This study addressed the incidence of drug use by freshmen at Siuslaw High School in Florence, Oregon, and sought their opinions about effective drug and alcohol prevention programs. The purpose was to provide basic data which would ultimately assist in specific drug and alcohol programs for this population.

In phase one, 83 students from four of seven freshmen Health Education randomly selected classes were given the Washington State Survey of Adolescent Health Behavior. This survey consisted of 81 questions about student demographics, students' drug use, and their opinions of drug prevention programs. During phase two, the students were asked open-ended questions about their suggestions for more effective drug prevention programs and curriculum.

The survey revealed an average amount of drug use and that the students did not think the drug prevention program
at Siuslaw was working. The survey also revealed that teenagers are influenced to drink and use drugs by the media, their friends, and by a lack of activities offered by the community.

The study conclusions showed that Florence does have teenage drug use and the community should consider a variety of approaches. Data suggest that more youth support groups, more affordable counseling, and more recreational activities may help reduce drug use. The school needs to develop a more comprehensive drug prevention curriculum and implement it at the younger grade levels. The school combined with the community, should offer more drug-free alternatives and target those youths who are not using drugs and promote their positive behavior.
DRUG AND ALCOHOL USE BY FRESHMEN AT SIUSLAW HIGH SCHOOL AND THEIR OPINIONS REGARDING POTENTIALLY EFFECTIVE DRUG AND ALCOHOL EDUCATION PROGRAMS

by

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A THESIS submitted to Oregon State University

in partial fulfillment of the requirements for the degree of Master of Science

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I understand that my thesis will become part of the permanent collection of Oregon State University libraries. My signature below authorizes release of my thesis to any reader upon request.
ACKNOWLEDGEMENTS

There are many people who have made this project a success: my parents, my best friend, my students, and my advisor. I would like to thank my major professor, Margaret Smith, for her reflections and suggestions.

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CHAPTER I

INTRODUCTION

Student drug use and the effectiveness of existing drug prevention programs and secondary school curriculums, are concerns to many associated with secondary schools. Although the research seems to be limited in effectively promoting these programs, they are very popular. According to Green (1989), these programs are effective in transmitting knowledge, but not in changing attitudes and behaviors which cause drug use and abuse. "One of the primary goals of drug prevention programs is to disseminate information about drug abuse to the students." Although they have been fairly receptive to the information, students still have not changed their patterns of use. In fact, if a program is not comprehensive, it usually does not work (Linney and Wandersman, 1991). Changing attitudes and building self-esteem are difficult because teachers cannot or do not devote enough time to them due to other curriculum requirements. Therefore, many of these programs are short-lived, because students and teachers initially excited about these programs lose enthusiasm.

With the growing popularity of prevention programs and the problem of rising drug abuse among young people, researchers and educators are searching for the most effective types of programs. Additionally, they are searching for better ways to evaluate their effectiveness.
School districts do not want to waste time, money, and energy on programs which will not reflect the intended results. While some studies reflect positive results, others point toward increased drug use after programs are implemented. Many programs which were designed to warn young people away from drugs have failed to accomplish their purpose, and have caused adolescents to rebel and use more drugs. For example, the National Drug Policy throughout the 1960's contributed to the rise of drug use by young people (Albeit, C., and Rolleston, H., 1990).

Prevention programs can work if they are approached in a comprehensive manner that includes parents, teachers, administrators, students, communities, and other resources (Linney and Wandersman, 1991). Although it would be ideal to think educators could eliminate all students' drug use, a more realistic approach seems to be to promote drug-free alternatives designed to lower students' drug use. Although some programs are in need of more thorough research, implementing one is more effective than doing nothing at all (Braucht, 1984). According to the Alcohol and Drug Abuse Programs office in Salem, Oregon, the longer young people wait to try drugs, the less chance they have of using them, especially on a regular basis. "The key is to focus on the students who are not using and promote their behavior" (Kushner, 1994). To promote this behavior,
the community could get involved by offering drug-free alternative activities for young people.

THE PROBLEM

In this section the problem, purpose of the study, limitations, research questions, and terms appropriate to the study will be set forward. All are specific to one Oregon high school, Siuslaw High School in Florence.

Purpose of the Study

The most important purpose of this study, was to gather research based information to present to administrators and school board members of Siuslaw School District, to make curriculum decisions regarding drugs and alcohol. A second purpose was to ascertain students' opinions regarding the current drug prevention programs at Siuslaw High School. The students were also asked during Phase II, to provide suggestions concerning ways to improve their drug prevention curriculum and drug prevention program. This was done so the students could feel some ownership of the drug prevention program. Hopefully, with their suggestions and input, they will listen and learn; so ultimately the program will be more successful.

Drug prevention programs have been offered in schools for many years. Evaluators (Galano & Nezlak) of these programs are discovering that many of them are not
effectively meeting the designed objective, which is to lower drug use among adolescents. In fact, they are discovering some changes need to be made to make the programs valuable. As Hansen (1989) suggests, some teachers, schools, and administrators do not necessarily want to take the time, energy, and money to make this commitment.

Statement of the Problem

The central problem of the study was that at Siuslaw High School the level of drug use and student opinion about drug prevention programs, were unknown. Since no specific commercial drug prevention curriculum exists, basic survey data and opinions from students are extremely important to gather. The purpose of this study was to assess the degree of drug use by the Siuslaw High School students, to gather students' opinions of the prevention instruction, and an ultimate goal eventually would be to reduce the incidence of drug usage among adolescents at Siuslaw High School in Florence, Oregon.

Research Questions

1. What is the current level of drug use by freshmen at Siuslaw High School?
2. What are the opinions of the students regarding current drug prevention instruction and programs?

3. From the data gathered, can suggestions be made concerning curriculum and programs needed to reduce drug use?

Limitations of the Study

The limitations of the study are several: a) Willingness of parents to allow their child to participate in the survey, b) Student answering all the questions on the survey (preventing missing data), c) honesty of student responses, due to self-reporting. A delimitation was to keep the size of the sample manageable and applicable to the study.

Definition of Terms

For the purpose of this study, the following terms were used and were defined as:

**Drug Abuse:** To use drugs in an illegal way; as defined by the law, this means under 18 for tobacco and under 21 for alcohol; and/or using drugs to the extreme.

**Drug Education:** Curriculum designed to prevent drug use.

**Drug Use:** The act of consuming legal or illegal drugs.
Gateway Drugs: Using alcohol, tobacco, and marijuana; drugs causing a person to want to access harder drugs, such as cocaine, methamphetamines, and crack. The use of gateway drugs becomes boring and the person wants more of a high.

Opinion: A view held by a person; judgment.

Prevention: To keep or hinder from happening.

Prevention Curriculum: Educational materials in the program.

Prevention Program: A program to keep students from using drugs.
CHAPTER II

REVIEW OF THE LITERATURE

The review of literature examined drug prevention programs in a general manner and provided specific examples of programs currently in use. The review also examined the frequency of teen drug use and opinions of students about drug prevention curriculum and programs.

Drugs represent a significant problem in schools and society. The majority of drug and alcohol research suggests that mass media, education, and school-based programs are possible answers to the problem. However, some of these programs encouraged use, because they reduced fear and encouraged young people to want to try drugs. Even some parents believe that the more students know about drugs, the more they may want to use drugs. If it feels good, do it, may be the attitude. Schlaadt (1990) suggests that it is the schools' responsibility to educate youth about drugs. However, he says, "...properly designed drug programs are cost-effective, but if they are poorly designed, they can actually increase student drug use."

According to the office of Alcohol and Drug Abuse Programs, a recent survey paints a discouraging picture of drug use among Oregon teens. According to this survey, on the eleventh grade level, lifetime use of drugs in general has declined, but among eighth graders it has increased.
Compared to national surveys, Oregon teens use drugs at higher frequencies, and at earlier ages. Daily use of cocaine, LSD, and cigarettes have increased for Oregon youth. For many drugs, eighth graders are using at a higher rate than eleventh graders (Dept. of Education, 1988).

**Prevention Programs**

It is not possible to make generalized statements about the impact of drug prevention programs because these programs differ in so many ways, and because many have never been evaluated. Some common problems identified in current studies include a lack of pre-test and post-test evaluations, small numbers of programs conforming to acceptable research designs, lack of comparison groups, and poor sampling. Therefore, some researchers, including Goodstadt (1986), state that, "...it is difficult to make valid conclusions." In spite of all the negatives, other researchers support these programs as long as they are carefully planned, executed, and evaluated (Green & Kelley, 1989). Perhaps then the problem may lie in the process of evaluation and not the program itself.

Prevention programs usually don't work as well when there is a history of family drug abuse, when they are based on a single level of influence, when they are used to only increase knowledge but not behavior, and when they try
School prevention programs and curriculum may hold some promise, but assessment has been limited and a program must be comprehensive to work (MacKinnon, Weber, and Pentz, 1988).

Green and Kelley (1989), agreed that many prevention tools used today do not work, including laws, prohibition, scare tactics, increasing drug fines, classifying drugs, fighting drug wars nationally, and trying to eliminate all illegal drugs. Green suggested society should attack the drug problem locally and in small pieces instead of taking more than it can handle. Other researchers have followed this same line of thinking.

Through research regarding drug prevention programs, Goodstadt (1986) stated that "...changes need to be made, no matter how large or small, because incentives for not using drugs compete with incentives to use them. More efforts need to be invested to ensure successful progression after the programs have been implemented." This problem exists because it takes time, training, and commitment, which the program directors or teachers may not have. The literature also focused on follow-through as a key tool to success.

Goodstadt (1989) believed that, "...any delay in the onset of drug use reduces the probability of such use and the likelihood that abuse will lead to problems. Choosing
an alternative set of behaviors is the positive approach." The researchers indicate pessimism is growing that drug education and prevention programs do not work. Therefore, adults must also be held responsible to be role models and impose drug-free attitudes on themselves first and then on young people. Studies show because adults are the decision makers in programs, they must be the ones who guide the youth in positive non-drug and alcohol directions (Green & Kelley, 1989).

According to the United States Department of Education and the United States Department of Health Services, a number of problems exist in program design and development. These include inadequate use of theory, failure to consider differences in causes of use of different substances (not all drugs are the same), failure to consider individual differences in program development (people think one size fits all), failure to reach high-risk environments, programs too short or narrow in focus, weak implementation, lack of training, weak assessments, and either judging too soon or not at all (Linney & Wandersman, 1991).

