

Youth Risk Behavior Survey 2016-2017

Alexandria, VA

**Alexandria City Public Schools
Alexandria Health Department**



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Youth Risk Behavior Survey

Introduction

The Alexandria Youth Risk Behavior Survey (YRBS), based on the original Youth Risk Behavior Surveillance System (YRBSS) developed by the Centers for Disease Control and Prevention (CDC), is a voluntary, anonymous, self-reported survey administered to adolescents in grades 8, 10, and 12. This survey of Alexandria's public school youth was a result of the collaboration among a wide range of academic, government, volunteer, and non-governmental organizations to improve the health and wellness of adolescents in Alexandria. The goal of the survey is to obtain information on youth behaviors in six risk areas identified as contributing to the leading cause of death and disability among youth in the United States.¹

- 1) Physical health
- 2) Behaviors that contribute to unintentional and intentional injuries
- 3) Alcohol and other drug use
- 4) Tobacco use
- 5) Sexual behaviors that contribute to unintended pregnancy or sexually transmitted infections, including HIV
- 6) Dietary behavior

The survey was conducted in November of 2016 among students in grades 8, 10, and 12. Notable risk behaviors reported among students in grades 8, 10, and 12 are highlighted graphically in this report. Comparable data from Alexandria's 2011, 2013 (grade 8), and 2014 (grades 10 and 12) YRBS were included where possible; however, methodologies were different in that 2011 YRBS utilized a paper-based survey for data collection, while data for the 2013, 2014, and 2016 surveys were collected electronically.

The attached appendices provide a comprehensive summary of results from the Alexandria YRBS in all three grades surveyed. National estimates from the 2015 CDC National YRBSS were included in the appendices as a reference point, but various methodologies were utilized by states across the nation, which may account for some differences in outcomes.

Methodology

The sampling frame for the 2016 YRBS in Alexandria included all students in grades 8, 10, and 12 attending school at George Washington Middle School, Francis C. Hammond Middle School, Jefferson-Houston School, and T.C. Williams High School. The survey was offered to students in these grades who were present on days selected by each school's administration.

Eighth grade students completed a 75-question survey in November 2016. Tenth and twelfth grade students at T.C. Williams High School completed a longer survey of 110 questions in November 2016. A total of 1,788 students from all three grades attempted the questionnaires.

Parents were notified about the survey one month prior to administration and given the opportunity to opt their children out of participation. Seventeen parents (0.62%) chose this option. Students were able to choose whether or not to take part in the survey, and those who participated could choose not to answer particular questions. The survey was administered electronically via each student's laptop computer during a 50 minute class period.

Survey Data

Of the 1,788 students who attempted the questionnaires, 66 were not included in the analysis. Reasons for removal include blank or highly incomplete questionnaires, extreme/conflicting responses to questions, or incomplete information on grade level. Removing these questionnaires from analysis avoided inclusion of responses that would place known bias into survey results.

Grade 8

- 26 questionnaires were removed from analysis
- 78% of eighth graders registered for the 2016-2017 school year completed the survey ($n=738$)

Grade 10 and 12

- 40 questionnaires were removed from analysis
- 59% of tenth graders registered for the 2016-2017 school year completed the survey ($n=605$)
- 57% of twelfth graders registered for the 2016-2017 school year completed the survey ($n=445$)

Analysis

This report focuses on graphical portrayal of notable results from the YRBS conducted among grades 8, 10, and 12. The graphs present results stratified by grade level, race/ethnicity, and gender. Data analysis was conducted using SAS 9.4 and StataSE 14. Data was weighted to reflect the true population proportions according to race and gender using the Virginia Department of Education 2016-2017 enrollment numbers by school and grade. All bar graphs visually display statistically significant data.

Statistical Significance

The use of an asterisk next to an indicator highlights if there was a statistically significant difference between the high school grades, race/ethnicity, or gender surveyed within the same year. Differences were statistically significant if the “p-value” in statistical analysis using the chi-square test resulted at or below 0.05. Such a low p-value means that there is a 5% or less probability that the observed difference is based on chance alone and would not be replicated if the survey were conducted again with the same population. Statistical significance in and of itself does not necessarily indicate public health significance. The use of a double asterisk indicates that an additional chi-square test was utilized to confirm that one group was statistically significantly different from the other groups.

Limitations

The response rates from the 2016 survey are comparable to 8th grade response rates in 2013 (82%) and 10th and 12th grade response rates in 2014 (53.5%). However, there may be some bias in the responses, given that roughly forty percent of eligible students in grades 10 and 12 opted to not participate in the survey or were not present at school that day. Inherent differences in the two populations, those who participated in the survey and those who did not, cannot be measured.

CDC National Estimates

National estimates from the 2015 CDC National YRBSS were included as a reference point at the right side of graphs for comparison with Alexandria City. Differences in administration and questions by states across the nation, may account for some differences in outcomes.

Acknowledgements

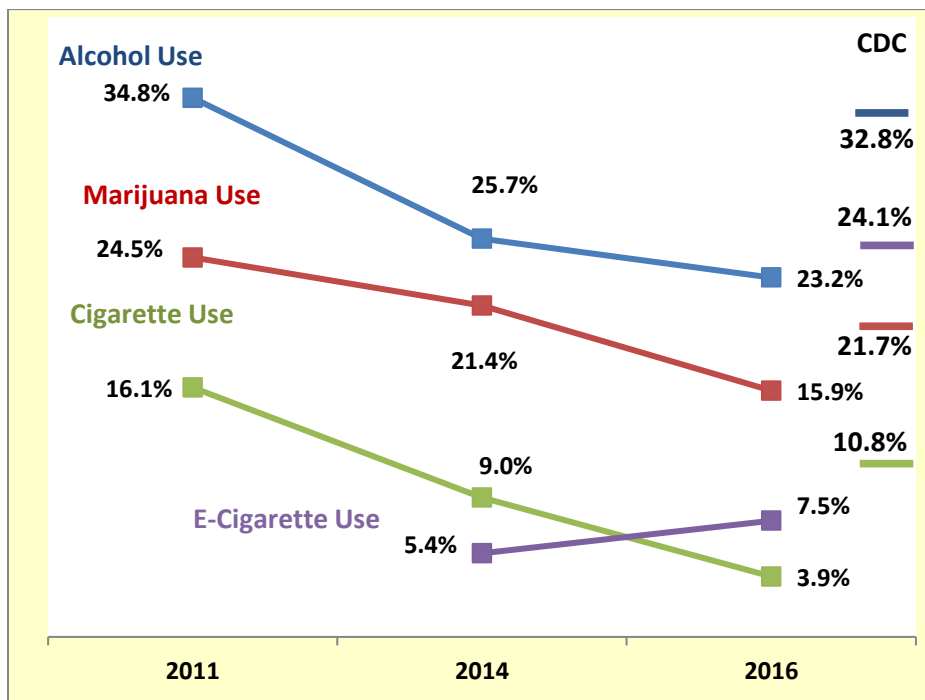
This report was a collaborative effort by Alexandria City Public Schools (ACPS), the Substance Abuse Prevention Coalition of Alexandria (SAPCA), Alexandria Health Department (AHD), and other community organizations. Data analysis was conducted by, and this report was prepared by, AHD Epidemiologists Melissa Arons MS, RN and George Washington Master in Public Health (Epidemiology) Intern Elizabeth Johns MPHc. The analyses and report were approved by AHD Deputy Health Director Tina Singh, MD, MPH and Director Stephen A. Haering, MD, MPH, FACPM; any errors in the analysis are the responsibility of AHD.

Questions about this report may be directed to alex_epi@vdh.virginia.gov.

**2016 Alexandria YRBS Results
Grades 8, 10, and 12**

2016 Alexandria YRBS Results: Youth Substance Use – Grades 10 and 12

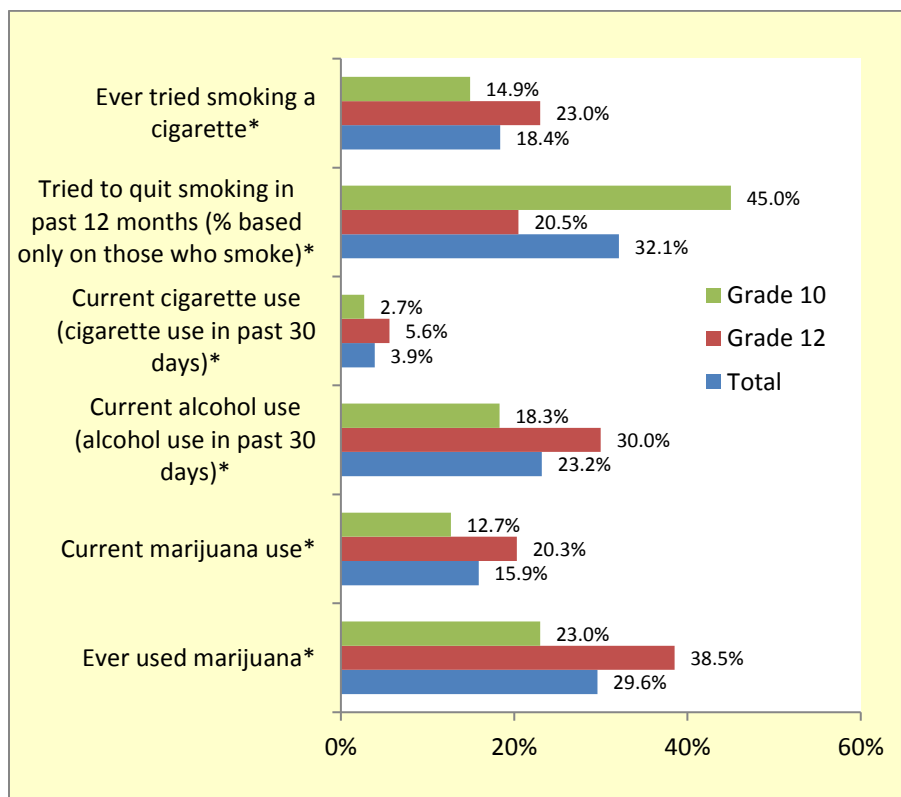
Figure 1: Alcohol, Marijuana, Cigarette, & E-cigarette Use in Last 30 Days 2011, 2014, & 2016, Grades 10 & 12



Substance Behaviors

- Current use of e-cigarettes was reported at **higher** levels in 2016 from 2014 when the question was first introduced into the survey.
- Current alcohol, marijuana, cigarette, and e-cigarette usage in Alexandria City schools was reported at **lower** levels when compared to CDC national estimates.

Figure 2: Substance Use by Grade, 2016

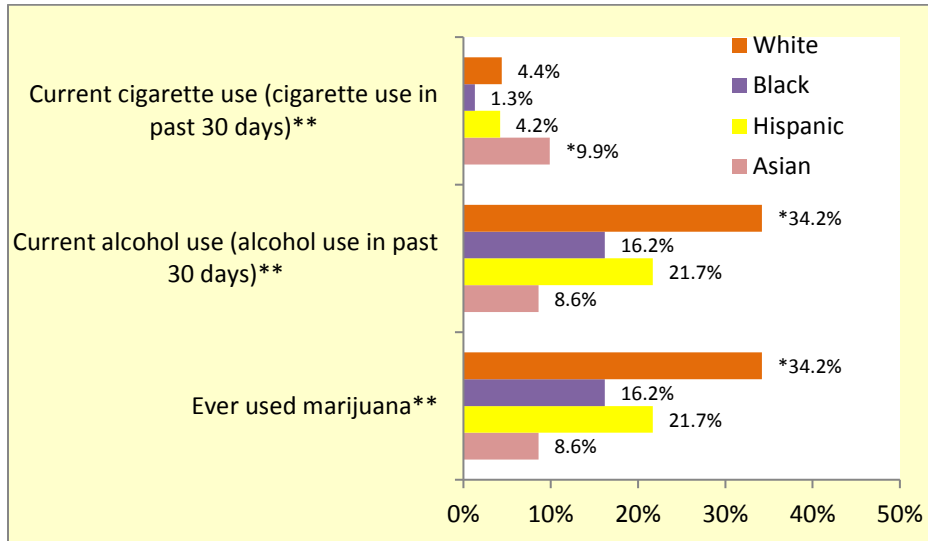


Substance Behaviors

- In 2016, ever smoking a cigarette, current use of cigarettes, alcohol, and marijuana were reported at statistically **higher** levels among twelfth graders, relative to tenth graders.
- Trying to quit smoking in the past 12 months, based on those who smoke, was reported at statistically **higher** levels among tenth graders relative to twelfth graders.

2016 Alexandria YRBS Results: Youth Substance Use – Grades 10 and 12

Figure 3: Substance Use by Race/Ethnicity, 2016



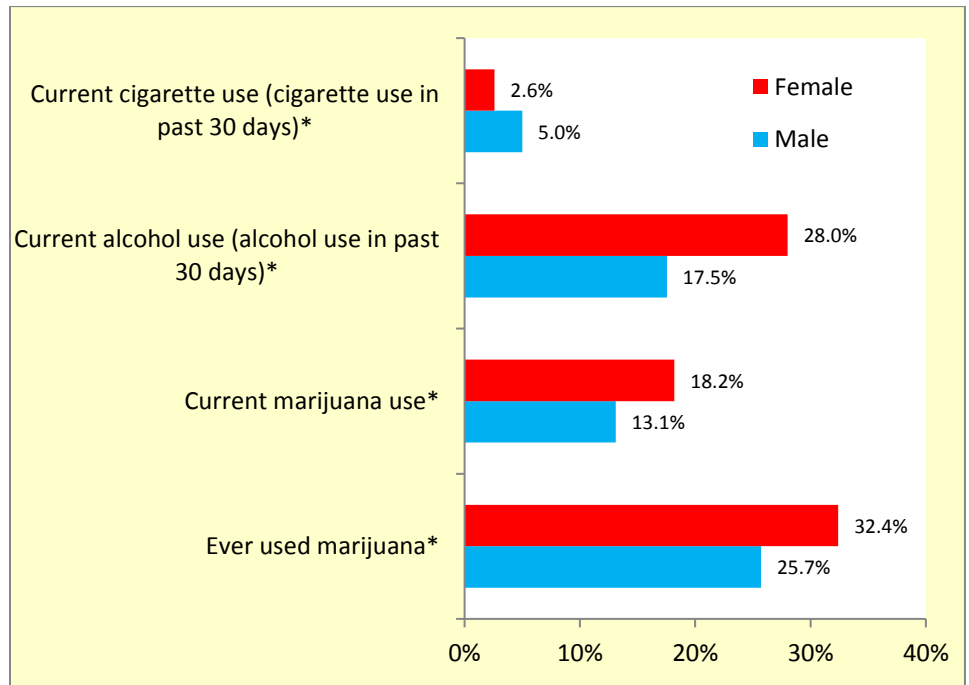
Substance Behaviors

- Statistically significant **higher** proportions of Asian students reported cigarette use in the past 30 days, relative to Hispanic, Black, and White students.
- Statistically significant **higher** proportions of White students reported alcohol use in the past 30 days, and ever using marijuana, relative to Asian, Hispanic, and Black students.

Figure 4: Substance Use by Gender, 2016

Substance Behaviors

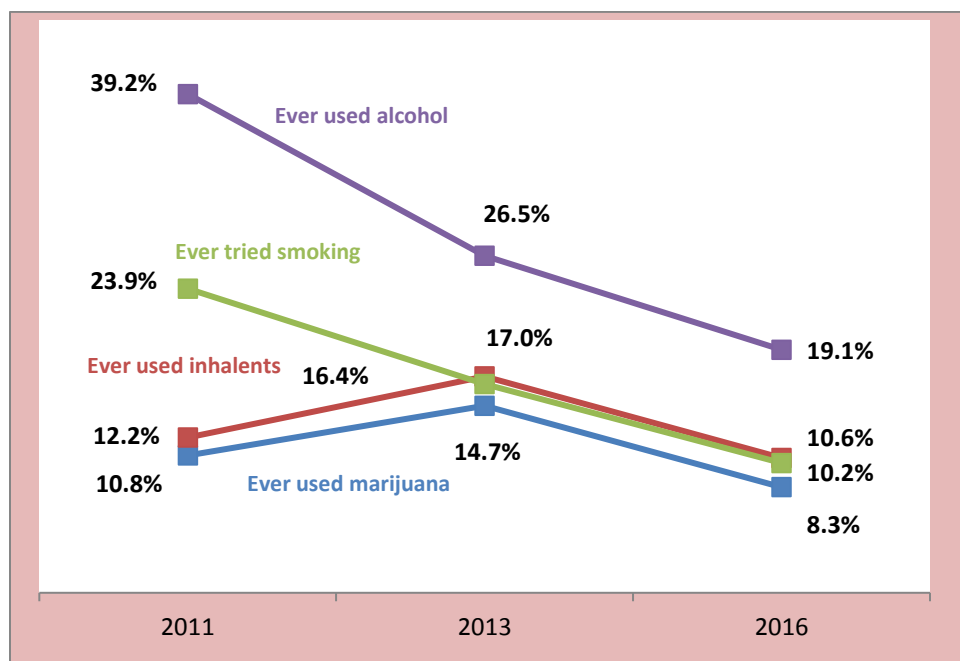
- A statistically significant **higher** proportion of females report alcohol use in the past 30 days, current marijuana use, and ever using marijuana, relative to males.
- A statistically significant **higher** proportion of males report cigarette use in the past 30 days, relative to females.



