2022 Louisiana Caring Communities Youth Survey

Results for

Region 5 - Imperial Calcasieu Human Service Authority

2022 Louisiana

Caring Communities Youth Survey

Sponsored by



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2022 Region 5 - Imperial Calcasieu Human Service Authority CCYS Summary

This report summarizes the findings from the 2022 Louisiana Caring Communities Youth Survey (CCYS), a survey of 6th, 8th, 10th, and 12th grade students conducted in the fall of 2022 and completed February 2023. The survey window was extended into the spring semester to give schools more flexibility in scheduling their survey. The results for your region are presented along with comparisons to 2018 and 2020 CCYS survey results, as applicable. In addition, the report contains important information about the content of the survey, and suggestions and guidelines on how to interpret and use the data for prevention planning.

The Louisiana CCYS was originally designed to assess students' involvement in a specific set of problem behaviors, as well as their exposure to a set of scientifically validated risk and protective factors identified in the Risk and Protective Factor Model of adolescent problem behaviors. These risk and protective factors have been shown to predict the likelihood of academic success, school dropout, substance abuse, violence, and delinquency among youth. As the substance abuse prevention field has evolved, the CCYS has been modified to measure additional substance abuse and other problem behavior variables to provide prevention professionals in Louisiana with important information for understanding their communities. Some examples of these additional variables include the percentage of youth who are in need for alcohol or drug treatment, measures of community norms around alcohol use, and bullying.

Table 1 contains the characteristics of the students who completed the survey from your region and the state of Louisiana. A total of 376 schools across Louisiana participated in the survey. Since students are able to select more than one race or ethnicity, the sum of students of individual categories may exceed the total number of students surveyed. Because not all students answer all of the questions, the total count of students by gender (and less frequently, students by ethnicity) may be less than the reported total students.

Comparisons between the number of students completing the survey and the student enrollment in your community and the state are shown on Table 2. The total percentage of students completing the survey and the percentage from each grade are shown in the "Percent" column.

When using the information in this report, please pay attention to the number of students who participated from your community. If **60% or more** of the students participated, the report is a good indicator of the levels of substance use, risk, protection, and antisocial behavior. If fewer than 60% participated, consult with your local prevention coordinator or a survey professional before generalizing the results to the entire community.

Coordination and administration of the Louisiana CCYS was a collaborative effort of Louisiana Department of Health, Office of Behavioral Health (OBH); Regional Prevention Coordinators; Department of Education; Cecil J. Picard Center for Child Development and Lifelong Learning, University of Louisiana at Lafayette; and Bach Harrison, L.L.C. For more information about the CCYS or prevention services in Louisiana, please refer to the Contacts for Prevention section at the end of this report.

Table 2. Survey Completion Rate

Table 1. Characteristics of Participants *													
	LGE 2	2018	LGE :	2020	LGE :	2022	State	2022					
	Number	Percent	Number	Percent	Number	Percent	Number	Percent					
Total													
All Grades	7,531	100.0	994	100.0	5,250	100.0	53,446	100.0					
Grade													
6	916	12.2	323	32.5	1,514	28.8	16,939	31.7					
8	2,741	36.4	338	34.0	1,586	30.2	16,638	31.1					
10	2,241	29.8	309	31.1	1,296	24.7	11,672	21.8					
12	1,633	21.7	24	2.4	854	16.3	8,197	15.3					
Gender													
Male	3,608	48.6	503	50.8	2,524	48.3	25,429	47.9					
Female	3,811	51.4	488	49.2	2,701	51.7	27,635	52.1					
Race/Ethnicity*													
African American	1,760	20.2	106	9.5	1,275	20.1	22,160	33.9					
American Indian	402	4.6	54	4.8	319	5.0	2,387	3.7					
Asian	169	1.9	9	0.8	159	2.5	1,831	2.8					
Hispanic or Latino	491	5.6	55	4.9	393	6.2	7,117	10.9					
Pacific Islander	61	0.7	7	0.6	50	0.8	415	0.6					
White	5,373	61.6	843	75.5	3,587	56.6	24,228	37.1					
Other	470	5.4	42	3.8	552	8.7	7,240	11.1					

	surveyed	enrolled	Percent	surveyed	enrolled	Percent
Grade						
6	1,514	2,971	51.0	16,939	49,399	34.3
8	1,586	3,207	49.5	16,638	51,564	32.3
10	1,296	3,517	36.8	11,672	52,512	22.2
12	854	2,900	29.4	8,197	43,389	18.9
Total	5,250	12,595	41.7	53,446	204,341	26.2

State 2022

Table 1 provides demographic information for the survey participants in your community. Table 2 provides estimated enrollment and survey completion rate information for your community.

Please note that in order to be included in the charts and tables in this report, grades must meet a minimum cutoff of 15 participating students. However, data are presented in Tables 1 & 2 for all participating grades, even those grades surveyed that did not meet minimum cutoff criteria.

^{*} Students were instructed to choose all categories that apply.

The Risk and Protective Factor Model of Prevention

Prevention is a science. The Risk and Protective Factor Model of Prevention is a proven way of reducing substance abuse and its related consequences. This model is based on the simple premise that to prevent a problem from happening, we need to identify the factors that increase the risk of that problem developing and then find ways to reduce the risks. Just as medical researchers have found risk factors for heart disease such as diets high in fat, lack of exercise, and smoking; a team of researchers at the University of Washington have defined a set of risk factors for youth problem behaviors.

Risk factors are characteristics of school, community and family environments, and of students and their peer groups known to contribute to increased likelihood of drug use, delinquency, school dropout, and violent behaviors among youth. For example, children who live in disorganized, crime-ridden neighborhoods are more likely to become involved in crime and drug use than children who live in safe neighborhoods.

The chart below shows the links between the 19 risk factors and six problem behaviors. The check marks indicate where at least two well designed, published research studies have shown a link between the risk factor and the problem behavior.

Protective factors exert a positive influence and buffer against the negative influence of risk, thus reducing the likelihood that adolescents will engage in problem behaviors. Protective factors identified through research include strong bonding to family, school, community, and peers; and healthy beliefs and clear standards for behavior. Protective bonding depends on three conditions:

1. **Opportunities** for young people to actively contribute

- 2. **Skills** to be able to successfully contribute
- 3. **Consistent recognition** or reinforcement for their efforts and accomplishments

Bonding confers a protective influence only when there is a positive climate in the bonded community. Peers and adults in these schools, families, and neighborhoods must communicate healthy values and set clear standards for behavior in order to ensure a protective effect. For example, strong bonds to antisocial peers would not be likely to reinforce positive behavior.

