



Rhode Island Data Brief

2011 RI Middle School Health Risks Summary

Purpose: Health compromising behaviors adopted during adolescence often translate into poor health status later in adulthood. The purpose of this Brief is threefold: 1) to examine unfavorable risk behaviors among RI middle school students, 2) to see if those risks have improved or worsened over time (2007-2011), and 3) to see if there is any difference in 11 select behaviors by grade level (6th, 7th, and 8th grades). Twenty four measures¹ are evaluated, comprising eight areas of vulnerability (i.e., violence, mental health, tobacco, alcohol, drugs, sex, injury, and weight). The findings are intended to inform interested parties and stimulate further research.

Key Findings

Overall, RI middle school students' health risks were generally unchanged from 2007-2011.

From 2007-2011, one of 18 individual risk measures improved significantly (i.e., abused Rx drugs), and no measure worsened.

In 2011, eight (of 11) select risk measures increased unfavorably by student grade level (6-8).

Using the Information: The 2007-2011 changes in the health risk values may be statistically 'significant' or not² (2007-2011 changes could not be determined for six of the 24 measures as they were new in 2009). All 24 measures are unfavorable indicators, so lower/declining values are preferred.

Findings: From 2007 to 2011, one of the 18 measures for which there are complete data, improved significantly, and no measure worsened. However, in 2011, eight of 11 select risk behaviors increased unfavorably by grade level (6-8). Demographically, 34% of RI middle school students were minority, 52% were male, 8% had a physical disability, 10% had an emotional disability, and 7% received mostly 'D&F' grades in school. Select risk factors include:

- Thirty nine percent of middle school students were **bullied** at school in 2011, but there was no appreciable difference in bullying rates by grade level (6-8).
- Forty three percent of students were involved in a **physical fight** in 2011, and fighting rates increased by grade level (6-8).
- In 2011, 11% of middle school students **planned their own suicide**, and 6% **attempted suicide**. There was also an increase in the attempted suicide rates by grade level (6-8).
- In 2011, 4% of middle school students were **current smokers** and those rates increased by grade level (6-8). Six percent of students had **tried any tobacco product** in 2011.
- The **current drinking** rate was 13% in 2011, and 10% of students had **tried alcohol before age 11**.
- In 2011, 10% of middle school students had **tried marijuana**, and the rates increased by grade level (6-8).
- Four percent of students **tried cocaine** in 2011, but there was no appreciable difference by grade level (6-8).
- In 2011, 6% of students **abused prescription drugs**, a significant improvement from the 11% rate in 2007.
- In 2011, 12% of students had ever **had intercourse**, and those rates increased by grade level (6-8).
- Four percent of students **had intercourse before age 11** in 2011, and 32% had **never received any AIDS/HIV education** in school.
- In 2011, 59% of middle school students did **not wear a bike helmet**, and those rates increased by grade level (6-8). Six percent of students did **not wear seatbelts**, and those rates also increased by grade level (6-8).
- In 2011, 22% of students **rode with a driver that had been drinking** alcohol.
- In 2011, 10% of middle school students had **inadequate exercise**, 32% had **excessive computer use** for non-school related work (3+ hours per school day), and 33% spent too much time **watching television** (3+ hours per school day).

The general lack of improvement in RI middle school students' risk behaviors is concerning, as is the increase in select risk behaviors by grade level (6-8). Early recognition of these behaviors, and intervention efforts, are, therefore, critical to improving the Publics' health status.

¹ Data are from RI's Youth Risk Behavior Survey, part of a biennial national survey of public high school students on the major causes of disease and injury morbidity and mortality (for more information contact (author) Nikolas Petropoulos at 401-222-4613, or Bruce Cryan at 401-222-5111, www.health.ri.gov/data/youthriskbehaviorsurvey/)

² As the RI-YRBS is a sample survey, if the 95% Confidence Intervals of two values do not overlap, one may conclude (with 95% certainty) that there was a 'real' (statistically 'significant') difference between the two values (i.e., the difference was not likely due to sampling bias)