Drug Use Prevention

Other drug and alcohol specialists believe that society should get away from saying drugs are bad and change its focus. Society should make home life more attractive, turn off the media when it emphasizes 'Just Say
No', and help youth with comprehensive programs if they start using drugs (Brook, 1987). These three ideas could decrease young people's rebellious attitudes and reduce the potential to act on their aggressive use of drugs and alcohol. Other solutions, according to authors such as Brook (1987), Jewett (1991), and Lorion (1991), include switchboards, hotlines, rap centers, crash pads, crisis intervention centers, free clinics, and comprehensive drug centers. Many solutions are always being tested.

Youth drug use is strongly influenced by peers, and they must be given an opportunity to be associated with a group that meets their needs. Although sometimes it is difficult to assess the potential effectiveness of drug prevention, it has been found that peer leaders have been very helpful in delaying drug use among group members (Benard, 1990).

Austin (1987) found there were many social influences on drug use prevention. Austin suggested that the majority of young people who were involved in drug-free groups were already drug free themselves. He believes that investigators should not target these youth in their studies. Rather, "Schools should pay more attention to the problem users and reduce behavior problems to decrease use" (Austin, 1987). Other researchers believe there has been a positive relationship between drug-free groups, prevention
programs, and prevention curriculum in terms of lower drug usage (Benard, 1990).

The way to reduce demand for drugs, according to Schlaadt (1990), is to use prevention techniques in schools and communities. "There is federally sponsored drug-free money available to schools that is not being taken advantage of. A large number of creative preventive programs have been started and appear to be extremely effective. The initial findings show these programs are reducing drug use in Maine, California, Oregon, Texas, and Washington. Some of these programs include drug preventions and specifically drug-free groups." Some areas are currently using programs that have been successful.

Specific Programs

Efforts in Battle Creek, Michigan, have been far-reaching in reducing substance abuse. According to Williams and Kubik (1990), changes in student drug use have been questionable, although somewhat encouraging. "Although alcohol and crack use increased, marijuana and cigarette smoking declined by 17 percent. This was both troublesome and significant, because the school had four substance abuse groups and they were hoping to find more inspiring statistics. The findings showed change is slow and schools should not get discouraged because other pre-
vention educators will also give up" (Williams & Kubik, 1990).

Lavik (1986) described a Norwegian project where 15 and 16 year olds were assigned to a control group of one of three programs involving facts, prevention, and values clarification. Results showed more than 80 percent of the subjects felt these programs could help the non-users stay away from drugs.

In a separate study, a survey of high school students in 1989-1990 in the Austin, Texas Independent School District revealed that many students were aware of drugs and alcohol use, and most believed the school was doing a good job of beating the problem. The reduction was not due to just one factor, but the drop was probably attributed in part to drug interventions (Smyer & Wilkinson, 1990). Most prevention programs have common characteristics that are successful (Linney & Wandersman, 1991).

Goals of other prevention programs include: raising awareness levels of students, parents, and community; increasing knowledge of teachers, students, and parents; changing norms and expectations about alcohol and other drug use; and enhancing parenting and positive family influence (Linney & Wandersman, 1991).
Recommendations

Recommendations made by the U.S. Department of Health include: broad-based community programs, consistently enforcing school discipline and drug policies, parent involvement, making drug curriculum age appropriate, and identifying long-term and short-term goals. These recommendations identify clear results, have criteria for success, and have measurable objectives (Linney & Wandersman, 1991).

According to the Office of Alcohol and Drug Abuse Programs in Salem, Oregon, as of July 1994, prevention of substance abuse in the 90's has never received more attention than now, but prevention strategies are weak. The knowledge is available, but putting this knowledge together into a successful program and providing a global approach, is the challenge. The students' survey also gave these same types of suggestions which seem to coincide with the researchers' and with the state's findings. The researchers also suggested a balanced program designed to reduce the demand for illegal drugs and the abuse of alcohol and other legal drugs.

Suggestions

1. Traditional drug and alcohol education programs, including information about drugs and advertising.
2. Coping skills education. Improved social skills can help students learn to say "no" and stand up for what they believe.

3. Parenting education. If any program is going to be successful, the parents must support it.

4. School improvements. The teachers could use management styles designed to not alienate students, which causes some of them to use drugs.

5. Support systems. In the school and community, there needs to be a place for students to go for help.

6. Policies and enforcement. Schools and local police need to establish clear policies and enforce them consistently.

7. Community improvements and alternatives. The community needs to offer drug-free alternatives and get youth actively involved in community activities.

8. Prevention leadership. Schools, organizations, community, churches, agencies, and local government must be involved to make programs like these successful (Kushner, Oregon Department of Human Resources, Office of Alcohol and Drug Abuse Programs).

In terms of tobacco, Seiber and Austin (1994) state that "American youth continue to drink and smoke in alarm-
ing numbers." Their report summarizes the latest findings, and suggests that despite growing anti-smoking campaigns, and widespread prevention education, smoking declined in the 1980's but has now leveled off. This may suggest that "teens are resistant to a 'no-use' message." As for alcohol use, Austin and Seiber (1994) indicate that some data suggests teens are drinking in moderation but alcohol still is the most popular drug among teenagers. Both authors stressed the importance of prevention education in adolescence because most adults who smoke and drink started in their teenage years. Austin also says, "alcohol has been the least consistently affected by prevention education due to alcohol being the most popular substance."

According to much of the current drug and alcohol literature, research shows that mass media, education, and school-based prevention programs are some solutions to the adolescent drug and alcohol problem. But one of the biggest problems with school-based prevention programs is that many have never been evaluated, so it is difficult to arrive at valid conclusions. Some researchers indicate that if the programs were evaluated correctly, the school would see a decrease in use (Green & Kelley, 1989). This approach clearly indicates that the problem lies in the lack of evaluation or in the evaluation tools.

One important fact remains true; the program must be comprehensive to be effective. Over and over again, the
literature suggests that the community is the missing piece of the puzzle. The community needs to be involved (Hansen, 1989). The research also seems to agree that any delay in the onset of drug use reduces the probability that the person will become a habitual or problem user (Kushner, 1994).

Most schools are developing drug-free groups or using peer resistance counselors to talk to other students and get them involved in drug-free activities. Within these groups, the students are learning coping skills and learning how to have fun being drug free. To make the drug prevention programs work will take a great effort from everyone involved; not just those who are in drug-free groups. Individuals on the outside need to help with financial and emotional support.

This chapter briefly describes problems related to drug abuse and provides some information concerning drug and alcohol use among Oregon youth. It also describes several drug prevention programs on the national and state level. Suggestions are offered for program components which should be included in programs to increase their likelihood of success.
CHAPTER III

METHODS AND PROCEDURES

This chapter addresses the process used for the population, the specific research questions, the selection of subjects, the instrument utilized for data collection techniques, and the process utilized in the treatment of data.

Population and Study Subjects

Students of Siuslaw High School are generally middle class; their clothes and attitudes are similar to other Oregon teenagers, but they are somewhat isolated on the coast. In these ways, they reflect typical youth of our society today.

There are 150 freshmen students at Siuslaw High School. All freshman take one of seven Health Education classes. Four of seven intact freshman health education classes (classroom groups) were randomly selected for study inclusion. Students within these groups who were not freshmen were excluded.

Selection of Study Subjects

Male and female subjects from four selected health education classes were involved in this study. The investigator solicited study participation from all
potential subjects in these classes. A postcard was mailed to each potential subject's parent explaining the purpose and nature of the study. The postcard provided the parent an opportunity to permit his/her child to participate or not participate in the study.

A second mailing was made to the 45 non-respondent parents two weeks after the first mailing. Additionally, the investigator used a telephone follow-up to encourage "non-participating" parents. There were 23 parents who did not respond or declined involvement. During the phone conversation, the investigator informed the parents that the results of the study would be reported in a statistical manner and that all information was completely confidential. Anonymity was guaranteed. There were 83 total subjects, and seven subjects did not complete the survey.

Instrument

The Phase I instrument used was the Washington State Survey of Adolescent Health Behaviors. This 1992 health survey was created in order to collect information about a variety of teenage health behaviors among students in Washington state. Combining the two following surveys, reduced the number of surveys to be developed, and used in high schools to collect this type of information. It comprises items from these surveys: The Northwest Regional Educational Laboratory's (NWREL), Student Tobacco, Alcohol,
and other Drug Use Survey (TAOD), sponsored by the Office of the Superintendent of Public Instruction (OSPI), and the National Centers for Disease Control's Youth Risk Behavior Survey (YRBS), sponsored by the Washington State Department of Health (DOH) and OSPI. They originally developed these surveys to determine the need for school and community-based prevention and intervention programs.

These surveys include questions on student use of various substances, demographics, risk factors predicting future use, perceived harmfulness of certain drugs, perceived parental attitudes toward use, estimates of friends' use, perceived effects of media advertising, and questions concerning alcohol and other drug education. Two versions of the survey were created, one for elementary students and one for junior high and high school students.

The TAOD survey was used in 1988, 1990, and 1992 with over 144 public schools participating in the 1992 survey. The YRBS survey was administered in 1991, but many schools declined to participate in the survey.

The internal consistency of answers to related questions provides evidence of the validity of the survey responses. For example, responses to several questions concerning drinking were compared and a little more than one percent of the subjects were found to be inconsistent with their responses. The "never drink" questions would be followed with "never drink" on the quantity questions.
National studies of substance abuse also cite evidence about the validity of these survey responses. Subjects have been very reliable in their responses over a three-year period on this survey. The observed trends and patterns of use have been consistent over time after nine years of research, as long as the survey was properly administered (Washington State Survey, 1988).

The Phase II instrument (See Appendix D) consisted of open-ended questions which are listed as part of the research questions in Chapter I. These questions surveyed students' opinions about the current drug prevention curriculum and programs, and asked for the students' suggestions regarding more effective types of curriculum and programs. The other questions addressed what they would do to reduce drug and alcohol use by teenagers at Siuslaw High School and what teachers could do to help educate youth about the dangers of drug and alcohol use.

Data Collection

The design used in this study was a survey given before the drug prevention curriculum was introduced and a second-phase opinion question was asked after the curriculum was taught. The curriculum was teacher developed and not a specific commercial program. The survey was given in February and the follow-up in March,
1995. Each survey asked the student's age and sex, but not name, so complete confidentiality was insured.

The 83 subjects who participated in the Siuslaw High School study completed the standard questionnaire for high school students, comprised of 81 questions. A scantron sheet was used to ensure the survey was completely confidential and to help with the tabulation process. The instrument included background data, descriptive questions, and measured opinions, as stated above.

A follow-up was done for those students who were absent or unable to complete the survey during the initial testing period. The students were personally thanked for their involvement, and it was indicated that a copy of the results would be shared with the class as soon as they were available. The results were also sent to the parents of the participants, if they requested them.