Research on risk and protective factors has important implications for children's academic success, positive youth development, and prevention of health and behavior problems. In order to promote academic success and positive youth development and to prevent problem behaviors, it is necessary to address those risk factors that may influence these behaviors. By measuring risk and protective factors in a population, specific risk factors that are elevated and widespread can be identified and targeted by policies, programs, and actions shown to reduce those risk factors and to promote protective factors.

Each risk and protective factor can be linked to specific types of interventions that have been shown to be effective in either reducing risk(s) or enhancing protection(s). The steps outlined here will help planners make key decisions regarding allocation of resources, how and when to address specific needs, and which strategies are most effective and known to produce results.

In addition to helping assess current conditions and prioritize areas of greatest need, data from the Louisiana CCYS can be a powerful tool in applying for and complying with federal programs such as the Strategic Prevention Framework process.

		C	omm	unity				F	amily		Sch	nool			Pee	r/Individ	ual		
Risk factors and linked problem behaviors	Community Laws & Norms Favorable Toward Drug Use, Firearms & Crime	Availability of Drugs & Firearms	Transitions & Mobility	Low Neighborhood Attachment	Community Disorganization	Extreme Economic & Social Deprivation	Family History of the Problem Behavior	Family Conflict	Family Management Problems	Favorable Parent Attitudes & Involvement in the Problem Behavior	Academic Failure	Lack of Commitment to School	Early Initiation of Drug Use & Other Problem Behaviors	Early & Persistent Antisocial Behavior	Alienation & Rebelliousness	Friends Who Use Drugs & Engage in Problem Behaviors	Favorable Attitudes Toward Drug Use & Other Problem Behaviors	Gang Involvement	Constitutional Factors
Problem Behaviors																			
Substance Abuse	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Depression & Anxiety			1				1	1	1	1	✓	1	1	1	1	1	1	1	1
Delinquency	1	1	1	1	1	1	1	1	1	1	✓	1	1	1	1	1	1	1	1
Teen Pregnancy						1	1	1	1		1	1	1	1		1	1		
School Drop-Out			1			1	1	1	1		✓	1	1	1	1	1	1		
Violence	1	1		1	1	1	1	1	1	1	1	1	1	1		1		1	1

Data-Driven Strategic Planning: Risk and Protective Factor Model

Why conduct the Louisiana Caring Communities Youth Survey? Data from the CCYS are important for building an understanding of the substance use priorities in your community, and can help your community develop a data driven strategic prevention plan to address the areas of greatest need. The Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Prevention (CSAP) has emphasized data driven strategic planning guidelines using the Risk and Protective Factor Model, and more recently, the Strategic Prevention Framework (SPF) Model through incentive grants provided to states. These two planning models share much in common and utilize many of the same planning steps and tasks. Specifically, both planning models advocate the collection and use of data to identify needs, resources and community capacity. Based on these data, communities can establish substance abuse prevention priorities to be addressed. Next, both models encourage the implementation of strategically chosen evidence-based programs and interventions to address the identified priorities. Finally, the two models promote the collection of evaluation data to ensure the desired outcomes are achieved. An overview of the basic planning steps and tasks for both the Risk and Protective Factor Model and SPF Model is provided below1

Step 1: Profile Population Needs, Resources, and Readiness to Address the Problems and Gaps in Service Delivery

- Community Needs Assessment: While planning prevention services, communities need to understand the factors that cause substance use and abuse in their community. Communities are urged to collect and use multiple data sources, including archival and social indicators, assessment of existing resources, key informant interviews, as well as survey data in order to establish prevention priorities for their community. CSAP encourages states to consider administering a survey to assess adolescent substance use, anti-social behavior, and many of the risk and protective factors that predict adolescent problem behaviors. The results of the CCYS (presented in this Profile Report and in results reported at the State level) are particularly useful in helping to identify the prevention needs in your community.
- Community Resource Assessment: It is likely that
 existing agencies and programs are already addressing
 some of the prioritized risk and protective factors. It is
 important to identify the assets and resources already
 available in the community and any gaps in services and
 capacity.

• Community Readiness Assessment: It is very important for states and communities to have the commitment and support of their members and ample resources to implement effective prevention efforts. Therefore, the readiness and capacity of communities and resources to act should also be assessed.

Step 2: Mobilize and/or Build Capacity to Address Needs: Engagement of key stakeholders at the State and community levels is critical to plan and implement successful prevention activities that will be sustained over time. Some of the key tasks to mobilize the state and communities are to work with leaders and stakeholders to build coalitions, provide training, leverage resources, and help sustain prevention activities.

Step 3: Develop a Comprehensive Strategic Plan: States and communities should develop a strategic plan that articulates not only a vision for the prevention activities, but also strategies for organizing and implementing prevention efforts. The strategic plan should be based on documented needs, build on identified resources/strengths, set measurable objectives, and identify how progress will be monitored. Plans should be adjusted with ongoing needs assessment and monitoring activities. The issue of sustainability should be kept in mind throughout each step of planning and implementation.

Step 4: Implement Evidence-based Prevention Programs and Infrastructure Development Activities: By understanding risk and protective factors in a population, as well as other causal factors at work in the community, prevention programs can be implemented that will reduce the most influential causes of substance abuse in your community. For example, if academic failure is identified as a prioritized risk factor in a community, then mentoring, tutoring, and increased opportunities and rewards for classroom participation can be provided to improve academic performance. After completing Steps 1, 2, and 3, communities will be able to choose prevention programs that fit the Strategic Framework of the community, match the population served, and are scientifically proven to work.

Step 5: Monitor Process, Evaluate Effectiveness, Sustain Effective Programs/Activities, and Improve or Replace Those That Fail: Finally, ongoing monitoring and evaluation are essential to determine if the outcomes desired are achieved and to assess program effectiveness, assess service delivery quality, identify successes, encourage needed improvement, and promote sustainability of effective policies, programs, and practices.

1 ADAPTED FROM CSAP'S STRATEGIC PREVENTION FRAMEWORK STATE INCENTIVE GRANTS REQUEST FOR APPLICATION (2010)

Prevention Planning: Risk and Protective Factor Model

For communities using the Risk and Protective Factor Model of prevention as their guide, the CCYS is an ideal source of information for planning purposes. Because the CCYS was specifically developed as a means for assessing the levels of risk and protective factors within the community, the data are particularly relevant to planning using this model.