* Statistically significant – see page 4 for details

2016 Alexandria YRBS Results: Youth Substance Use – Grade 8

Figure 5: History of Substance Use, 2011, 2013, & 2016, Grade 8



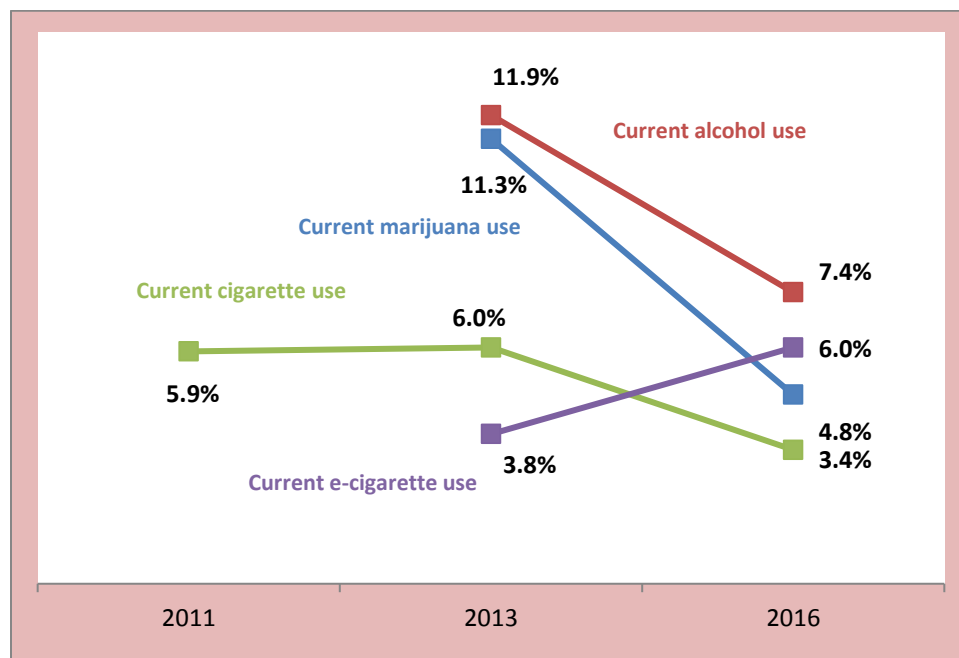
Substance Behaviors

- The proportion of eighth graders who reported ever using alcohol or cigarettes is **lower** in 2016 compared to 2011 and 2013.

Substance Behaviors

- Of the students who reported alcohol use: approximately 30% also reported current marijuana use, 17% reported current cigarette use, and 30% reported current use of e-cigarettes.
- "Current" use is defined as the use of a product within the past 30 days.

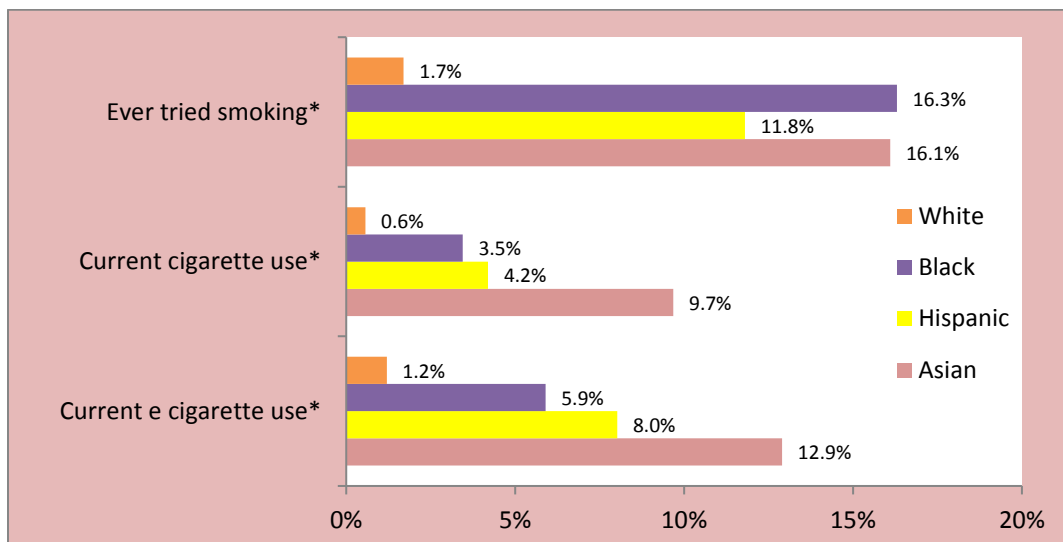
Figure 6: Current Use of Marijuana, Alcohol, Cigarettes, & E-cigarettes, 2011, 2013, & 2016, Grade 8



* Statistically significant – see page 4 for details

2016 Alexandria YRBS Results: Youth Substance Use – Grade 8

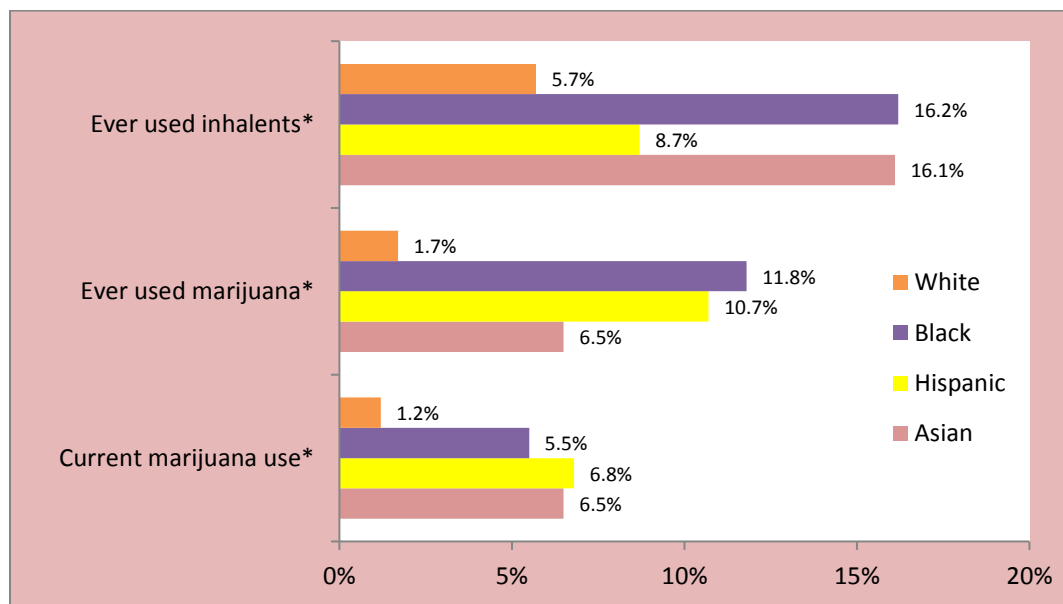
Figure 7: Alcohol & Cigarette Use by Race/Ethnicity, 2016, Grade 8



Substance Behaviors

- White students reported statistically significant **lower** proportions of ever having smoked, current e-cigarette use, ever having used inhalants, ever having used marijuana, and current marijuana use when compared to Black, Hispanic, and Asian students.
- Statistically significant differences between genders were only observed for current alcohol use. Females (9.2%) reported statistically significant **higher** proportion of current alcohol use when compared to males (5.1%).

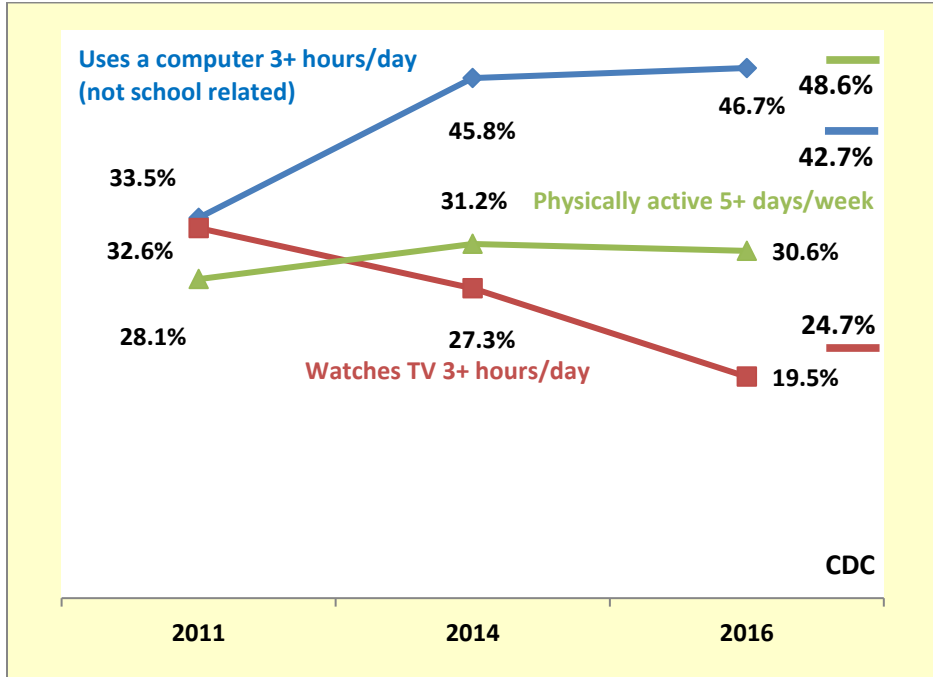
Figure 8: Marijuana & Inhalant Use by Race/Ethnicity, 2016, Grade 8



* Statistically significant – see page 4 for details

2016 Alexandria YRBS Results: Wellness and Healthcare – Grades 10 and 12

Figure 9: Daily Screen Time and Physical Activity, 2011, 2014, & 2016, Grades 10 & 12



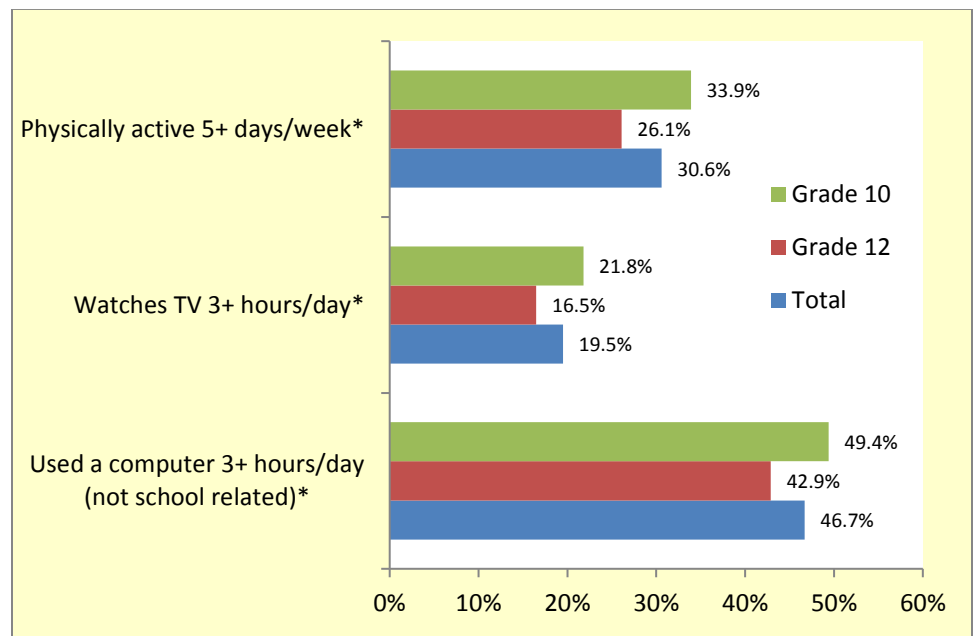
Screen Time & Physical Activity

- Watching TV was reported at **lower** levels in 2016 than 2011 and 2014, while using a computer and physical activity remained stable from 2014.
- Reported levels of physical activity and watching TV in Alexandria City were **lower** when compared to CDC national estimates. However, reported levels of computer usage were **higher** when compared to CDC national estimates.

Figure 10: Daily Screen Time and Physical Activity by Grade, 2016

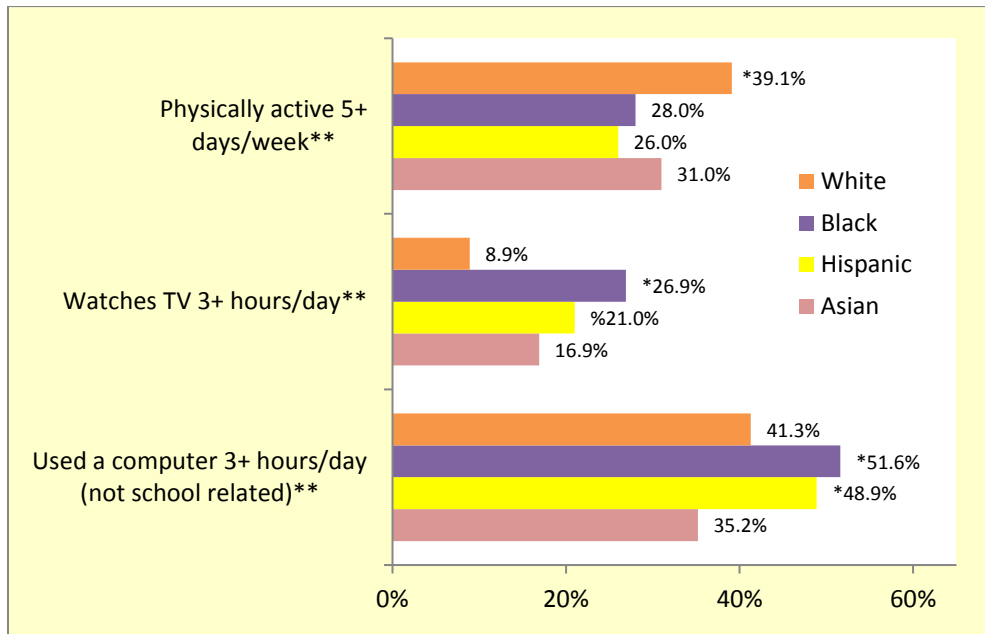
Screen Time & Physical Activity

- A statistically significant **higher** proportion of tenth graders reported being physically active 60 minutes a day, 5+ days/week, watching TV 3+ hours/day, and using a computer 3+ hours/day, relative to twelfth graders.



2016 Alexandria YRBS Results: Wellness and Healthcare – Grades 10 and 12

Figure 11: Daily Screen Time and Physical Activity by Race/Ethnicity, 2016



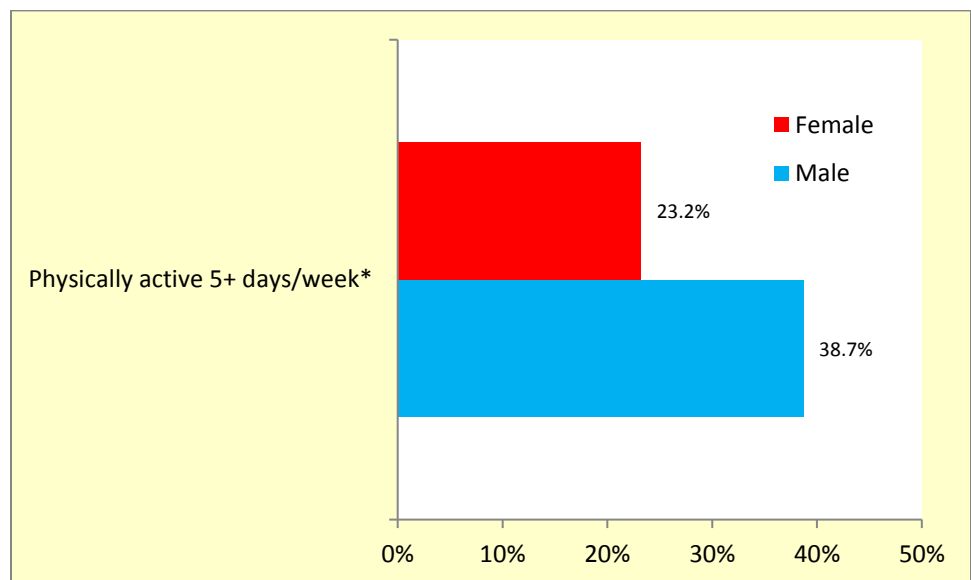
Screen Time & Physical Activity

- Statistically significant **higher** proportions of White students were physically active 60+ minutes at least 5 days per week, relative to Black, Hispanic and Asian students.
- Black and Hispanic students reported watching TV 3+ hours per day and using a computer 3+ hours per day at statistically significant **higher** proportions than White and Asian students.

