HUDSON PUBLIC SCHOOLS METROWEST ADOLESCENT HEALTH SURVEY 2016 HIGHLIGHTS

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BACKGROUND



- Survey Middle and High School Students
- Administered every other year since 2008
- Monitors trends in risky behaviors over time
- Funded and administered by MetroWest Health Foundation
- Administered in 26 school districts in MetroWest region

SURVEY PARTICIPATION - 2016

- 90% Middle School Students (Grades 7-8)
- 89% High School Students (Grades 9-12)

Key Highlights and Trends

CIGARETTE SMOKING

HUDSON	METROWEST				
GRADES 9-12	GRADES 9-12				
Steady decrease from 39% in 2008 to 12% in 2016	Declined consistently since 2008 to 13% in 2016				
GRADES 7-8	GRADES 7-8				
Trending down from 9% in 2010 to 2% in 2016	Trending down from 6% in 2010 to 2% in 2016				

ELECTRONIC CIGARETTES

HUDSON	METROWEST		
GRADES 9-12	GRADES 9-12		
Decreased from 31% (2014) to 21% (2016)	Decreased from 31% (2014) to 28% (2016)		
GRADES 7-8	GRADES 7-8		
Steady at 7% for both 2014 and 2016	Very slight decline in use of electronic cigarettes		

ALCOHOL USE

HUDSON	METROWEST			
GRADES 9-12	GRADES 9-12			
Declined substantially, from 67% (2008) to 51% (2016)	Declined substantially since 2006 (66%) to 52% in 2016			
GRADES 7-8	GRADES 7-8			
Declined from 15% (2014) to 10% (2016)	Declined from 13% to 10 %			

MARIJUANA USE

HUDSON	METROWEST			
GRADES 9-12	GRADES 9-12			
Marijuana use decreased from 47% in 2010 to 33% in 2016	Marijuana use also decreased from 35% (2010) to 28% (2016)			
GRADES 7-8	GRADES 7-8			
Trending down from 7% in 2010 to 4% in 2016	Declined from 4% in 2010 to 2.5% in 2016			

PRESCRIPTION DRUG USE

HUDSON	METROWEST		
GRADES 9-12	GRADES 9-12		
Decreased from 17% in 2010 to 5% in 2016	Similar trend from 10% (2010) to 6% (2016)		
GRADES 7-8	GRADES 7-8		
Not included in survey	Not included in survey		

BULLYING

HUDSON	METROWEST
GRADES 9-12	GRADES 9-12
Declined substantially from 27% in 2008 to 22% in 2014, dropping further to 14% in 2016	Decreased steadily from 26% (2008) to 17% (2016)
GRADES 7-8	GRADES 7-8
Steady decrease in trend from 34% (2010) to 20% (2016)	Decreasing trend from 32% (2010) to 21% (2016)

CYBERBULLYING

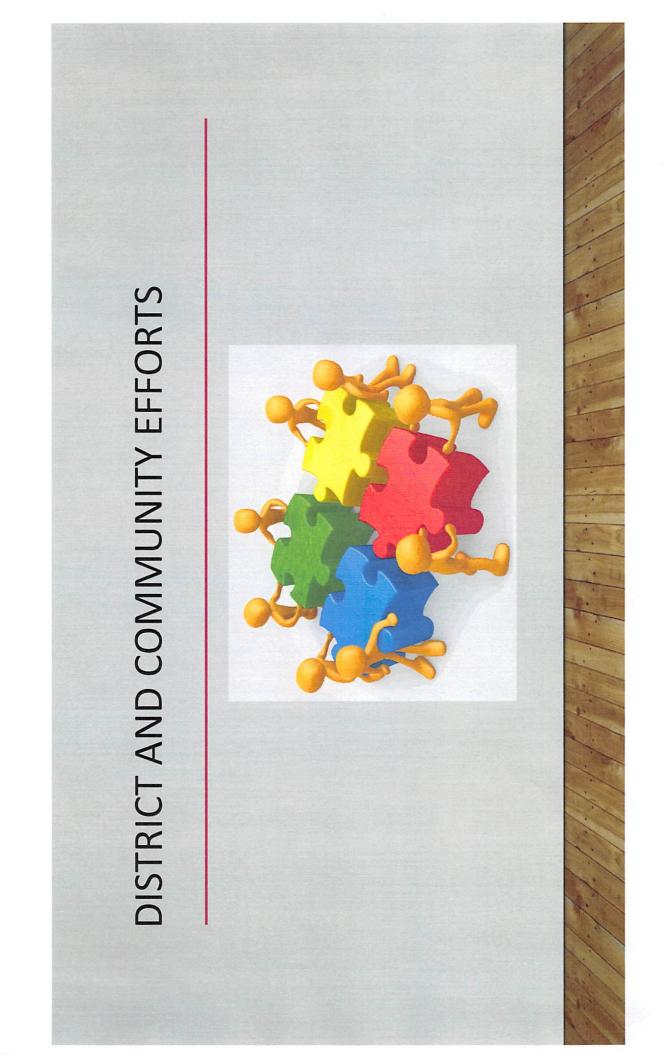
HUDSON	METROWEST
GRADES 9-12	GRADES 9-12
Decreased from 25% (2014) to 18% (2016)	Decreased slightly from 21% (2014) to 19% in (2016)
GRADES 7-8	GRADES 7-8
Decreased from 23% (2014) to 19% (2016)	Remained steady at 19%

STRESS

HUDSON	METROWEST
GRADES 9-12	GRADES 9-12
Reports of stress increased from a low of 25% in 2012 to 35% in 2014 and 2016	Stress has increased substantially over the two most recent surveys
GRADES 7-8	GRADES 7-8
Increased steadily from 11% (2012) to 19% (2016)	Similar trend with increase from 12% (2012) to 16% (2016)

DEPRESSIVE SYMPTOMS, SELF-INJURY, AND SUICIDALITY

HUDSON	METROWEST
GRADES 9-12	GRADE 9-12
Decrease in depressive symptoms and self-injury, while there was no notable change in suicide attempts since 2008	Small decreases in depressive symptoms and self-injury in recent years, but not suicide attempts
GRADES 7-8	GRADES 7-8
After increasing from 2010-2014, reports of mental health problems are somewhat lower in 2016	Decrease in depressive symptoms. No significant change in reports of suicidal thoughts and behaviors



DISTRICT

- Hudson Health and Wellness Curriculum (5th-12th grades)
- Break Free from Depression (9th grade)
- PATH Program (QMS)
- SBIRT (7th and 9th grades)-Screening, Brief Intervention, Referral to Treatment (HPS Pilot District-now law)
- HPS Wellness Newsletters
- PD on Dialectical Behavioral Therapy (DBT)

SCHOOL AND COMMUNITY COLLABORATION

- Hudson Youth Substance Abuse Prevention Coalition (YSAP)
- Hidden In Plain Sight demonstration
- Medication "Take Back" kiosks at Hudson Police station
- Parent/Athlete meetings substance abuse prevention

NEXT STEPS

Share survey results with:

- School Health and Safety Advisory Committee-October, 2017 Meeting
- District Leadership Teams
- Health and Wellness Educators
- Nursing Staff
- Parents
- Hudson Youth Substance Abuse Prevention Coalition

NEXT STEPS

- Develop district wide substance use prevention policy
- Provide Professional development on risk behaviors (substance use, suicide prevention, mental/behavioral health)
- Seek grant funding for initiatives to address risk behaviors
- Develop/expand district mental health supports through budget process
- Ensure HPS representation at Hudson Youth Substance Abuse Prevention coalition meetings (held monthly)
- Continue active participation in Middlesex County District Attorney's Opioid Abuse Task Force

Highlights from the MetroWest Adolescent Health Survey

Informing data-driven school and community health policies and practices

2016 MetroWest Region Middle School Report

GRADES 7-8





Funded by: MetroWest Health Foundation



Submitted by: Education Development Center, Inc. Spring 2017

Highlights from the 2016 MetroWest Adolescent Health Survey

MetroWest Region Middle School Report

Background

The 2016 MetroWest Adolescent Health Survey (MWHAS) marks the beginning of a new decade in monitoring trends in adolescent health behaviors to advance school and community prevention efforts. Since 2006, the MWAHS has been administered every other year in communities served by the MetroWest Health Foundation, with the goal of supporting data-driven improvements in health programs and policies at the local and regional levels. In 2016 alone, over 40,000 students were surveyed in 26 school districts, providing important adolescent health data on key areas of concern and emerging health issues. Over the course of the initiative, the MWHAS data has greatly enhanced school and community efforts to prevent harm from risky behaviors and improve adolescent physical, mental, and emotional wellbeing.

Methodology

The 2016 middle school MWAHS was administered to a census of students in grades 7 and 8 in all 24 school districts in the MetroWest region that contain middle schools. 18 school districts chose to include 6th grade students; these findings are described in a separate report. As in previous survey waves, local procedures were followed to inform parents/guardians of the survey and give them the choice to opt out their child(ren). Students were also informed that their participation was voluntary and that no names or other identifying information were being collected. Data collection at each school was guided by a protocol that protected the privacy of students' responses.

In total, 12,307 students in grades 7 and 8 completed the 2016 survey, representing 93% of the youth in the 24 school districts. The data allow for an examination of behavioral trends across six time points from 2006 to 2016. This report summarizes current youth behaviors on key health indicators in the areas of substance use, violence, bullying, mental health, and physical activity. Current data from 2016 is provided by gender and grade, and trends over the six waves of the MWAHS are highlighted.

Key Findings: Substance Use

Cigarette smoking has declined at every time point since the MWAHS began. Only 3% of youth have tried a cigarette in their lifetime, down steadily from 10% in 2006. Twice as many youth (6%) have tried an electronic cigarette.