Treatment of the Data

For Phase I, the data was collected, the results were tabulated, coded and presented in figure form. Utilization of figures to present the data was felt to be a useful format for parents and school personnel who were expected to review study results. Results of the initial survey also provided the investigator with ideas of how to classify the data.
During Phase II the investigator used the data to answer the second two research questions, which were also presented in the figures and are in Chapter IV. The second two research questions were open-ended to allow students to express their opinions and suggestions to improve the drug and alcohol curriculum and programs at Siuslaw High School.

This chapter has described the population, study subjects, how the subjects were selected, Phase I and Phase II instrument, data collection, and lastly the treatment of the data.
CHAPTER IV

ANALYSIS AND INTERPRETATION OF DATA

This chapter reports on the demographics of the subjects, their drug use as ascertained from the survey and their opinions and suggestions to improve the drug and alcohol curriculum at Siuslaw High School.

Study subjects consisting of students in four of seven randomly selected freshman health classes. This selection procedure was used to ensure that the results would be representative of the student population at Siuslaw High School. However, some of the students declined to answer certain questions, which made some of the analysis more difficult. Seven of the 90 subjects (8%) did not complete their surveys. They were eliminated from the study. It is reasonable to assume that the data collected was representative of the student population, but one should always remember to exercise caution when making generalizations from a sample to a population.

The data presented from the opinion survey will be presented in a format consistent with the Washington State Health Behaviors Survey Manual. The categories include: demographics, prevalence of use, regular use, substance abuse, factors related to use, drug education, and media advertising.
Demographics

The survey included 83 freshmen, 46 females and 37 males at Siuslaw High School, in Florence, Oregon. Out of the 80 responses to Question #2 concerning ethnicity, 67 (84%) were white, 5 (6%) were American Indian, 4 (5%) hispanic, 3 (4%) Asian, and 1 (1%) black. The age of the subjects ranged from 14-18, 57 (71%); age 14-15, 21 (26%); and 2 (3%) age 18.

Questions 4, 5, 6 and 7 dealt with missing school, grades, and college. Those subjects who never missed school, 7 (9%); hardly ever miss school, 32 (40%); miss 2-3 days, 22 (28%); miss some every month, 16 (20%), and miss some every week, 3 (4%). The majority of subjects received B's, 32 (40%); 22 (28%) received A's; 13 (16%) earned C's, and 13 (16%) earned less than C's. Most of the subjects, 44 (55%) felt grades were very important, and 23 (29%) said it was somewhat important. Others, 13 (16%) said it was not very important. Again, the majority responded they would graduate from a four year college program, 47 (59%).

At the freshmen level, only 16 (20%) work at a part-time job from 1-20 hours. But, 47 (59%) participate in school and non-school activities, and 48 (60%) participate in one or more sports.

Unfortunately, 21 (26%) of the subjects said that they had thought about dropping out of school. Question #13 must have been difficult to understand due to the fact that
only 43 (52%) of the subjects answered it, (concerning changing schools).

The last demographic question, number 14, addressed whether the subjects' parents know where they are. With 59 (74%) responding most of the time and/or always, 10 (12%) said sometimes, and 11 (13%) hardly ever.

**Prevalence of Use**

Lifetime prevalence shows when students begin to experiment with tobacco, alcohol, and other drugs. Figure 1 shows that at least 45% of the students had never even used any type of drug. Alcohol was the first drug of choice, with 55% of the students using, or at least trying it. The students who do drink get alcohol mostly from friends (23%), and their parents, (24%). But, encouragingly, 40 out of 90 do not drink at all. The majority drink to get drunk (24%), consuming five or more drinks at one time. They also were 10 years old or younger when they consumed their first drink. A number of students drank and used drugs at the same time (29%).

The second drug of choice was tobacco, specifically cigarettes, as opposed to chew (Figure 3). Out of 82 respondents, Figure 2 shows 42 subjects that had never tried tobacco, but 40 responded favorably. Interestingly, 16% said they used tobacco daily and 17% said they used it sometimes.
Alcohol, beer, wine, hard liquor

How Often Used: Never = Never used in lifetime
Some = Used at least once
Monthly = Used about once a month
Weekly = Used about once a week
Daily = Used every day

Figure 1. How often subjects used alcohol, beer, wine and hard liquor.
Tobacco (includes cigarettes and cigars)

Figure 2. How often subjects used tobacco.
Figure 3. How often subjects used chew.
The third most popular drug was marijuana. With 81 students responding, 47 said they never have tried it, but 12 used it sometimes, while 13 used marijuana once a month. The remaining 9 students used the drug weekly or daily, as shown in Figure 4.

Regular Use

Regular use is defined as using a substance at least six times in the past year. Lifetime prevalence is sometimes misleading because a student may have tried a drug one time and it appears they are a user, but they may no longer be using the drug. Alcohol again was the number one choice; 48 students said they had not used the drug in the last thirty days, but 35 students responded that they had, in Figure 5.

Cigarettes and marijuana were close in the regular use pattern. The first being 60 (69%) of the students had not used cigarettes in the last 30 days but 31% had, as described in Figure 6. Figure 7 shows that marijuana was not used by 59 (71%) and 29% had used it at least one time, or up to 10 or more times in the last 30 days.

Drinking risk behaviors seemed to be lower than regular use drinking. Questions 48-51 address the amount the subject drinks, the age they consumed their first drink, and how much alcohol the subjects must drink to get
Marijuana

![Bar chart showing the frequency of marijuana use.]

Figure 4. How often subjects used marijuana.
Figure 5. How often in the last thirty days subject used alcohol.
Figure 6. How often in the last thirty days subject used cigarettes
Figure 7. How often in the last thirty days subjects used marijuana
drunk. At least 55% said they don't get drunk, and 36% said they have never had a full drink.

Substance Abuse

Students who indicated daily use of gateway drugs (tobacco, alcohol, and marijuana), are in need of special services immediately. They are already at great risk concerning their health and well-being. This is when schools need to offer some type of intervention program.

The results show 2% of the subjects surveyed using alcohol, 20% using tobacco, and 6% using marijuana daily. Weekly use of all three drugs included 4-5% of students which is considered fairly low, but remember, the population surveyed was freshmen.

Factors Related to Use

Certain factors in questions 43-47, which addressed the amount the subjects' friends used drugs and alcohol (Figure 8), and 54-61, where the subjects answered questions dealing with perceived risk of using. In questions 77-80, the main focus was on advertising and how much it influences young people to drink. There are various reasons young people use drugs and alcohol, such as: peer pressure, exposure to drug use, elements of risk, and access to drugs and alcohol.
Close friends use: cigarettes, alcohol, marijuana once a month or more often

Figure 8. How many subjects' close friends use cigarettes, alcohol, marijuana, once a month or more often.
Peer pressure has been found to be a major factor in using drugs. Although many students, 38 (48%), reported that there were parties without drugs and alcohol, or they didn't party at all (question 18), students indicated a drug/alcohol problem among the students at Siuslaw High School (questions 15, 16 and 17).

Students who participated in extracurricular activities or after school activities were less likely to use drugs or alcohol, compared to those who did not have other activities. Along with this, the students who planned on attending college used less than those who had no future plans for college, questions 7-11, as discussed in the demographics.

A majority of the students (65%) said their parents would greatly disapprove of them using marijuana, or drinking heavily. However, subjects reported that their parents were more lenient when they attended a party where alcohol was served (21%).

Illicit drug use was very low at Siuslaw High School. Steroids, methamphetamines, inhaled substances, and hallucinogens, with 80 students responding, an average of 84% never had used these substances. But 9% reported some use, 2% used monthly, 3% daily use, and 2% used on a weekly basis. This seemed to be encouraging compared to other drug and alcohol use.
Although 83% of the subjects said it would be somewhat easy to get marijuana, in question number 22, and 40% said the same thing about cocaine. In question number 23, cocaine was used by 11%, as shown in Figure 9, which indicates that high school students have little problem with access to illicit drugs.

During Phase II of this project, the subjects were asked what they felt would help youths not use drugs and alcohol. The question was phrased on an open-ended basis and below are some of their responses. Overall, the students emphasized the need for education, prevention programs, peer assistance, and a need for community involvement. Unfortunately, some said there was nothing that could be done about adolescent drug and alcohol use. Lastly, a few subjects verbalized that people shouldn't try so hard to prevent youths from using drugs and alcohol, because they are going to do it anyway.

Drug Education

Schools need to be involved with substance abuse education by enforcing strict policies, and giving student assistance when needed. In question number 81, 19 (26%) of the subjects said that more community activities need to be offered, and 17 (24%) said stricter enforcement of laws were needed for students caught using drugs or alcohol. Eleven percent responded that TV ads promoting these
Figure 9. How often subjects use cocaine.
products should be reduced and eighteen percent suggested that schools offer more programs encouraging students not to use drugs and alcohol (see Figure 16). Unfortunately, 21% said nothing would help.

Phase II survey questioned students about their perceptions of the drug and alcohol education they have received and the help that is available to them (questions 73-76). Regrettably, an average of 30% said they were not sure if the school offered support groups, counselors, or peer assistance, for drug and alcohol related problems.

School was the largest source of drug and alcohol information for 54%, and family the second with 24% (see Figure 10). The most active people in the school trying to reduce drug and alcohol use, according to the survey results (Figure 11), were the principal, vice-principal, counselor, and the school nurse. Unfortunately, 20% said none of these people have been active.

As far as prevention programs (question number 69) presented in Figure 12, subjects surveyed reported D.A.R.E. as the best (39%). It should be noted that study subjects had been exposed to this program in the elementary school. The second ranking here, 35%, indicated that a sizeable number of students believe nothing helps. Peer assistance and education being helpful too, received only 22% of the responses. In the students' opinion, the survey proved drug education and drug use is important to the staff, with
Where have you learned about drugs and alcohol?

Figure 10. Where subjects learned about drugs and alcohol.
In school, who has been the most active in trying to help reduce alcohol and drug use among students?

Figure 11. Who in school has been the most active in trying to reduce drug and alcohol use among students.
Which prevention programs are doing the best job of preventing or helping stop alcohol and drug use in your school?

Figure 12. Which prevention program has done the best job of preventing or stopping drug and alcohol use in your school.
72% of the students saying it is fairly important. This is depicted in Figure 13.

In Phase II, the subjects responded to open-ended questions about their suggestions to improve drug prevention programs and what can be done in the school to reduce drug and alcohol use by teenagers. To reduce drug and alcohol use, the students chose class lectures and suggested bringing people in from the outside to talk about drugs and alcohol (see Figure 14). They felt talking to someone about their problems was important (see Figure 15), but unfortunately, the same percentage responded that nothing really helped.