Figure 12: Physical Activity by Gender, 2016

Screen Time & Physical Activity

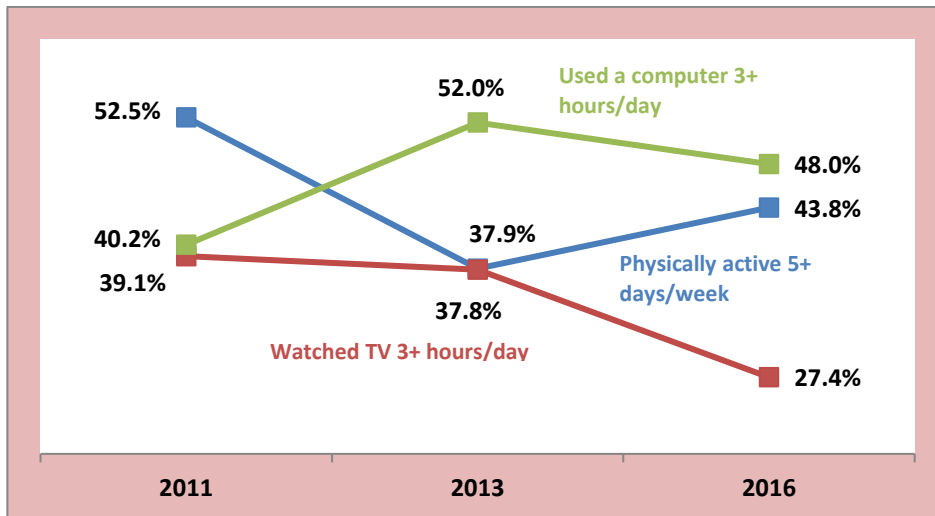
- A **higher** statistically significant proportion of males reported being physically active for 60 minutes a day, at least 5 days per week, relative to females.
- Differences in proportions between males and females are consistent with CDC national estimates.



* Statistically significant – see page 4 for details

2016 Alexandria YRBS Results: Wellness and Healthcare – Grade 8

Figure 13: Daily Screen Time & Physical Activity, 2011, 2013, & 2016, Grade 8



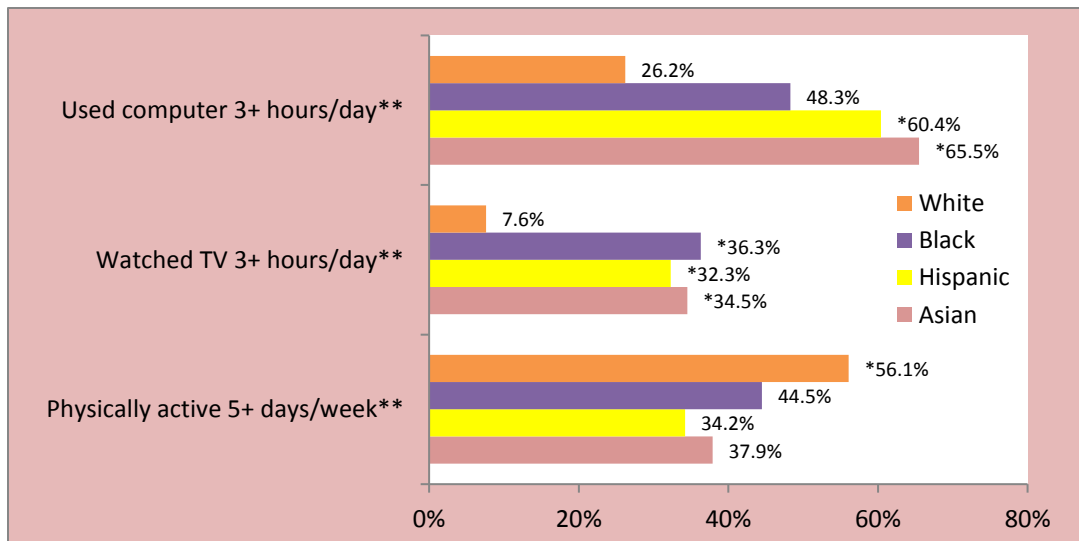
Screen Time & Physical Activity

- Use of a computer for 3+ hours/day and watching TV for 3+ hours/day was reported at **lower** levels in 2016 from 2013.
- Physical activity for 60 minutes, 5+ days/week, was reported at **higher** levels in 2016 from 2013.

Screen Time & Physical Activity

- Computer use for 3+ hours/day was reported at statistically significantly **higher** proportions among Asian and Hispanic students compared to Black and White students. *Note: Use of a computer includes screen time spent on a smartphone.*
- Statistically significant **lower** proportions of White students reported watching 3+ hours of TV/day compared to Black, Hispanic, and Asian students.
- White students reported statistically significant **higher** levels of daily exercise compared to Black, Hispanic, and Asian students.

Figure 14: Daily Screen Time & Physical Activity by Race/Ethnicity, 2016, Grade 8



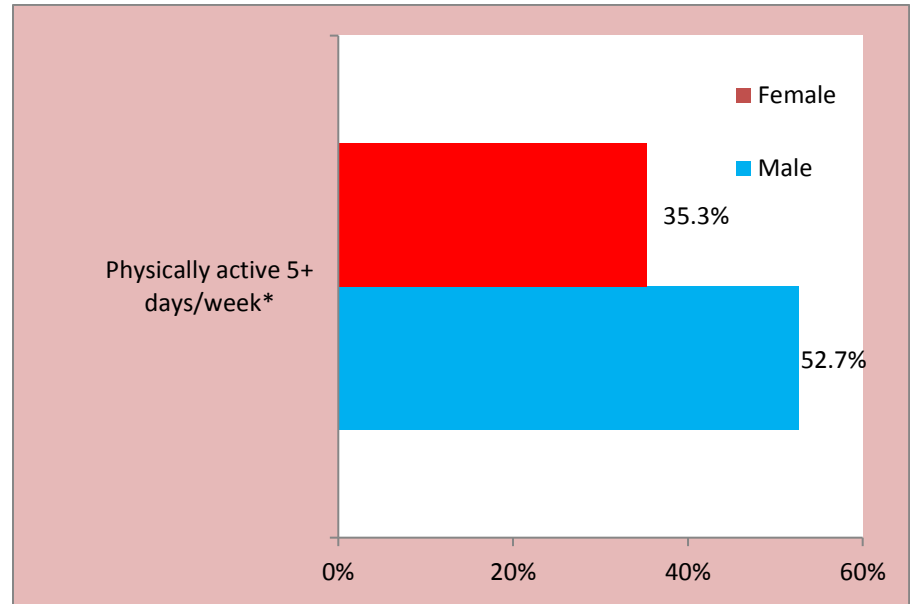
* Statistically significant – see page 4 for details

2016 Alexandria YRBS Results: Wellness and Healthcare – Grade 8

Figure 15: Daily Screen Time & Physical Activity by Gender, 2016, Grade 8

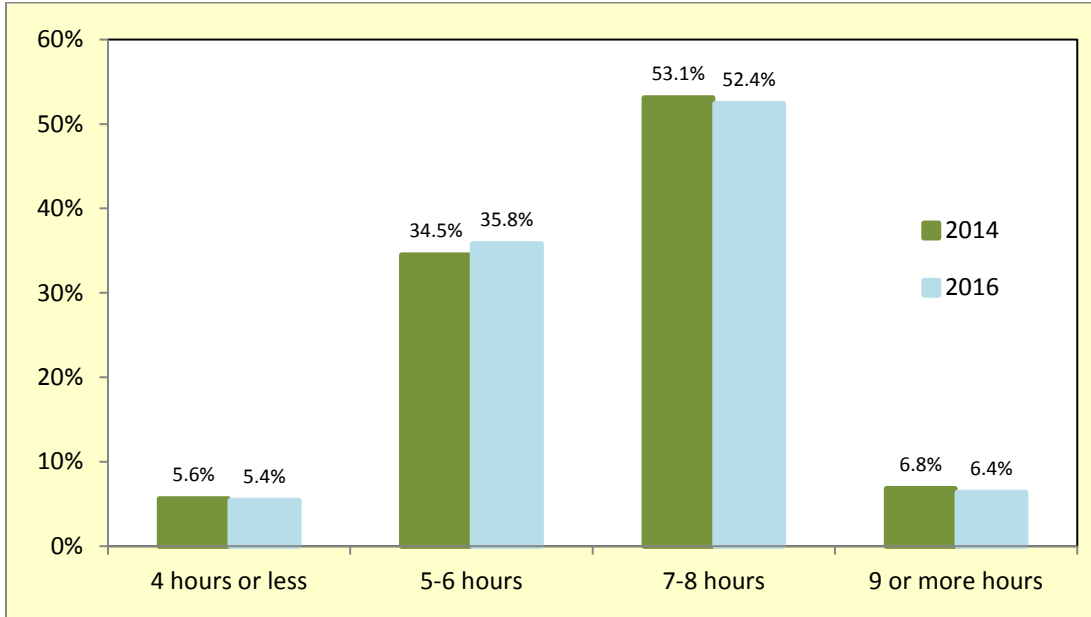
Screen Time & Physical Activity

- A statistically significant **higher** proportion of males reported exercising at least 60 minutes, 5+ days/week, compared to females.



2016 Alexandria YRBS Results: Wellness and Healthcare – Grades 10 and 12

Figure 16: Hours of Sleep on a Typical School Night, 2014 & 2016



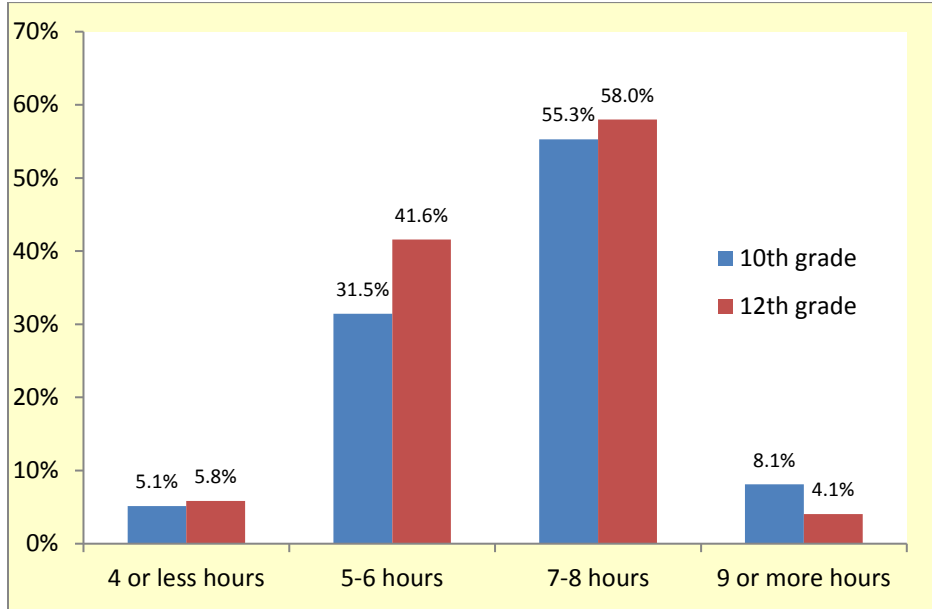
Sleep Habits

- Less than 30% of all surveyed students reported sleeping 8 or more hours on a typical school night. These reported levels remained stable from 2014.

* Statistically significant – see page 4 for details

2016 Alexandria YRBS Results: Wellness and Healthcare – Grades 10 and 12

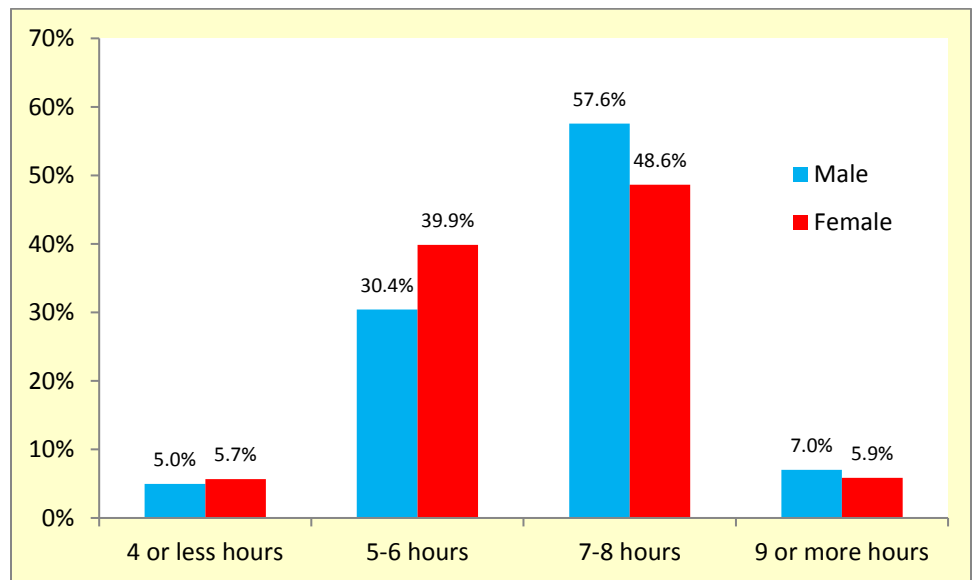
Figure 17: Hours of Sleep on Typical School Night by Grade, 2016



Sleep Habits

➤ A **higher** statistically significant proportion of tenth graders reported getting 8 or more hours of sleep on a typical school night when compared to twelfth graders. This difference between tenth and twelfth graders is consistent with CDC national estimates.

Figure 18: Hours of Sleep on Typical School Night by Gender, 2016



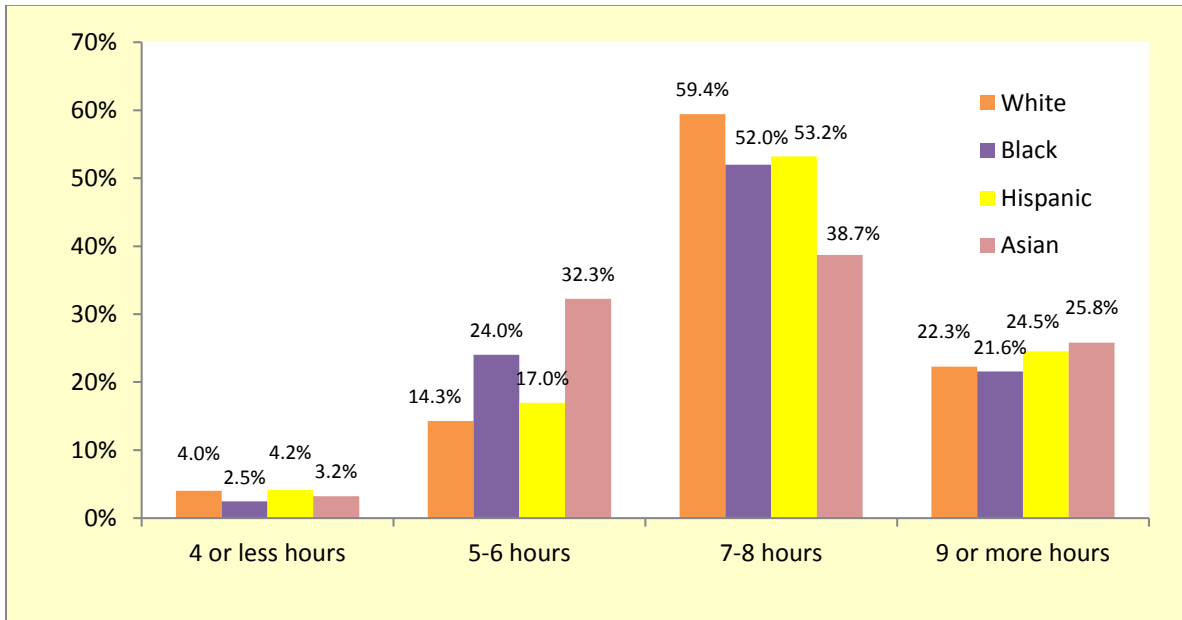
Sleep Habits

➤ A **higher** statistically significant proportion of males reported getting 8 or more hours of sleep on a typical school night when compared to females. This difference between males and females is consistent with CDC national estimates.

* Statistically significant – see page 4 for details

2016 Alexandria YRBS Results: Wellness and Healthcare – Grades 10 and 12

Figure 19: Hours of Sleep on a Typical School Night by Race/Ethnicity, 2016



Sleep Habits

- **Higher** proportions of White students reported sleeping 8 or more hours per night when compared to Asian, Hispanic, and Black students.
- Approximately 25-28% of Asian, Hispanic, Black, and White students reported sleeping 8 or more hours on a typical school night.

2016 Alexandria YRBS Results: Wellness and Healthcare – Grade 8

Sleep Habits

- Nearly 80% of all surveyed eighth graders reported having *at least* 7 hours of sleep on a typical school night.
- Overall, eighth graders reported **higher** proportions (55.3%) of getting eight or more hours of sleep on a typical school night than 10th and 12th graders (27.0%).