When using the Risk and Protective Factor Framework for prevention planning, the focus is primarily on identifying the risk and protective factors that are the most problematic within your community and choosing evidence-based programs to address these priority risk and protective factors. In theory, by reducing areas of high risk and bolstering areas of low protection, substance abuse and other problem behaviors in youth can be reduced. An examination of the Risk Factor Profile and Protective

Factor Profile charts provided in this report, will allow you to compare the relative levels of each risk (or protective) factor measured by the survey. In so doing, the data will reveal what risk and protective factors your community should pay most attention to, and which factors are relatively low priorities for prevention resources. Once problematic risk and protective factors have been identified, this information can be used in conjunction with information about the existing prevention resources, and community readiness, to identify the priority risk and priority factors that should be addressed with the prevention resources available to your community.

For more information about prevention planning using the Risk and Protective Factor Framework, contact the State Office of Behavioral Health (OBH), Addictive Disorders Services (see contacts section).

Prevention Planning: Strategic Prevention Framework (SPF) Model

The SPF Model of prevention planning is the most current planning model endorsed by CSAP. The SPF planning model, while differing in focus from the Risk and Protective Factor Model, is actually quite similar in regards to process. While the Risk and Protective Factor Model of prevention planning focuses on identifying prevention priorities based on areas of higher risk and lower protection as a means for ultimately **Assessment** reducing substance use and problem behaviors, the SPF Model has a broader focus. Within the SPF, it is important for prevention professionals to understand what substance use related consequences are problematic in the community (e.g., al-**Evaluation** cohol related motor vehicle Sustainability crashes), what substance use Capacity patterns are associated with and those consequences (e.g., Cultural binge drinking and drinking and driving), and what factors Competence within the community cause these problematic substance use (consumption) patterns (e.g., community norms that accept binge drinking and/or drinking as driving as acceptable behavior). The CCYS is an **Implementation** important source of data for prevention **Planning** professionals using the SPF Model, as it contains many pieces of information

Prevention Planning: SPF Model (continued)

regarding substance use and the causal factors that predict substance use. However, as a result of the broad focus of the SPF, it is highly recommended that prevention professionals using the SPF Model for prevention planning obtain other sources of data in addition to the CCYS in developing a strategic plan for their community. In particular, the CCYS has limited data regarding substance use consequences within the community, therefore prevention staff are encouraged to seek consequence related data from both local (e.g., local law enforcement) and state sources (e.g., the State Epidemiological Workgroup).

Among the CCYS data that prevention professionals are likely to find useful in their SPF needs assessment process are substance use trends among youth, and risk and protective factor data relevant to the substance use consequences and consumption patterns identified as problematic in the community. While not all of the risk and protective factors within the Risk and Protective Factor Model are likely to be relevant to your community's substance use

consumption and consequence priorities, many likely will be useful for planning purposes. Prevention professionals should closely examine the risk and protective factor data available through CCYS to determine which are relevant to understanding the causal influences that lead to the specific substance use consequence priorities in their community.

Additionally, several items have been added to the CCYS to better identify causal factors related to problematic alcohol consumption because the Louisiana State SPF SIG Strategic Plan identified alcohol consumption and consequences as the highest priorities for the state overall. These additional items were added to the CCYS in order to aid those communities identified as alcohol problem hot spots through the state needs assessment process. However, given that alcohol is by far the most widely consumed substance across the entire state, these data should be helpful for other communities that experience high levels of alcohol use and consequences. Data for these items can be found in Table 10 of this report.

Using CCYS Data for Prevention Planning

What are the numbers telling you?

Review the charts and data tables presented in this report. Note your findings as you discuss the following questions.

- Which 3-5 risk factors appear to be higher than you would want when compared to the Bach Harrison Norm?
- Which 3-5 protective factors appear to be lower than you would want when compared to the Bach Harrison Norm?
- Which levels of 30-day drug use are increasing and/or unacceptably high? Which substances are your students using the most? At which grades do you see unacceptable usage levels?
- Which antisocial behaviors are increasing and/or unacceptably high? Which behaviors are your students exhibiting the most? At which grades do you see unacceptable behavior levels?

How to identify high priority problem areas

Once you have familiarized yourself with the data, you can begin to identify priorities.

- Look across the charts for items that stand out as either much higher or much lower than the others.
- Compare your data with statewide, and/or national data. Differences of 5% between local and other data are probably significant.

- **Prioritize problems for your area** according to the issues you've identified. Which can be realistically addressed with the funding available to your community? Which problems fit best with the prevention resources at hand?
- Determine the standards and values held within your community. For example: Is it acceptable in your community for a percentage of high school students to drink alcohol regularly as long as that percentage is lower than the overall state rate?

Use these data for planning.

Once priorities are established, use data to guide your prevention efforts.

- Substance use and antisocial behavior data are excellent tools to raise awareness about the problems and promote dialogue.
- **Risk and protective factor data** can be used to identify exactly where the community needs to take action.
- **Promising approaches** for any prevention goal are available for through resources listed on the last pages of this report. These contacts are a great resource for information about programs that have been proven effective in addressing the risk factors that are high in your community, and improving the protective factors that are low.

	Sample notes	Priority rate 1	Priority rate 2	Priority rate 3
Risk factors	8th grade Favorable Attitude to Drugs (Peer/Indiv. Scale) @14% (8% > BH Norm.)			
Protective factors	10th grade School rewards for prosocial involvement down 7% from 2 yrs ago			
Substance abuse	8th grade 30-day Marijuana @7% (3% above state av.)			
Antisocial behavior	12th grade - Drunk/high at school @ 5% (same as state, bat still too high)			

Understanding the Charts in this Report

There are three major categories of data presented in this report, representing nine types of charts:

Drug use profiles:

- 1. Gateway drug use charts
- 2. Other illicit drug use charts
- 3. Severe substance use indicator charts

Antisocial behavior and gambling profiles:

- 4. Antisocial behavior (ASB) charts
- 5. Gambling charts

Risk and protective factors, alcohol environmental risk factors and mental health and suicide indicators:

- 6. Risk factor charts
- 7. Protective factor charts.
- 8. Alcohol environmental risk factor charts
- 9. Mental health and suicide charts

Drug Use Profiles

There are three types of use measured on the drug use charts.