The students also indicated they were not sure if the school provided a counselor or support groups to talk with about drug and alcohol problems (42%). Maybe the subjects need to be educated concerning what the school does offer and where they can go for assistance with a drug or alcohol related problem.

**Media Advertising**

Media is constantly in our lives. Students spend more hours watching television than they spend in class. In questions 77-80, the subjects answered questions related to media influence. Respondents indicated that they believed alcohol ads were primarily aimed at adults and teenagers (84%). They also said advertising influences people to
How important does prevention and reducing alcohol and other drug use seem to be to teachers and staff at your school?

Figure 13. How important does prevention and reducing alcohol and other drug use seem to be to the staff at school?
What is the most important thing teachers can do in school to reduce drug and alcohol use by teenagers?

73 Total Responded

- NOTHING CAN HELP (21%)
- CLASS LECTURES (21%)
- PEER RESISTENCE (16%)
- LISTEN TO KIDS (23%)
- GUEST LECTURE (19%)

Figure 14. What is the most important thing teachers can do in school to reduce drug and alcohol use by teenagers?
Who do you talk to about drugs and alcohol? (Problems or Concerns)

83 Total Responded

Figure 15. Who subjects talk to about drug and alcohol problems or concerns.
drink (80%). The producers of alcohol make it look very attractive to drink and are obviously drawing the young people's attention. Only 11% of the students suggested reducing or eliminating advertising to reduce drug and alcohol use. Twenty-one percent of the young people said nothing would help reduce the drug and alcohol use among adolescents. Their biggest suggestion was for the community to offer activities to give the young people something else to do besides using alcohol and drugs.

This chapter provided information regarding drug use and opinions from a sample of 90 freshmen at Siuslaw High School. Data was collected via two sources. First, was the Washington State Health Behaviors Survey. Second, was open-ended questions generated from the data collected from the initial survey.

Summary of Research Questions

The current level of drug use among freshmen at Siuslaw High School, as shown in the figures of this chapter, were similar to other high school students in Oregon (Kushner, 1994, Office of Drug and Alcohol Abuse Programs). Overall, the survey results show 43% have never even tried drugs, but this indicates that 57% have at least tried some type of drug. The survey results also indicated that alcohol is the most popular drug among young people; this matches the most popular drug in the nation for
What would you do to reduce the drug, alcohol problem among teenagers?

72 Total Responded

- **NOTHING WILL HELP** (21%)
- **SCHOOL PROGRAMS** (18%)
- **REDUCE ALCOHOL ADS** (11%)
- **COMMUNITY ACTIVITIES** (26%)
- **STIFFER PENALTIES** (24%)

**Figure 16.** What subjects would do to reduce the drug and alcohol problem among teenagers.
teenagers. Tobacco was the second most popular drug, as it is in the nation, too (Austin & Seiber, 1995).

Research question number two focused on students' opinions regarding current drug prevention programs at Siuslaw High School. The results indicate that students learn about drugs and alcohol (Figure 10), mostly at school (54%), but only 24% learn from their family. In Figure 12 the students' responses showed D.A.R.E. was to be viewed as effective (39%), but 35% said no prevention program was effective.

In the pie charts, Figures 14 through 16, the students responded to the third research question. What suggestions did the students have to reduce drug and alcohol use by teens? Their responses ranged from nothing (21%) to getting help from peers (16%), school lectures (21%), and listening to kids (23%). Students also suggested reducing drug and alcohol ads (11%), giving stiffer penalties to kids caught with drugs (24%), offering more community events for teenagers (26%), and offering more school prevention programs (18%). Unfortunately, 21% of respondents said nothing would help reduce drug and alcohol use by teens.
CHAPTER V

SUMMARY, IMPLICATIONS, AND RECOMMENDATIONS

There are many health problems in our society caused by preventable health behaviors. The student population at Siuslaw High School is not much different than other student populations, in that 57% drink, smoke, and use illegal drugs. The literature indicates that many of these behaviors lead to eventual health problems, poor grades, and problems with parents. Therefore planned alcohol and drug interventions, including educational programs are needed to address the use of drugs and alcohol and to potentially reduce the extent to which adolescents engage in risky behaviors, related to drugs and alcohol.

The results of this survey will provide a basis for the development of a school/community based comprehensive health education program specific to Siuslaw High School. The goal would be to assist the community to invest in the education of our young people, and to eventually reduce the incidence of drug and alcohol use among teens. In this chapter, implications and recommendations are addressed in light of the study data.

Drug prevention programs are a very important part of the Health Education curriculum. Discovering the most effective type of prevention program is a goal of many teachers, administrators, researchers, and community
people. Unfortunately, these people may not want to invest the time, money, and effort on a program that has only average results. Research suggests that the only successful programs are those that are taught in a comprehensive manner. These involve: parents, teachers, administrators, students, school boards, communities, and other positive resources.

The goal of a successful drug prevention program would be to reduce adolescent drug use. The realistic approach is to promote those programs which offer drug-free alternatives. At least implementing a program is better than doing nothing, according to researchers and the students surveyed.

There were three main purposes of this study. First, to determine the current drug use by freshmen at Siuslaw High School, second to ascertain students' opinions regarding the drug prevention programs at Siuslaw High School, and lastly, to gather suggestions from the students to improve the drug prevention curriculum and drug prevention programs, and ultimately reduce the incidence of use.

The purposes of the survey were fulfilled by recognizing that students at Siuslaw High School do use drugs. The study subjects also gave valuable suggestions such as having guest speakers, offering peer assistance programs, reducing alcohol and drug ads, giving stiffer penalties to
those teenagers caught using drugs, and most importantly, having the community offer more activities for teens.

Implications

One of the biggest problems with school-based prevention programs is that many have never been evaluated, which makes it difficult to draw valid conclusions. Some researchers said that if the programs were evaluated correctly, the school would see a decrease in drug and alcohol use, so the problem specifically lies in the lack of evaluation or poor evaluation tools. Implementing a program can sometimes be better than not implementing one.

One important fact remains true; the program must be comprehensive to be effective. One of the most common suggestions from the students was to get the community of Florence to offer more teen activities and for them to get involved in youths' lives. The literature states the same important factor. The students suggested more community activities to give the youth something else to do besides use drugs and alcohol. Another suggestion from the second phase of the survey, was the earlier educational programs are offered, the better. The research also agrees that any delay in the onset of drug use reduces the probability that the person will become a habitual or problem user.

Siuslaw High School has since developed a drug-free group that include peer resistance counseling. These
students talk to other students and get them involved in drug-free activities. Within these groups, the students are learning coping skills/decision making skills and learning how to have fun being drug free.

Recommendations

Recommendations for prevention programs, alternatives and suggestions for curriculum development in regard to Siuslaw High School are as follows:

1. Based on data gathered, 57% of freshmen at Siuslaw High School are using drugs. The administration should consider promoting drug free alternatives and promoting a more comprehensive drug prevention curriculum.

2. The data also reports on alternatives to using drugs. The students suggested that the community should consider getting involved and offer more drug-free alternatives, to keep young people sober. They also suggested stiffer penalties be enforced on teens convicted of a drug related offense, and that alcohol and drug advertising should be reduced. Of course, some students reported that nothing can be done to reduce the use of drugs and alcohol (21%), but 79% at least offered solid ideas and suggestions.
3. During Phase I of the survey, and Phase II, the open-ended questions, the results indicated a need for prevention programs in school, and drug-free alternatives to reduce drug and alcohol use. Health Education teachers and administrators should consider developing a program that includes decision making skills, refusal skills, class lectures, guest lectures, peer assistance, and providing someone for young people to talk to about drug and alcohol problems.

4. Try to encourage a group of people in Florence including: administrators, health educators, community members, teachers, students and parents, to review the survey results. After examining the results, the committee could brainstorm ideas for comprehensive drug curriculum to reduce teen drug and alcohol use. Possibly then take those suggestions to the school board, and ultimately implement these board approved curriculum ideas into Health Education courses.

Future Research

1. Start with sixth graders and give them a pre-test on their current drug use and follow them for five years. Then give these same students a post-test
in their sophomore year, to determine their current drug use.

2. Evaluate any "new" drug and alcohol curriculum to determine effectiveness. Compare results with the data collected for this study.

3. Involve the school site-council in creating new curriculum for drug and alcohol education.

4. Require that parts of a drug and alcohol curriculum be taught across the curriculum.

5. Offer drug-free clubs at the junior and high school levels.

This chapter has provided information about current drug use at Siuslaw High School, among the freshmen who participated in this study. It also reviewed students' opinions about the current drug prevention curriculum and how it might be changed to be more effective. The major implications are that the school, community, teachers, and administrators need to work together to reduce the incidence of drug use among young people.

The recommendations and future research suggest the importance of offering a more effective curriculum and studying a group of students in a follow-up study. The follow-up could result in identifying strengths and weaknesses of the new curriculum developed, in light of the data from this study.


APPENDICES
Appendix A

Washington State Survey of Adolescent Health Behaviors
Washington State Survey of Adolescent Health Behaviors

Please take a few minutes to complete this survey. The purpose of this survey is to find out what students in our school know and think about tobacco, alcohol and other drug use and other important health behaviors. Your answers will help us understand the problems and needs of students in this school.

Your participation is voluntary. If there is any question that would upset you or your parents, just leave it blank.

Write the name of your school on the top of the answer sheet where it asks for NAME. Do NOT write your name anywhere on the answer sheet. Your answers will be kept secret.

When you are finished, an envelope will be passed around. Put your answer sheet in the envelope so no one will see your answers.

INSTRUCTIONS:

Make sure that you have a survey booklet, an answer sheet, and a No. 2 pencil. Mark your answers on your answer sheet. Do NOT write in the survey booklet.

Sample Question: 1. Where did you go after school yesterday?
   a. Home
   b. School activity
   c. Work
   d. Class
   e. Other

On your answer sheet you would fill in the circle for the answer which is true for you. For example, if you attended a basketball game after school, you would fill in the circle under “B” as shown below.

```
A B C D E
1   ○   ○   ○   ○   ○
```

Fill in the circle completely. Erase your answer completely if you wish to change it. Use a No. 2 pencil only.

This is not a test; there are no right answers. Choose the answer that is right for you. Work as quickly as you can so you have enough time to finish before the end of the period.

Begin by filling in your school’s name in the “Name” space on the answer sheet. Next mark your sex and grade in the appropriate boxes.