Figure 20: Hours of Sleep on a Typical School Night, 2016, Grade 8

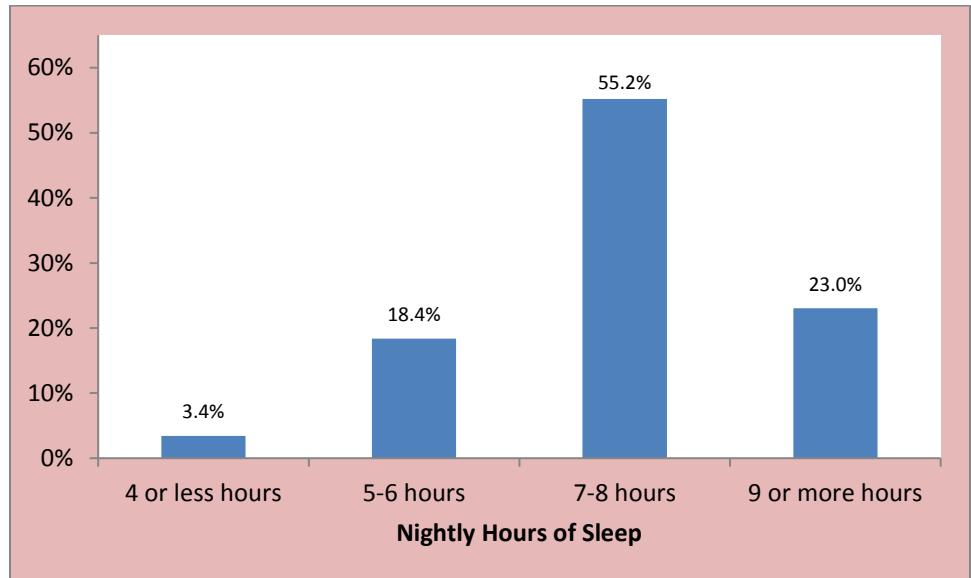
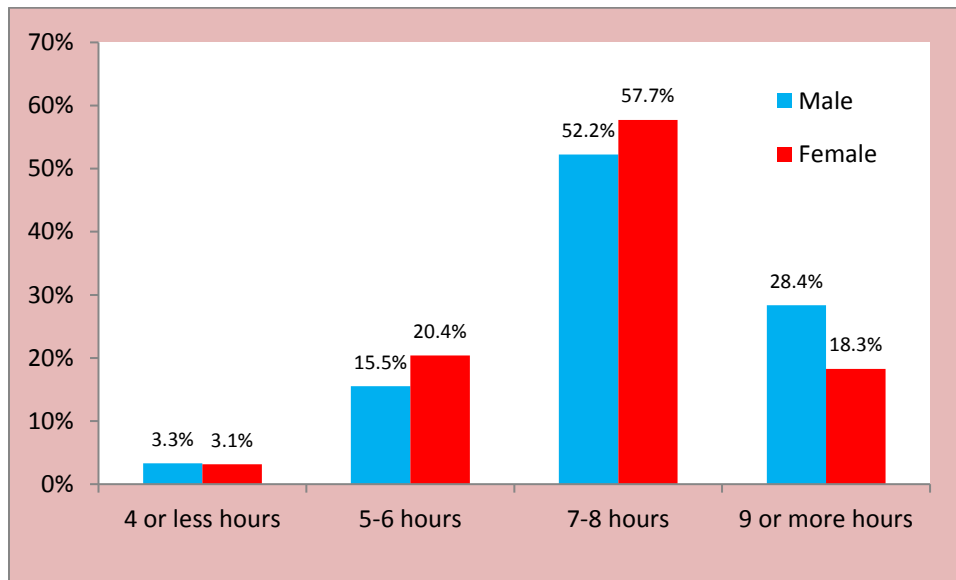


Figure 21: Hours of Sleep on a Typical School Night by Gender, 2016, Grade 8



Sleep Habits

- A **higher** proportion of male students reported getting 7 or more hours of sleep on a typical school night when compared to female students.
- No statistically significant differences were found when stratified by race/ethnicity.

2016 Alexandria YRBS Results: Wellness and Healthcare – Grades 10 and 12

Healthcare Provider Usage

- **Higher** proportions of students reported having a physical or check-up in the past 2 years, and having a medical home, usual doctor, or health center they go to when sick in 2016 than 2014.
- No statistically significant differences in reported healthcare provider usage were observed between tenth and twelfth grade students or between male and female students.

Figure 22: Healthcare Provider Usage, 2014 & 2016

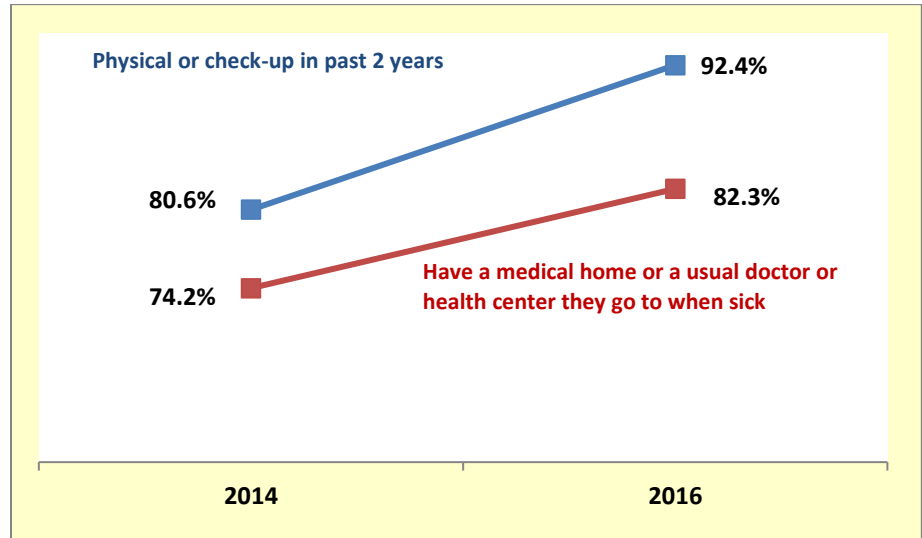
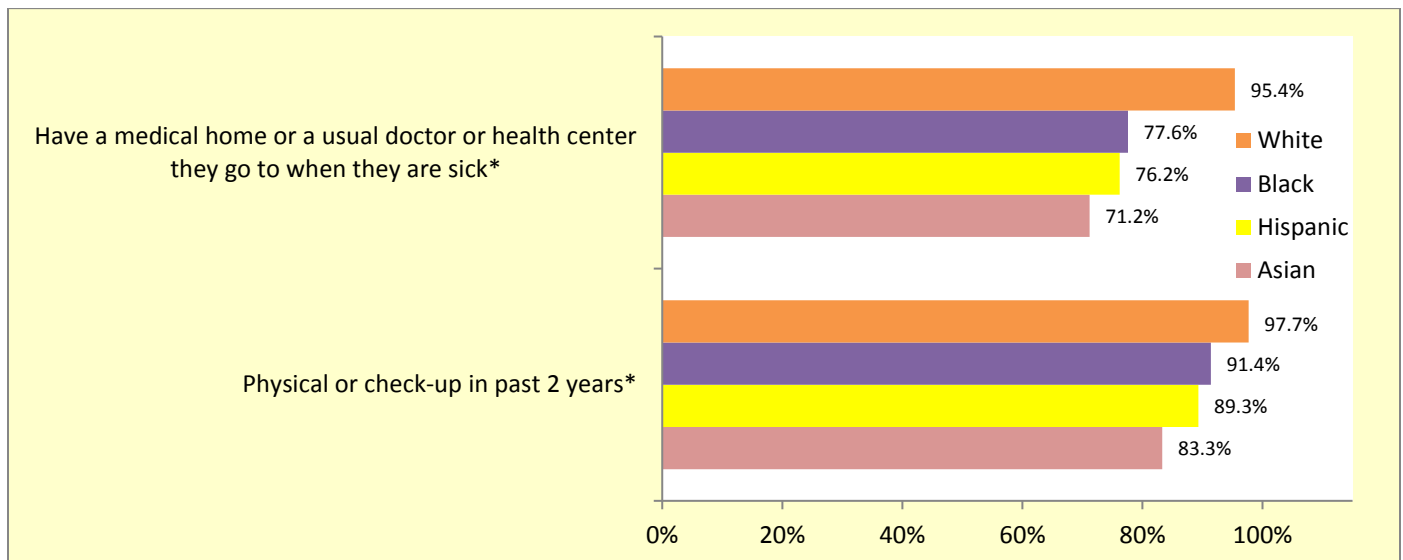


Figure 23: Healthcare Provider Usage by Race/Ethnicity, 2016

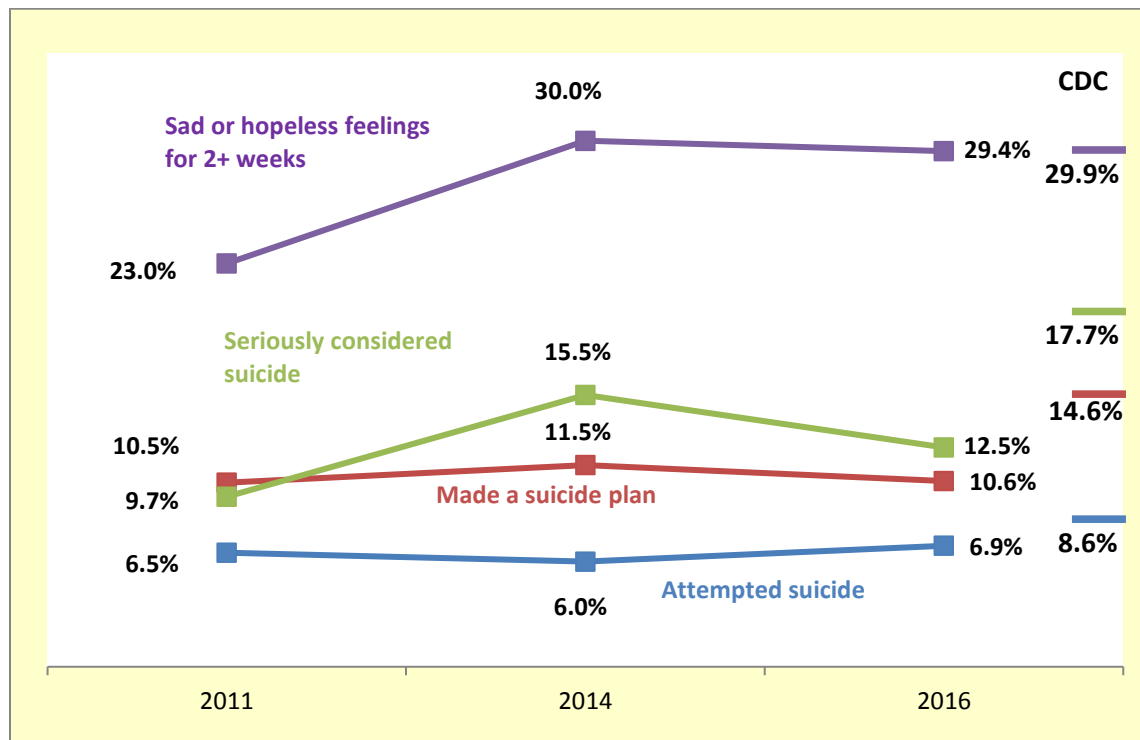


Healthcare Provider Usage

- A **higher** statistically significant proportion of White students reported having a medical home, usual doctor, or health center they go to when they are sick, and having had a physical or well check-up in the past 2 years compared to Black, Hispanic, and Asian students.

2016 Alexandria YRBS Results: Mental Health – Grades 10 and 12

Figure 24: Depression and Thoughts of Suicide, 2011, 2014, & 2016, Grades 10 & 12



Mental Health

- Overall reports of sad or hopeless feelings, plans for suicide, and suicide attempts remained stable from 2014 to 2016.
- No statistically significant differences between tenth and twelfth grade students or between Race/Ethnicity were reported.
- Students reported levels of sad or hopeless feelings, seriously considering suicide, making a suicide plan, and attempting suicide at **lower** proportions when compared to CDC national estimates.

* Statistically significant – see page 4 for details

2016 Alexandria YRBS Results: Mental Health – Grades 10 and 12

Mental Health

- Reported levels of having an injury after attempting suicide was **higher** in Alexandria City (6.9%) than CDC national estimates.

Figure 25: Depression & Thoughts of Suicide, 2016

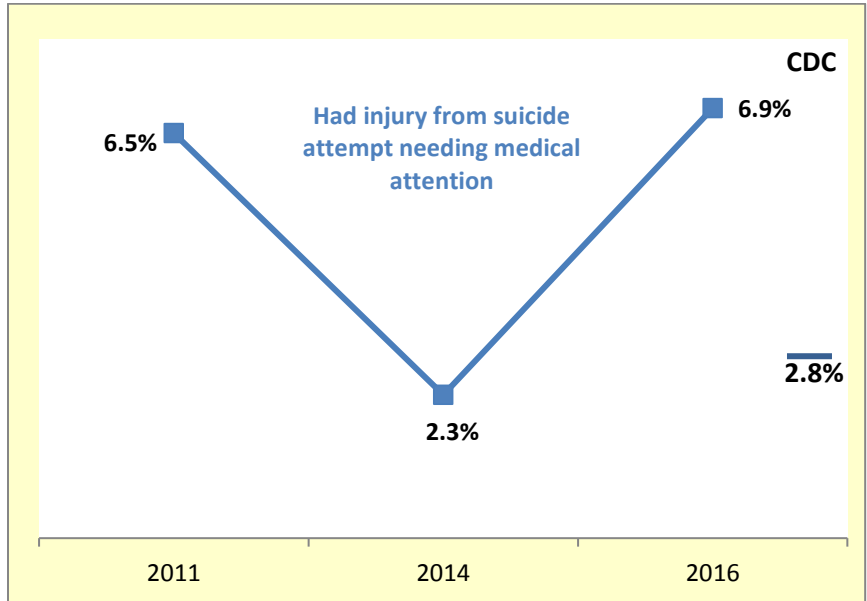
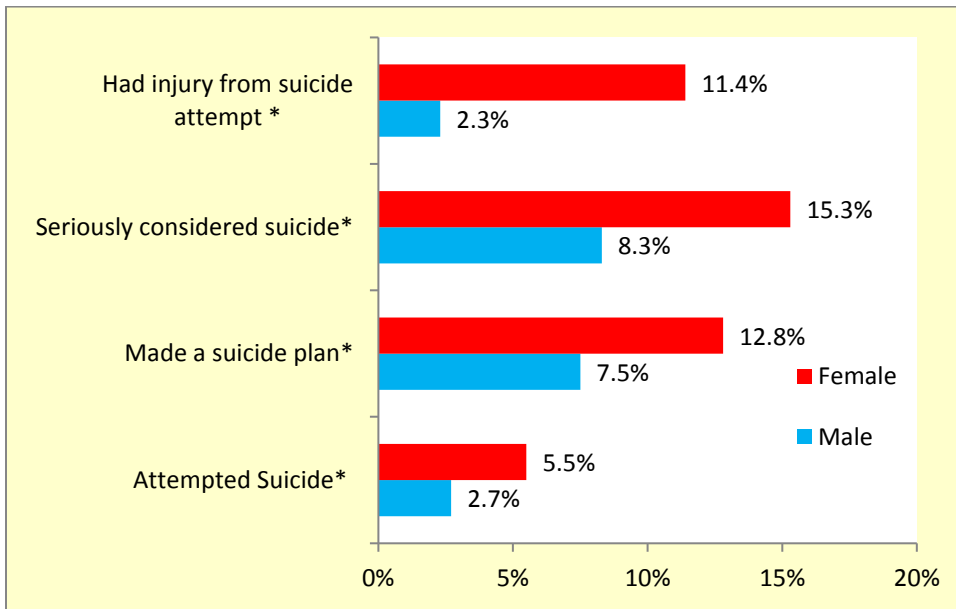


Figure 26: Depression & Thoughts of Suicide by Gender, 2016



Mental Health

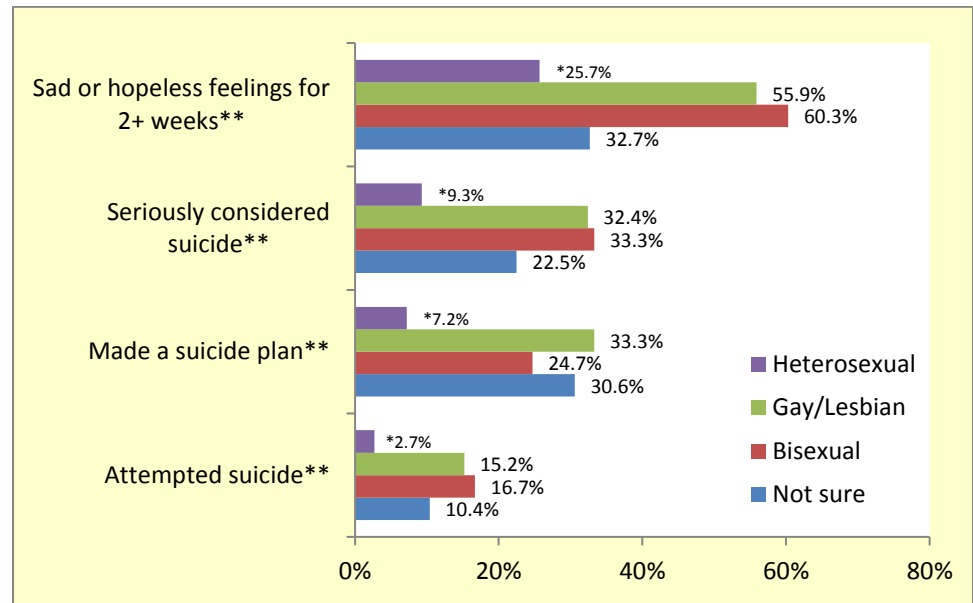
- A statistically significant **higher** proportion of female students reported they seriously considered suicide, made a suicide plan, and attempted suicide, relative to male students.
- A statistically significant **higher** proportion of female students reported self-injury from a suicide attempt relative to male students.

