
APPENDIX



Table 1-1. Protective Factor Definitions

Community Domain	Community Opportunities for Prosocial Involvement	When opportunities for positive participation are available in a community, children are more likely to become bonded to the community. <i>Example question: "Which of the following activities for people your age are available in your community -- sports teams, scouting, boys and girls clubs, 4-H clubs, service clubs?"</i>
	Community Recognition for Prosocial Involvement	Recognition for positive participation in community activities helps children bond to the community, thus lowering their risk for problem behaviors. <i>Example question: "My neighbors notice when I am doing a good job and let me know about it."</i>
Family Domain	Family Attachment	Young people who feel strongly bonded to their family are less likely to engage in substance use and other problem behaviors. <i>Example question: "Do you feel very close to your mother?"</i>
	Family Opportunities for Prosocial Involvement	Young people who have more opportunities to participate meaningfully in the responsibilities and activities of the family are more likely to develop strong bonds to the family. <i>Example question: "My parents ask me what I think before most family decisions affecting me are made."</i>
	Family Recognition for Prosocial Involvement	When parents, siblings, and other family members praise, encourage, and recognize things done well by their child, children are more likely to develop strong bonds to the family. <i>Example question: "How often do your parents tell you they're proud of you for something you've done?"</i>
School Domain	School Opportunities for Prosocial Involvement	When young people are given more opportunities to participate meaningfully in the classroom and school, they are more likely to develop strong bonds of attachment and commitment to school. <i>Example question: "In my school, students have lots of chances to help decide things like class activities and rules."</i>
	School Recognition for Prosocial Involvement	When young people are recognized for their contributions, efforts, and progress in school, they are more likely to develop strong bonds of attachment and commitment to school. <i>Example question: "My teachers praise me when I work hard in school."</i>
Peer-Individual Domain	Social Skills	Young people who are socially competent are less likely to use drugs and engage in other problem behaviors. <i>Example question: "You are at a party at someone's house, and one of your friends offers you a drink containing alcohol. What would you say or do?"</i>
	Belief in the Moral Order	Young people who have a belief in what is "right" or "wrong" are less likely to use drugs or engage in delinquent or other problem behaviors. <i>Example question: "It is important to be honest with your parents, even if they become upset or you get punished."</i>

Table 1-2. Risk Factor Definitions

Community Domain	Low Neighborhood Attachment	Neighborhoods where residents report low levels of bonding to the neighborhood have higher rates of juvenile crime, violence and drug use. <i>Example question: "I'd like to get out of my neighborhood."</i>
	Community Disorganization	Neighborhoods with high population density, lack of natural surveillance of public places, physical deterioration, and high rates of adult crime have higher rates of juvenile crime, violence and drug use. <i>Example question: "How much do each of the following statements describe your neighborhood: crime and/or drug selling."</i>
	Laws and Norms Favorable Toward Drug Use	Communities where laws regulating alcohol and other drug use are poorly enforced have higher rates of youth alcohol and drug use, violence, and delinquency. Further, rates of youth alcohol and drug use and violence are higher in communities where adults believe it is normative or acceptable for minors to use alcohol or other drugs. <i>Example question: "How wrong would most adults in your neighborhood think it is for kids your age to drink alcohol?"</i>
	Perceived Availability of Drugs	The availability of cigarettes, alcohol, marijuana, and other illegal drugs is related to a higher risk of drug use and violence among adolescents. <i>Example question: "If you wanted to get some marijuana, how easy would it be for you to get some?"</i>
	Perceived Availability of Handguns	The availability of handguns is related to a higher risk of violent crime and delinquency by adolescents. <i>Example question: "If you wanted to get a handgun, how easy would it be for you to get one?"</i>
Family Domain	Poor Family Management	Parents' use of inconsistent and/or unusually harsh or severe punishment with their children places the children at higher risk for substance use and other problem behaviors. Parents' failure to provide clear expectations and to monitor their children's behavior makes it more likely that they will engage in drug abuse and other problem behaviors. <i>Example question: "The rules in my family are clear."</i>
	Family Conflict	Children raised in families high in conflict are at risk for violence, delinquency, school dropout, teen pregnancy, and drug use. <i>Example question: "We argue about the same things in my family over and over."</i>
	Family History of Antisocial Behavior	Children from families with a history of problem behaviors (e.g., crime, violence or alcohol or drug abuse or dependence) are more likely to engage in these behaviors. <i>Example question: "Has anyone in your family ever had a severe alcohol or drug problem?"</i>
	Parental Attitudes Favorable Toward Drug Use	In families where parents are tolerant of their children's alcohol or drug use, children are more likely to become drug abusers. The risk is further increased if parents involve children in their own drug or alcohol using behavior; for example, by asking the child to light the parent's cigarette or get the parent a beer from the refrigerator. <i>Example question: "How wrong do your parents feel it would be for you to smoke cigarettes?"</i>
	Parental Attitudes Favorable Toward Antisocial Behavior	In families where parents are tolerant of their children's misbehavior, including violent and delinquent behavior, children are more likely to become involved in violence and crime during adolescence. <i>Example question: "How wrong do your parents feel it would be for you to pick a fight with someone?"</i>