Northwest Regional Educational Laboratory
101 S.W. Main, Suite 500
Portland, OR 97204
1. Look at the bottom of this page on the right side. Which word is printed in your booklet?  
   a. Elementary b. Standard

2. Which of the following best describes your background? Choose only one answer. (For example, if one parent was part Asian and part White and the other parent was White, you would mark E.) (Optional)
   a. Asian or Pacific Islander  
   b. Black, not Hispanic  
   c. Hispanic  
   d. American Indian  
   e. White, not Hispanic

3. How old are you?  
   a. 9-11 years old b. 12-13 years old c. 14-15 years old d. 16-17 years old e. 18 years old or over

4. How much school do you miss?  
   a. I never miss school.  
   b. I hardly ever miss school.  
   c. I miss 2 or 3 days a semester.  
   d. I miss some school every month.  
   e. I miss some school every week.

5. In general, what are your grades right now? Mostly...  
   a. A's b. B's c. C's d. less than C's

6. How important is it to you to get good grades?  
   a. It is very important to me.  
   b. It is somewhat important.  
   c. I care about it, but it is not very important.  
   d. I don't care about it.

7. How likely is it that you will graduate from college (four-year program)?  
   a. Definitely won't b. Probably won't c. Probably will d. Definitely will

8. During the school year, how many hours a week do you work at a part-time job?  
   a. I don't work b. 1 to 4 hrs. c. 5 to 9 hrs. d. 10 to 20 hrs. e. over 20 hrs.

9. How many extra school activities do you participate in regularly (for example: sports, music, student government, clubs)?  
   a. None b. 1 c. 2 d. 3 e. 4 or more

10. How many non-school activities do you participate in regularly (for example: Little League, Scouts, church youth)?  
    a. None b. 1 c. 2 d. 3 e. 4 or more

11. How many different school sports teams have you participated on in the last two school years (for example: football, soccer, volleyball, basketball, track, swim team)?  
    a. None b. 1 c. 2 d. 3 e. 4 or more
12. In the last year have you ever thought about dropping out of school?
   a. Never thought about it
   b. Thought about it, but not seriously
   c. Seriously thought about it

13. How many times have you changed schools in the last 12 months?
   a. None (same school for a year)
   b. 1 time (attended two schools)
   c. 2 times
   d. 3 or more times

14. When you are away from home, do your parents know where you are and who you are with?
   a. Every time
   b. Most times
   c. Sometimes
   d. Rarely
   e. Never

The following questions ask about problems with alcohol (beer, wine, or liquor) or other drugs.

15. Do you think there is an alcohol or other drug problem among kids attending your school?
   a. Yes, a lot of kids are using alcohol or other drugs.
   b. Yes, some kids are using alcohol or other drugs.
   c. No, only a few kids are using alcohol or other drugs.
   d. No, no one uses alcohol or other drugs

16. Do you think there is alcohol or other drug use during the school day at your school?
   a. Yes, alcohol
   b. Yes, drugs
   c. Yes, both
   d. No

17. Do you think teachers in your school are concerned about alcohol or other drug problems among kids attending your school?
   a. Yes, they are very concerned and are trying to do something about it.
   b. They are concerned, but are not trying to do much about it.
   c. They do not seem to be too concerned.
   d. No, they are not concerned about it at all.

18. Is there drinking or drug use among kids at most parties you attend?
   a. Yes, alcohol
   b. Yes, drugs
   c. Yes, both alcohol and other drugs
   d. No
   e. I don't attend parties

19. Have you ever gotten into trouble at home or at school because of your drinking or drug use?
   a. I don't drink or use drugs
   b. No, never
   c. Once or twice
   d. Many times

20. Have you ever been arrested because of drinking or using drugs?
   a. I don't drink or use drugs
   b. No, never
   c. Once or twice
   d. Many times

21. Are you aware of someone close to you (those you live with or a friend) who has a drinking or drug problem?
   a. Yes, someone I live with
   b. Yes, a friend
   c. Yes, both someone I live with and a friend
   d. No, no one
How difficult do you think it would be for you to get each of the following types of drugs?

22. Marijuana or hashish (grass, hash, pot)
   a. Probably impossible  b. Very difficult  c. Fairly difficult  d. Fairly easy  e. Very easy

23. Cocaine (coke, crack, snow)
   a. Probably impossible  b. Very difficult  c. Fairly difficult  d. Fairly easy  e. Very easy

This next section deals with different drugs and alcohol. We hope that you will answer all of the questions; but if you find one that you cannot answer honestly, leave it blank. Do not report drugs prescribed by a doctor or wine sipped in religious ceremonies.

For questions 24 to 37, please mark how often you use each type of drug. Some other names for each drug are given in parentheses. Select one of the following answers for each question:

   a. Never  
   b. Some  
   c. Monthly  
   d. Weekly  
   e. Daily

24. Smoking tobacco (cigarettes, cigars, pipes)
   a. Never  
   b. Some  
   c. Monthly  
   d. Weekly  
   e. Daily

25. Smokeless tobacco (chew, plug, snuff)
   a. Never  
   b. Some  
   c. Monthly  
   d. Weekly  
   e. Daily

26. Beer
   a. Never  
   b. Some  
   c. Monthly  
   d. Weekly  
   e. Daily

27. Wine coolers
   a. Never  
   b. Some  
   c. Monthly  
   d. Weekly  
   e. Daily

28. Wine (other than wine coolers)
   a. Never  
   b. Some  
   c. Monthly  
   d. Weekly  
   e. Daily

29. Hard liquor (whiskey, gin, vodka, mixed drinks)
   a. Never  
   b. Some  
   c. Monthly  
   d. Weekly  
   e. Daily

30. Marijuana or hashish (grass, hash, pot)
   a. Never  
   b. Some  
   c. Monthly  
   d. Weekly  
   e. Daily

31. Cocaine (snow, coke, crack)
   a. Never  
   b. Some  
   c. Monthly  
   d. Weekly  
   e. Daily

32. Derbisol (temportan, antagonui
   a. Never  
   b. Some  
   c. Monthly  
   d. Weekly  
   e. Daily

33. Hallucinogens (angel dust, LSD, acid, mescaline, PCP, magic mushrooms)
   a. Never  
   b. Some  
   c. Monthly  
   d. Weekly  
   e. Daily
34. Inhaled substances to get high (glue, gasoline, paint thinner, spray cans, white-out, snappers, poppers, rush),
35. Drugs purchased from the drugstore to get high (diet pills like Dexatrim, stay awake pills like NoDoz or Vivarin, pep pills, Nyquil or other cough medicines)
36. Steroids (muscle builders)
37. Other drugs (methamphetamines, tranquilizers, heroin, uppers, downers)

How often have you used each of the following drugs in the past 30 days:

38. Cigarettes
   a. None b. up to 5 per day c. 1/2 pack per day d. 1 pack per day e. more than 1 pack per day
39. Alcohol (beer, wine, wine coolers, hard liquor)
   a. None b. 1-2 times c. 3-5 times d. 6-9 times e. 10 or more
40. Marijuana or hashish (grass, hash, pot)
   a. None b. 1-2 times c. 3-5 times d. 6-9 times e. 10 or more
41. Cocaine (coke, crack, snow)
   a. None b. 1-2 times c. 3-5 times d. 6-9 times e. 10 or more
42. Other illegal drugs (see 32 to 37 above)
   a. None b. 1-2 times c. 3-5 times d. 6-9 times e. 10 or more

How many of your closest friends use each of the following drugs once a month or more often:

43. Smoke cigarettes
   a. None b. A few c. Some d. Most e. All
44. Drink alcohol (beer, wine, wine coolers, hard liquor)
   a. None b. A few c. Some d. Most e. All
45. Smoke marijuana or hashish (grass, hash, pot)
   a. None b. A few c. Some d. Most e. All
46. Take other illegal drugs
   a. None b. A few c. Some d. Most e. All
The following questions ask about alcohol, cigarette, and marijuana use.

47. How do you usually get the beer, wine, or liquor you drink?
   a. I don't drink
   b. From home and my parents know
   c. From home, but my parents don't know
   d. From friends
   e. Ask adults to purchase or buy it myself

48. How much do you usually drink at one time?
   a. I don't drink
   b. Less than one can or glass of beer, wine, or mixed drink
   c. One can or glass of beer, wine, or mixed drink
   d. 2-4 cans or glasses of beer, wine, or mixed drinks
   e. 5 or more cans or glasses of beer, wine, or mixed drinks

49. How old were you when you had your first full drink (a can of beer, a full glass of wine, or a mixed drink)?
   a. I have never had a full drink
   b. 10 or younger
   c. 11 or 12
   d. 13 or 14
   e. 15 or older

50. Think back over the last two weeks. How many times have you had five or more drinks in a row? (A drink is a glass of wine, a bottle of beer, a shot glass of liquor, or a mixed drink.)
   a. None
   b. Once
   c. Twice
   d. 3 to 5 times
   e. 6 or more times

51. How many drinks does it take for you to get drunk when you drink?
   a. I don't get drunk
   b. 2 or fewer
   c. 3 or 4
   d. 5 or 6
   e. 7 or more

52. Have you ever used drugs and alcohol together?
   a. I don't drink or use drugs
   b. No, never
   c. Once or twice
   d. Many times

53. How old were you when you smoked your first cigarette?
   a. I have never smoked
   b. 10 or younger
   c. 11 or 12
   d. 13 or 14
   e. 15 or older
54. How do you usually get the cigarettes you smoke?
   a. I don’t smoke
   b. From adults
   c. From friends
   d. From a vending machine
   e. From a store

55. How old were you when you first tried marijuana?
   a. I have never tried marijuana
   b. 10 or younger
   c. 11 or 12
   d. 13 or 14
   e. 15 or older

How much do you think people risk harming themselves if they:

56. Smoke one or more packs of cigarettes a day
   a. No risk
   b. Slight risk
   c. Moderate risk
   d. Great risk
   e. Not sure

57. Smoke marijuana occasionally
   a. No risk
   b. Slight risk
   c. Moderate risk
   d. Great risk
   e. Not sure

58. Try cocaine once or twice
   a. No risk
   b. Slight risk
   c. Moderate risk
   d. Great risk
   e. Not sure

59. Have one or two drinks nearly every day
   a. No risk
   b. Slight risk
   c. Moderate risk
   d. Great risk
   e. Not sure

60. Have five or more drinks once or twice each weekend
   a. No risk
   b. Slight risk
   c. Moderate risk
   d. Great risk
   e. Not sure

61. What is the risk of getting AIDS from injecting drugs with a needle that someone else has used?
   a. No risk
   b. Slight risk
   c. Moderate risk
   d. Great risk
   e. Not sure

How would your parents feel about your doing each of the following:

62. Smoking marijuana occasionally
   a. Approve
   b. Not disapprove
   c. Disapprove
   d. Greatly disapprove

63. Having one or two drinks nearly every day
   a. Approve
   b. Not disapprove
   c. Disapprove
   d. Greatly disapprove

64. Having five or more drinks once or twice each weekend
   a. Approve
   b. Not disapprove
   c. Disapprove
   d. Greatly disapprove

65. Attending a party in a friend’s home where beer, wine, or liquor were available to you
   a. Approve
   b. Not disapprove
   c. Disapprove
   d. Greatly disapprove

66. What is the risk of getting AIDS from injecting drugs with a needle that someone else has used?
The next questions ask about drug education.