2016 Alexandria YRBS Results: Mental Health – Grades 10 and 12

Mental Health

- A statistically significant **higher** proportion of students who identified as gay, lesbian, bisexual, and not sure reported sad or hopeless feelings, seriously considering suicide, making a suicide plan, or attempting suicide when compared to students who identified as heterosexual.

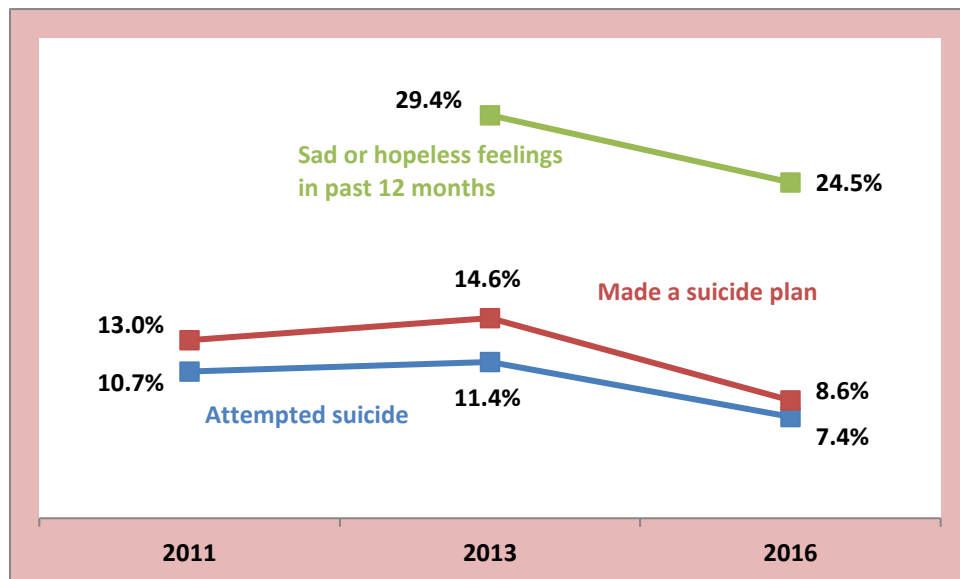
Figure 27: Depression & Thoughts of Suicide by Sexual Identity, 2016



* Statistically significant – see page 4 for details

2016 Alexandria YRBS Results: Mental Health – Grade 8

Figure 28: Depression & Thoughts of Suicide 2011, 2013, & 2016, Grade 8



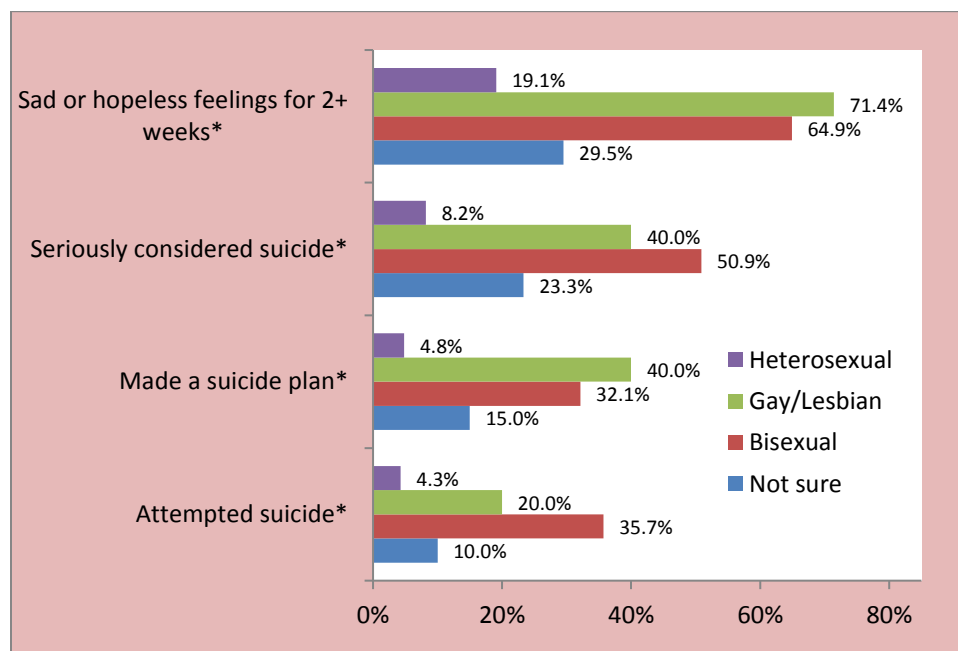
Mental Health

- Eighth grade students reported **lower** proportions of sad or hopeless feelings, plans for suicide, and suicide attempts in 2016 than 2013.

Figure 29: Depression & Thoughts of Suicide by Sexual Identity, 2016, Grade 8

Mental Health

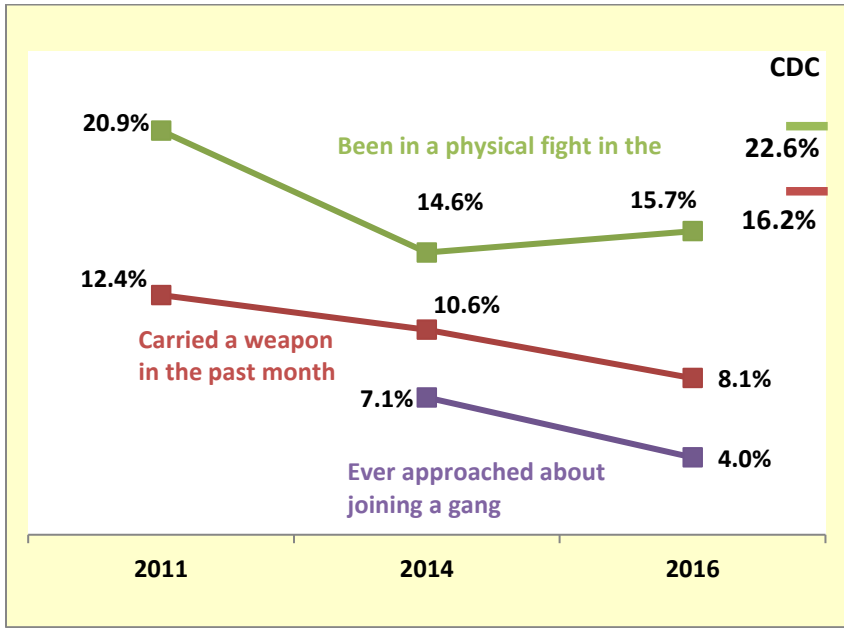
- A statistically significant **higher** proportion of eighth grade students who identified as gay, lesbian, bisexual, and not sure reported sad or hopeless feelings, seriously considering suicide, making a suicide plan, or attempting suicide when compared to students who identified as heterosexual.



* Statistically significant – see page 4 for details

2016 Alexandria YRBS Results: Aggressive Behavior, Injuries, and Violence – Grades 10 and 12

Figure 30: Aggressive Behavior, Injuries, & Violence 2011, 2014, & 2016, Grades 10 & 12



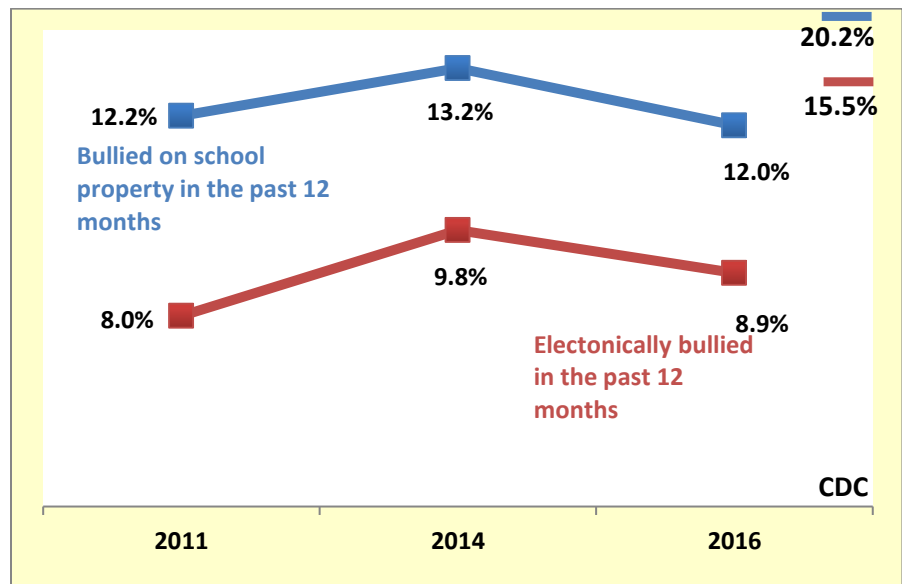
Aggressive Behavior, Injuries, & Violence

- Students reported carrying a weapon in the past month and ever being approached about joining a gang at **lower** levels in 2016 from 2014. Students reported being in a physical fight in the past year at **higher** levels in 2016 from 2014.
- Reports of being in a physical fight in the past year and carrying a weapon in the past month are **lower** than CDC national estimates.

Figure 31: Aggressive Behavior, Injuries, & Violence 2011, 2014, & 2016, Grades 10 & 12

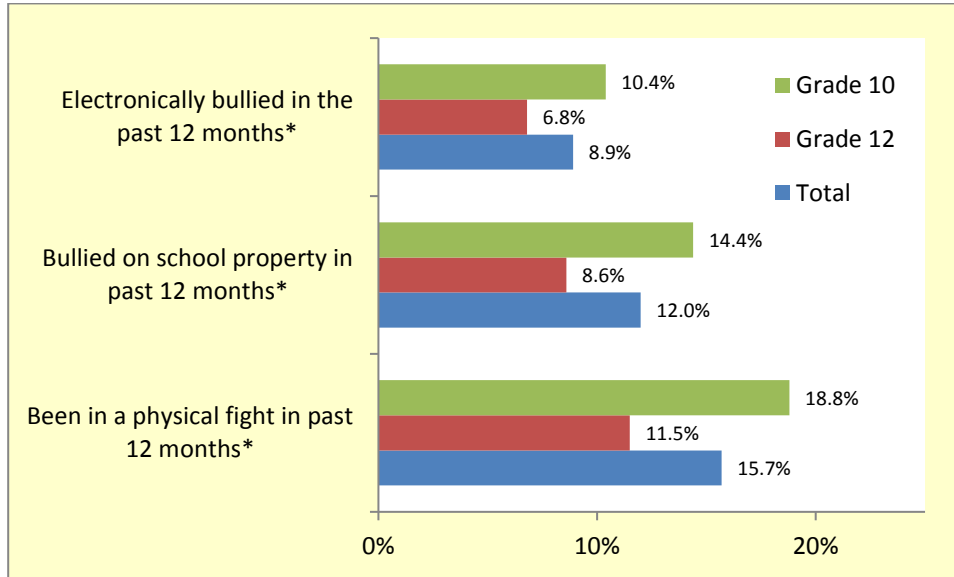
Aggressive Behavior, Injuries, & Violence

- Student reports of being bullied on school property and being electronically bullied in the past 12 months are at **lower** levels in 2016, as compared to 2014.
- Reported levels of being bullied on school property and being electronically bullied are **lower** than CDC national estimates.



2016 Alexandria YRBS Results: Aggressive Behavior, Injuries, and Violence – Grades 10 and 12

Figure 32: Aggressive Behavior, Injuries, & Violence by Grade, 2016



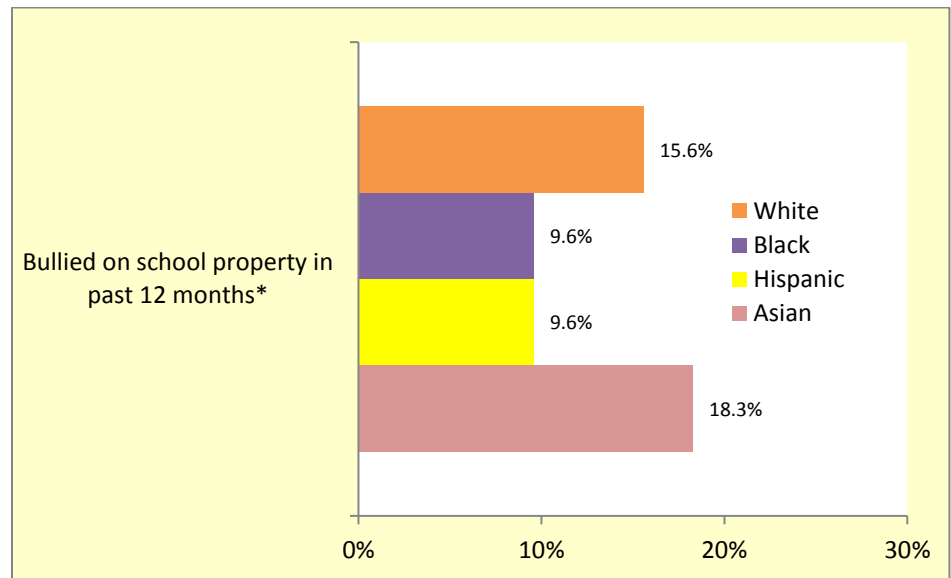
Aggressive Behavior, Injuries, & Violence

- A statistically significant **higher** proportion of tenth graders reported being bullied on school property in the past year, being electronically bullied in the past year, and being in a physical fight in the past year, relative to twelfth graders.

Figure 33: Aggressive Behavior, Injuries, & Violence, by Race/Ethnicity, 2016

Aggressive Behavior, Injuries, & Violence

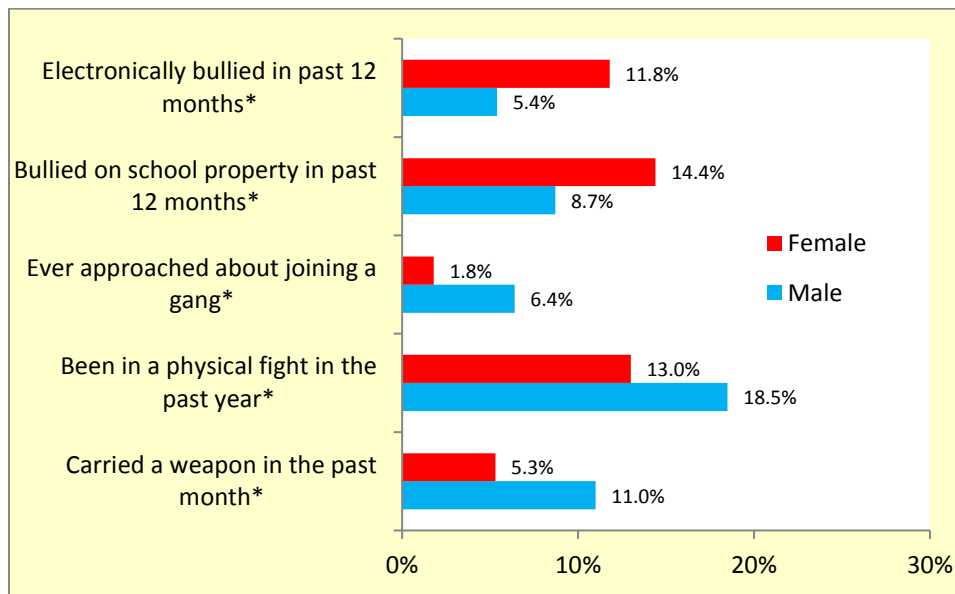
- Statistically significant **higher** proportions of Asian and White students reported being bullied on school property in the past year, relative to Black and Hispanic students. (CDC national estimates show **higher** proportions of White and Black/African American students being bullied; data not shown).



* Statistically significant – see page 4 for details

2016 Alexandria YRBS Results: Aggressive Behavior, Injuries, and Violence – Grades 10 and 12

Figure 34: Aggressive Behavior, Injuries, & Violence by Gender, 2016



Aggressive Behavior, Injuries, & Violence

- A statistically significant **higher** proportion of females reported being electronically bullied and bullied on school property in the past year, relative to males.
- Statistically significant **higher** proportions of male students reported being approached about joining a gang, being in a physical fight in the past year, and carrying a weapon in the past month, relative to females.
- The differences between males and females regarding being electronically bullied, being bullied on school property, being in a physical fight in the past year, and carrying a weapon in the past month are consistent with CDC national estimates.