- **Gateway drug use** measures lifetime and 30-day use rates for alcohol, tobacco, marijuana, and inhalants.
- Other illicit drug use measures lifetime and 30-day use rates for a variety of illicit drugs, including cocaine, heroin, and methamphetamine.
- Severe substance use indicators offer estimates of youth in need of alcohol and drug treatment, the percentage of youth indicating having been drunk or high at school, and youth indicating drinking alcohol and driving or reporting riding with a driver who had been drinking alcohol.

Antisocial Behavior and Gambling Profiles

- Antisocial behavior (ASB) profiles show the percentage
 of youth who reported antisocial behaviors, including
 suspension from school, selling illegal drugs, and
 attacking another person with the intention of doing
 them serious harm.
- **Gambling profiles** show the percentage of youth who gambled in the past year, and the specific types of gambling they engaged in.

Risk and Protective, Alcohol Environmental Risk and Mental Health Factors

• **Risk factor charts** show the percentage of youth who are considered "higher risk" across a variety of risk factor scales.

- **Protective factor charts** show the percentage of youth who are considered high in protection across a variety of protective factor scales.
- Alcohol environmental risk factor charts show alcohol availability in the community, and insights into community norms on alcohol related issues.
- Prescription drug environmental risk factor charts show prescription drug availability in the community.
- Vape environmental risk factor charts show vape availability in the community.
- Mental health and suicide charts show the percentage of youth with mental health treatment needs, currently using medication to manage mental health, and at risk for suicide.

Data corresponding to each of these categories are also presented in tabular format following each set of charts (tables 3 through 12).

Additional Tables in this Report

Additional data useful for prevention planning are found in Tables 13 and 14.

Table 13 contains prevention indicators from the CCYS relevant to the issues of violence, bullying and mental health.

Table 14 contains information required by communities with Drug Free Communities Grants, such as the perception of the risks of ATOD use, perception of parent and peer disapproval of ATOD use, and rates of past 30-day use for alcohol, tobacco, marijuana, and prescription drugs.

Table 15 contains detailed definitions for the risk and protective factor scales found in this profile report.

Understanding the Format of the Charts

There are several graphical elements common to all the charts. Understanding the format of the charts and what these elements represent is essential in interpreting the results of the 2022 CCYS survey.

• The Bars on substance use and antisocial behavior charts represent the percentage of students in that grade who reported a given behavior. The bars on the risk and protective factor charts represent the percentage of students whose answers reflect significant risk or protection in that category.

Each set of differently colored bars represents one of the last three administrations of the CCYS: 2018, 2020, and 2022. By looking at the percentages over time,

Understanding the Charts in this Report (continued)

it is possible to identify trends in substance use and antisocial behavior. By studying the percentage of youth at risk and with protection over time, it is possible to determine whether the percentage of students at risk or with protection is increasing, decreasing, or staying the same. This information is important when deciding which risk and protective factors warrant attention.

• Dots, Diamonds, Triangles, and Xs provide points of comparison to larger samples. The dots on the charts represent the percentage of all of the youth surveyed across Louisiana who reported substance use, problem behavior, elevated risk, or elevated protection.

For the 2022 CCYS Survey, there were 53,446 participants in grades 6, 8, 10, and 12, out of 204,341 enrolled, a participation rate of 26.2%. The fact that over 54,000 students across the state participated in the CCYS make the state dot a good estimate of the rates of ATOD use and levels of risk and protective factors of youth in Louisiana. The survey results provide considerable information for communities to use in planning prevention services.

Diamonds represent national data from the Monitoring the Future (MTF) study, a long-term epidemiological study that surveys trends in drug and alcohol use among American adolescents. Funded by research grants from the National Institute on Drug Abuse, it features nationally representative samples of 8th, 10th, and 12th-grade students.

Triangles represent national data from the Bach Harrison Norm. The Bach Harrison Norm was developed by Bach Harrison L.L.C. to provide states and communities with the ability to compare their results on risk, protection, and antisocial measures with more national measures. Survey participants from eight statewide surveys and five

large regional surveys across the nation were combined into a database of approximately 460,000 students. The results were weighted to make the contribution of each state and region proportional to its share of the national population. Bach Harrison analysts then calculated rates for antisocial behavior and for students at risk and with protection. The results appear on the charts as BH Norm. In order to keep the Bach Harrison Norm relevant, it is updated approximately every two years as new data become available.

The Xs represent national mental health data gathered by the 2019 Youth Risk Behavior Survey (YRBS). Comparison data are available for grades 10 and 12 on the topics of suicide and depression. (Note these are national data, not data from the Louisiana Youth Risk Behavior Survey.)

A comparison to state-wide and national results provides additional information for your community in determining the relative importance of levels of alcohol, tobacco and other drug (ATOD) use, antisocial behavior, risk, and protection. Information about other students in the state and the nation can be helpful in determining the seriousness of a given level of problem behavior. Scanning across the charts, it is important to observe the factors that differ the most from the Bach Harrison Norm. This is the first step in identifying the levels of risk and protection that are higher or lower than those in other communities. The risk factors that are higher than the Bach Harrison Norm and the protective factors that are lower than the Bach Harrison Norm are probably the factors your community should consider addressing when planning prevention programs.

The charts and tables that follow present the substance use rates for your community for 6th, 8th, 10th and 12th grade students who completed the survey. The first set of substance use charts cover the "Gateway Drugs" most commonly used by youth (alcohol, tobacco, marijuana and inhalants). The second set of substance use charts include a variety of important, but less commonly used illicit drugs such as cocaine, heroin, methamphetamine, and prescription narcotics. Finally, the last set of substance use charts present indicators of severe (or extremely dangerous) substance use, including the youth in need of substance abuse treatment, the percentage indicating they used substances in school, and students involved in drinking and driving.

Each chart represents students from a single grade. The bars on each chart represent the percentage of students in the indicated sample (e.g. school, parish, or region) reporting substance use, and related behaviors or perceptions. The **dots** on the charts represent the same data for all students of that grade surveyed in the state of Louisiana. The **diamonds** and **triangles** represent national data included to allow a comparison of your data to a national sample of students, either the Monitoring the Future (MTF) Survey (*lifetime*, 30-day, and heavy use), and the Bach Harrison Norm (severe substance use) respectively. The Bach Harrison Norm is available for grades 6 through 12 while MTF only surveys grades 8, 10, and 12.

A comparison to state and national results provides additional information for your community in determining the relative importance of levels of ATOD use. Information about other students in the region and the nation can be helpful in determining the seriousness of a given level of problem behavior. Scanning across the charts will help you gain a better understanding of the substance use (consumption) issues affecting your community.