Table 1-2. Risk Factor Definitions (continued)

School Domain	Academic Failure	Beginning in the late elementary grades (grades 4-6), children who fall behind academically for any reason are at greater risk of drug abuse, school dropout, teen pregnancy, violence and delinquency. <i>Example question: "Putting them altogether, what were your grades like last year?"</i>
	Low Commitment to School	Factors such as not liking school, spending little time on homework, and perceiving coursework as irrelevant are predictive of drug use, violence, delinquency and school dropout. <i>Example question: "Now, thinking back over the past year in school, how often did you try to do your best work in school?"</i>
Peer - Individual Domain	Rebelliousness	Young people who do not feel part of society, are not bound by rules, don't believe in trying to be successful or responsible, or who take an active rebellious stance toward society, are at higher risk for delinquency, dropping out of school, and drug abuse. <i>Example question: "I ignore rules that get in my way."</i>
	Early Problem Behavior	Children who display aggressive and antisocial behavior in elementary school are at increased risk for delinquency, violence, school dropout, and drug use later in life. <i>Example question: "How old were you when you first attacked someone with the idea of seriously hurting them?"</i>
	Early Initiation of Drug Use	Early onset of drug use predicts misuse of drugs. Onset of drug use prior to the age of 15 is a consistent predictor of drug abuse, and a later age of onset of drug use has been shown to predict lower drug involvement and a greater probability of discontinuation of use. <i>Example question: "How old were you when you first smoked marijuana?"</i>
	Favorable Attitudes Toward Antisocial Behavior	Young people who accept or condone antisocial behavior are more likely to engage in a variety of problem behaviors. <i>Example question: "How wrong do you think it is for someone your age to steal anything worth more than \$5?"</i>
	Favorable Attitudes Toward Drug Use	Youth who express positive attitudes toward drug use are at higher risk for subsequent drug use. <i>Example question: "How wrong do you think it is for someone your age to smoke marijuana?"</i>
	Low Perceived Risk of Drug Use	Young people who do not perceive drug use to be risky are more likely to engage in drug use. <i>Example question: "How much do you think people risk harming themselves (physically or in other ways) if they try marijuana once or twice?"</i>
	Friends' Use of Drugs	Young people who associate with peers who engage in alcohol or substance use are much more likely to engage in the same behavior. <i>Example question: "Think of your four best friends (the friends you feel closest to). In the past year (12 months), how many of your best friends have smoked cigarettes?"</i>
	Sensation Seeking	Young people who seek out opportunities for dangerous, risky behavior in general are at higher risk for engaging in drug use and other problem behaviors. <i>Example question: "How many times have you done something dangerous because someone dared you to do it?"</i>
	Rewards for Antisocial Involvement	Young people who see antisocial behavior as rewarding and having few costs are at higher risk for engaging in antisocial behavior. <i>Example question: "What are the chances you would be seen as cool if you smoked marijuana?"</i>

Table 2. “Ever Used” Prevalence of Substance Use

Substance	2002 Franklin High School	2001 MTF Data *		
	10 th Grade	8 th Grade	10 th Grade	12 th Grade
Alcohol	56.0%	50.5%	70.1%	79.7%
Cigarettes	47.3%	36.6%	52.8%	61%
Chewing Tobacco	4.4%	11.7%	19.5%	19.7%
Inhalants	7.6%	17.1%	15.2%	13%
Marijuana	35.5%	20.4%	40.1%	49%
Hallucinogens	1.5%	4%	7.8%	12.8%
Cocaine	1.9%	4.3%	5.7%	8.2%

Table 3. 30-Day Prevalence of Substance Use

Substance	2002 Franklin High School	2001 MTF Data *		
	10 th Grade	8 th Grade	10 th Grade	12 th Grade
Alcohol	27.8%	21.5%	39%	49.8%
Cigarettes	17.3%	12.2%	21.3%	29.5%
Chewing Tobacco	3.0%	4%	6.9%	7.8%
Inhalants	2.3%	4%	2.4%	1.7%
Marijuana	17.0%	9.2%	19.8%	22.4%
Hallucinogens	1.1%	1.2%	2.1%	3.2%
Cocaine	0.8%	1.2%	1.3%	2.1%

* Comparison data from the Monitoring The Future (MTF) survey of a nationally representative sample of students in the 8th, 10th, and 12th grades.