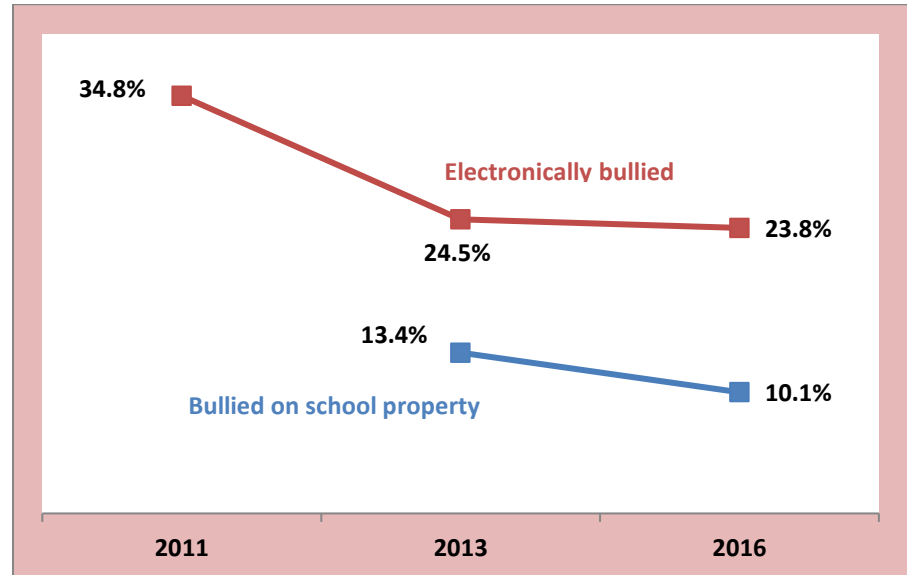
* Statistically significant – see page 4 for details

2016 Alexandria YRBS Results: Aggressive Behavior, Injuries, and Violence – Grade 8

Figure 35: Bullying on School Property, 2011, 2013, & 2016, Grade 8

Bullying

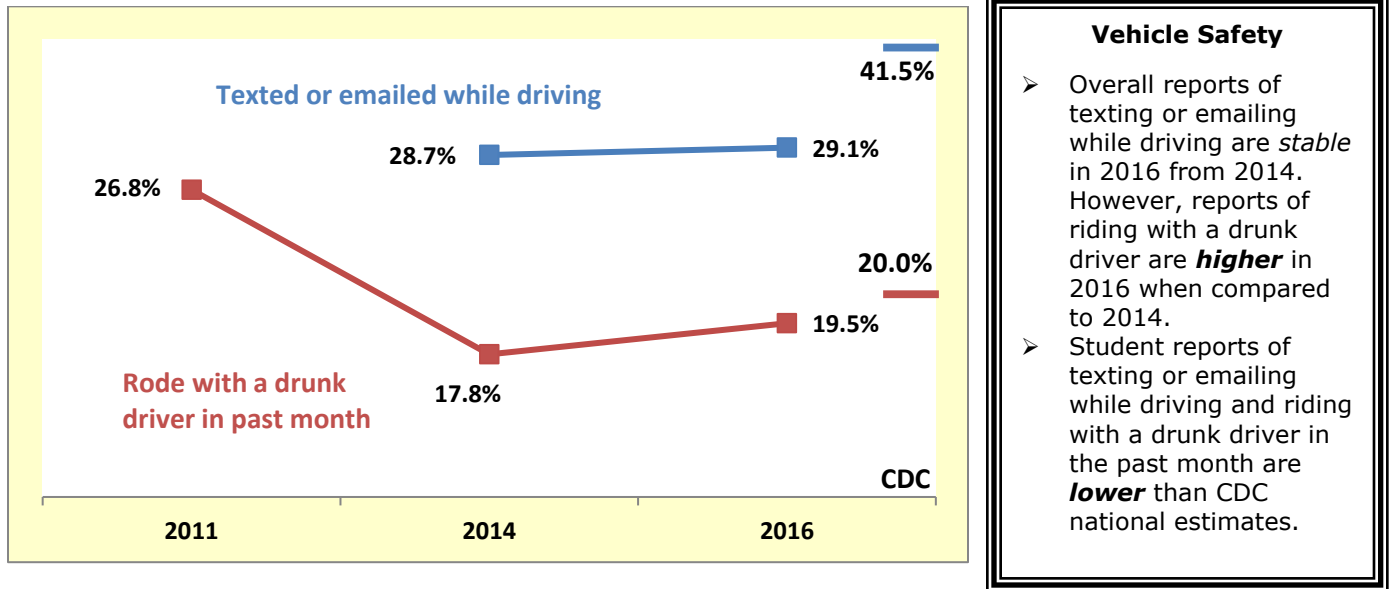
- Reports of being bullied on school property are **lower** among eighth graders in 2016 from 2013. However, reports of being electronically bullied remained stable in 2016 from 2013.



* Statistically significant – see page 4 for details

2016 Alexandria YRBS Results: Aggressive Behavior, Injuries, and Violence – Grades 10 and 12

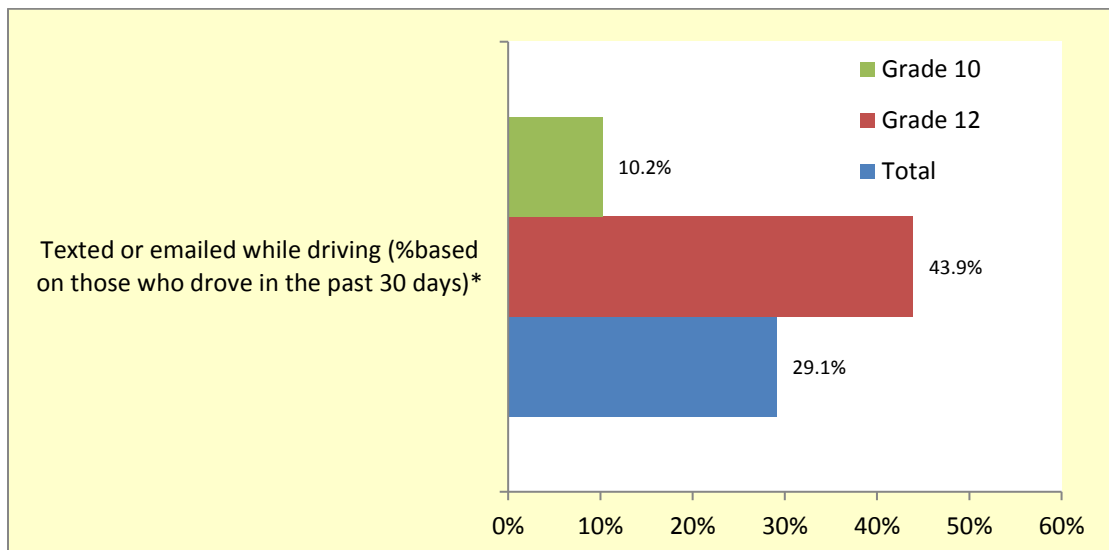
Figure 36: Vehicle Safety Behavior, 2011, 2014, & 2016, Grades 10 & 12



Vehicle Safety

- Overall reports of texting or emailing while driving are *stable* in 2016 from 2014. However, reports of riding with a drunk driver are **higher** in 2016 when compared to 2014.
- Student reports of texting or emailing while driving and riding with a drunk driver in the past month are **lower** than CDC national estimates.

Figure 37: Vehicle Safety Behavior by Grade, 2016

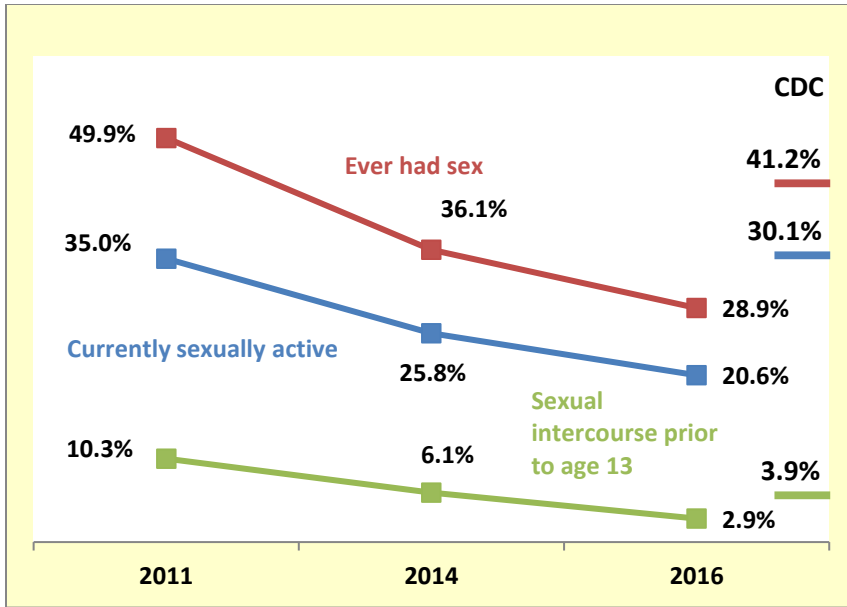


Vehicle Safety

- A statistically significant **higher** proportion of twelfth graders reported texting or emailing while driving, relative to tenth graders. The difference in findings between tenth and twelfth grade students is consistent with CDC national estimates.
- No statistically significant differences were found with regard to texting while driving or riding with a drunk driver when stratified by gender or race/ethnicity (not displayed).

2016 Alexandria YRBS Results: Sexual Behavior – Grades 10 and 12

Figure 38: Sexual Behavior, 2011, 2014, & 2016, Grades 10 & 12



Sexual Behavior

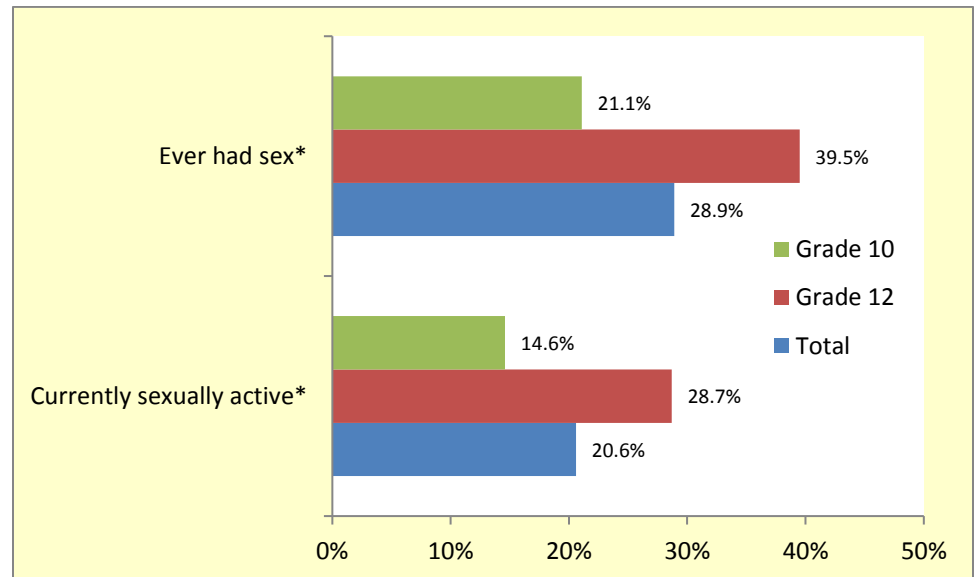
- The proportion of tenth and twelfth graders who reported ever having sex, being currently sexually active, or having sex prior to age 13 are at **lower** levels in 2016 from 2014 and 2011.
- Reported levels of sexual activity indicators are **lower** when compared to CDC national estimates.

Note: "Currently sexually active" is defined on the survey as having sexual intercourse within the past three months.

Figure 39: Sexual Behavior by Grade, 2016

Sexual Behavior

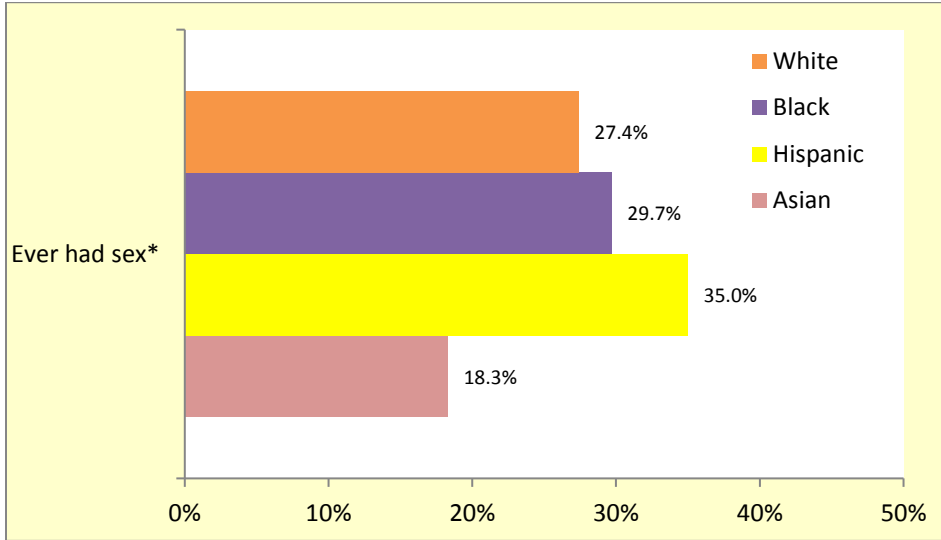
- Statistically significant **higher** proportions of twelfth graders report ever having sex or being currently sexually active, relative to tenth graders.



* Statistically significant – see page 4 for details

2016 Alexandria YRBS Results: Sexual Behavior – Grades 10 and 12

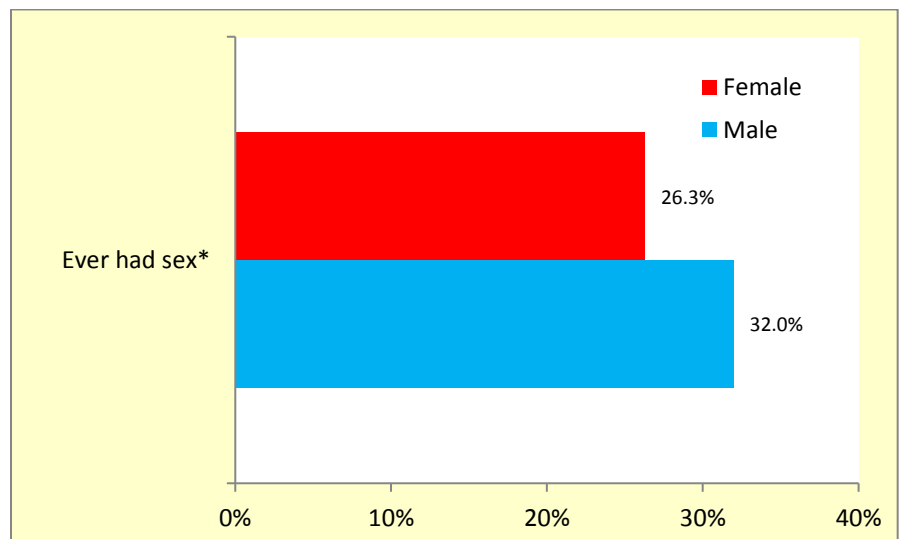
Figure 40: Sexual Behavior by Race/Ethnicity, 2016



Sexual Behavior

- A statistically significant **higher** proportion of Hispanic students reported ever having sex, relative to White, Black, and Asian students.
- CDC national estimates show Black students reported **higher** proportions of ever having sex, relative to White, Hispanic, and Asian students.

Figure 41: Sexual Behavior by Gender, 2016



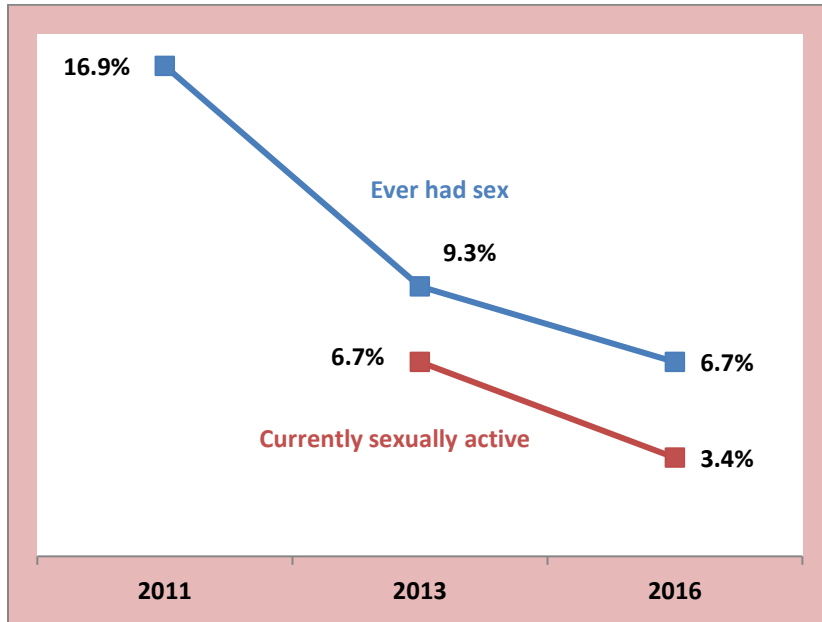
Sexual Behavior

- A statistically significant **higher** proportion of males reported ever having sex, relative to females. This is consistent with CDC national estimates.