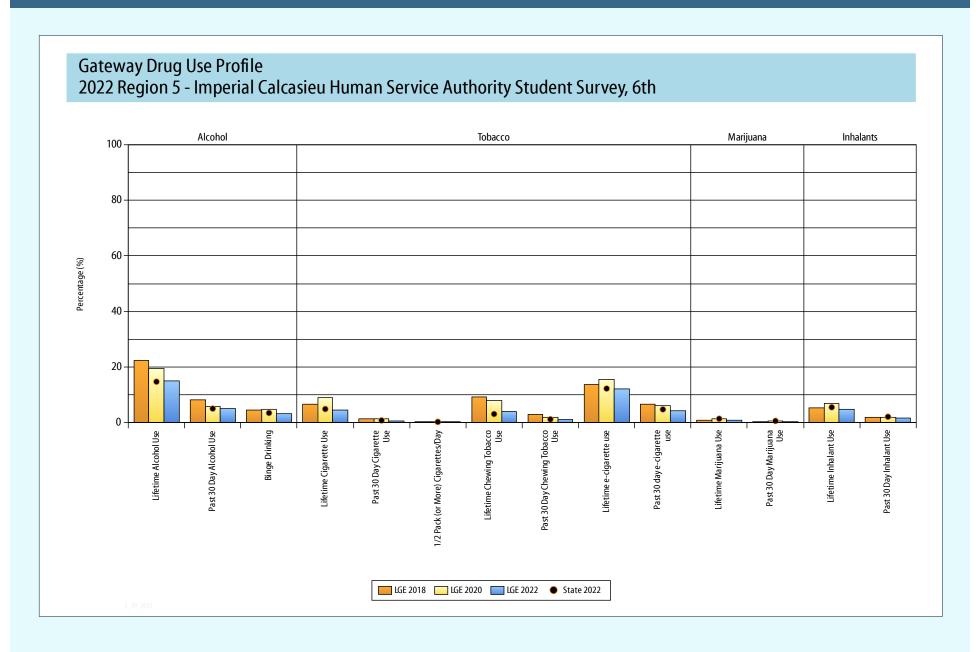
The following definitions and descriptions provide information for the substance use and severe substance use charts that follow.

- **Lifetime use** is a measure of the percentage of students who tried the particular substance at least once in their lifetime and is used to show the percentage of students who have had experience with a particular substance.
- 30-day use is a measure of the percentage of students who used the substance at least once in the 30 days prior to taking the survey and is a more sensitive indicator of the level of current use of the substance.
- **Heavy use** includes binge drinking (having five or more drinks in a row during the two weeks prior to the survey) and smoking one-half a pack or more of cigarettes per day.
- Severe substance use indicators include student responses regarding drinking alcohol and driving, riding with a drinking driver, being drunk, being drunk or high at school, binge drinking, and the need for substance abuse treatment (alcohol, drug, and the total in need of any treatment alcohol *or* drug).

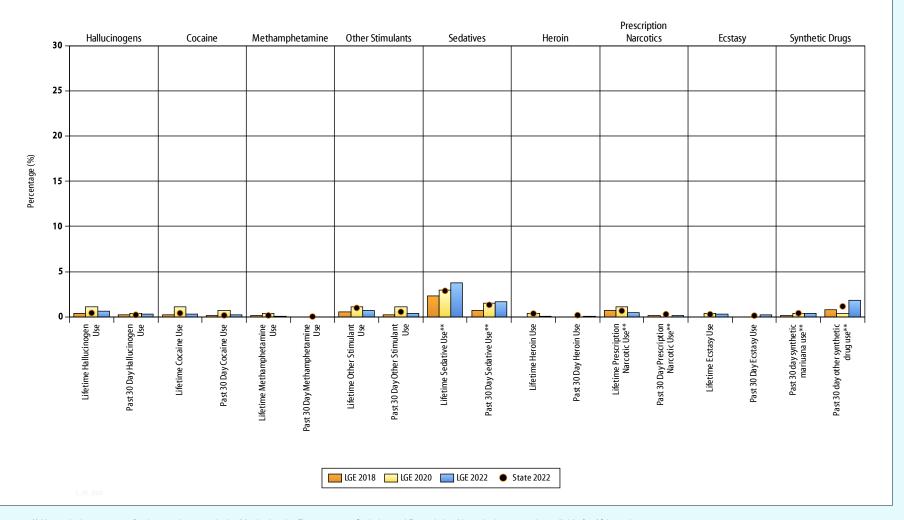
The need for treatment is defined as students who have used alcohol or drugs on 10 or more occasions in their lifetime and marked at least three of the following items specific to their drug or alcohol use in the past year:

- Spent more time using than intended;
- Neglected some of your usual responsibilities because of use
- · Wanted to cut down on use
- Others objected to your use
- o Frequently thought about using
- Used alcohol or drugs to relieve feelings such as sadness, anger, or boredom

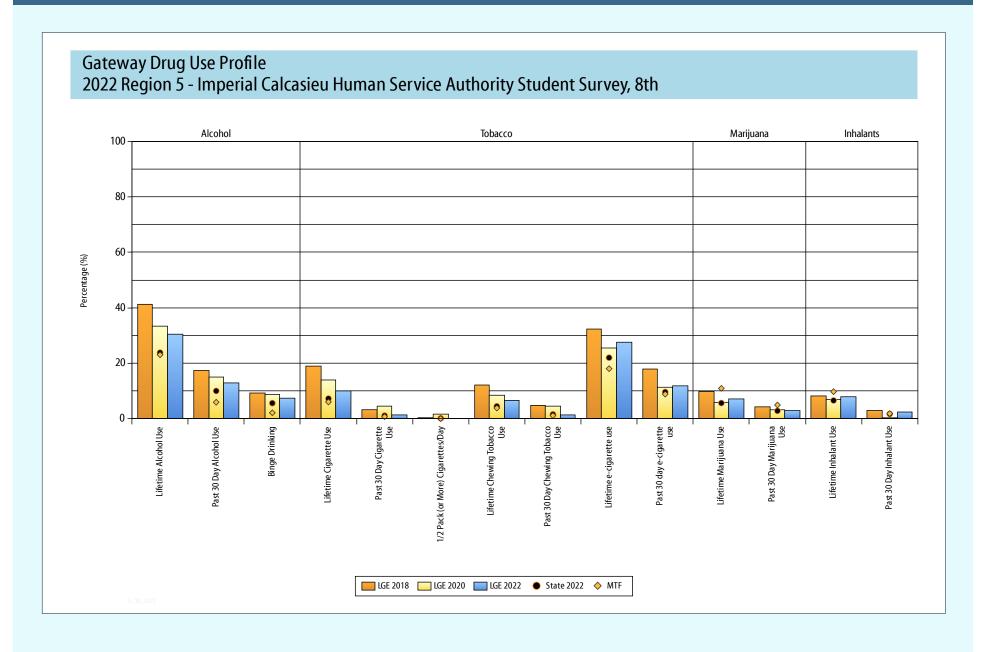
Students could mark whether these items related to their drug use and/or their alcohol use.