Table 4. Heavy Use Prevalence of Alcohol and Cigarettes

Behavior	2002 Franklin High School
	10 th Grade
Binge Drinking	11.2%
30-Day Use of a Pack of Cigarettes or More/Day	1.6%

- Binge Drinking: Student has consumed five or more alcoholic drinks in a row on at least one occasion in the previous two weeks.

Table 5. Past Year Prevalence of Antisocial Behavior

Antisocial Behavior	2002 Franklin High School
	10 th Grade
Suspended from School	8.6%
Drunk or High at School	19.2%
Sold Illegal Drugs	8.4%
Stolen or Tried to Steal a Vehicle	5.5%
Been Arrested	4.8%
Attacked Someone with Intention to Harm	16.8%
Carried a Handgun	3.1%
Taken a Handgun to School	1.0%

Table 6. Percent of Students Reporting Protection

Protective Factor	2002 Franklin High School	2002 District Data			
	10 th Grade	6 th Grade	8 th Grade	10 th Grade	12 th Grade
Community Domain					
Community Opportunities for Prosocial Involvement	28.5%	44.3%	39.4%	37.4%	35.3%
Community Recognition for Prosocial Involvement	37.6%	47.2%	36.5%	46.7%	43.5%
Family Domain					
Family Attachment	42.2%	50.6%	44.9%	43.2%	58.8%
Family Opportunities for Prosocial Involvement	40.4%	51.8%	51.5%	50.6%	53.1%
Family Recognition for Prosocial Involvement	41.8%	45.9%	52.8%	51.5%	53.1%
School Domain					
School Opportunities for Prosocial Involvement	56.5%	54.5%	55.0%	59.3%	59.7%
School Recognition for Prosocial Involvement	51.5%	41.3%	42.7%	56.9%	46.9%
Peer-Individual Domain					
Social Skills	53.8%	68.5%	61.6%	56.0%	68.0%
Belief in Moral Order	57.3%	46.3%	48.8%	61.1%	46.5%

Table 7. Percent of Students Reporting Risk

Risk Factor	2002 Franklin High School	2002 District Data			
	10 th Grade	6 th Grade	8 th Grade	10 th Grade	12 th Grade
Community Domain					
Low Neighborhood Attachment	47.1%	47.3%	37.2%	42.0%	44.1%
Community Disorganization	58.6%	36.5%	42.3%	49.4%	46.2%
Laws & Norms Favorable to Drug Use	49.4%	50.4%	41.1%	48.2%	45.6%
Perceived Availability of Drugs	40.0%	32.5%	39.0%	42.0%	49.8%
Perceived Availability of Handguns	17.7%	16.5%	29.6%	17.0%	25.8%
Family Domain					
Poor Family Management	60.9%	51.7%	57.6%	55.0%	61.0%
Family Conflict	34.8%	36.7%	48.7%	36.6%	34.1%
Family History of Antisocial Behavior	36.8%	32.4%	39.2%	38.9%	35.7%
Parental Attitudes Favorable towards Drug Use	35.1%	17.0%	31.3%	43.6%	45.3%
Parental Attitudes Favorable to Antisocial Behavior	45.1%	36.1%	49.9%	47.1%	45.6%
School Domain					
Academic Failure	49.3%	43.2%	49.0%	45.3%	41.3%
Low Commitment to School	48.8%	54.4%	51.1%	48.4%	48.3%
Peer-Individual Domain					
Rebelliousness	47.4%	57.5%	42.7%	43.8%	40.4%
Early Problem Behavior	43.1%	27.0%	37.9%	39.1%	37.8%
Early Initiation of Drug Use	35.4%	33.7%	34.5%	34.3%	38.4%
Favorable Attitudes Towards Antisocial Behavior	48.5%	59.3%	52.4%	51.8%	49.5%
Favorable Attitudes Towards Drug Use	44.6%	36.4%	43.1%	48.6%	50.4%
Low Perceived Risks of Drug Use	41.4%	32.9%	49.8%	45.7%	47.1%
Friends' Use of Drugs	39.9%	29.2%	43.0%	42.3%	40.2%
Sensation Seeking	41.3%	41.3%	42.2%	40.1%	42.9%
Rewards for Antisocial Involvement	24.7%	35.8%	47.8%	36.3%	43.1%