* Statistically significant – see page 4 for details

2016 Alexandria YRBS Results: Sexual Behavior – Grade 8

Figure 42: Sexual Behavior, 2011, 2013, & 2016, Grade 8

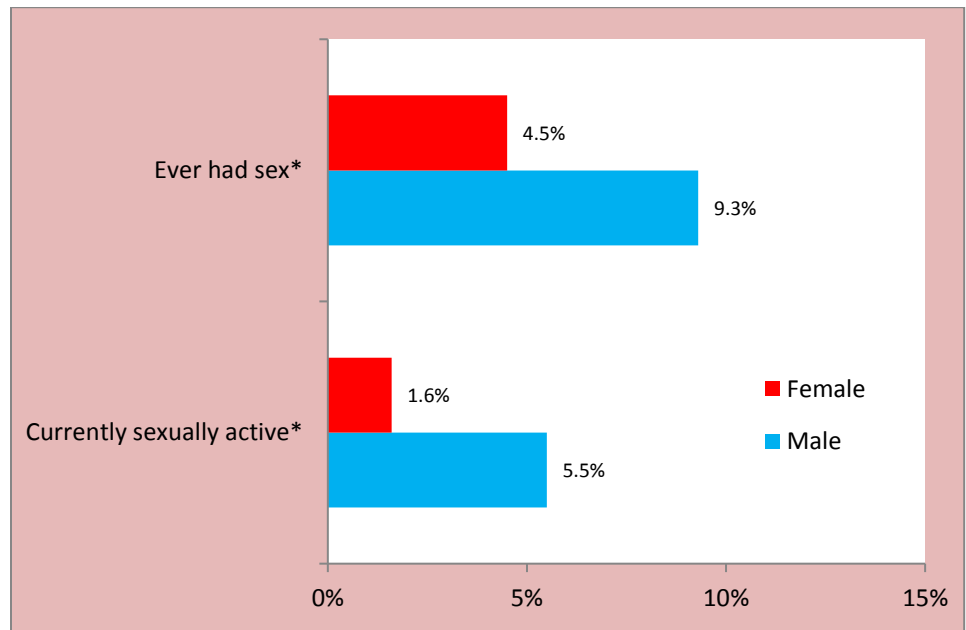


Sexual Behavior

- Reports of ever having sex and being currently sexually active are at **lower** levels among eighth graders in 2016 from 2013.

Note: "Currently sexually active" is defined on the survey as having sexual intercourse within the past three months.

Figure 43: Sexual Behavior by Gender, 2016, Grade 8



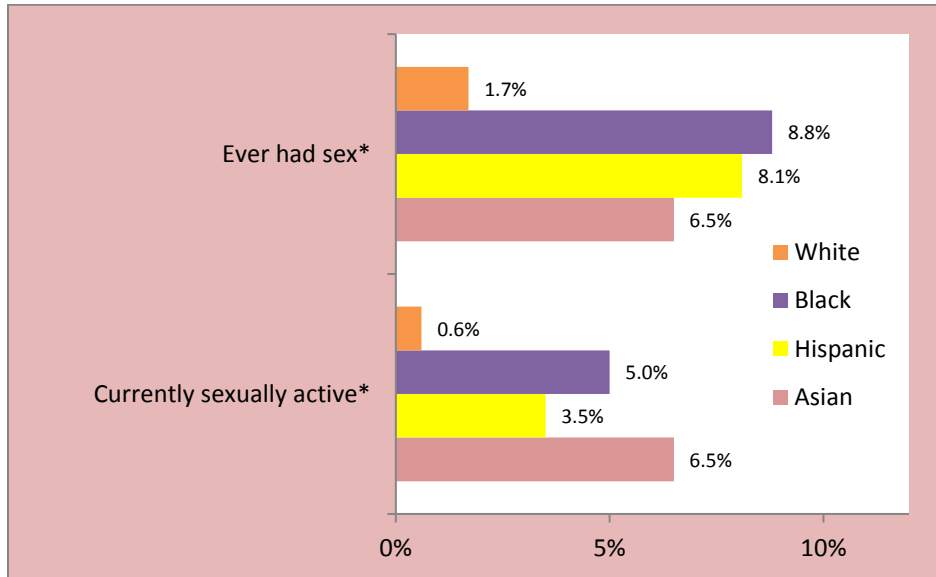
Sexual Behavior

- A **higher** statistically significant proportion of eighth grade males reported ever having sex and being currently sexually active, relative to females.

* Statistically significant – see page 4 for details

2016 Alexandria YRBS Results: Sexual Behavior – Grade 8

Figure 44: Sexual Behavior by Race/Ethnicity 2016, Grade 8



Sexual Behavior

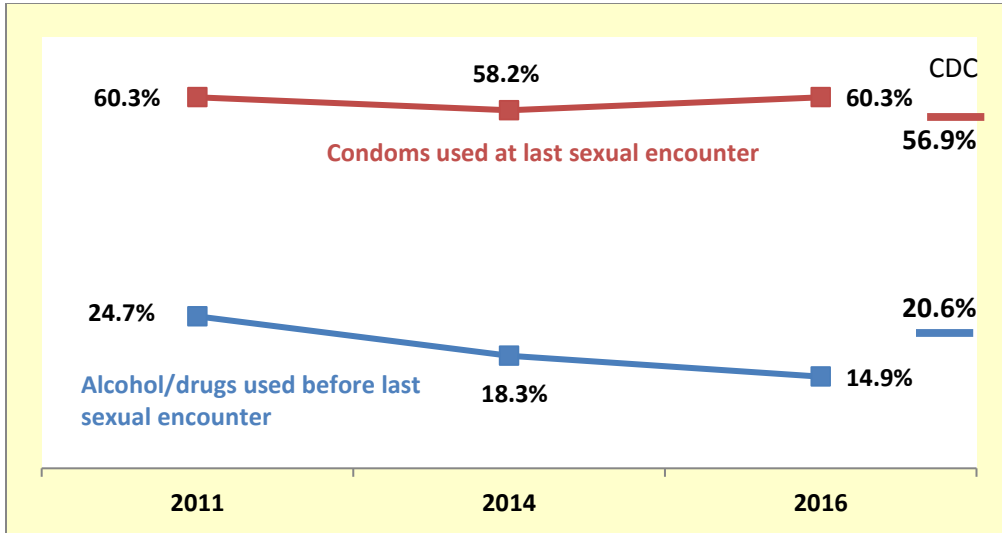
- A **higher** statistically significant proportion of eighth grade Black, Hispanic, and Asian students reported ever having sex, as compared to White students.

Note: "Currently sexually active" is defined on the survey as having sexual intercourse within the past three months.

* Statistically significant – see page 4 for details

2016 Alexandria YRBS Results: Sexual Behavior – Grades 10 and 12

Figure 45: Safety and Sexual Behavior, 2011, 2014, & 2016, Grades 10 and 12



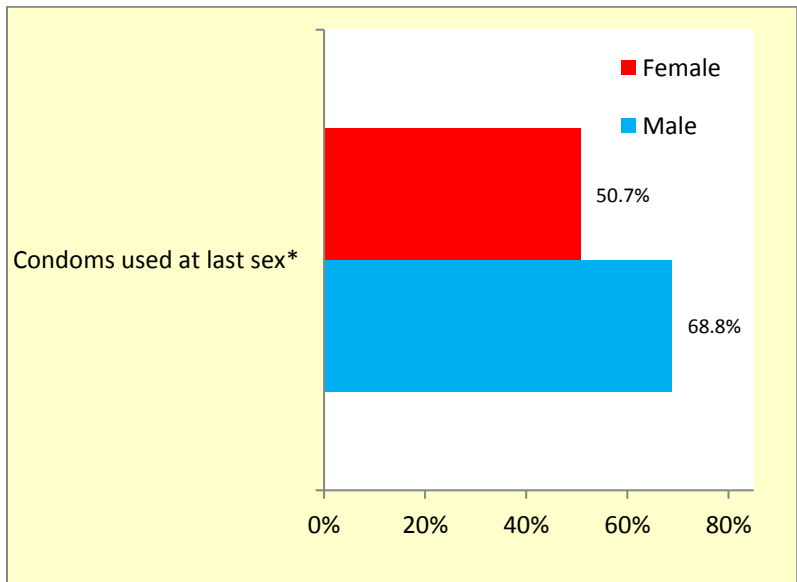
Sexual Behavior

- For those currently sexually active, condom use at last sexual encounter among tenth and twelfth grades was reported at **higher** levels in 2016 from 2014.
- When compared to CDC national estimates, reports of alcohol/drug use before last sex were **lower** and reports of condom use at last sex were **higher** by ACPS tenth and twelfth grade students who are currently sexually active.

Figure 46: Safety and Sexual Behavior by Gender, 2016

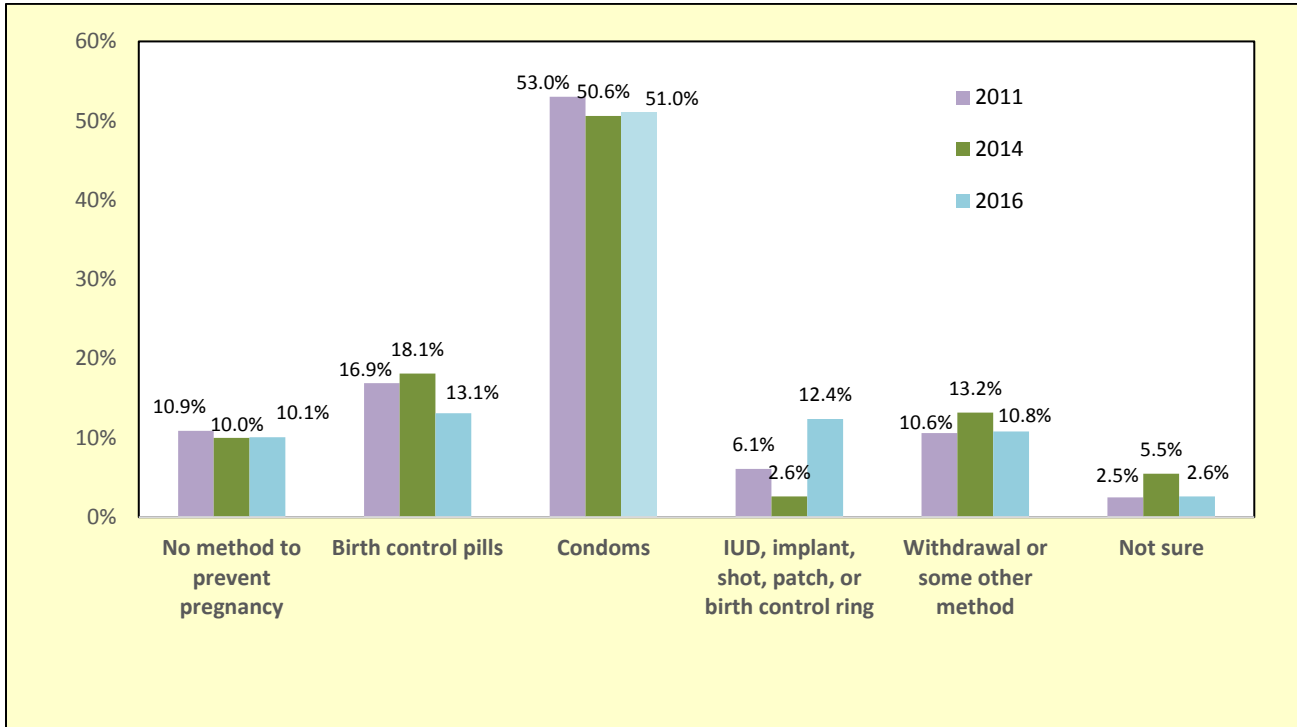
Sexual Behavior

- A statistically significant **higher** proportion of males reported condom use at last sexual encounter, relative to females.
- No statistically significant differences were observed for condom use and alcohol/drug use before last sexual intercourse when stratified by race/ethnicity or grade (not displayed).



2016 Alexandria YRBS Results: Sexual Behavior – Grades 10 and 12

Figure 47: Methods Used to Prevent Pregnancy, 2011, 2014, & 2016, Grades 10 & 12



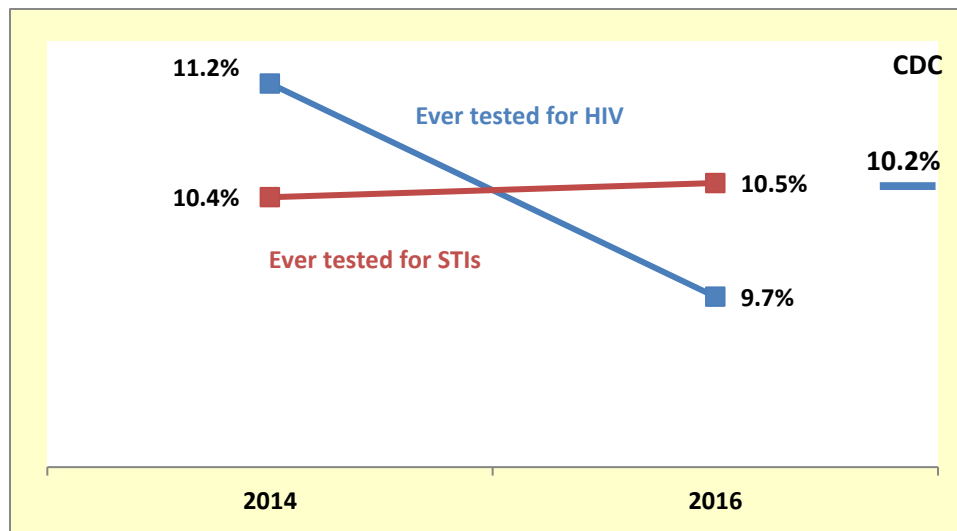
Methods Used to Prevent Pregnancy

- Students reporting their method to prevent pregnancy as IUD, implant, shot, patch, or birth control ring, were at **higher** levels in 2016 than 2011 and 2014.
- Students not sure of their method to prevent pregnancy were reported at **higher** proportions in males than females (data not shown).

* Statistically significant – see page 4 for details

2016 Alexandria YRBS Results: Sexual Behavior – Grades 10 and 12

Figure 48: HIV and STI Testing, 2014 & 2016, Grades 10 & 12



HIV/STI Testing

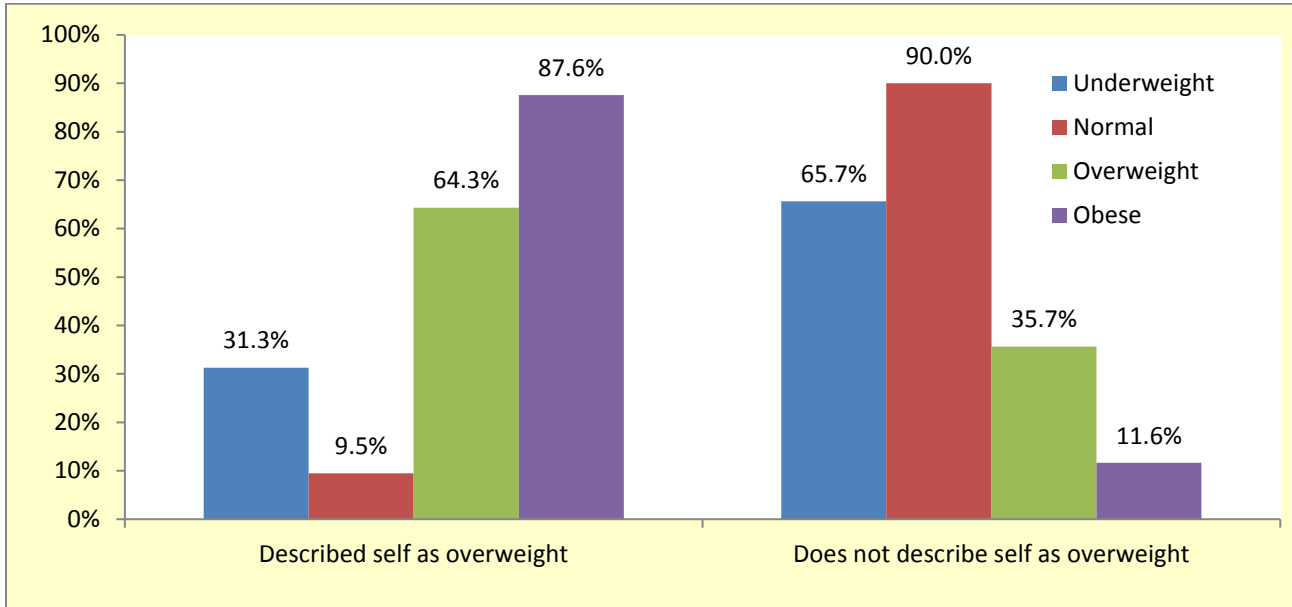
- In 2016, **lower** proportions of high school students report ever being tested for HIV, relative to 2014. Reports of ever being tested for an STI remained stable in 2016 from 2014.