Cigarette Smoking

- » Current cigarette smoking (in the past 30 days) has also decreased at every survey, from 4% in 2006 to 1% in 2016. Both females and males in middle school are smoking less.
- » Males are more likely to experiment with cigarettes than females (4% vs. 2%), but use is low among both genders.
- » A small number of youth initiate smoking during middle school, with lifetime use increasing from 2% in 7th grade to 4% in 8th grade.
- » Lifetime smoking is lower among MetroWest 8th grade students (4%) compared with 8th grade students in Massachusetts (9%)¹ and the nation (10%),² though recent smoking in MetroWest and Massachusetts is similar at 2%.¹ The substantial decline in smoking is consistent with state data as well as national trends among 8th grade youth from the *Monitoring the Future* study.²

Electronic Cigarettes

- » 6% of middle school youth have tried an electronic cigarette or other electronic vapor product in their lifetime, and 3% have used one in the past 30 days. (Data in this section refers to use of electronic cigarettes or other electronic vapor products.)
- » Consistent with use of conventional cigarettes, middle school males are more likely than females to have tried electronic cigarettes (7% vs. 4%).
- » Experimentation with electronic cigarettes increases from 3% in 7th grade to 8% in 8th grade.
- » Three-quarters of youth (77%) perceive that using electronic cigarettes is of moderate or great risk, up from 64% in 2014.
- » Reports from 2014 to 2016 suggest a very slight decline in current use of electronic cigarettes, but data from future years will determine if this is the beginning of a downward trend. The most recent *Monitoring the Future* study found a slight decline in current electronic cigarette use in 2016.²

Alcohol Use

Alcohol use among middle school youth has declined by more than half. Reports of lifetime drinking decreased at every time point, from 22% in 2006 to 11% in 2014, and down further to 10% in 2016.

- » Current drinking (in the past 30 days) has also decreased steadily, from 9% in 2006 to 4% in 2014, and remaining at that level in 2016.
- » Drinking has declined substantially among both females and males in middle school. For example, lifetime drinking decreased from 18% in 2006 to 8% in 2016 among females, and from 26% to 12% among males.
- » Binge drinking has remained steady at 1% since 2012, after dropping from 3% in 2006. (Binge drinking in 2016 is defined as consuming four or more drinks in a row for females or five or more drinks in a row for males on one or more occasions in the past 30 days. This does not take into account body weight or other factors that influence intoxication levels).
- » 2% of youth have ridden in a car driven by a high school student who has been drinking in their lifetime. Reports have been steady since this data was first collected in 2012.
- » More males than females initiate alcohol use in middle school (12% vs. 8%); current drinking is only slightly higher among males than females (4% vs. 3%).
- » Despite the decline in drinking in the region, many youth continue to initiate drinking during the middle school years. Lifetime drinking nearly doubles from 7% in 7th grade to 13% in 8th grade, and current drinking rises from 2% to 5%.
- » Reports of drinking in MetroWest continue to be lower than in Massachusetts and the nation. For example, 13% of 8th grade youth in the region reported using alcohol in their lifetime, compared with 20% of 8th grade youth statewide¹ and 23% of 8th grade youth nationally. ² The declines in drinking in MetroWest are consistent with state and national trends.

Marijuana Use

Marijuana use in middle school has declined in recent surveys. After remaining similar from 2006 to 2012 at 4-5%, lifetime marijuana use is now reported by less than 3% of students.

- » Current marijuana use (in the past 30 days) has decreased from 3% in 2006 to just over 1% in 2016. Both females and males are reporting less marijuana use.
- » Consistent with prior surveys, marijuana use is higher among males than females, but is low among both genders. For example, current use is reported by 2% of males and 1% of females.
- » A small number of youth initiate marijuana use in middle school. From 7th grade to 8th grade, lifetime use increases from 1% to 4%.
- » Fewer MetroWest 8th grade youth have used marijuana in their lifetimes (4%) compared with 8th grade youth in the state (10%)¹ and nationally (13%).² There have been declines in recent years among middle school youth in MetroWest, the state, and the nation.

Inhalant Use

Use of inhalants has decreased substantially over the course of the MWAHS. Only 3% of middle school youth have used inhalants, which is similar to 2014 levels and down substantially from 2006 levels (8%).

- » Inhalant use has declined notably among both females (from 8% in 2006 to 2% in 2016) and males (from 9% to 3%). (Inhalant use is defined as sniffing glue, breathing the contents of spray cans, or inhaling any paints or sprays to get high.)
- » Reports of lifetime inhalant use increase only slightly from 7th grade (2%) to 8th grade (3%).
- » Fewer MetroWest 8th grade youth have used inhalants compared to 8th grade youth nationwide (3% vs. 8%); the decrease in the MetroWest region is consistent with national trends.²

Key Findings: Violence

Physical fighting among middle school youth has declined considerably since the early years of the MWAHS. Lifetime reports of fighting decreased steadily from 45% in 2006 to 32% in 2016. Weapon carrying has not changed substantially in recent surveys.

Physical Fighting

- » Lifetime reports of fighting on school property have decreased by half from 19% in 2006 to 9% in 2014, and remained at that level in 2016.
- » There have been substantial declines in fighting among females and males. For example, fighting on school property decreased from 30% in 2006 to 15% in 2016 among males, and from 8% to 3% among females.
- » Despite these declines among both genders, overall reports of fighting are nearly three times higher among males than females, and reports of fighting at school are more than four times higher among males.
- » Reports of fighting are similar by grade. For example, 9% of 7th grade youth and 10% of 8th grade youth reported fighting on school property in their lifetime.

Weapon Carrying

- » 16% of youth have carried a weapon in their lifetime. Reports have been similar at 15-16% since 2012, and are lower than 2006 levels (18%).
- » Weapon carrying declined among males from 28% in 2006 to 23% in 2014 but was slightly higher at 25% in 2016. Among females, weapon carrying has been in the range of 5-7% over the course of the MWAHS.
- » Weapon carrying on school property declined from 3% in 2006 to 1% in 2010 and has stayed at that level over the last three surveys.
- » Consistent with gender patterns for physical fighting, overall reports of weapon carrying are more than three times higher among males than females (25% vs. 7%).
- » Lifetime reports of carrying a weapon increase from 14% in 7th grade to 18% in 8th grade.

Key Findings: Bullying and Cyberbullying

The number of middle school students bullied at school has declined steadily over the last four surveys. Reports of bullying on school property decreased by more than half from a peak of 43% in 2008 to 24% in 2014, and down further to 21% in 2016. In contrast, cyberbullying has remained at 19% since 2014, up from 16% in 2006.

Bullying

- » Reports of overall bullying victimization in the past 12 months also decreased by half, from a high of 49% in 2008 to 29% in 2014, further declining to 25% in 2016.
- » School bullying has declined substantially among both females and males, but the recent decline is driven mostly by females. Among females, school bullying declined from a high 45% in 2008 to 27% in 2014, and declined further to 21% in 2016. Among males, school bullying declined from 41% in 2008 to 21% in 2014, and remained similar at 20% in 2016.
- » As a result of the recent decline in school bullying among females, the gap in gender reports has diminished. Whereas females reported more bullying at school than males in earlier surveys, in 2016, reports on school property are nearly the same by gender (21% for females and 20% for males). However, more females than males still report bullying victimization overall (27% vs. 23%).
- » 9% of males and 7% of females report bullying someone else in the past 12 months, and 6% of males and 4% of females did so on school property.
- » Reports of bullying on school property are slightly higher in 7th grade (22%) compared with 8th grade (19%).
- » Data on verbal harassment was collected for the first time in 2016. 12% of youth reported being verbally harassed in the past 12 months due to their race, ethnicity or culture, 6% due to their sexual orientation, 6% due to a disability, and 27% due to their appearance (height, weight, or how they look).
- » Many bullying victims do not seek help from adults. Among students bullied at school in the past year, fewer than half (41%) had talked to a school adult, and 58% had talked to a parent or other adult outside of school about being bullied.
- » One in three middle school youth (32%) have intervened as bystanders in the past 12 months by trying to stop a student from bullying someone else at school, and 15% have told an adult at school that someone was being bullied.
- » School bullying among 8th grade youth in MetroWest (19%) is substantially lower than among 8th grade youth in Massachusetts (30%).

Cyberbullying

- » Reports of cyberbullying victimization in the past 12 months were similar from 2006 to 2012 at 16-17%, but increased to 19% in 2014 and remained at that level in 2016.
- » Over the entire course of the MWAHS, cyberbullying has increased more for females than males; however, in recent years, the increase is greater for males. Specifically, reports among males decreased from 13% in 2006 to a low of 11% in 2012, but then increased over the last two surveys to 15% in 2016. Among females, cyberbullying increased from 18% in 2006 to 24% in 2014, with slightly fewer females (23%) reporting cyberbullying in 2016.
- » 6% of both females and males report cyberbullying someone else in the past year.
- » Cyberbullying victimization increases slightly by grade, from 18% in 7th grade to 20% in 8th grade.
- » More than four out of ten youth (43%) spend three or more hours online on the average school day, and 17% spend three or more hours on social media sites per day. Many more females (22%) than males (13%) report this level of social media use.
- » Youth who spend more three or more hours on social media per day are twice as likely to report cyberbullying victimization (35% vs. 16%) and perpetration (15% vs. 4%) than youth who spend less time on social media.
- » The vast majority of cyberbullying victims do not seek help from adults. Among students who were cyberbullied in the past year, only one in five (19%) had talked to an adult at school about being cyberbullied, and 37% had talked to a parent or other adult outside of school. These numbers are substantially lower than those reported by school bullying victims.
- » 15% of youth have tried to stop a student from cyberbullying someone else. More females than males (18% vs. 11%) have tried to intervene in this way. Also, 4% of youth took action by telling an adult at school that someone was being cyberbullied, and 9% told a parent or other adult outside of school.
- » While school bullying in MetroWest is lower than in Massachusetts, cyberbullying is higher in MetroWest. 20% of MetroWest 8th grade youth report cyberbullying, compared with 16% of Massachusetts 8th grade youth.

Key Findings: Mental Health

Since 2006, reports of stress have risen slightly, with 16% of middle school youth reporting their life was very stressful in the past 30 days. While there may be recent improvements in depressive symptoms, reports of suicidal thoughts and behaviors have been similar since the beginning of the MWAHS.