66. Where have you learned the most about the dangers of drugs and drinking?
   a. Family or people I live with
   b. School
   c. Other kids
   d. Church or temple
   e. TV, movies, or newspaper

67. At what grade level do you think alcohol and other drug education should begin?
   a. 3rd or earlier    b. 4th or 5th    c. 6th, 7th, or 8th    d. 9th or 10th    e. 11th or 12th

68. In your school, which of the following people has been most active in trying to help reduce alcohol and other drug use among the students?
   a. The principal or assistant principal
   b. A teacher
   c. A counselor or nurse
   d. Another school staff member
   e. None of these have been very active

69. In your opinion, which of the following prevention programs is doing the best job of preventing or helping stop alcohol and other drug use in your school?
   a. Here's Looking At You (II or 2000)
   b. D.A.R.E.
   c. Natural Helpers or other Peer Assistance programs
   d. None of the above are helping, but we have something else that is.
   e. Nothing is really helping prevent or stop alcohol and other drug use in my school.

70. How important does preventing and reducing alcohol and other drug use seem to be to teachers and staff at your school?
   a. It is one of the most important goals we have in our school
   b. It is fairly important, but many other things are a higher priority
   c. It is mentioned, but doesn't seem to be very important
   d. It is not important at all

71. Which of the following people, who do not work in your school, have been most active in trying to help reduce alcohol and other drug use among the students?
   a. A counselor or health professional
   b. A police officer
   c. A minister, priest or some religious leader
   d. Someone else from outside the school
   e. No one from outside the school has gotten very involved in this

72. Who would you go to first if you wanted to talk about a problem related to alcohol or other drug use in yourself or a friend?
   a. A teacher or counselor
   b. Another student
   c. Someone in my family
   d. Someone other than those mentioned above
   e. No one, I would keep it to myself
Which of the following do you think is most important in helping to reduce alcohol and other drug use in your school among students your age?

- a. Class presentations on types of drugs and their effects on people.
- b. Having someone at school who can listen to and help students who are using alcohol or other drugs.
- c. Bringing people from outside of school to talk about the problems of alcohol or other drug use.
- d. Groups of students working together to persuade other students not to use alcohol or other drugs.
- e. None of the above can really help reduce alcohol or other drug use.

If you or a friend had a problem with alcohol or other drugs, does your school provide:

- 74. A counselor or other school staff to discuss the problem
  - a. Yes
  - b. No
  - c. I'm not sure

- 75. A support group (or rap group) of students with similar concerns
  - a. Yes
  - b. No
  - c. I'm not sure

- 76. Students to talk to who have been trained to assist students with problems and to refer them to help. These may be called Peer Assistants, Peer Counselors, Natural Helpers, Peer Helpers, or Peer Listeners.
  - a. Yes
  - b. No
  - c. I'm not sure

The next questions ask about the effects of media advertising on alcohol use.

- 77. Whom do you think beer, wine and alcohol advertising is primarily aimed at?
  - a. Primarily at adults
  - b. Primarily at teens and adolescents
  - c. Both adults and adolescents to the same degree
  - d. No one in particular

- 78. Do you think beer, wine and alcohol advertising influences young people to drink?
  - a. Yes, more young people drink because of the way alcohol is advertised.
  - b. No, the advertising has no effect on how many young people drink.

- 79. Where do you notice most of the beer, wine and alcohol advertising?
  - a. On TV
  - b. On the radio
  - c. In print (magazines, newspapers, etc.)
  - d. On billboards, buildings, and signs

- 80. Does beer, wine and alcohol advertising make it look more attractive to drink than it actually is?
  - a. Yes, a lot more attractive
  - b. Yes, in some cases, but not all
  - c. No, it doesn't make drinking look more attractive

- 81. If you were going to try to reduce the amount of alcohol and other drug use among young people your age, which one of the following do you think is most important to do?
  - a. More school programs encouraging students not to use alcohol or other drugs.
  - b. Reducing or eliminating alcohol advertising on radio and TV.
  - c. Stiffer penalties and stronger enforcement for kids caught using alcohol or other drugs.
  - d. More community activities giving kids other things to do besides using alcohol or other drugs.
  - e. None of the above will help reduce alcohol and other drug use among young people my age.

Thank you for completing this survey.
Appendix B

Washington State Survey of Adolescent Health Behaviors (Raw Data and Percentages)
Washington State Survey of Adolescent Health Behaviors

Please take a few minutes to complete this survey. The purpose of this survey is to find out what students in our school know and think about tobacco, alcohol and other drug use and other important health behaviors. Your answers will help us understand the problems and needs of students in this school.

Your participation is voluntary. If there is any question that would upset you or your parents, just leave it blank.

Write the name of your school on the top of the answer sheet where it asks for NAME. Do NOT write your name anywhere on the answer sheet. Your answers will be kept secret.

When you are finished, an envelope will be passed around. Put your answer sheet in the envelope so no one will see your answers.

INSTRUCTIONS:

Make sure that you have a survey booklet, an answer sheet, and a No. 2 pencil. Mark your answers on your answer sheet. Do NOT write in the survey booklet.

Sample Question: 1. Where did you go after school yesterday?
   a. Home
   b. School activity
   c. Work
   d. Class
   e. Other

On your answer sheet you would fill in the circle for the answer which is true for you. For example, if you attended a basketball game after school, you would fill in the circle under "B" as shown below.

   A B C D E
   0 0 0 0 0

Fill in the circle completely. Erase your answer completely if you wish to change it. Use a No. 2 pencil only.

This is not a test; there are no right answers. Choose the answer that is right for you. Work as quickly as you can so you have enough time to finish before the end of the period.

Begin by filling in your school's name in the "Name" space on the answer sheet. Next mark your sex and grade in the appropriate boxes.

Northwest Regional Educational Laboratory
101 S.W. Main, Suite 500
Portland, OR 97204
1. Look at the bottom of this page on the right side. Which word is printed in your booklet?
   a. Elementary  b. Standard

2. Which of the following best describes your background? Choose only one answer. (For example, if one parent was part Asian and part White and the other parent was White, you would mark E.)
   a. Asian or Pacific Islander  3 (4%)
   b. Black, not Hispanic  1 (1%)
   c. Hispanic  4 (5%)
   d. American Indian  5 (6%)
   e. White, not Hispanic  67 (84%)

3. How old are you?
   a. 9-11 years old  b. 12-13 years old  c. 14-15 years old  d. 16-17 years old  e. 18 years old or over
   57 (71%)  21 (26%)  2 (3%)

4. How much school do you miss?
   a. I never miss school.  7 (9%)
   b. I hardly ever miss school.  32 (40%)
   c. I miss 2 or 3 days a semester.  22 (28%)
   d. I miss some school every month.  16 (20%)
   e. I miss some school every week.  3 (4%)

5. In general, what are your grades right now? Mostly...
   a. A's  22 (27%)
   b. B's  32 (40%)
   c. C's  14 (17%)
   d. less than C's  13 (16%)

6. How important is it to you to get good grades?
   a. It is very important to me.  44 (54%)
   b. It is somewhat important.  23 (28%)
   c. I care about it, but it is not very important.  11 (14%)
   d. I don't care about it.  3 (4%)

7. How likely is it that you will graduate from college (four-year program)?
   a. Definitely won't  b. Probably won't  c. Probably will  d. Definitely will
   12 (16%)  14 (19%)  19 (26%)  28 (38%)

8. During the school year, how many hours a week do you work at a part-time job?
   a. I don't work  b. 1 to 4 hrs.  c. 5 to 9 hrs.  d. 10 to 20 hrs.  e. over 20 hrs.
   64 (80%)  6 (8%)  3 (4%)  4 (5%)

9. How many extra school activities do you participate in regularly (for example: sports, music, student government, clubs)?
   a. None  b. 1  c. 2  d. 3  e. 4 or more
   25 (30%)  23 (28%)  16 (19%)  12 (14%)  7 (8%)

10. How many non-school activities do you participate in regularly (for example: Little League, Scouts, church youth)?
    a. None  b. 1  c. 2  d. 3  e. 4 or more
     41 (51%)  21 (26%)  10 (12%)  2 (2%)  7 (9%)

11. How many different school sports teams have you participated on in the last two school years (for example: football, soccer, volleyball, basketball, track, swim team)?
    a. None  b. 1  c. 2  d. 3  e. 4 or more
     32 (42%)  14 (18%)  12 (15%)  11 (14%)  11 (14%)
12. In the last year have you ever thought about dropping out of school?
   a. Never thought about it  52 (65%)
   b. Thought about it, but not seriously 17 (21%)
   c. Seriously thought about it 11 (14%)

13. How many times have you changed schools in the last 12 months?
   a. None (same school for a year)  20 (47%)
   b. 1 time (attended two schools)  19 (44%)
   c. 2 times 2 (5%)
   d. 3 or more times 2 (5%)

14. When you are away from home, do your parents know where you are and who you are with?
   a. Every time 15 (19%)
   b. Most times 44 (55%)
   c. Sometimes 10 (13%)
   d. Rarely 8 (10%)
   e. Never 3 (4%)

The following questions ask about problems with alcohol (beer, wine, or liquor) or other drugs.