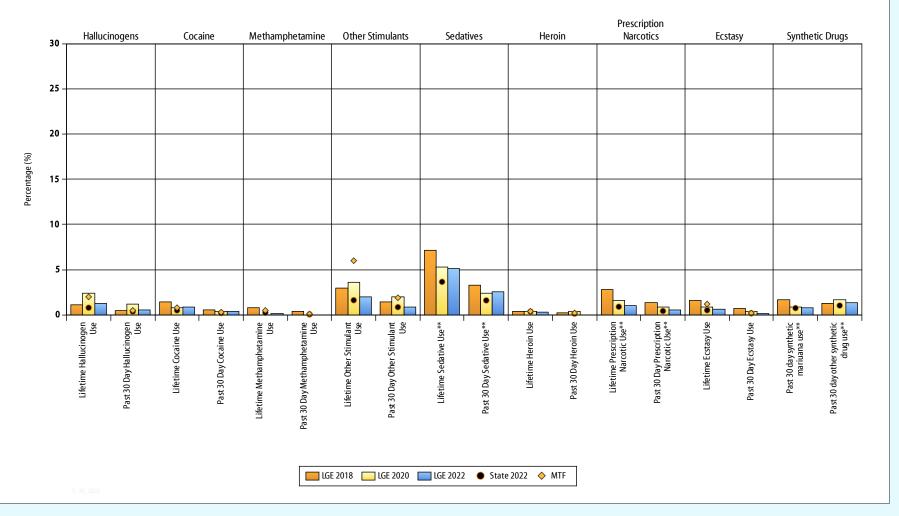




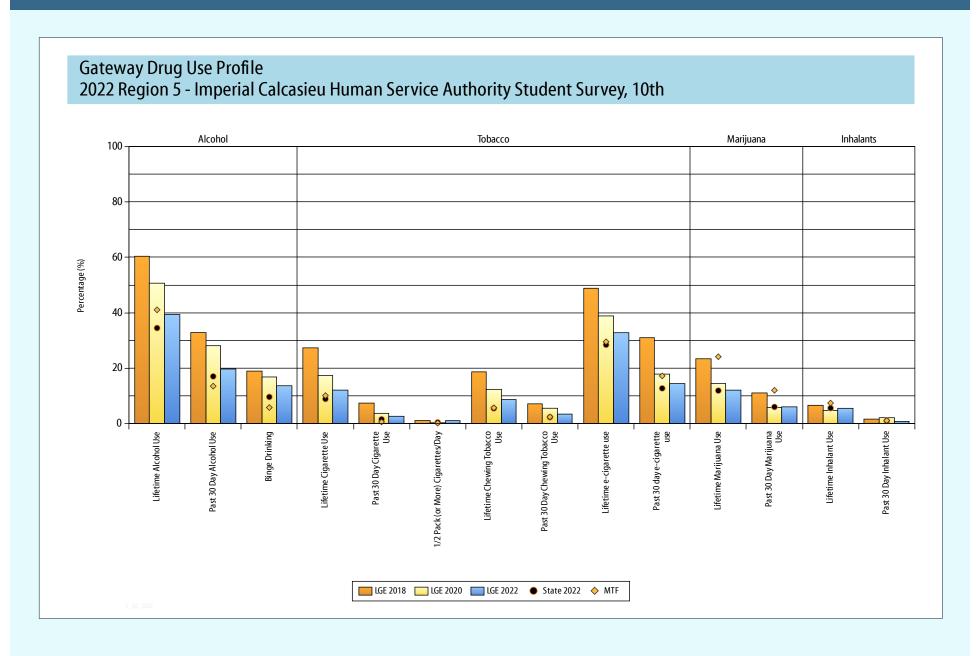
^{**} No equivalent category for these substances in the Monitoring the Future survey. Sedative and Prescription Narcotic data are only available for 12th grade.