Stress

- » Reports of feeling life was "very" stressful in the past 30 days were similar at 12-13% from 2006 to 2012, but increased over the last two surveys to 16% in 2016.
- » More females are experiencing stress, with reports increasing steadily from 16% in 2006 to 20% in 2016. Among males, reports of stress have risen recently from a low of 8% in 2012 to 11% in 2016, and are now similar to 2006 levels (10%).
- » Consistent with prior surveys, reports of stress are nearly twice as high among females (20%) as males (11%).
- » Reports of recent stress increase by grade, from 13% in 7th grade to 18% in 8th grade.
- » Stress related to school issues is most common, reported by 44% of youth, followed by stress related to social issues (19%), and stress related to appearance issues (18%). (School issues include grades, homework, and tests; social issues include friendships, dating, teasing; appearance issues include weight and how you look.)
- » Reports are substantially higher for females than males for these sources of stress. For example, 53% of females and 34% of males report stress due to school issues, and 25% of females and 13% of males report stress related to social issues.

Depressive Symptoms, Self-Injury, and Suicidality

- » There was a notable decline in reports of depressive symptoms over the past two surveys, from 15% in 2014 to 10% in 2016; in prior surveys, reports ranged from 13-16%. Data from future years will show if this decline is the beginning of a trend. (Depressive symptoms are defined as feeling sad or hopeless almost every day for two or more weeks during the past 12 months.)
- » Reports of depressive symptoms have declined among both males and females since 2006. Among males, there has been a somewhat steady decline from 14% in 2006 to 7% in 2016. Among females, depressive symptoms increased from 18% in 2006 to a high of 20% in 2014, and then lowered to 13% in 2016.
- » Self-injury has not changed substantially over the six surveys. In 2016, 7% of youth reported self-injury in the past 12 months, slightly lower than 2014 reports (9%), with prior surveys ranging from 7-9%. From 2014 to 2016, there was a decline in reports among females (13% to 10%) whereas reports among males were steady at 5%. (Self-injury is defined as cutting, burning, or bruising oneself on purpose in the past 12 months.)
- » Reports of suicidal thoughts and behaviors have remained similar. Since 2006, lifetime reports of seriously considering suicide have ranged from 9-11%, and have been steady at 11% since 2012. Reports of attempting suicide have been steady at 3% over all six surveys.
- » Mental health problems continue to be much higher among females than males, consistent with prior surveys. In 2016, about twice as many females as males reported depressive symptoms (13% vs. 7%) and self-injury (10% vs. 5%), and more females also reported seriously considering suicide (13% vs. 9%).

- » Reports of depressive symptoms are similar from 7th to 8th grade (10% to 11%), and self-injury increases from 6% in 7th grade to 9% in 8th grade.
- » 3% of youth have been absent or missed some school in the past 30 days due to feeling sad or hopeless, or having thoughts about hurting themselves. This is reported by more females (4%) than males (2%).
- » 12% of youth have talked to a parent/adult outside of school about feeling sad or hopeless, or having thoughts about hurting themselves in the past 12 months. 4% of youth have spoken to a teacher or other adult at school, and 4% have talked to a doctor, nurse, or health care provider.
- » Reports of mental health problems are lower in MetroWest compared with the state. 11% of 8th grade MetroWest youth report depressive symptoms, compared with 20% of 8th grade youth in Massachusetts, and self-injury in MetroWest is also lower than in the state (9% vs. 17%).

Key Findings: Physical Activity, Nutrition, Overweight/Obesity, and Sleep

Physical activity levels and overweight/obesity have remained similar among middle school youth since the MWAHS began. In 2016, 81% of students engaged in vigorous physical activity on 3 or more days per week, and one in five youth (20%) were overweight or obese.

Physical Activity

- » Reports of vigorous physical activity have been steady at 80-81% since 2012. (Vigorous physical activity is defined as exercising for at least 20 minutes that makes you sweat and breathe hard on three or more of the past seven days.)
- » Consistent with prior surveys, more males (84%) than females (78%) reported vigorous physical activity on three or more days a week.
- » Reports of physical activity are similar in 7th and 8th grades.
- » While the majority of students reported vigorous physical activity on at least three days per week, 34% of youth reported spending three or more hours a day on "screen time" that is not for school or homework. This has been similar since 2012 when this data was first collected, and may be an indicator of unhealthy sedentary behavior.
- » Reports of physical activity among 8th grade youth are higher in MetroWest (80%) compared with 8th grade youth in Massachusetts (74%).

Nutrition

- » Consumption of non-diet soda/soft drinks has continued to decline. The proportion of youth having one or more sodas on the day prior to the survey decreased substantially, from 51% in 2006 to 33% in 2014, and further to 31% in 2016.
- » 87% of youth reported eating at least one serving of fruit on the day before the survey, and 80% reported consuming at least one serving of vegetables or green salad. Fruit consumption in 2016 (87%) is higher than in prior years (78-84%), whereas vegetable consumption has remained similar at 80-82% across all surveys.
- » 57% of youth ate breakfast on all 7 days in the past week, with more males than females reporting this (62% vs. 52%).

Overweight/Obesity

- » The proportion of youth who were overweight or obese has been steady at 19-20% over the last decade. (Reports of overweight/obesity are based on self-reported height and weight, which is used to calculate body mass index. Overweight/obesity is defined as being in the 85th percentile or above for body mass index by age and gender, based on reference data.)
- » Consistent with prior years, males are more likely than females to be overweight/obese (22% compared to 17%).
- » Fewer 8th grade youth in MetroWest are overweight/obese (20%) compared with 8th grade youth in Massachusetts (24%).

Sleep

- » Fewer than two-thirds of middle school youth (62%) get 8 or more hours of sleep on an average school night. This is slightly lower than 2014 levels (64%), when this data was first collected.
- » Males are more likely to get 8 or more hours of sleep (66%) than females (58%).
- » The proportion of youth that get 8 or more hours of sleep decreases from 68% in 7th grade to 56% in 8th grade.

Key Findings: Protective Factors

More than seven out of ten middle school youth (72%) have an adult at school to talk to if they have a problem, and more than nine out of ten youth (93%) have a supportive adult outside of school. About three-quarters of youth report high levels of school connectedness. Youth with these protective factors report lower levels of harmful behaviors including substance use, violence, bullying victimization, and mental health problems.

Adult Support

- » The proportion of youth who have an adult at school to talk to if they have a problem has increased notably, from 63% in 2006 to 69% in 2014, and further to 72% in 2016.
- » Reports of adult support outside of school by parents or other adults have increased from 89% in 2006 to 93% in 2016. (This is defined as having at least one adult outside of school to talk to about things that are important.)
- » Adult support, both at school and outside of school, is similar by gender and grade.
- » While most MetroWest middle school youth report having adult support in their lives, youth without adult support are more likely to report a variety of risk behaviors. For example, youth without adult support at home are more likely to report lifetime alcohol use (25% vs. 9%), lifetime marijuana use (8% vs. 2%), school bullying victimization (36% vs. 19%), and depressive symptoms (34% vs. 9%).

School Attachment and Engagement

- » Three-quarters of youth report being engaged in and connected with their school, as indicated by their agreement with statements such as, "I feel close to people at this school" (75%), "I am happy to be at this school" (72%), and "I feel safe in my school" (85%).
- » Overall reports of school attachment have been similar during the course of the MWAHS.
- » There are no notable differences in reports of school attachment among females and males.
- » Reports of school attachment decrease slightly from 7th grade to 8th grade.
- » Youth who report high levels of school attachment are less likely than students who report low levels of attachment to engage in high-risk behaviors, including substance use and physical violence. They are also less likely to be victims of bullying and to report mental health problems.

Conclusions

Over six surveys and more than a decade, the MWAHS has continued to provide a basis for data-driven improvements in health programs and practices, both at the local and regional levels. Since 2006, each wave of the survey has identified areas of continued progress in the region, while also bringing attention to new or existing areas of concern.

For many of the behaviors covered on the survey, there have been substantial improvements over the past decade that have continued through the most recent 2016 survey:

- » Very few middle school youth are smoking cigarettes, with current levels at one-third those first measured in 2006. These declines are consistent with state and national trends.
- » Alcohol use has continued to decline at every survey. While some youth initiate alcohol use during the middle school years, much progress has been made over the last decade alongside local and regional initiatives aimed at reducing alcohol and other substance use and associated consequences.
- » While marijuana use has always been low among MetroWest middle school youth, it continues to decline despite the 2009 decriminalization, 2012 legalization of medical marijuana use, and the dialogue around the 2016 legalization of marijuana use for adults 21 and over in Massachusetts. The next survey will give an indication of how marijuana use among youth may be impacted once retail marijuana outlets open in the state.
- » School bullying among middle school youth has declined by more than half since it peaked in 2008. This may be related to several targeted bullying prevention and intervention efforts, including school-based programs to improve school climate and increase social emotional learning, bullying prevention initiatives in several schools sponsored by the MetroWest Health Foundation, and increased awareness and action following the 2010 state anti-bullying legislation.

The following areas show progress or stabilization in recent surveys:

- » Slightly fewer youth are using electronic cigarettes, but with data collected only in the two most recent surveys, it is too early to tell whether this decline is the beginning of a downward trend.
- » Related to the decline in school bullying, physical fighting on school property dropped substantially in the earlier years of the MWAHS but has not decreased further in recent surveys. Reports of weapon carrying on school property have remained very low.

The areas of cyberbullying and adolescent mental health continue to demand attention:

- » One in five youth continue to report cyberbullying, which has risen since the MWAHS began, despite the substantial declines in school bullying. While cyberbullying has increased more for females than males overall, recent data also shows an increase among males for the first time.
- » Reports of stress are higher among middle school youth, particularly among girls, with school-related stress being the most common cause of stress. Despite this rise in stress, the 2016 survey data suggests a notable improvement in depressive symptoms. In addition, there has not been any recent change in suicidal thoughts and behaviors. The contributors to adolescent mental health are multiple and complex, but there have been many positive efforts in communities across the region including: implementation of screening and prevention programming in schools, coordination of school and community mental health programs and

services, and transition programs to support students returning from treatment to re-enter the school environment. Many such local efforts have been supported by the MetroWest Health Foundation's adolescent mental health grant program.