15. Do you think there is an alcohol or other drug problem among kids attending your school?
   a. Yes, a lot of kids are using alcohol or other drugs. 32 (43%)
   b. Yes, some kids are using alcohol or other drugs. 35 (47%)
   c. No, only a few kids are using alcohol or other drugs. 6 (8%)
   d. No, no one uses alcohol or other drugs 2 (3%)

16. Do you think there is alcohol or other drug use during the school day at your school?
   a. Yes, alcohol 8 (10%)
   b. Yes, drugs 21 (26%)
   c. Yes, both 46 (56%)
   d. No 5 (6%)

17. Do you think teachers in your school are concerned about alcohol or other drug problems among kids attending your school?
   a. Yes, they are very concerned and are trying to do something about it. 15 (20%)
   b. They are concerned, but are not trying to do much about it. 36 (48%)
   c. They do not seem to be too concerned. 18 (24%)
   d. No, they are not concerned about it at all. 6 (8%)

18. Is there drinking or drug use among kids at most parties you attend?
   a. Yes, alcohol 10 (13%)
   b. Yes, drugs 9 (11%)
   c. Yes, both alcohol and other drugs 23 (29%)
   d. No 23 (29%)
   e. I don’t attend parties 15 (19%)

19. Have you ever gotten into trouble at home or at school because of your drinking or drug use?
   a. I don’t drink or use drugs 35 (44%)
   b. No, never 25 (31%)
   c. Once or twice 16 (20%)
   d. Many times 4 (5%)

20. Have you ever been arrested because of drinking or using drugs?
   a. I don’t drink or use drugs 31 (40%)
   b. No, never 37 (48%)
   c. Once or twice 5 (6%)
   d. Many times 4 (5%)

21. Are you aware of someone close to you (those you live with or a friend) who has a drinking or drug problem?
   a. Yes, someone I live with 12 (16%)
   b. Yes, a friend 33 (43%)
   c. Yes, both someone I live with and a friend 8 (10%)
   d. No, no one 24 (31%)

SSWREL 3

Standard
How difficult do you think it would be for you to get each of the following types of drugs?

22. Marijuana or hashish (grass, hash, pot)
   a. Probably impossible
   b. Very difficult
   c. Fairly difficult
   d. Fairly easy
   e. Very easy
   1 (1%) 3 (4%) 9 (12%) 33 (42%) 32 (41%)

23. Cocaine (coke, crack, snow)
   a. Probably impossible
   b. Very difficult
   c. Fairly difficult
   d. Fairly easy
   e. Very easy
   9 (11%) 16 (20%) 23 (29%) 23 (29%) 9 (11%)

This next section deals with different drugs and alcohol. We hope that you will answer all of the questions; but if you find one that you cannot answer honestly, leave it blank. Do not report drugs prescribed by a doctor or wine sipped in religious ceremonies.

For questions 24 to 37, please mark how often you use each type of drug. Some other names for each drug are given in parentheses. Select one of the following answers for each question:

- a. Never
- b. Some
- c. Monthly
- d. Weekly
- e. Daily

<table>
<thead>
<tr>
<th>Question</th>
<th>Never</th>
<th>Some</th>
<th>Monthly</th>
<th>Weekly</th>
<th>Daily</th>
</tr>
</thead>
<tbody>
<tr>
<td>24. Smoking tobacco (cigarettes, cigars, pipe)</td>
<td>42 (51%)</td>
<td>16 (20%)</td>
<td>5 (6%)</td>
<td>3 (4%)</td>
<td>16 (20%)</td>
</tr>
<tr>
<td>25. Smokeless tobacco (chew, plug, snuff)</td>
<td>58 (70%)</td>
<td>16 (20%)</td>
<td>2 (3%)</td>
<td>3 (4%)</td>
<td>1 (2%)</td>
</tr>
<tr>
<td>26. Beer</td>
<td>30 (36%)</td>
<td>32 (39%)</td>
<td>16 (19%)</td>
<td>3 (4%)</td>
<td>1 (1%)</td>
</tr>
<tr>
<td>27. Wine coolers</td>
<td>32 (43%)</td>
<td>32 (43%)</td>
<td>8 (11%)</td>
<td>1 (1%)</td>
<td>1 (1%)</td>
</tr>
<tr>
<td>28. Wine (other than wine coolers)</td>
<td>35 (41%)</td>
<td>32 (40%)</td>
<td>10 (12%)</td>
<td>3 (4%)</td>
<td>1 (1%)</td>
</tr>
<tr>
<td>29. Hard liquor (whiskey, gin, vodka, mixed drinks)</td>
<td>38 (47%)</td>
<td>22 (27%)</td>
<td>16 (20%)</td>
<td>3 (4%)</td>
<td>2 (2%)</td>
</tr>
<tr>
<td>30. Marijuana or hashish (grass, hash, pot)</td>
<td>47 (56%)</td>
<td>12 (15%)</td>
<td>13 (16%)</td>
<td>4 (5%)</td>
<td>5 (6%)</td>
</tr>
<tr>
<td>31. Cocaine (snow, coke, crack)</td>
<td>74 (89%)</td>
<td>3 (4%)</td>
<td>3 (4%)</td>
<td>2 (2%)</td>
<td>1 (1%)</td>
</tr>
<tr>
<td>32. Derbisol (empininan, antagoni)</td>
<td>74 (92%)</td>
<td>2 (2%)</td>
<td>1 (1%)</td>
<td>0 (0%)</td>
<td>3 (4%)</td>
</tr>
<tr>
<td>33. Hallucinogens (angel dust, LSD, acid, m. a. m., PCP, magic mushrooms)</td>
<td>67 (81%)</td>
<td>7 (8%)</td>
<td>4 (5%)</td>
<td>3 (4%)</td>
<td>2 (2%)</td>
</tr>
</tbody>
</table>
34. Inhaled substances to get high (glue, gasoline, paint thinner, spray cans, white-out, snappers, poppers, rush) (3)
   64 (78%)  13 (16%)  1 (1%)  1 (1%)  3 (4%)

35. Drugs purchased from the drugstore to get high (diet pills like Dietrim, stay awake pills like NoDoz or Tylenol, pep pills. Nyquil or other cough medicines) (3)
   70 (84%)  7 (8%)  2 (2%)  3 (4%)  1 (1%)

36. Steroids (muscle builders) (3)
   78 (93%)  1 (1%)  0 (0%)  0 (0%)  4 (5%)

37. Other drugs (methamphetamines, tranquilizers, heroin, uppers, downers) (3)
   67 (82%)  7 (8%)  3 (4%)  2 (2%)  3 (4%)

How often have you used each of the following drugs in the past 30 days:

38. Cigarettes (3)
   a. None  b. Up to 5 per day  c. 1/2 pack per day  d. 1 pack per day  e. more than 1 pack per day
   60 (72%)  8 (10%)  6 (7%)  3 (4%)  5 (6%)

39. Alcohol (beer, wine, wine coolers, hard liquor) (3)
   a. None  b. 1-2 times  c. 3-5 times  d. 6-9 times  e. 10 or more
   48 (59%)  17 (20%)  8 (10%)  5 (6%)  5 (6%)

40. Marijuana or hashish (grass, hash, pot) (3)
   a. None  b. 1-2 times  c. 3-5 times  d. 6-9 times  e. 10 or more
   59 (71%)  10 (12%)  1 (1%)  3 (4%)  10 (12%)

41. Cocaine (coke, crack, snow) (3)
   a. None  b. 1-2 times  c. 3-5 times  d. 6-9 times  e. 10 or more
   78 (94%)  6 (7%)  3 (4%)  1 (1%)  1 (1%)

42. Other illegal drugs (see 32 to 37 above) (3)
   a. None  b. 1-2 times  c. 3-5 times  d. 6-9 times  e. 10 or more
   71 (86%)  5 (6%)  2 (2%)  3 (4%)  2 (2%)

How many of your closest friends use each of the following drugs once a month or more often:

43. Smoke cigarettes (3)
   a. None  b. A few  c. Some  d. Most  e. All
   38 (46%)  16 (20%)  9 (11%)  13 (16%)  9 (11%)

44. Drink alcohol (beer, wine, wine coolers, hard liquor) (3)
   a. None  b. A few  c. Some  d. Most  e. All
   27 (33%)  28 (34%)  7 (8%)  14 (17%)  7 (8%)

45. Smoke marijuana or hashish (grass, hash, pot) (3)
   a. None  b. A few  c. Some  d. Most  e. All
   35 (43%)  10 (14%)  6 (8%)  13 (18%)  7 (10%)

46. Take other illegal drugs (3)
   a. None  b. A few  c. Some  d. Most  e. All
   48 (68%)  17 (24%)  10 (14%)  3 (4%)  3 (4%)
The following questions ask about alcohol, cigarette, and marijuana use.

47. How do you usually get the beer, wine, or liquor you drink?
   a. I don't drink 38 (48%)
   b. From home and my parents know 9 (11%)
   c. From home, but my parents don't know 9 (11%)
   d. From friends 19 (24%)
   e. Ask adults to purchase or buy it myself 5 (6%)

48. How much do you usually drink at one time?
   a. I don't drink 36 (43%)
   b. Less than one can or glass of beer, wine, or mixed drink 13 (16%)
   c. One can or glass of beer, wine, or mixed drink 6 (7%)
   d. 2-4 cans or glasses of beer, wine, or mixed drinks 8 (10%)
   e. 5 or more cans or glasses of beer, wine, or mixed drinks 20 (24%)

49. How old were you when you had your first full drink (a can of beer, a full glass of wine, or a mixed drink)?
   a. I have never had a full drink 30 (36%)
   b. 10 or younger 20 (24%)
   c. 11 or 12 13 (16%)
   d. 13 or 14 17 (20%)
   e. 15 or older 3 (4%)

50. Think back over the last two weeks. How many times have you had five or more drinks in a row? (A drink is a glass of wine, a bottle of beer, a shot glass of liquor, or a mixed drink.)
   a. None 64 (79%)
   b. Once 5 (6%)
   c. Twice 4 (5%)
   d. 3 to 5 times 5 (6%)
   e. 6 or more times 3 (4%)

51. How many drinks does it take for you to get drunk when you drink?
   a. I don't get drunk 45 (55%)
   b. 2 or fewer 5 (6%)
   c. 3 or 4 13 (16%)
   d. 5 or 6 12 (15%)
   e. 7 or more 7 (9%)

52. Have you ever used drugs and alcohol together?
   a. I don't drink or use drugs 33 (39%)
   b. No, never 25 (30%)
   c. Once or twice 15 (18%)
   d. Many times 10 (12%)

53. How old were you when you smoked your first cigarette?
   a. I have never smoked 35 (42%)
   b. 10 or younger 20 (24%)
   c. 11 or 12 10 (12%)
   d. 13 or 14 15 (18%)
   e. 15 or older 4 (5%)
54. How do you usually get the cigarettes you smoke?
   a. I don’t smoke 46 (55%)
   b. From adults 7 (8%)
   c. From friends 13 (16%)
   d. From a vending machine 7 (8%)
   e. From a store 10 (12%)

55. How old were you when you first tried marijuana?
   a. I have never tried marijuana 50 (62%)
   b. 10 or younger 7 (9%)
   c. 11 or 12 6 (8%)
   d. 13 or 14 12 (15%)
   e. 15 or older 5 (6%)