NOTES AND DEFINITIONS

NOTES

Representativeness. Although every attempt was made to include all Franklin High School students in 10th and 12th grades, the overall participation rate was approximately 79%. Thus, it is possible that results shown here are not representative of all Franklin High School youth. The prevalences described are *estimates* of youths' behavior and experience.

School dropouts. In interpreting differences between grades, the reader should remember that some reported behaviors and risk factors may appear more prevalent in the eighth and tenth grades compared to twelfth grade because of increased school dropouts after age 16 (prior to 12th grade) (Einspruch et al., 1998). School dropouts have generally been found to have higher levels of problem behaviors and risk factors than youths who remain in school.

Validity of student self-report data. Three different strategies were used to assess the validity of individual student surveys (Arthur et al., in press). The first two strategies eliminated respondents who appeared to exaggerate their substance use. In the first strategy, respondents who reported improbably high levels of marijuana, LSD and cocaine were eliminated from the survey data set. In the second strategy, respondents were asked questions specifically designed to determine if they lied about their substance use; endorsing these items eliminated them from the data set. The third strategy involved the final question of the survey, which asked respondents how honest they had been in answering the questions. If a student reported they had been dishonest, they were eliminated from the data set.

DEFINITIONS

Risk and Protective Factors: see Tables 1-1 and 1-2 on pages A1-A3.

Protective Profiles

- ⇒ **'Percent Protected':** the percent of surveyed youth in that grade whose level of exposure to that protective factor decreased the likelihood of negative outcomes.
- ⇒ **'Overall Protection':** the proportion of surveyed youth who reported adequate protection on four or more protective factors.

Risk Profiles

- ⇒ **'Percent at Risk':** the percent of surveyed youth in that grade whose level of exposure to that risk factor increased the likelihood of negative outcomes.
- ⇒ **'Overall Risk':** the proportion of surveyed youth who reported significant risk on nine or more risk factors.

Substance Use and Antisocial Behaviors

- 1) 'Ever-used' measures show the prevalence of use of a particular substance in the youth's lifetime.
- 2) '30-day use' is an indication of current use of the substance.
- 3) 'Binge drinking' and 'A pack of cigarettes or more per day' measure heavy use of alcohol and tobacco.
- 4) Antisocial behavior measures show any involvement with the reported behavior in the past year.

CONTACTS FOR PREVENTION

Where to Find Prevention Resources

Communities That Care Prevention Strategies: A Research Guide to What Works.

Distributed by Channing Bete Company. Available online at www.channing-bete.com or by calling 1-877-896-8532.

Center for the Application of Prevention Technologies (CAPT)

Robert McArdle

CAPT Coordinator for Washington State

(360) 407-5296

email: mcardaw@dshs.wa.gov

<http://www.captus.org>

Brings research into practice by assisting policy makers and practitioners in applying research to prevention planning and programs. Resources available through the CAPT include: Prevention News, Science-Based Prevention Primer, Effective Programs Database, Definition of Scientifically Defensible Prevention, and Levels of Effectiveness.

Office of Juvenile Justice and Delinquency Prevention (OJJDP)

<http://www.ojjdp.ncjrs.org>

Arm of the Office of Justice Programs of the U.S. Department of Justice. Provides grant funding, technical assistance, programs, publications and other resources for the prevention of juvenile delinquency and violence. Website provides state-by-state list of contacts.

Safe and Drug-Free Schools and Communities Program (SDFSCP)

email: safeschl@ed.gov

<http://www.ed.gov/offices/OESE/SDFS/>

Arm of the Department of Education that provides funding and technical assistance directly to schools and communities for planning and implementing prevention programs.

Where to Obtain Technical Assistance

Seattle Public Schools

Office of Community Learning

Terry Chadsey, Caroline Tamayo, and Mike Donlin

Communities That Care (CTC) Mobilizers

(206) 252-0790

Office supporting the implementation of Communities That Care (CTC) in the Seattle Public Schools.