The 6th administration of the MWAHS shows substantial and meaningful progress in reducing harm among adolescents, particularly in the areas of substance use and school bullying. While many youth continue to report behaviors that may endanger their physical and emotional health, the MWAHS helps to ensure that efforts to address these risks are driven by local data, targeted to each communities' needs, and supported by regional prevention initiatives.

References

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² Johnston, LD, O'Malley, PM, Miech, RA, Bachman, JG, & Schulenberg, JE (2017). *Monitoring the Future national survey results on drug use*, 1975-2016: Overview, key findings on adolescent drug use. Ann Arbor: Institute for Social Research, The University of Michigan. Available at: http://monitoringthefuture.org///pubs/monographs/mtf-overview2016.pdf. Accessed March 10, 2017.

Middle School Key Indicators

2006–2016 Trends 2016 Gender Patterns 2016 Grade Patterns

MetroWest Region Middle School Students (Grades 7-8) 2006-2016 Trends in Key Indicators

MetroWest Adolescent Health Survey

	Year of Survey (%)					
	2006	2008	2010	2012	2014	2016
	(6,875)	(10,650)	(11,597)	(12,224)	(12,191)	(12,307)
SUBSTANCE USE						
Lifetime cigarette smoking	9.6	8.4	5.7	6.2	4.1	2.9
Current cigarette smoking (past 30 days)	3.9	3.7	2.4	2.1	1.4	1.1
Lifetime alcohol use	21.9	20.2	13.2	12.4	11.0	10.2
Current alcohol use (past 30 days)	9.0	8.6	4.9	5.0	4.0	3.7
Binge drinking (past 30 days)*	2.5	2.5	1.5	1.4	1.0	1.0
Lifetime marijuana use	4.8	5.2	4.1	4.1	3.1	2.5
Current marijuana use (past 30 days)	3.0	3.3	2.2	2.4	1.8	1.4
Lifetime inhalant use	8.3	7.1	5.2	4.2	3.0	2.6
VIOLENCE			and har she		and the set	
Physical fighting (lifetime)	44.5	45.3	39.3	35.0	33.4	31.5
Physical fighting on school property (lifetime)	18.9	16.8	12.4	9.8	9.4	9.4
Carried a weapon (lifetime)	17.6	16.3	13.7	15.1	15.2	16.0
Carried weapon on school property (lifetime)	3.3	2.5	1.4	1.4	1.1	1.0
BULLYING VICTIMIZATION						
Bullying victim (past 12 months)	43.9	48.9	37.7	32.4	28.8	25.1
Bullying victim on school property (past 12 months)	38.8	42.7	31.7	26.7	23.5	20.6
Cyberbullying victim (past 12 months)	15.6	15.9	17.2	16.6	18.6	18.8
MENTAL HEALTH						Nonice and the
Life "very" stressful (past 30 days)	13.3	13.6	12.1	12.5	14.1	15.6
Depressive symptoms (past 12 months)	15.6	15.2	12.8	12.8	15.0	10.4
Self-injury (past 12 months)	7.7	8.5	6.7	7.8	9.0	7.4
Considered suicide (lifetime)	9.9	10.9	9.4	10.5	11.2	10.7
Attempted suicide (lifetime)	3.0	3.0	2.6	3.0	3.2	2.7
PHYSICAL ACTIVITY AND BODY WEIGHT	和公司司令		ALC: NO			
Exercised for ≥20 minutes on 3 or more days/week	78.7	79.0	76.9	80.3	80.8	80.7
Overweight or obese [†]	20.4	19.8	19.5	19.0	19.2	19.7

* From 2006 to 2014, binge drinking was defined as 5 or more drinks in a row on one or more occasion for all students. In 2016, binge drinking was defined as 4 or more drinks in a row for females and 5 or more drinks in a row for males.

+ Students who were ≥85th percentile for body mass index by age and gender, based on reference data

MetroWest Region Middle School Students (Grades 7-8) 2016 Gender Patterns for Key Indicators

MetroWest Adolescent Health Survey

	Gender (%)		Total (%)	
	Female	Male	() () () () () () () () () ()	
	(6,030)	(6,183)	(12,307)	
SUBSTANCE USE				
Lifetime cigarette smoking	2.2	3.6	2.9	
Current cigarette smoking (past 30 days)	0.6	1.5	1.1	
Lifetime alcohol use	7.9	12.3	10.2	
Current alcohol use (past 30 days)	3.0	4.2	3.7	
Binge drinking (past 30 days)*	0.6	1.3	1.0	
Lifetime marijuana use	1.6	3.2	2.5	
Current marijuana use (past 30 days)	0.9	1.8	1.4	
Lifetime inhalant use	2.1	3.0	2.6	
VIOLENCE				
Physical fighting (lifetime)	16.2	46.2	31.5	
Physical fighting on school property (lifetime)	3.3	15.2	9.4	
Carried a weapon (lifetime)	6.9	24.8	16.0	
Carried weapon on school property (lifetime)	0.4	1.5	1.0	
BULLYING VICTIMIZATION				
Bullying victim (past 12 months)	27.1	23.0	25.1	
Bullying victim on school property (past 12 months)	21.4	19.7	20.6	
Cyberbullying victim (past 12 months)	22.7	14.9	18.8	
MENTAL HEALTH				
Life "very" stressful (past 30 days)	20.4	10.8	15.6	
Depressive symptoms (past 12 months)	13.1	7.4	10.4	
Self-injury (past 12 months)	9.8	5.0	7.4	
Considered suicide (lifetime)	12.7	8.5	10.7	
Attempted suicide (lifetime)	3.3	2.1	2.7	
PHYSICAL ACTIVITY AND BODY WEIGHT				
Exercised for ≥20 minutes on 3 or more days/week	77.5	84.1	80.7	
Overweight or obese ⁺	17.0	22.4	19.7	

* From 2006 to 2014, binge drinking was defined as 5 or more drinks in a row on one or more occasion for all students.

In 2016, binge drinking was defined as 4 or more drinks in a row for females and 5 or more drinks in a row for males.

 $^{+}$ Students who were \geq 85th percentile for body mass index by age and gender, based on reference data

MetroWest Region Middle School Students (Grades 7-8) 2016 Grade Patterns for Key Indicators

MetroWest Adolescent Health Survey

	Grade		Total (%)	
	7 th	8 th		
	(6,065)	(6,242)	(12,307)	
SUBSTANCE USE	* 199 年二年三年			
Lifetime cigarette smoking	1.8	4.0	2.9	
Current cigarette smoking (past 30 days)	0.5	1.7	1.1	
Lifetime alcohol use	7.2	13.0	10.2	
Current alcohol use (past 30 days)	1.8	5.4	3.7	
Binge drinking (past 30 days)*	0.4	1.6	1.0	
Lifetime marijuana use	1.0	4.0	2.5	
Current marijuana use (past 30 days)	0.5	2.3	1.4	
Lifetime inhalant use	2.0	3.1	2.6	
VIOLENCE	12.12.24		and the second second	
Physical fighting (lifetime)	31.4	31.6	31.5	
Physical fighting on school property (lifetime)	8.6	10.1	9.4	
Carried a weapon (lifetime)	14.0	17.8	16.0	
Carried weapon on school property (lifetime)	0.6	1.5	1.0	
BULLYING VICTIMIZATION				
Bullying victim (past 12 months)	26.7	23.6	25.1	
Bullying victim on school property (past 12 months)	21.9	19.4	20.6	
Cyberbullying victim (past 12 months)	18.0	19.6	18.8	
MENTAL HEALTH			Sand Street Street	
Life "very" stressful (past 30 days)	12.7	18.4	15.6	
Depressive symptoms (past 12 months)	9.6	11.1	10.4	
Self-injury (past 12 months)	6.2	8.6	7.4	
Considered suicide (lifetime)	8.7	12.6	10.7	
Attempted suicide (lifetime)	2.1	3.3	2.7	
PHYSICAL ACTIVITY AND BODY WEIGHT	Charles In Concession	19-14-14	A share of the second	
Exercised for ≥20 minutes on 3 or more days/week	81.9	79.6	80.7	
Overweight or obese [†]	19.6	19.8	19.7	

* From 2006 to 2014, binge drinking was defined as 5 or more drinks in a row on one or more occasion for all students. In 2016, binge drinking was defined as 4 or more drinks in a row for females and 5 or more drinks in a row for males.

+ Students who were ≥85th percentile for body mass index by age and gender, based on reference data

This report was prepared by Education Development Center, Inc. (EDC) in Waltham, MA.

For technical assistance in interpreting and utilizing the MWAHS data, please contact: Shari Kessel Schneider, MSPH, MetroWest Adolescent Health Survey Project Director 617-969-7100 or <u>MetroWestSurvey@edc.org</u>

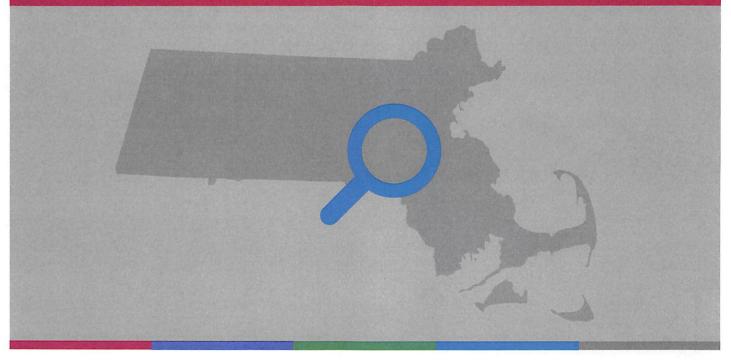
For information about EDC, visit our website at www.edc.org.