How much do you think people risk harming themselves if they:

56. Smoke one or more packs of cigarettes a day
   a. No risk 3 (4%)
   b. Slight risk 10 (13%)
   c. Moderate risk 26 (33%)
   d. Great risk 30 (38%)
   e. Not sure 10 (13%)

57. Smoke marijuana occasionally
   a. No risk 13 (17%)
   b. Slight risk 12 (16%)
   c. Moderate risk 30 (39%)
   d. Great risk 19 (25%)
   e. Not sure 3 (4%)

58. Try cocaine once or twice
   a. No risk 3 (4%)
   b. Slight risk 14 (18%)
   c. Moderate risk 14 (18%)
   d. Great risk 44 (56%)
   e. Not sure 3 (4%)

59. Have one or two drinks nearly every day
   a. No risk 7 (9%)
   b. Slight risk 20 (25%)
   c. Moderate risk 36 (43%)
   d. Great risk 18 (21%)
   e. Not sure 3 (4%)

60. Have five or more drinks once or twice each weekend
   a. No risk 6 (8%)
   b. Slight risk 11 (14%)
   c. Moderate risk 30 (38%)
   d. Great risk 30 (38%)
   e. Not sure 3 (4%)

61. What is the risk of getting AIDS from injecting drugs with a needle that a someone else has used?
   a. No risk 2 (3%)
   b. Slight risk 3 (4%)
   c. Moderate risk 10 (13%)
   d. Great risk 57 (72%)
   e. Not sure 7 (9%)

How would your parents feel about your doing each of the following:

62. Smoking marijuana occasionally
   a. Approve 4 (5%)
   b. Not disapprove 5 (6%)
   c. Disapprove 15 (19%)
   d. Greatly disapprove 54 (69%)

63. Having one or two drinks nearly every day
   a. Approve 6 (7%)
   b. Not disapprove 4 (5%)
   c. Disapprove 17 (22%)
   d. Greatly disapprove 50 (65%)

64. Having five or more drinks once or twice each weekend
   a. Approve 4 (5%)
   b. Not disapprove 7 (9%)
   c. Disapprove 18 (23%)
   d. Greatly disapprove 50 (63%)

65. Attending a party in a friend’s home where beer, wine, or liquor were available to you
   a. Approve 8 (10%)
   b. Not disapprove 8 (10%)
   c. Disapprove 19 (25%)
   d. Greatly disapprove 42 (55%)
The next questions ask about drug education.

66. Where have you learned the most about the dangers of drugs and drinking?
   a. Family or people I live with 20 (24%)
   b. School 45 (54%)
   c. Other kids 7 (9%)
   d. Church or temple 5 (6%)
   e. TV, movies, or newspaper 6 (7%)

67. At what grade level do you think alcohol and other drug education should begin?
   a. 3rd or earlier 33 (42%)
   b. 4th or 5th 29 (37%)
   c. 6th, 7th, or 8th 10 (13%)
   d. 9th or 10th 2 (3%)
   e. 11th or 12th 4 (5%)

68. In your school, which of the following people has been most active in trying to help reduce alcohol and other drug use among the students?
   a. The principal or assistant principal 23 (28%)
   b. A teacher 18 (22%)
   c. A counselor or nurse 25 (30%)
   d. Another school staff member 2 (2%)
   e. None of these have been very active 15 (18%)

69. In your opinion, which of the following prevention programs is doing the best job of preventing or helping stop alcohol and other drug use in your school?
   a. Here's Looking At You (II or 2000) 5 (6%)
   b. D.A.R.E. 30 (38%)
   c. Natural Helpers or other Peer Assistance programs 11 (14%)
   d. None of the above are helping, but we have something else that is 6 (8%)
   e. Nothing is really helping prevent or stop alcohol and other drug use in my school 28 (35%)

70. How important does preventing and reducing alcohol and other drug use seem to be to teachers and staff at your school?
   a. It is one of the most important goals we have in our school 19 (24%)
   b. It is fairly important, but many other things are a higher priority 38 (48%)
   c. It is mentioned, but doesn't seem to be very important 17 (21%)
   d. It is not important at all 6 (8%)

71. Which of the following people, who do not work in your school, have been most active in trying to help reduce alcohol and other drug use among the students?
   a. A counselor or health professional 10 (13%)
   b. A police officer 16 (21%)
   c. A minister, priest or some religious leader 10 (13%)
   d. Someone else from outside the school 13 (17%)
   e. No one from outside the school has gotten very involved in this 26 (35%)

72. Who would you go to first if you wanted to talk about a problem related to alcohol or other drug use in yourself or a friend?
   a. A teacher or counselor 17 (21%)
   b. Another student 25 (31%)
   c. Someone in my family 16 (20%)
   d. Someone other than those mentioned above 9 (11%)
   e. No one, I would keep it to myself 13 (16%)
73. Which of the following do you think is most important in helping to reduce alcohol and other drug use in your school among students your age?
   a. Class presentations on types of drugs and their effects on people. 15 (21%)
   b. Having someone at school who can listen to and help students who are using alcohol or other drugs. 17 (23%)
   c. Bringing people in from outside of school to talk about the problems of alcohol or other drug use. 14 (18%)
   d. Groups of students working together to persuade other students not to use alcohol or other drugs. 15 (21%)
   e. None of the above can really help reduce alcohol or other drug use.

If you or a friend had a problem with alcohol or other drugs, does your school provide:
74. A counselor or other school staff to discuss the problem
   a. Yes 42 (56%)
   b. No 6 (8%)
   c. I'm not sure 27 (36%)
75. A support group (or rap group) of students with similar concerns
   a. Yes 11 (15%)
   b. No 26 (36%)
   c. I'm not sure 36 (49%)
76. Students to talk to who have been trained to assist students with problems and to refer them to help. These may be called Peer Assistants, Peer Counselors, Natural Helpers, Peer Helpers, or Peer Listeners.
   a. Yes 30 (44%)
   b. No 10 (15%)
   c. I'm not sure 28 (41%)

The next questions ask about the effects of media advertising on alcohol use.
77. Whom do you think beer, wine and alcohol advertising is primarily aimed at?
   a. Primarily at adults 16 (21%)
   b. Primarily at teens and adolescents 21 (27%)
   c. Both adults and adolescents to the same degree 28 (36%)
   d. No one in particular 12 (16%)
78. Do you think beer, wine and alcohol advertising influences young people to drink?
   a. Yes, more young people drink because of the way alcohol is advertised. 58 (79%)
   b. No, the advertising has no effect on how many young people drink. 15 (21%)
79. Where do you notice most of the beer, wine and alcohol advertising?
   a. On TV 48 (62%)
   b. On the radio 7 (9%)
   c. In print (magazines, newspapers, etc.) 14 (18%)
   d. On billboards, buildings, and signs 9 (12%)
80. Does beer, wine and alcohol advertising make it look more attractive to drink than it actually is?
   a. Yes, a lot more attractive 28 (39%)
   b. Yes, in some cases, but not all 20 (28%)
   c. No, it doesn't make drinking look more attractive 24 (33%)
81. If you were going to try to reduce the amount of alcohol and other drug use among young people your age, which one of the following do you think is most important to do?
   a. More school programs encouraging students not to use alcohol or other drugs. 13 (18%)
   b. Reducing or eliminating alcohol advertising on radio and TV. 8 (11%)
   c. Stiffer penalties and stronger enforcement for kids caught using alcohol or other drugs. 17 (24%)
   d. More community activities giving kids other things to do besides using alcohol or other drugs. 19 (26%)
   e. None of the above will help reduce alcohol and other drug use among young people my age. 15 (21%)

Thank you for completing this survey.
Appendix C

Parent Letter
January 29, 1995

Dear Parent:

My name is Marcia Byrd, and I am a Health Education teacher at the high school. Siuslaw health classes will be taking a drug and alcohol survey, which will be used to improve current curriculum and for my thesis project at Oregon State University. The survey, Washington State Survey of Adolescent Health Behaviors, is currently being used at high schools in Washington, Oregon, Idaho, and Alaska. It needs no additional funding since the Northwest Regional Educational Laboratory has given its permission to copy the survey.

The purpose of the survey is to learn more about how teenagers at Siuslaw cope with pressures to smoke and use other drugs and to figure out ways to prevent them from using. Information will help the school develop a more comprehensive curriculum that directly deals with prevention. Realistically, it should help with the well-being of our young people.

As a part of the regular classroom curriculum in your son/daughter's class, a two-week smoking and drug prevention will be taught, along with a five-day unit from Oregon Research Institute, both of which have been adopted by the school board.

The survey includes a questionnaire asking questions about the student's use of cigarettes, chewing tobacco, alcohol, marijuana, and other illegal drugs. It asks about school, social, and community activities and parental influences. The survey concludes with questions concerning prevention curriculum and its effectiveness. The survey will be given in February.

Mr. Lloyd Little will randomly select two of his health classes, and I will be giving the initial survey to both of my health classes, a total of about 80 students.

Based on the students' answers, the second part of the survey will be given. It will consist of specific questions as to their opinion of how to improve the prevention curriculum and what might be done to discourage young people from using drugs, alcohol, and tobacco.

Participation in the survey is completely VOLUNTARY. You or your son/daughter may discontinue participation at any time and may choose to answer some but not all of the questions. Students will be given this opportunity to decline when the survey is given.
Your child will not be penalized for not responding or participating in this survey. It is strictly voluntary. You have every right to refuse your child's participation. If you do not want your child to take part in this survey, simply do not sign and return the consent form at the bottom of this page.

Information obtained from the students will be confidential. To insure confidentiality, students will fill out a scan-tron sheet and will not put their name or teacher's name on it. The only identification will be their gender. Mr. Little and I are the only ones who will see the scan-trons, and the information will be kept in a locked file cabinet. Only summary findings will be reported to the school district. The students' parents will have access to only the summary if they are interested. They would not have access to their child's survey answers.

If you have any questions concerning this survey, please contact me at the high school, 997-3448 between 8-4 p.m.

Sincerely,

Marcia J. Byrd
Health Educator

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Parental Consent Form

Please sign, date, and return this form—which gives your child permission to participate in this VOLUNTARY survey.

Parent Signature

Students' Name

Date
Appendix D

Phase II Questions
Appendix D

Phase II Questions

1.) What is the most important thing teachers can do in school to reduce drug and alcohol use by teenagers?

2.) Who do you talk to about drugs and alcohol? (Problems and concerns)

3.) What would you do to reduce the drug, and alcohol problem among teenagers?