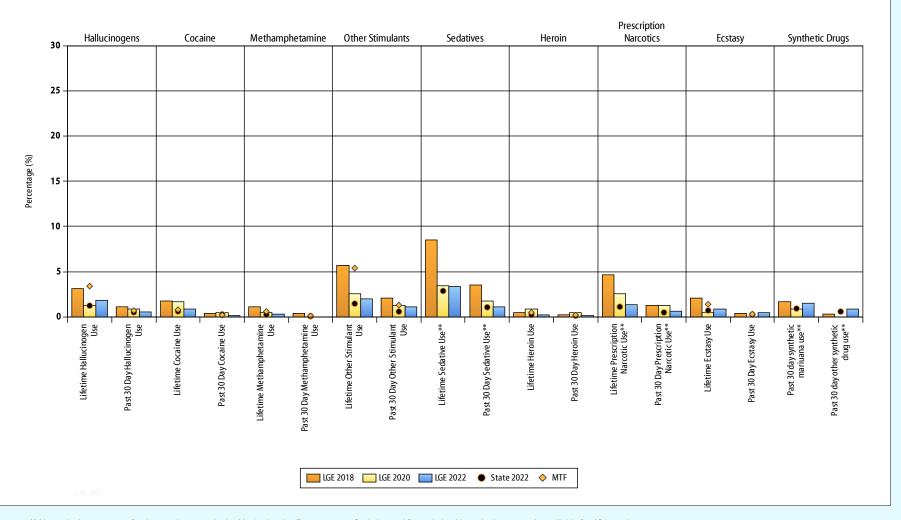




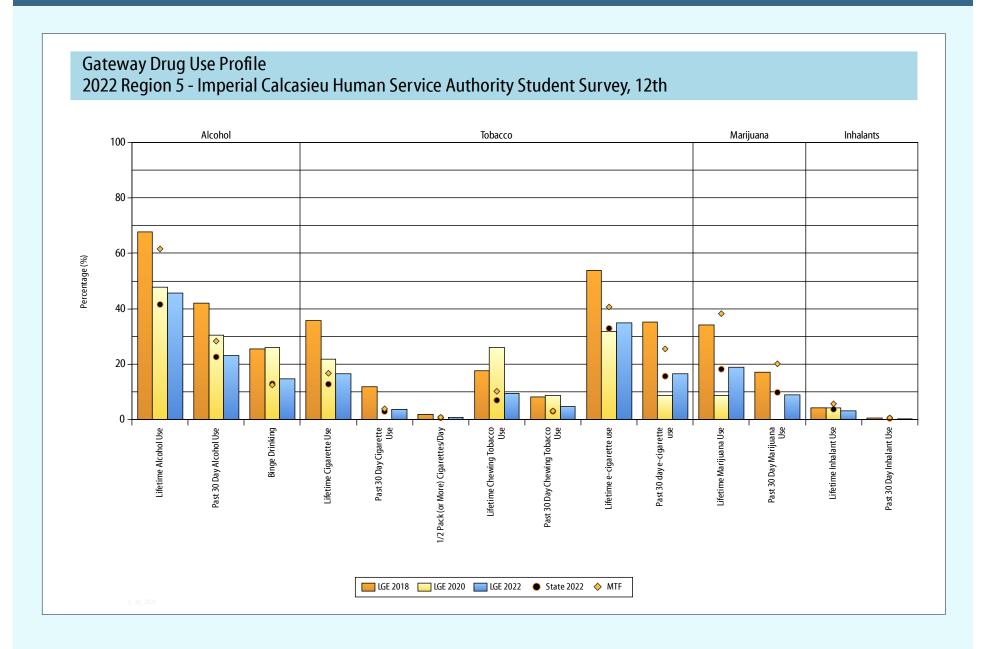
^{**} No equivalent category for these substances in the Monitoring the Future survey. Sedative and Prescription Narcotic data are only available for 12th grade.

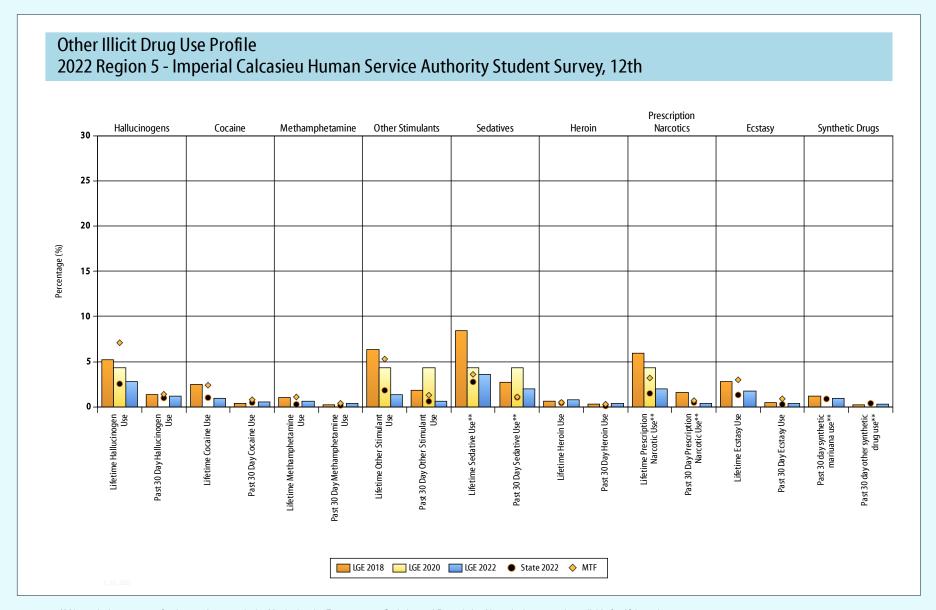






^{**} No equivalent category for these substances in the Monitoring the Future survey. Sedative and Prescription Narcotic data are only available for 12th grade.