Highlights from the MetroWest Adolescent Health Survey

Informing data-driven school and community health policies and practices

2016 MetroWest Region High School Report

GRADES 9-12





Funded by: MetroWest Health Foundation



Submitted by: Education Development Center, Inc. Spring 2017

Highlights from the 2016 MetroWest Adolescent Health Survey

MetroWest Region High School Report

Background

The 2016 MetroWest Adolescent Health Survey (MWHAS) marks the beginning of a new decade in monitoring trends in adolescent health behaviors to advance school and community prevention efforts. Since 2006, the MWAHS has been administered every other year in communities served by the MetroWest Health Foundation, with the goal of supporting data-driven improvements in health programs and policies at the local and regional levels. In 2016 alone, over 40,000 students were surveyed in 26 school districts, providing important adolescent health data on key areas of concern and emerging health issues. Over the course of the initiative, the MWHAS data has greatly enhanced school and community efforts to prevent harm from risky behaviors and improve adolescent physical, mental, and emotional wellbeing.

Methodology

The 2016 high school MWAHS was administered to a census of students in grades 9 through 12 in all 26 high schools in the MetroWest region served by the MetroWest Health Foundation. As in previous survey waves, local procedures were followed to inform parents/guardians of the survey and give them the choice to opt out their child(ren). Students were also informed that their participation was voluntary and that no names or other identifying information were being collected. Data collection at each school was guided by a protocol that protected the privacy of students' responses.

In total, 24,385 students in grades 9 through 12 completed the 2016 survey, representing 89% of the youth in all 26 high schools. The data allow for an examination of behavioral trends across six time points from 2006 to 2016. This report summarizes current youth behaviors on key health indicators in the areas of substance use, violence, bullying, mental health, sexual behavior, and physical activity. Current data from 2016 is provided by gender and grade, and trends over the six waves of the MWAHS are highlighted.

Key Findings: Substance Use

Cigarette Smoking

Cigarette smoking among MetroWest high school youth has dropped to one-third the level it was in 2006. The percentage of youth who smoked a whole cigarette in their lifetime decreased steadily from 35% in 2006 to 17% in 2014, and declined further to 13% in 2016.

- » Current smoking (in the past 30 days) has also decreased to one-third the 2006 levels, dropping from 15% in 2006 to 5% in 2016.
- » Smoking continues to decline among both females and males. For example, current smoking decreased from 13% in 2006 to 3% in 2016 among females, and from 16% to 6% among males.
- » As in prior years, more males than females are smoking cigarettes. More males than females have tried smoking in their lifetime (16% vs. 11%), and in the past 30 days (6% vs. 3%).
- » Despite substantial declines in smoking in the MetroWest region, youth continue to experiment with cigarettes during the high school years. From 9th to 12th grade, lifetime smoking triples from 7% to 21%. By 12th grade, one in five youth (21%) have smoked a whole cigarette, and 8% have smoked in the past 30 days.
- » Current cigarette smoking among MetroWest youth (5%) continues to be lower than in Massachusetts (8%)¹ and the United States (11%).² The regional decline in lifetime and current cigarette smoking is consistent with state and national trends.

Electronic Cigarettes

More than one in five MetroWest high school youth (28%) have tried an electronic cigarette or other electronic vapor product. Use of electronic cigarettes is more than double the use of conventional cigarettes.

- » Lifetime electronic cigarette use in 2016 (28%) is lower than in 2014 (31%), when data on electronic cigarettes was first collected on the MWAHS. There are slight decreases among both females and males. Data from future years will show whether this is indicative of a downward trend. (Data in this section refers to use of electronic cigarettes or other electronic vapor products.)
- » 15% of high school youth have used an electronic cigarette in the past 30 days, down from 18% in 2014.
- » Consistent with conventional cigarette smoking, males are more likely than females to smoke electronic cigarettes. For example, 18% of males and 11% of females have recently smoked an electronic cigarette.
- » Experimentation with electronic cigarettes increases during high school. Lifetime use increases from 17% in 9th grade to 38% in 12th grade, and nearly one in five 12th grade students (19%) have used electronic cigarettes in the past 30 days.
- » Fewer than half of students (48%) perceive that using electronic cigarettes is of moderate or great risk. Females and younger students are more likely to perceive greater harm in using electronic cigarettes than males and older students.
- » Lifetime electronic cigarette use in MetroWest (28%) is markedly lower than in Massachusetts and the nation (both 45%).

Alcohol Use

Since 2006, drinking among MetroWest high school students has decreased steadily. Lifetime drinking decreased from 67% in 2006 to 54% in 2014, and further declined to 52% in 2016. Current drinking and binge drinking have also declined substantially over the course of the MWAHS.

- » Reports of current drinking (in the past 30 days) decreased by one-quarter over the course of the MWAHS, from 42% in 2006 to 32% in 2016. The majority of the decline in current drinking took place in the earlier years of the MWAHS (2006 to 2012); from 2012 to 2016, current drinking declined only slightly from 33% to 32%.
- » Binge drinking also decreased from 25% in 2006 to 17% in 2016. (Binge drinking in 2016 was defined as consuming four or more drinks in a row for females, or five or more drinks in a row for males on one or more occasions during the past 30 days. This does not take into account body weight or other factors that influence intoxication levels.)
- » Both females and males are drinking less. For example, lifetime drinking declined at every time point from 2006 to 2016 for both females (67% to 53%) and males (66% to 50%).
- » Current drinking declined steadily for males (from 42% in 2006 to 30% in 2016); for females, current drinking declined from 42% in 2006 to 34% in 2010 and has been in the range of 33-35% over the three most recent surveys.
- » Consistent with 2014 data, females report slightly higher levels of lifetime alcohol use (53% vs. 50%) and current alcohol use (33% vs. 30%) than males.
- » Binge drinking is reported by 17% of both females and males.
- » Despite substantial declines in drinking in the MetroWest region, a concerning number of youth continue to initiate alcohol use in high school: Current drinking more than triples from 14% in 9th grade to 48% in 12th grade, and binge drinking increases from 5% to 29%.
- » Lifetime alcohol use among MetroWest youth (52%) continues to be lower than in Massachusetts (61%) and the United States (63%), but current drinking is similar across all three. The decline in current drinking in MetroWest (from 42% in 2006 to 32% in 2016) is consistent with decreases in the state (from 48% in 2005 to 34% in 2015)¹ and the U.S. (from 43% to 33%).²

Marijuana Use

Marijuana use in MetroWest is lower in recent years. After remaining similar from 2006 to 2010 at 33-35%, lifetime marijuana use declined steadily to 28% over the last three surveys.

- » Current (past 30 day) marijuana use increased from 20% in 2006 to 24% in 2010, but then decreased in recent surveys to 19% in 2016.
- » The recent decrease in marijuana use is driven by a decrease among males, narrowing the gap in use between males and females. For example, current marijuana use among males decreased from a high of 30% in 2010 to 21% in 2016, whereas current use among females has remained similar at 17-18% since 2006.
- » Initiation of marijuana use quadruples from 11% in 9th grade to 46% in 12th grade. Nearly one in three 12th grade students (31%) have used marijuana in the past 30 days.
- » Two out of three high school students (66%) report that it is fairly or very easy to obtain marijuana.
- » Marijuana use continues to be lower in MetroWest than in the state and the nation: 28% of MetroWest youth have used marijuana in their lifetime, compared with 41% in Massachusetts¹ and 39% in the U.S.² Data from MetroWest, Massachusetts, and the U.S. all show slight declines in lifetime use over recent surveys.

Prescription Drug Misuse

Fewer MetroWest high school students are misusing prescription drugs. Lifetime reports were similar from 2006-2010 at 10-11% and then decreased over the last three surveys to 6% in 2016.

- » Current (past 30 day) misuse of prescription drugs also declined steadily, from 6% in 2008 to 3% in 2016. (Misuse of prescription drugs is defined as use without a doctor's prescription.)
- » Similar declines in prescription drug misuse were reported among both females and males over the past three surveys.
- » As in prior years, more males than females report lifetime (7% vs. 5%) and current (4% vs. 2%) prescription drug misuse.
- » Prescription drug misuse increases during the high school years. By 12th grade, one in ten youth (10%) youth have misused prescription drugs in their lifetime, and 5% have done so in the past 30 days.
- » In 2016, 5% of youth reported misuse of prescription stimulants, and 3% reported lifetime misuse of prescription opioids. (2016 was the first year the MWAHS asked about misuse of these specific types of prescription drugs.)
- » Lifetime misuse of prescription drugs is substantially lower in MetroWest (6%) compared with Massachusetts (11%)¹ and the nation (17%).²

Key Findings: Violence

Physical fighting, including fighting on school property, declined by nearly half since 2006. From 2006 to 2014, overall reports of fighting in the past 12 months decreased from 26% to 14% and remained at this level in 2016. Weapon carrying over the six surveys has not changed substantially.

Physical Fighting

- » Reports of physical fighting on school property in the past 12 months decreased steadily from 9% in 2006 to 4% in 2016.
- » Fighting is reported by three times as many males as females, but there have been substantial reductions in fighting among both genders. From 2006 to 2014, overall reports of fighting decreased from 36% to 20% among males, and from 16% to 7% among females.
- » Reports of fighting are more common among younger youth, decreasing from 16% in 9th grade to 11% in 12th grade. Reports of fighting on school property also decrease slightly during the high school years.
- » Physical fighting in MetroWest (14%) continues to be lower than in the state (19%)¹ and nation (23%),² though reports have declined in the region, state, and nation in recent years.

Weapon Carrying

- » Reports of weapon carrying in the past 30 days have been in the range of 7-8% since 2006, and reports of weapon carrying on school property have declined very gradually from 3% to 2% over the past six surveys.
- » This slight decrease in weapons at school are due to lower reports among males: Reports decreased from 5% in 2006 to 3% in 2016 among males and remained steady at 1% among females.
- » While reports of weapon carrying have changed little overall, reports of being threatened or injured with a weapon in the past 12 months declined from 9% in 2006 to 6% in 2014 and remained at that level in 2016. Weapons-related threats and injuries on school property declined gradually from 5% to 3%.
- » Males continue to report much higher levels of weapon carrying than females (12% vs. 3%), as well as higher levels of weapons-related threats and injuries (7% vs. 4%).
- » Reports of weapon carrying are slightly higher among older youth, but reports of weapons-related threats and injuries are similar across the high school years.
- » Weapon carrying among MetroWest youth (8%) is much lower than in the state (13%)¹ and nation (16%).² The small decline in weapon carrying in MetroWest is consistent with state and national trends.