Seattle Public Schools

Sharon Wilkins

Education Director for High Schools

(206) 252-0151

Channing Bete Company

Sherry Wong

Director of Training

(206) 935-1601

email: swong@channing-bete.com

<http://www.channing-bete.com>

Distributor of Communities That Care Prevention Strategies: A Research Guide to What Works, available online or by calling 1-877-896-8532.

REFERENCES

- Arthur, M.W., Hawkins, J.D., Pollard, J.A., Catalano, R.F., Baglioni, A.J. (in press). Measuring risk and protective factors for substance use, delinquency, and other adolescent problem behaviors: The Communities That Care Youth Survey. Evaluation Review.
- Brewer, D.D., Hawkins, J.D., Catalano, R.F., Neckerman, H.J. (1995). Preventing serious, violent, and chronic juvenile offending: A review of selected strategies in childhood, adolescence, and the community. In J.C. Howell, B. Krisberg, J.D. Hawkins, & J.J. Wilson (Eds.), A sourcebook: Serious, violent, and chronic juvenile offenders (pp. 61-141). Thousand Oaks, CA: Sage Publications, Inc.
- Briney, J.S., Arthur, M.W., Brooke-Weiss, B.L., Hawkins, J.D. (2002). Measuring community risk and protection using the Communities That Care Youth Survey. Submitted to Evaluation and Program Planning.
- Catalano, R.F., Arthur, M.W., Hawkins, J.D., Berglund, L., Olson, J.J. (1998). Comprehensive community and school-based interventions to prevent antisocial behavior. In R. Loeber, D.P. Farrington (Eds.), Serious and violent juvenile offenders: Risk factors and successful interventions (pp.248-283). Thousand Oaks, CA: Sage Publications, Inc.
- Developmental Research and Programs (2000). Communities That Care Prevention Strategies: A research guide to what works. Distributed by Channing Bete Company ([www.channing-bete.com/\(877\)896-8532](http://www.channing-bete.com/(877)896-8532)).
- Durlak, J.A. (1998). Common risk and protective factors in successful prevention programs. American Journal of Orthopsychiatry 68: 512-520.
- Einspruch, E.L., Deck, D.D., Nickel, P.R., Hyatt, G. (2001). Washington State Survey of Adolescent Health Behaviors 2000. Portland, OR: RMC Research Corporation.
- Einspruch, E.L., Gabriel, R.M, Deck, D.D., Nickel, P.R. (1998). Washington State Survey of Adolescent Health Behavior 1998. Portland, OR: RMC Research Corporation.
- Hawkins, J.D., Arthur, M.W., Catalano, R.F. (1995). Preventing substance abuse. In M.Tonry & D. Farrington (Eds.), Building a safer society: Strategic approaches to crime prevention (Vol 19, pp.343-427, Crime Justice: A Review of Research). Chicago: University of Chicago Press.
- Hawkins, J.D., Arthur, M.W., Olson, J.J. (1997). Community interventions to reduce risks and enhance protection against antisocial behavior. In D.M. Stoff, J. Breiling, J.D. Maser (Eds.), Handbook of antisocial behavior. (pp.365-374). New York, NY: Wiley.
- Hawkins, J.D., Catalano, R.F., Miller, J.Y. (1992). Risk and protective factors for alcohol and other drug problems in adolescence and early adulthood: Implications for substance abuse prevention. Psychological Bulletin, 112(1), 64-105.
- Hawkins, J.D., Herrenkohl, T.I., Farrington, D.P., Brewer, D.D., Catalano, R.F., Harachi, T.W., Cathern, L. (2000, April). Predictors of youth violence. OJJDP Juvenile Justice Bulletin.
- Mrazek, P.J., Haggerty, R.J. (1994). Reducing risks for mental disorders: Frontiers for prevention intervention research. Washington, D.C.: National Academy Press.
- Pollard, J.A., Hawkins, J.D. Arthur, M.W. (1999). Risk and protection: Are both necessary to understand diverse behavioral outcomes in adolescence? Social Work Research, 23(3), 145-158.
- Slavin, R.E. (1989). Students at risk of school failure: The problems and its dimensions. In R.E. Slavin, N.L. Karweit, & N.A. Madden (Eds.), Effective programs for students at risk. Boston, MA: Allyn and Bacon.
- Tobler, N.S., Roona, M.R., Ochshorn, P., Marshall, D.G., Streke, A.V., Stackpole, K.M. (2000). School-based adolescent drug prevention programs: 1998 meta-analysis. Journal of Primary Prevention 20: 275-336.