Chart 1: RI 2007 & 2011 Middle School Health Risks

* statistically significant differences

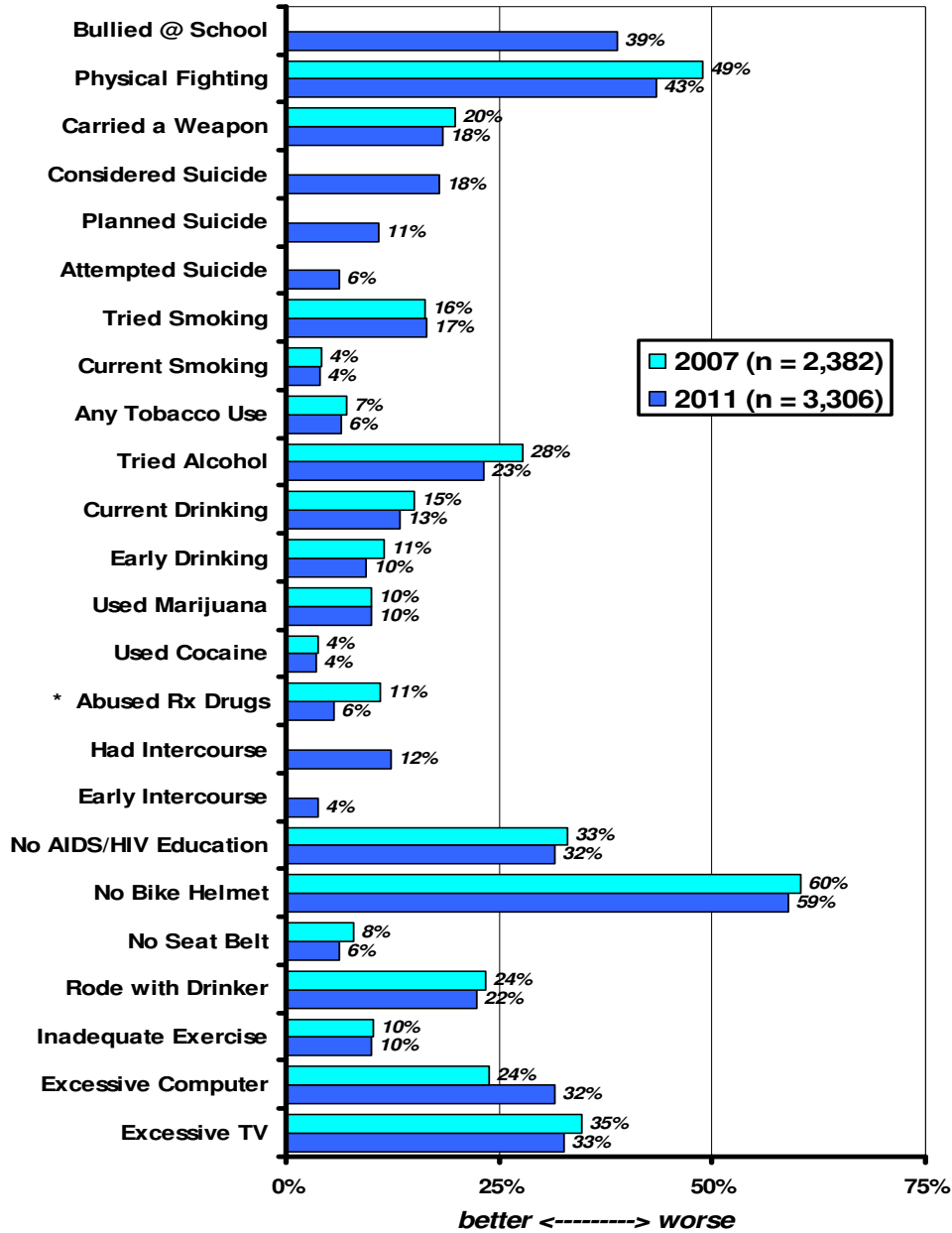
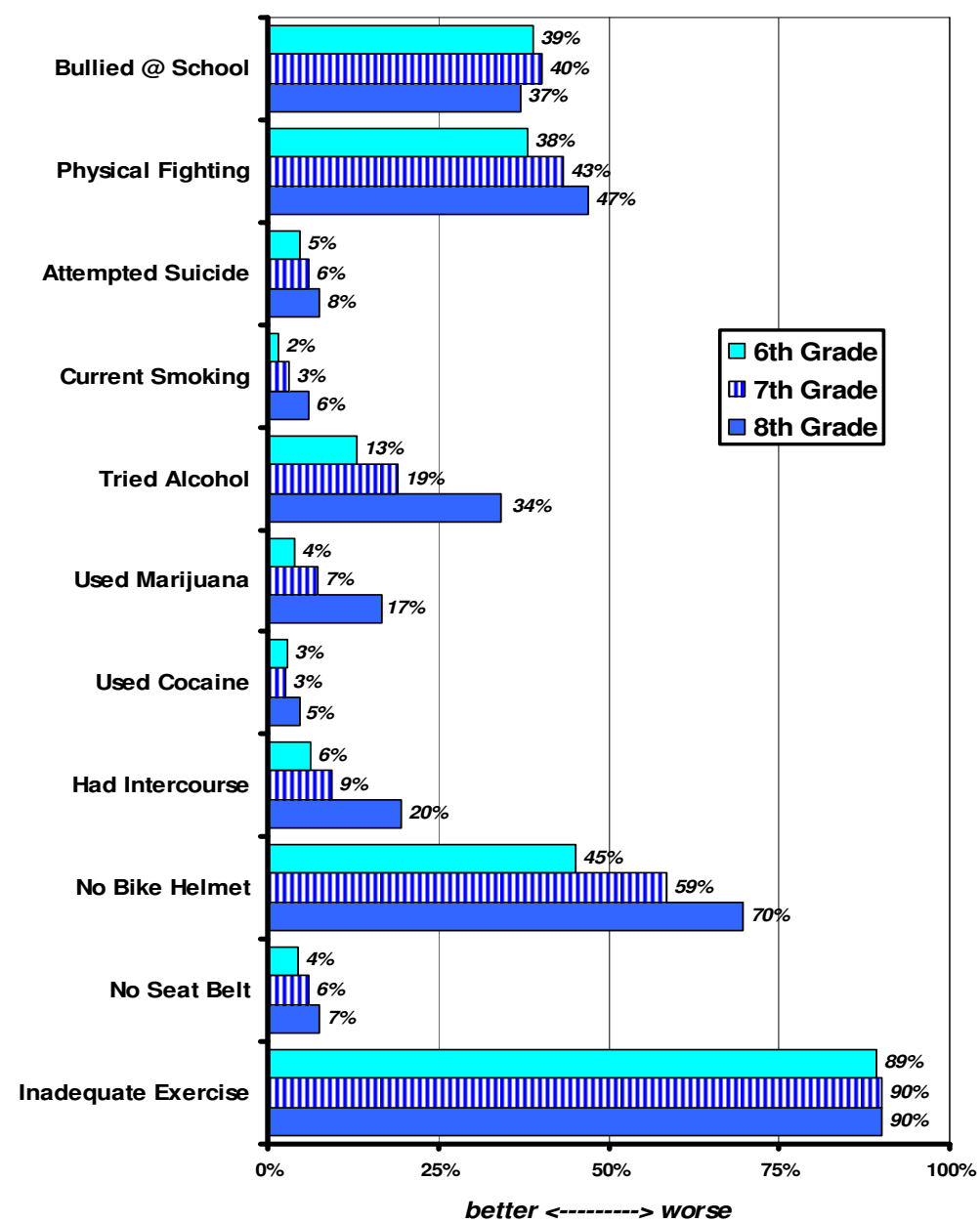