Key Findings: Bullying and Cyberbullying

School bullying has declined markedly over the last three surveys. Reports of bullying on school property in the past 12 months decreased from a high of 28% in 2010 to 20% in 2014, and dropped further to 17% in 2016, the lowest level since the MWAHS began. Cyberbullying has declined slightly in recent surveys, though levels are still higher than in early years of the MWAHS.

Bullying

- » Reports of overall bullying victimization in the past 12 months also decreased, from a high of 32% in 2010 to 24% in 2014, lowering further to 21% in 2016.
- » Both females and males are reporting less bullying. For example, bullying on school property decreased from a high of 31% in 2010 to 19% in 2016 among females, and from a high of 25% in 2010 to 15% in 2016 among males. Similar gender trends exist for overall reports of bullying.
- » Despite declines for both females and males, females continue to report higher victimization at school (19% vs. 15%). However, males are more likely than females to report bullying someone else at school (8% vs. 5%).
- » Bullying victimization at school decreases by grade, from 21% in 9th grade to 14% in 12th grade.
- » Data on verbal harassment was collected for the first time in 2016. 14% of youth reported being verbally harassed in the past 12 months due to their race, ethnicity or culture, 6% due to their sexual orientation, 6% due to a disability, and 23% due to their appearance (height, weight, or how they look).
- » Many victims do not seek help from adults: Among students who were bullied at school, only 30% had talked to a school adult and fewer than half (46%) had talked to a parent/adult outside of school about being bullied.
- » 24% of youth have intervened as bystanders by trying to stop a student from bullying someone else at school in the past 12 months, and 8% have told an adult at school that someone else was being bullied.
- » School bullying in MetroWest (17%) is similar to state levels (16%)¹ and is slightly lower than national levels (20%).² While there are recent declines in both the region and the state, school bullying in the United States has not changed notably in the last decade.

Cyberbullying

- » Reports of cyberbullying victimization in the past 12 months increased steadily from 15% in 2006 to 22% in 2012, but declined slightly over the last two surveys to 19% in 2016.
- » While females reported substantially more cyberbullying victimization than males at all surveys, the recent decrease in cyberbullying is driven by a decrease among females, from a high of 28% in 2012 to 24% in 2016; whereas cyberbullying among males was similar at 14-15% during this time period.
- » 8% of youth report that they cyberbullied someone else in the past 12 months; reports are similar by gender.
- » Reports of cyberbullying victimization decrease by grade, from 23% in 9th grade to 16% in 12th grade.
- » 59% of youth spend three or more hours online on an average school day, and 29% spend three or more hours daily on social media. Many more females (37%) than males (20%) report this level of social media use.
- » Youth who spend three or more hours on social media daily are twice as likely to also report cyberbullying victimization (29% vs. 15%) and perpetration (12% vs. 6%) as youth who spend less time on social media.

- » Few cyberbullying victims seek help from adults: Among students who were cyberbullied in the past 12 months, only 16% had talked to an adult at school and 30% had talked to a parent or other adult outside of school about being cyberbullied. These numbers are lower than those reported by school bullying victims.
- » 12% of youth have tried to stop a student from cyberbullying someone else; more females than males (16% vs.
 9%) reported intervening in this way.
- » Cyberbullying victimization in MetroWest (19%) remains higher than in the state (13%)¹ and nation (16%).²

Key Findings: Impaired and Distracted Driving

Consistent with trends in alcohol use, drinking and driving has declined at every survey since 2006. Reports of driving after drinking in the past 30 days have decreased by two-thirds, from 19% in 2006 to 6% in 2016. Driving after using marijuana declined slightly since 2012 but is reported by more than twice as many high school drivers (14%) as drinking and driving (6%).

Impaired Driving

- » Reports of riding as a passenger in a car with a driver (adult or high school student) who had been drinking in the past 30 days decreased from 25% in 2006 to 17% in 2014, and declined further to 14% in 2016.
- » Consistent with the above finding, reports of riding in a car with a high school driver who had been drinking decreased from 10% in 2012 to 7% in 2016 (2012 was the first year this data was collected).
- » In 2016, 14% of 11th and 12th grade drivers reported driving after using marijuana in the past 30 days, and 15% of all high school students reported riding with someone who had been using marijuana. These numbers are down slightly from 2012 levels (17% and 18%, respectively), when this data was first collected.
- Males are twice as likely as females to drive after using alcohol (8% vs. 4%) and marijuana (19% vs. 10%), but there is a smaller gender difference in reports of riding as a passenger with an impaired driver. For example, 7% of males and 6% of females rode with a high school student who had been drinking, and 16% of males and 13% of females rode with a high school student who had been using marijuana.
- » Reports of driving after using alcohol increase substantially from 11th grade (4%) to 12th grade (7%). Similarly, reports of driving after marijuana use also rise notably from 11th to 12th grade (from 11% to 18%).

Distracted Driving

- » In 2016, three out of ten youth (29%) rode in a car driven by a high school student who was texting or emailing while driving in the past 30 days. Reports increased from 29% in 2010, when this was first measured, to 33% in 2012, and then returned to 2010 levels over the two most recent surveys.
- » 36% of 11th and 12th grade students who drive reported driving while texting in the past 30 days. Reports decreased steadily from 44% in 2010 to 38% in 2014, and declined further to 36% in 2016.
- » Reports of texting while driving are similar among males and females, and more than double from 11th grade (23%) to 12th grade (50%).

Key Findings: Mental Health

Stress among MetroWest youth has continued to rise in recent years, but other mental health problems may be starting to decline. Reports of feeling very stressed in the past month were steady from 2006 to 2012 at 28-29% and increased over the last two surveys to 36% in 2016. In contrast, there are slight decreases over the last two years in depressive symptoms and self-injury.

Stress

- » Half of all females (49%) report feeling very stressed in the past 30 days, more than double the levels reported by males (22%).
- » The increase in stress over the last decade is driven by an increase among females. Reports of stress among females rose steadily from 35% in 2006 to 47% in 2014, and then further to 49% in 2016. Reports among males have been steady at 22% since 2014 and have not changed substantially since 2006.
- » As in previous surveys, reports of stress increase during the high school years, nearly doubling from 25% in 9th grade to 48% in 12th grade.
- » Stress related to school issues is most common, reported by two-thirds of youth (66%), followed by stress related to social issues (33%). Specifically, 68% of students are stressed often or very often about getting good grades in school, 62% are stressed about being able to finish all of their work and study enough, and 49% are worried about plans after high school. School-related stress is higher among females than males, and is highest in 11th and 12th grades.

Depressive Symptoms, Self-Injury, and Suicidality

- » There are small declines in reports of depressive symptoms and self-injury in recent surveys. From 2014 to 2016, depressive symptoms declined from a high of 22% to 18%, and self-injury declined from a high of 16% in 2012 to 13% in 2016. Future data will show if these recent differences are the beginning of downward trends.
- » The declines in depressive symptoms and self-injury are driven more by females than males. Over the last two surveys, depressive symptoms declined from 30% to 24% among females, and from 14% to 12% among males; self-injury declined from 23% to 18% among females and remained stable at 7% among males.
- » There has been little change in suicidal thoughts and behaviors in recent years. The proportion of students who seriously considered suicide in the past 12 months has been at 12-13% since 2010, slightly up from earlier reports in 2006 (10%), and the proportion of students who attempted suicide in the past 12 months has been steady at 4-5% since 2006.
- » Despite improvements in some mental health problems among females, reports are still substantially higher among females than males. For example, depressive symptoms are twice as high among females (24% vs. 12%), and suicidal ideation is also higher among females than males (15% vs. 9%).
- » Reports of self-injury and suicidal thoughts and behaviors are similar by grade, whereas there is a slight increase in depressive symptoms from 9th grade (16%) to 12th grade (19%).
- » 7% of youth have missed school on one or more of the past 30 days due to feeling sad or hopeless, or having thoughts about hurting themselves, with more females (10%) than males (4%) reporting this.

- » 17% of youth have talked to a parent/adult outside of school about feeling sad or hopeless, or having thoughts about hurting themselves in the past 12 months. 7% of youth have spoken to a teacher or other adult at school, and 9% have talked to a doctor, nurse, or health care provider.
- » Reports of depressive symptoms in 2016 are lower in MetroWest (18%) than in Massachusetts (27%) and the United States (30%). Similarly, fewer MetroWest youth report seriously considering suicide (12%) compared to Massachusetts youth (15%) and U.S. youth (18%).²

Key Findings: Sexual Behaviors

There has been a decline in sexual intercourse over the last three surveys. Reports of lifetime intercourse were steady at 28-29% through 2010, and then declined at each subsequent survey to a low of 22% in 2016. However, four in ten sexually active youth (38%) didn't use a condom the last time they had intercourse.

Sexual Intercourse and Sexting

- » The proportion of youth who reported that they are currently sexually active (had intercourse in the past 3 months) has also declined, from 23% in 2008 to 17% in 2016.
- » By 12th grade, 42% of youth have had sexual intercourse and one in three (33%) are currently sexually active.
- » Reports of condom use at last intercourse are slightly lower in 2016 (62%) compared with 2012-2014 levels (65-66%).
- » One in four sexually active youth (26%) used alcohol or drugs before they had intercourse the last time, down slightly from 2012-2014 reports of 28-29%. Reports are higher among males than females (31% vs. 20%).
- » The proportion of youth who have ever had intercourse continues to be markedly lower in MetroWest (22%) than in the state (36%)¹ and nation (41%); reports have also declined in the state and nation in recent surveys.²
- » Sexting (defined as sending or forwarding nude, sexually suggestive, or explicit photos or videos of someone you know using the Internet, cell phones or other electronic communications in the past 12 months) has been measured in MetroWest since 2010. There have been steady increases in reports of receiving a sext (from 25% in 2010 to 36% in 2016) and sending a sext of yourself (from 11% in 2012 to 18% in 2016), with females more likely to report sending a sext of themselves than males (21% vs. 15%).
- » Reports of sexting increase during the high school years, with one in four 12th grade youth (25%) reporting they sent a sext of themselves.

