

# MetroWest Adolescent Health Survey

*Informing data-driven school and community  
health policies and practices*

## 2016 | A Youth High School Report

GRADES 9-12



**METROWEST  
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MetroWest Health Foundation

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Submitted by:  
Education Development Center, Inc.

Spring 2017



# Highlights from the 2016 MetroWest Adolescent Health Survey

## MetroWest Region High School Report

### Background

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

### Methodology

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

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

## Key Findings: Substance Use

### Cigarette Smoking

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

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

### Electronic Cigarettes

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

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

## Alcohol Use

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

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

## Marijuana Use

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

- » Current (past 30 day) marijuana use increased from 20% in 2006 to 24% in 2010, but then decreased in recent surveys to 19% in 2016.
- » The recent decrease in marijuana use is driven by a decrease among males, narrowing the gap in use between males and females. For example, current marijuana use among males decreased from a high of 30% in 2010 to 21% in 2016, whereas current use among females has remained similar at 17-18% since 2006.
- » Initiation of marijuana use quadruples from 11% in 9<sup>th</sup> grade to 46% in 12<sup>th</sup> grade. Nearly one in three 12<sup>th</sup> grade students (31%) have used marijuana in the past 30 days.
- » Two out of three high school students (66%) report that it is fairly or very easy to obtain marijuana.
- » Marijuana use continues to be lower in MetroWest than in the state and the nation: 28% of MetroWest youth have used marijuana in their lifetime, compared with 41% in Massachusetts<sup>1</sup> and 39% in the U.S.<sup>2</sup> Data from MetroWest, Massachusetts, and the U.S. all show slight declines in lifetime use over recent surveys.

## Prescription Drug Misuse

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

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

## Key Findings: Violence

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

### Physical Fighting

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

### Weapon Carrying

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

## Key Findings: Bullying and Cyberbullying

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

### Bullying

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

### Cyberbullying

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

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

## Key Findings: Impaired and Distracted Driving

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

### Impaired Driving

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

### Distracted Driving

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

## Key Findings: Mental Health

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

### Stress

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

### Depressive Symptoms, Self-Injury, and Suicidality

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

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

## Key Findings: Sexual Behaviors

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

### Sexual Intercourse and Sexting

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

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

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

### Physical Activity

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

### Nutrition

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

### Overweight/Obesity

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

## Sleep

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

## Key Findings: Protective Factors

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

## Adult Support

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

## School Attachment and Engagement

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

## Conclusions

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

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

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

The following areas show signs of progress in recent surveys:

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

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

The area of adolescent mental health continues to demand attention:

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

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

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## References

- <sup>1</sup> Massachusetts Department of Elementary and Secondary Education and Massachusetts Department of Public Health (2016). Health and Risk Behaviors of Massachusetts Youth 2015. Available at: <http://www.mass.gov/eohhs/docs/dph/behavioral-risk/youth-health-risk-report-2015.pdf>. Accessed March 10, 2017.
- <sup>2</sup> Centers for Disease Control and Prevention. 2015 Youth Risk Behavior Survey. Available at: <https://nccd.cdc.gov/youthonline/App/Default.aspx>. Accessed March 10, 2017.

# High School Key Indicators

2006–2016 Trends  
2016 Gender Patterns  
2016 Grade Patterns

# MetroWest Region High School Students (Grades 9-12)

## 2006-2016 Trends in Key Indicators

*MetroWest Adolescent Health Survey*

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

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

† Without a doctor's prescription

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

# MetroWest Region High School Students (Grades 9-12)

## 2016 Gender Patterns for Key Indicators

*MetroWest Adolescent Health Survey*

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

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

† Without a doctor's prescription

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

# MetroWest Region High School Students (Grades 9-12)

## 2016 Grade Patterns for Key Indicators

*MetroWest Adolescent Health Survey*

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

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

† Without a doctor's prescription

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

This report was prepared by  
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