11-30%)	13.9	181	23.9	324	28.2	366	22.0	871
	Half or less (31-50%)	7.5	97	12.2	165	14.2	184	11.3	446
	Half or more (51-70%)	3.3	43	9.7	131	9.4	122	7.5	296
	Most (71-90%)	2.3	30	6.4	86	5.6	73	4.8	189
	Almost All (91-100%)	1.0	13	2.1	29	2.3	30	1.8	72

Contacts for Prevention

NATIONAL RESOURCES

United States Department of Health and
Human Services (USDHHS)
Substance Abuse and Mental Health
Service Administration (SAMHSA)
1 Choke Cherry Rd., Rm. 8-1054
Rockville, Maryland 20857
240-276-2000
info@samhsa.hhs.org
www.samhsa.gov

Substance Abuse and Mental Health
Service Administration (SAMHSA)
Center for Substance Abuse Prevention
(CSAP)
1 Choke Cherry Rd., Ste 4-1057
Rockville, Maryland 20857
240-276-2420
info@samhsa.hhs.org
<http://prevention.samhsa.gov/>

Center for Substance Abuse Prevention
(CSAP)
Central Center for Applied Prevention
Technology (CAPT)
2720 Hwy. 10
Mounds View, Minnesota 55112
1-800-782-1878
centralcapt@miph.org
<http://www.ccapt.org/>

CSAP's Southeastern CAPT
Pacific Institute for Research and Evaluation
309 Holley Lane
Ridgeland, MS 39175
601-605-0025
Fax: 601/605-0025
<http://captus.samhsa.gov/southeast/southeast.cfm>

National Institutes of Health (NIH)
National Institute on Drug Abuse (NIDA)
6001 Executive Blvd., Rm. 5213
Bethesda, Maryland 20892-9561
301-443-1124
Information@lists.nida.nih.gov
<http://www.nida.nih.gov/>

LOCAL RESOURCES

SAFE, Inc.
Chesterfield Youth Planning and
Development
9700 Krause Road
Chesterfield, VA 23832
804-796-7100