Key Findings: Physical Activity, Nutrition, Overweight/Obesity, and Sleep

Half of MetroWest high school youth (51%) exercise moderately on at least five days per week, up from 34% in 2006. Despite this increase, the proportion of youth who are overweight or obese has remained similar at 19-21% since 2006.

Physical Activity

- » There were substantial increases in reports of moderate exercise from 2006 to 2016 among both females (from 28% to 43%) and males (from 40% to 59%). (Moderate physical activity is defined as activity that increases your heart rate and makes you breathe hard for at least one hour on five or more of the past seven days.)
- » As in prior surveys, more males than females engage in both moderate (59% vs. 43%) and vigorous physical activity (74% vs. 63%). (Vigorous physical activity is defined as exercising for at least 20 minutes that makes you sweat and breathe hard on three or more of the past seven days.)
- » Students report less physical activity as they get older. For example, from 9th grade to 12th grade, reports of moderate physical activity decrease from 57% to 44%.
- » 39% of youth (37% of females and 41% of males) reported spending three or more hours a day on "screen time" that is not for school or homework. This may be an indicator of unhealthy sedentary behavior.
- » The proportion of students who exercised moderately on five or more days in the past week is higher in MetroWest (51%) compared with the state (45%),¹ and similar to national levels (49%).²

Nutrition

- » There has been a steady decline in reports of drinking one or more non-diet sodas per day in the week prior to the survey, from 24% in 2006 to 9% in 2016.
- » The proportion of youth who consume 5 or more servings of fruits and vegetables per day is higher in 2016 (16%) relative to reports from prior years, which ranged from 10-13%.
- » In 2016, 23% of youth consumed fried food and 4% consumed fast food at least once per day in the past week.
- » About half of high school youth (46%) in the MetroWest region ate breakfast every day in the past week, higher than in the state (35%)¹ and nation (36%).²

Overweight/Obesity

- » Although there have been improvements in physical activity and nutrition, overweight/obesity has not changed substantially since 2006. One in five (21%) of youth were overweight or obese in 2016; reports from prior years were in the range of 19-20%. (Reports of overweight/obesity are based on self-reported height and weight, which is used to calculate body mass index. Overweight/obesity is defined as being in the 85th percentile or above for body mass index by age and gender, based on reference data.)
- » Consistent with prior surveys, more males (24%) than females (18%) are overweight/obese.
- » Overweight/obesity is relatively similar throughout the high school years.
- » Fewer MetroWest youth are overweight/obese (21%) compared with the state (26%)¹ and the nation (30%).²

Sleep

- » Only 27% of high school youth sleep 8 or more hours on an average school night. This is down slightly from 2014 levels (29%), when this data was first collected.
- » Males are more likely to get this amount of sleep (31%) than females (22%), and reports are lower in 2016 than in 2014 among both genders.
- » The proportion of youth who sleep for 8 or more hours decreases by more than half during the high school years, from 38% in 9th grade to 18% in 12th grade.

Key Findings: Protective Factors

Three out of four MetroWest high school youth (75%) have an adult at school to talk to if they have a problem, and nine out of ten youth (91%) have a supportive adult outside of school. Threequarters of youth also report high levels of school connectedness. Youth with these protective factors report lower levels of harmful behaviors including substance use, violence, bullying, and mental health problems.

Adult Support

- » Reports of having an adult at school to talk to about things that are important increased from 66% in 2006 to 71% in 2014, and further increased to 75% in 2016, with notable increases among both females and males.
- » Reports of adult support outside of school by parents or other adults have ranged from 88-91% since the MWAHS began, with reports of 91% in 2016. (This is defined as having at least one adult outside of school to talk to about things that are important.)
- » Adult support at school is high among both genders and increases during the high school years, from 69% in 9th grade to 82% in 12th grade. Reports of adult support outside of school are similar across genders and grades.
- » While most MetroWest youth report having adult support in their lives, youth without adult support are more likely to report a variety of risk behaviors. For example, youth without adult support at home are more likely to report current alcohol use (40% vs. 31%), current marijuana use (30% vs. 18%), depressive symptoms (39% vs.16%) and having seriously considered suicide (31% vs. 10%).

School Attachment and Engagement

- » About three-quarters of youth report being engaged in and connected with their school, as indicated by their agreement with statements such as: "I feel like I am part of this school" (71%), "I am happy to be at this school" (69%), and "I feel safe in my school" (83%).
- » Reports of school attachment have been similar among MetroWest region high school youth since 2006.
- » While a majority of both males and females have high levels of school attachment, reports are slightly higher among males.
- » Reports of school attachment are similar across grade levels.
- » Youth with higher levels of school attachment are less likely to report harmful behaviors than those who report lower levels of school attachment, including substance use, fighting, bullying, and mental health problems.

Conclusions

Over six surveys and more than a decade, the MWAHS has continued to provide a basis for data-driven improvements in health programs and practices, both at the local and regional levels. Since 2006, each wave of the survey has identified areas of continued progress in the region, while also bringing attention to new or existing areas of concern.

For many of the behaviors covered on the survey, there have been substantial improvements over the past decade that have continued through the most recent 2016 survey:

- » Cigarette smoking in MetroWest is now at one-third the levels reported at the beginning of the MWHAS in 2006. There have been substantial declines in the state and nation as well, but MetroWest youth continue to smoke substantially less than youth in Massachusetts and the nation.
- » Alcohol use and drinking and driving have declined steadily, consistent with state and national trends. While alcohol is still the most commonly used substance by adolescents by far, much progress has been made over the last decade alongside local and regional initiatives aimed at reducing alcohol and other substance use and associated consequences.
- » School bullying has declined by more than one-third since it peaked in 2010. This may be related to several targeted bullying prevention and intervention efforts, including school-based programs to improve school climate and enhance social emotional learning, bullying prevention initiatives in several schools sponsored by the MetroWest Health Foundation, and increased awareness and action following the 2010 state anti-bullying legislation.
- » Related to the decline in school bullying, there are also fewer reports of fighting and weapons-related threats and injuries, both on and off school property.

The following areas show signs of progress in recent surveys:

- » Slightly fewer youth are using electronic cigarettes, but with data collected only in the two most recent surveys, it is too early to tell whether this decline is the beginning of a downward trend.
- » Marijuana use has continued to decline since 2010, along with declines in driving after using marijuana. While a majority of youth report that marijuana is easy to get, there does not appear to be a rise associated with the 2009 decriminalization, 2012 legalization of medical marijuana use, and the dialogue around the 2016 legalization of marijuana use for adults 21 and over in Massachusetts. The next survey will give an indication of how marijuana use among youth may be impacted once retail marijuana outlets open in the state.
- » Fewer youth are misusing prescription drugs in recent surveys. While concerns about the opioid epidemic are high, very few MetroWest youth report misusing prescription opioids.
- » Cyberbullying has declined over the last two surveys, though levels are still higher than when the MWAHS began. Despite cyberbullying prevention efforts that are often part of larger bullying prevention programs, there has not been the same progress in this area that has been achieved for school bullying.
- » Fewer youth are at risk of injury due to distracted driving that involves texting or emailing. Despite the pervasive use of smartphones among youth, some teen drivers are taking care to protect themselves and their passengers from the dangers of driving and texting.

» Youth in MetroWest are less sexually active. While this represents substantial progress, more than a third of youth are still not using condoms to protect themselves against pregnancy and sexually transmitted diseases.

The area of adolescent mental health continues to demand attention:

» Reports of stress among youth continue to climb, particularly among girls, with school-related stress being the most common cause of stress among MetroWest region high school youth. Despite this rise in stress, the 2016 survey data suggests slight improvements in depressive symptoms and self-injury, though it is too early to know if these trends will continue. In addition, there has not been any recent change in suicidal thoughts and behaviors. The contributors to adolescent mental health are multiple and complex, but there have been many positive efforts in communities across the region including: implementation of screening and prevention programming in schools, coordination of school and community mental health programs and services, and transition programs to support students returning from treatment to re-enter the school environment. Many such local efforts have been supported by the MetroWest Health Foundation's adolescent mental health grant program.

The 6th administration of the MWAHS shows substantial and meaningful progress in reducing harm among adolescents, particularly in the areas of substance use and related consequences, as well as school bullying. While many youth continue to report behaviors that may endanger their physical and emotional health, the MWAHS helps to ensure that efforts to address these risks are driven by local data, targeted to each communities' needs, and supported by regional prevention initiatives.

References

¹ Massachusetts Department of Elementary and Secondary Education and Massachusetts Department of Public Health (2016). Health and Risk Behaviors of Massachusetts Youth 2015. Available at:

http://www.mass.gov/eohhs/docs/dph/behavioral-risk/youth-health-risk-report-2015.pdf. Accessed March 10, 2017.

² Centers for Disease Control and Prevention. 2015 Youth Risk Behavior Survey. Available at:

https://nccd.cdc.gov/youthonline/App/Default.aspx. Accessed March 10, 2017.