* Statistically significant – see page 4 for details

Health-enhancing and health-threatening behaviors are the result of complex biological, cognitive, psychological, familial, social, and cultural influences on individuals and groups. One's perceptions of risk, personal vulnerability and benefit are important determinants in behavior. Such perceptions change over the life course and that risk-taking behaviors increase during adolescence. This section (pages 37-40) provides data on respondents' perceptions of their weight status relative to their categorized reported weight status; perception of risks of using tobacco, alcohol, and marijuana relative to reported use of these substances; and perceptions of their peers' behaviors relative to their reported behaviors. Students reported behaviors and reported substance use is provided in percentages for reference.

2016 Alexandria YRBS Results: Perception – Grades 10 and 12

Figure 49: Perception of Weight Status by CDC Weight Status Category, 2016, Grades 10 & 12



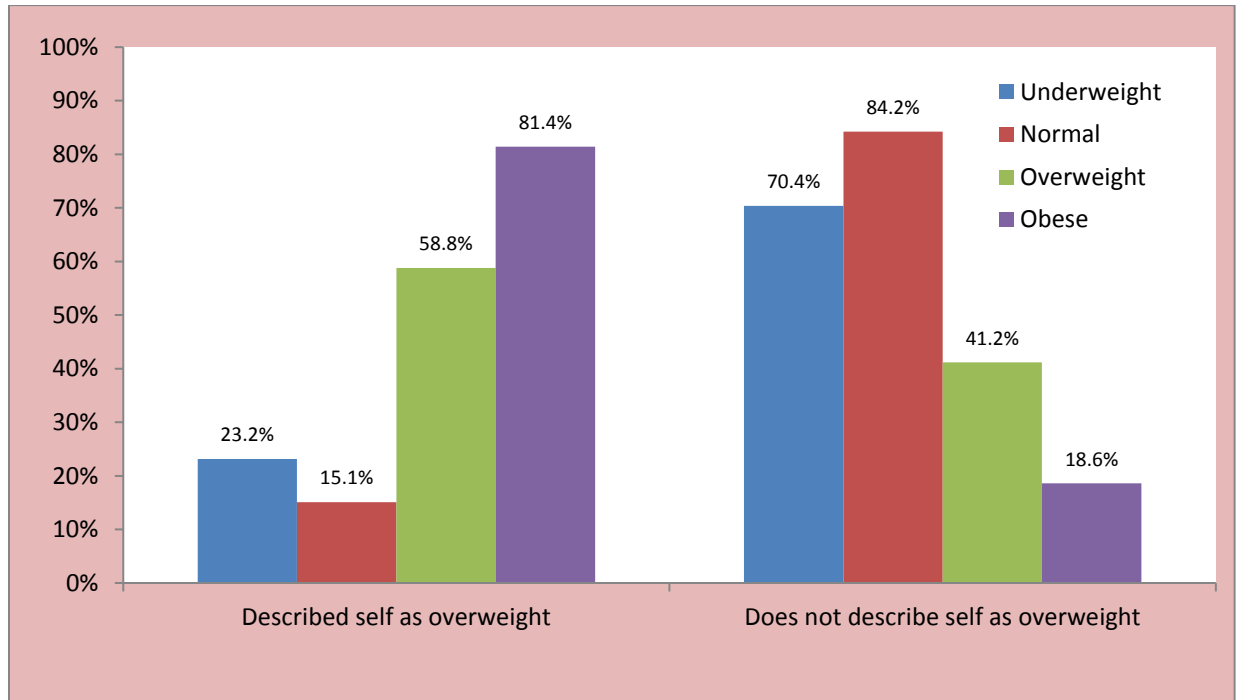
Please see page 41 for explanation of BMI calculations and Table 1 for weight status categories.

Perception and Reported Weight Status

- Overall, the proportion of those who did not describe themselves as overweight was statistically **higher** among those who were considered underweight and normal based on their Body Mass Index (BMI), when compared to those who were considered overweight or obese based on their BMI.
- The proportion of those who described themselves as overweight was statistically **higher** among those who were considered overweight or obese based on their BMI, when compared to those who were underweight or normal based on their BMI.
- However, it is important to note that 31.3% of students who were underweight based on their BMI described themselves as being overweight.
(Note: See page 40 for CDC Weight Status Categories for Children and for AHD BMI calculation methodology.)

2016 Alexandria YRBS Results: Perception – Grade 8

Figure 50: Perception of Weight by CDC Weight Status Category, 2016, Grade 8



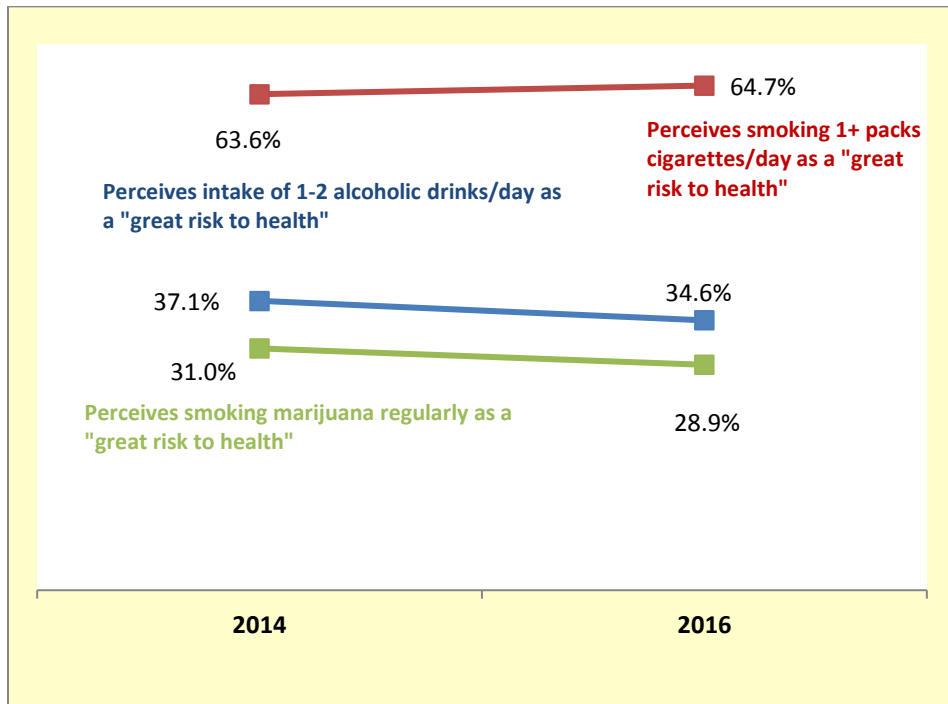
Perception and Reported Weight Status

- Overall, the proportion of eighth graders who did not describe themselves as overweight was statistically **higher** among those who were considered underweight and normal based on their BMI, when compared to those who were considered overweight or obese based on their BMI.
- The proportion of eighth graders who described themselves as overweight was statistically **higher** among those who were considered overweight or obese based on their BMI, when compared to those who were underweight or normal based on their BMI.
- However, it is important to note that 23.2% of students who were underweight based on their BMI described themselves as being overweight.
(Note: See page 40 for CDC Weight Status Categories for Children and for AHD BMI calculation methodology.)

* Statistically significant – see page 4 for details

2016 Alexandria YRBS Results: Perception – Grades 10 and 12

Figure 51: Perception of Substances, 2014 & 2016, Grades 10 & 12



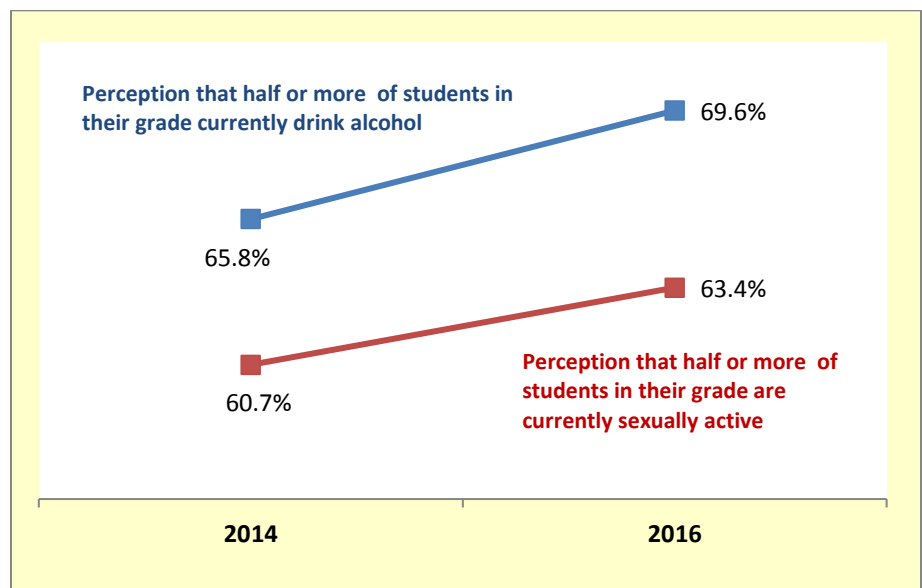
Perception of Substances

- From 2014 to 2016, students reported perceiving smoking 1+ packs/day, smoking marijuana regularly, and intake of 1-2 alcoholic drinks/day as a great risk to health at stable levels.
- However, students reporting currently drinking alcohol (23.2%), currently smoking cigarettes (3.9%), and currently smoking marijuana (15.9%) were at **lower** proportions in 2016 than 2014 (see page 7).

Perception of Others Behavior

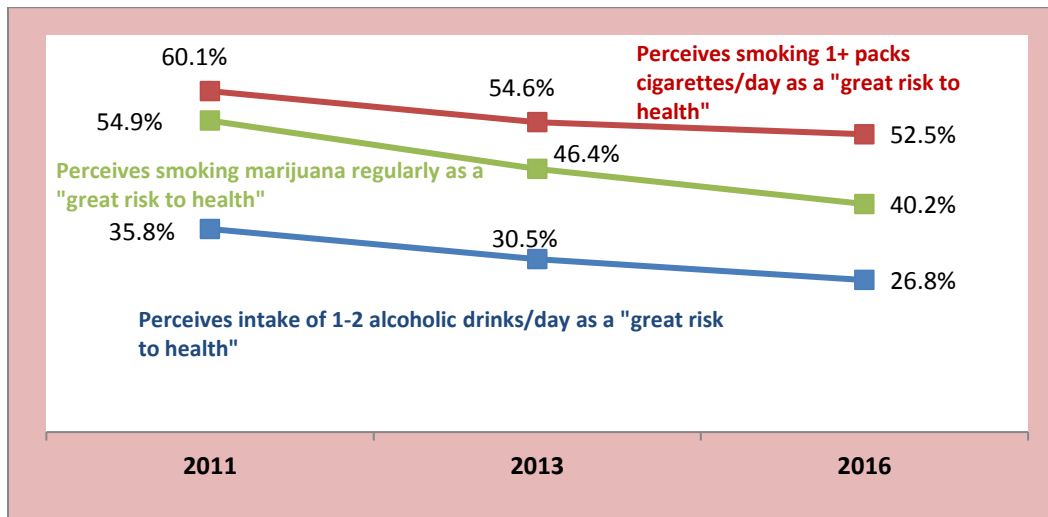
- Although nearly 70% of 10th and 12th graders perceive that half or more of students in their grade currently drink alcohol, only 23.2% of those surveyed reported currently drinking alcohol (see page 7).
- Although 63.4% of 10th and 12th graders perceive that half or more of students in their grade are currently sexually active, only 20.6% reported currently being sexually active (see page 29).

Figure 52: Perception of Others Behavior, 2014 & 2016, Grades 10 & 12



2016 Alexandria YRBS Results: Perception – Grade 8

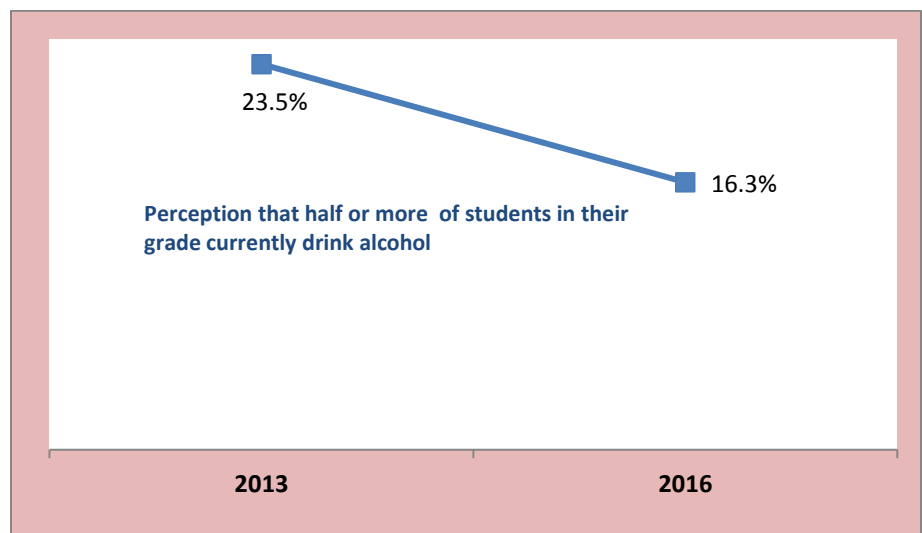
Figure 53: Perception of Substances, 2011, 2013, & 2016, Grade 8



Perception of Substances

- Despite **lower** levels of students perceiving smoking 1+ packs/day as a great risk to health from 2011 to 2016, lower proportions of 8th graders reported currently smoking cigarettes in 2016 (3.4%) than 2013 (6.0%).
- Despite **lower** levels of students perceiving smoking marijuana regularly as a great risk to health from 2011 to 2016, lower proportions of 8th graders reported currently smoking marijuana in 2016 (4.8%) than 2013 (11.3%).
- Despite **lower** levels of students perceiving intake of 1-2 alcoholic drinks/day as a great risk to health from 2011 to 2016, lower proportions of 8th graders reported currently smoking marijuana in 2016 (4.8%) than 2013 (11.3%), (see page 9).

Figure 54: Perception of Others' Behavior, 2014 & 2016, Grade 8



Perception of Others' Behavior

- Sixteen percent of 8th graders perceive that half or more of their fellow students currently drink alcohol, however only 7.4% report current alcohol use. Current alcohol use was reported at **lower** levels in 2016 than 2013 (see page 9).

Alexandria YRBS 2016 – CDC Weight Status Categories – Grades 8, 10, and 12

Table 1: CDC Weight Status Categories for Children

Weight Status Category	Percentile Range
Underweight	Less than the 5th percentile
Healthy weight	5th percentile to less than the 85th percentile
Overweight	85th to less than the 95th percentile
Obese	Equal to or greater than the 95th percentile

AHD calculated the students' BMI and assigned appropriate weight status categories, using statistical analysis software. BMI was calculated using the English formula ($BMI = [\text{weight in pounds} / (\text{height in inches})^2] \times 703$) for each child using self-reported values. Each calculated BMI was then compared to the standard percentile distribution as defined by the gender-specific CDC growth charts and assigned to a weight status category

Alexandria YRBS 2016 – Survey Respondent Demographics – Grades 10 and 12

Table 2: Response by Gender

Gender	#	%
Female	547	52.2
Male	483	46.1
Transgender, male-to-female	-	-
Transgender, female-to-male	-	-
Unsure	-	-
No response	11	1.1

Table 3: Response by Race

Race	#	%
Asian	77	7.4
Black	339	32.4
Multiracial*	81	7.7
Native Hawaiian/Pacific Islander	11	1.1
White	342	32.6

**This group represents all respondents who self-identified into 14 distinct biracial/multiracial groups.*

Table 4: Response by Hispanic Ethnicity

Ethnicity	#	%
Hispanic	316	30.2
Non-Hispanic	730	69.8

Table 5: Response by Sexual Identity

Sexual Identity	#	%
Bisexual	78	7.5
Heterosexual	877	84.4
Homosexual	34	3.3
No sure	50	4.8

- Respondent counts 1 to 4, numbers and proportions, are suppressed to maintain confidentiality.

Alexandria YRBS 2016 – Survey Respondent Demographics – Grade 8

Table 6: Response by Gender

Gender	#	%
Female	335	46.7
Male	383	53.3
Transgender, male-to-female	-	-
Transgender, female-to-male	0	0.0
Unsure	7	0.95
No response	9	1.22

Table 7: Response by Race

Race	#	%
Asian	38	5.2
Black	216	29.4
Multiracial*	65	8.8
Native Hawaiian/Pacific Islander	15	2.0
White	226	30.7
No response	163	22.2

**This group represents all respondents who self-identified into 14 distinct biracial/multiracial groups.*

Table 8: Response by Hispanic Ethnicity

Ethnicity	#	%
Hispanic	265	36.1
Non-Hispanic	469	63.9

Table 9: Response by Sexual Identity

Sexual Identity	#	%
Bisexual	61	8.2
Heterosexual	589	81.4
Homosexual	15	2.1
No sure	61	8.4

- Respondent counts 1 to 4, numbers and proportions, are suppressed to maintain confidentiality.