Chart 2: Select RI 2011 Middle School Health Risks by Grade Level



VIOLENCE MEASURES: Bullied @ School (ever); Physical Fighting (ever); Carried a Weapon (carried a gun, knife or club, ever); **MENTAL HEALTH MEASURES:** Considered Suicide (ever); Planned Suicide (ever); Attempted Suicide (ever); **TOBACCO MEASURES:** Tried Smoking (ever); Current Smoking (smoked on 1+ days in the past mo.); Any Tobacco Use (used chewing tobacco, snuff, dip, or smoked cigars or cigarettes on 1+ days in the past mo.); **ALCOHOL MEASURES:** Tried Alcohol (ever); Current Drinking (acquired alcohol in the past mo.); Early Drinking (1st alcohol drink before age 11); **DRUG USE MEASURES:** Used Marijuana (ever); Used Cocaine (used any form of cocaine, ever); Abused Rx Drugs (without a prescription, ever); **SEXUAL ACTIVITY MEASURES:** Had Intercourse (ever); Early Intercourse (had intercourse before age 11); **No AIDS/HIV Education** (never taught in school); **INJURY MEASURES:** No Bike Helmet (never or rarely wore a helmet); No Seat Belt (never or rarely wore a seat belt as a passenger); Rode with Drinker (ever); **WEIGHT RELATED MEASURES:** Inadequate Exercise (60+ min. of exercise on 0 days in the past wk.); Excessive Computer (non school work, 3+ hrs. per school day); Excessive TV (3+ hrs. per school day)