High School Key Indicators

2006–2016 Trends 2016 Gender Patterns 2016 Grade Patterns

MetroWest Region High School Students (Grades 9-12) 2006-2016 Trends in Key Indicators

MetroWest Adolescent Health Survey

	Year of Survey (%)						
	2006	2008	2010	2012	2014	2016	
	(16,680)	(20,406)	(23,187)	(24,459)	(24,355)	(24,385)	
SUBSTANCE USE					Real Providence		
Lifetime cigarette smoking	35.3	33.3	25.9	22.0	17.3	13.2	
Current cigarette smoking (past 30 days)	14.7	13.9	12.1	9.1	6.2	4.7	
Lifetime alcohol use	66.5	62.8	58.0	55.6	53.8	51.7	
Current alcohol use (past 30 days)	42.2	39.1	34.7	33.4	32.9	31.5	
Binge drinking (past 30 days)*	25.1	23.2	20.8	18.7	17.5	16.9	
Rode with driver who had been drinking (past 30 days)	25.2	25.8	22.5	19.5	16.7	14.1	
Lifetime marijuana use	33.2	33.4	34.6	32.3	30.4	27.8	
Current marijuana use (past 30 days)	20.2	22.8	23.5	21.5	20.3	19.2	
Lifetime prescription drug misuse [†]	11.0	10.1	10.1	8.8	7.3	5.8	
VIOLENCE							
Physical fighting (past 12 months)	26.0	23.9	21.7	16.8	14.1	13.6	
Physical fighting on school property (past 12 months)	8.7	8.3	7.4	5.5	4.2	3.9	
Carried a weapon (past 30 days)	8.2	7.3	7.3	6.8	6.6	7.6	
Carried a weapon on school property (past 30 days)	3.3	3.1	3.0	2.5	2.0	1.9	
BULLYING VICTIMIZATION							
Bullying victim (past 12 months)	28.6	29.3	31.8	27.0	23.7	20.8	
Bullying victim on school property (past 12 months)	25.5	25.9	28.2	22.9	20.0	17.1	
Cyberbullying victim (past 12 months)	14.6	15.8	20.0	21.5	21.2	19.3	
MENTAL HEALTH							
Life "very" stressful (past 30 days)	27.9	27.9	28.3	28.9	34.9	35.8	
Depressive symptoms (past 12 months)	20.1	20.3	19.1	19.7	22.0	18.1	
Self-injury (past 12 months)	13.2	13.2	14.0	15.6	15.2	12.9	
Considered suicide (past 12 months)	10.0	10.5	11.6	13.0	12.9	12.3	
Attempted suicide (past 12 months)	4.1	4.1	4.0	4.7	4.5	4.0	
SEXUAL BEHAVIOR							
Lifetime sexual intercourse	28.9	29.4	28.3	26.6	24.3	21.9	
Currently sexually active (past 3 months)	22.3	22.9	21.8	20.7	19.1	17.3	
Condom use at last intercourse (among sexually							
active youth)	66.6	65.0	63.2	66.3	65.1	62.2	
PHYSICAL ACTIVITY AND BODY WEIGHT	AL PROPERTY	小市市					
Exercised for ≥60 minutes on 5 or more days/week	33.7	33.2	45.3	48.8	47.3	50.6	
Overweight or obese [‡]	19.9	19.3	19.3	19.2	20.3	21.0	

* From 2006 to 2014, binge drinking was defined as 5 or more drinks in a row on one or more occasion for all students. In 2016, binge drinking was defined as 4 or more drinks in a row for females and 5 or more drinks in a row for males.

+ Without a doctor's prescription

 \pm Students who were \geq 85th percentile for body mass index by age and gender, based on reference data

MetroWest Region High School Students (Grades 9-12) 2016 Gender Patterns for Key Indicators

MetroWest Adolescent Health Survey

	Gender (%)		Total (%)	
-	Female	Male		
	(12,154)	(11,958)	(24,385)	
SUBSTANCE USE				
Lifetime cigarette smoking	10.8	15.5	13.2	
Current cigarette smoking (past 30 days)	3.1	6.1	4.7	
Lifetime alcohol use	53.3	50.0	51.7	
Current alcohol use (past 30 days)	33.2	29.6	31.5	
Binge drinking (past 30 days)*	17.0	16.7	16.9	
Rode with driver who had been drinking (past 30 days)	14.1	13.9	14.1	
Lifetime marijuana use	26.2	29.2	27.8	
Current marijuana use (past 30 days)	17.1	21.2	19.2	
Lifetime prescription drug misuse [†]	4.9	6.6	5.8	
VIOLENCE				
Physical fighting (past 12 months)	7.1	20.0	13.6	
Physical fighting on school property (past 12 months)	1.6	6.1	3.9	
Carried a weapon (past 30 days)	3.2	11.8	7.6	
Carried a weapon on school property (past 30 days)	0.9	2.8	1.9	
BULLYING VICTIMIZATION				
Bullying victim (past 12 months)	24.7	16.6	20.8	
Bullying victim on school property (past 12 months)	19.3	14.6	17.1	
Cyberbullying victim (past 12 months)	24.0	14.3	19.3	
MENTAL HEALTH				
Life "very" stressful (past 30 days)	49.4	21.6	35.8	
Depressive symptoms (past 12 months)	24.1	11.5	18.1	
Self-injury (past 12 months)	18.3	7.1	12.9	
Considered suicide (past 12 months)	15.1	9.0	12.3	
Attempted suicide (past 12 months)	4.7	3.1	4.0	
SEXUAL BEHAVIOR				
Lifetime sexual intercourse	20.4	23.2	21.9	
Currently sexually active (past 3 months)	16.5	17.9	17.3	
Condom use at last intercourse (among sexually active youth)	60.4	64.4	62.2	
PHYSICAL ACTIVITY AND BODY WEIGHT				
Exercised for ≥60 minutes on 5 or more days/week	42.6	59.2	50.6	
Overweight or obese [‡]	18.0	24.3	21.0	

* From 2006 to 2014, binge drinking was defined as 5 or more drinks in a row on one or more occasion for all students.

In 2016, binge drinking was defined as 4 or more drinks in a row for females and 5 or more drinks in a row for males.

+ Without a doctor's prescription

‡ Students who were ≥85th percentile for body mass index by age and gender, based on reference data

MetroWest Region High School Students (Grades 9-12) 2016 Grade Patterns for Key Indicators

MetroWest Adolescent Health Survey

	Grade (%)				Total (%)	
	9 th 10 th		11 th	12 th		
	(6,491)	(6,198)	(6,145)	(5,383)	(24,385)	
SUBSTANCE USE						
Lifetime cigarette smoking	7.0	9.8	16.0	21.0	13.2	
Current cigarette smoking (past 30 days)	2.1	3.5	5.8	7.5	4.7	
Lifetime alcohol use	32.8	47.5	60.5	69.3	51.7	
Current alcohol use (past 30 days)	14.3	28.4	38.2	48.0	31.5	
Binge drinking (past 30 days)*	5.1	13.9	21.6	29.2	16.9	
Rode with driver who had been drinking (past 30 days)	12.5	13.6	14.8	15.4	14.1	
Lifetime marijuana use	10.6	21.6	36.2	45.9	27.8	
Current marijuana use (past 30 days)	6.7	15.2	26.0	30.9	19.2	
Lifetime prescription drug misuse [†]	2.7	3.9	7.6	9.6	5.8	
/IOLENCE						
Physical fighting (past 12 months)	16.2	14.2	12.0	11.2	13.6	
Physical fighting on school property (past 12 months)	4.7	3.8	3.3	3.4	3.9	
Carried a weapon (past 30 days)	6.9	7.7	7.6	7.8	7.6	
Carried a weapon on school property (past 30 days)	1.0	1.7	2.4	2.5	1.9	
BULLYING VICTIMIZATION					S. A. S. S. S.	
Bullying victim (past 12 months)	24.5	21.0	19.6	17.1	20.8	
Bullying victim on school property (past 12 months)	20.7	17.6	15.6	13.7	17.1	
Cyberbullying victim (past 12 months)	22.8	19.6	18.0	15.8	19.3	
MENTAL HEALTH		P. C. LON				
Life "very" stressful (past 30 days)	25.0	32.6	39.7	47.9	35.8	
Depressive symptoms (past 12 months)	15.8	18.2	19.4	19.2	18.1	
Self-injury (past 12 months)	13.0	13.6	12.2	12.7	12.9	
Considered suicide (past 12 months)	11.5	12.6	12.5	12.5	12.3	
Attempted suicide (past 12 months)	4.2	4.1	3.7	3.8	4.0	
SEXUAL BEHAVIOR						
Lifetime sexual intercourse	7.6	14.0	27.6	41.5	21.9	
Currently sexually active (past 3 months)	5.6	10.8	22.5	32.8	17.3	
Condom use at last intercourse (among sexually active youth)	65.3	63.6	64.3	59.5	62.2	
PHYSICAL ACTIVITY AND BODY WEIGHT		States &				
Exercised for ≥60 minutes on 5 or more days/week	57.2	53.1	47.4	43.7	50.6	
Overweight or obese [‡]	20.8	21.5	20.2	21.5	21.0	

* From 2006 to 2014, binge drinking was defined as 5 or more drinks in a row on one or more occasion for all students.

In 2016, binge drinking was defined as 4 or more drinks in a row for females and 5 or more drinks in a row for males.

+ Without a doctor's prescription

‡ Students who were ≥85th percentile for body mass index by age and gender, based on reference data

This report was prepared by Education Development Center, Inc. (EDC) in Waltham, MA.

For technical assistance in interpreting and utilizing the MWAHS data, please contact: Shari Kessel Schneider, MSPH, MetroWest Adolescent Health Survey Project Director 617-969-7100 or <u>MetroWestSurvey@edc.org</u>

For information about EDC, visit our website at www.edc.org.

Food Service Update

A Food Service Committee has been formed to review the findings of the Food Service Consultant, who was hired last fiscal year to review our operation.

The first meeting will be held on Tuesday, November 2nd.

The Committee consists of the following members:

Dr. Marco Rodrigues Patty Lange Kelly Sardella Jason Webster

Lee Waingortin

April Lasky

Barbara Keefe

Pat Luoto

Carrie Walsh

Jen Downin.

Transportation Update

In September, 2017, Hudson Public Schools joined with Marlborough Public Schools to do a joint transportation bid for the period FY18 through FY22. Both Marlborough and Hudson had existing contract options to extend for fiscal year 2018. This meant that if the bid prices were more favorable than the contract extensions prices in effect, both Hudson and Marlborough could choose to enter into a new five-year contract with the lowest bidder.

The result of the bid was that the prices came in significantly higher than the current contract options in effect. For large busses, the contract price is \$314.12 per bus per day in our current contract and the low bid submitted in September, for FY19 is \$355.00, a 13% increase.

Both Hudson Public Schools and Marlborough Public Schools will be exercising the current contract extensions with NRT. NRT Inc., was the only bidder. We now have the benefit of testing the market and have information for the FY20 budget year, that bussing prices will be increasing significantly.