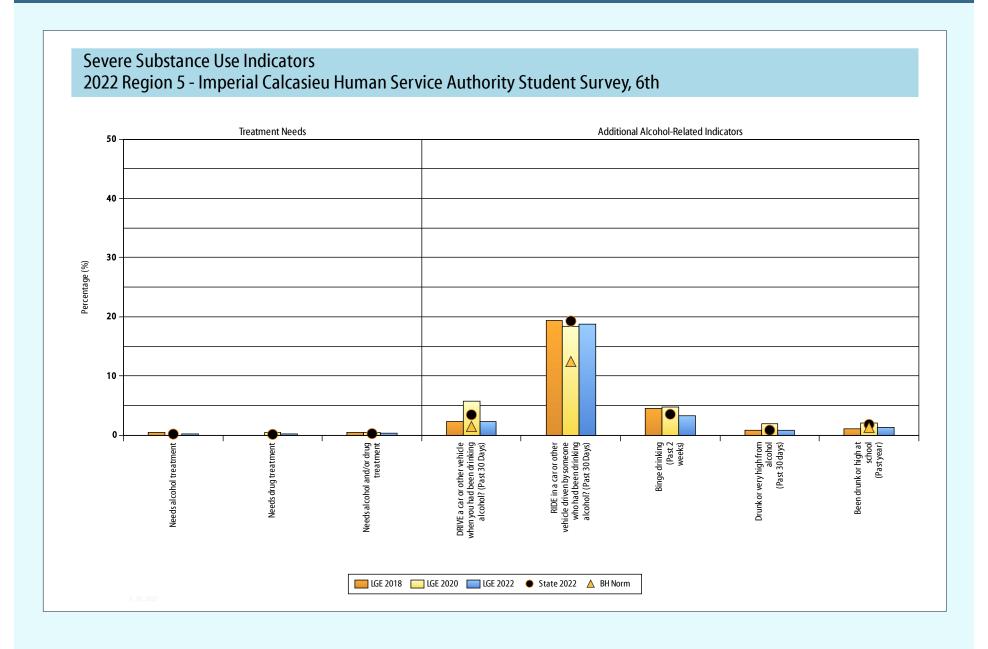


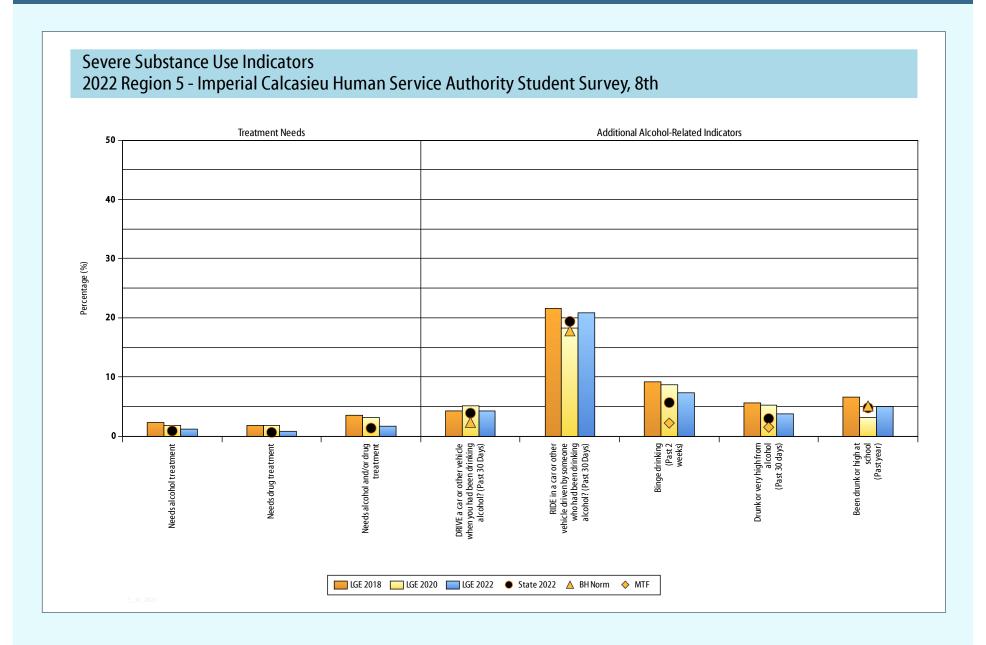
^{**} No equivalent category for these substances in the Monitoring the Future survey. Sedative and Prescription Narcotic data are only available for 12th grade.

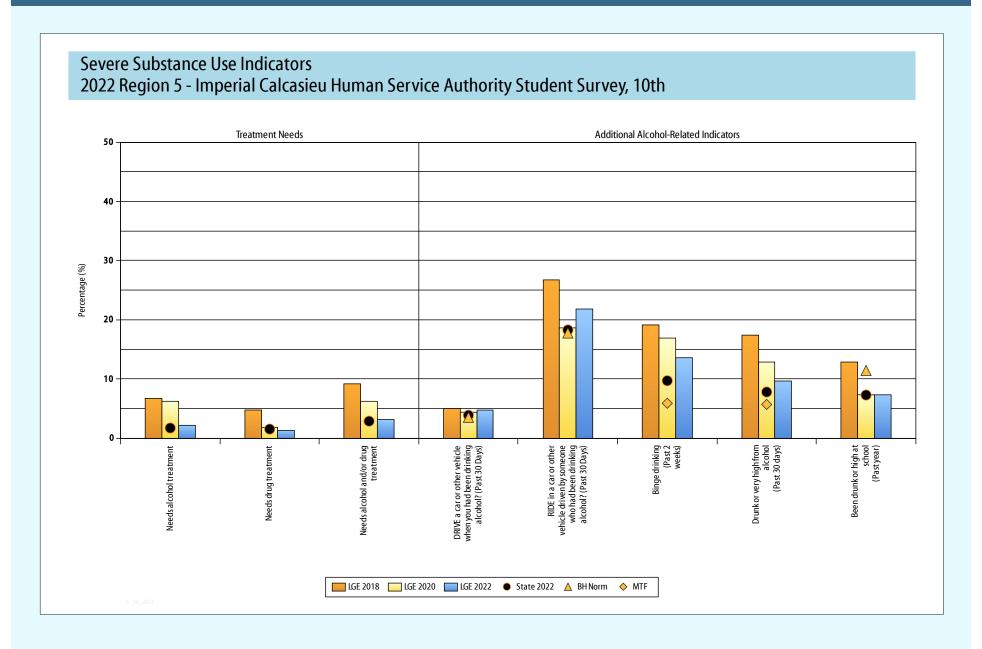
Table 3. Perc	Table 3. Percentage of Students Who Used Gateway Drugs																				
				6th					8th					10th					12th		
On how many occasion (One or more occasion		LGE 2018	LGE 2020	LGE 2022	State 2022	MTF 2022	LGE 2018	LGE 2020	LGE 2022	State 2022	MTF 2022	LGE 2018	LGE 2020	LGE 2022	State 2022	MTF 2022	LGE 2018	LGE 2020	LGE 2022	State 2022	MTF 2022
Lifetime alcohol	had alcoholic beverages (beer, wine, or hard liquor) to drink in your lifetime more than just a few sips?	22.4	19.4	15.1	14.7	~	41.3	33.3	30.5	23.9	23.1	60.3	50.6	39.3	34.6	41.1	67.6	47.8	45.6	41.6	61.6
Past 30 day alcohol	had beer, wine, or hard liquor to drink during the past 30 days?	8.2	5.9	5.0	5.1	~	17.4	15.1	13.0	10.1	6.0	32.8	28.0	19.7	17.1	13.6	42.0	30.4	23.2	22.7	28.4
Binge drinking	How many times have you had 5 or more alcoholic drinks in a row in the past 2 weeks? (One or more times)	4.5	4.8	3.3	3.5	~	9.2	8.6	7.3	5.7	2.2	19.1	16.9	13.6	9.7	5.9	25.5	26.1	14.7	13.0	12.6
Lifetime cigarettes	Have you ever smoked cigarettes?	6.7	9.0	4.6	4.9	~	18.9	14.0	10.0	7.3	6.1	27.5	17.4	12.1	9.0	10.2	35.9	21.7	16.5	12.9	16.8
Past 30 day cigarettes	How frequently have you smoked cigarettes during the past 30 days?	1.3	1.5	0.5	0.8	~	3.3	4.5	1.5	1.2	0.8	7.6	3.8	2.7	1.7	0.7	11.8	0.0	3.9	3.1	4.0
1/2 pack of cigarettes/day	During the past 30 days, how many cigarettes did you smoke per day? (About one-half pack a day or more)	0.1	0.4	0.1	0.3	~	0.4	1.6	0.0	0.2	0.1	1.1	0.4	1.0	0.5	0.3	1.9	0.0	0.9	0.8	0.9
Lifetime chewing tobacco	used smokeless tobacco (chew, snuff, plug, dipping tobacco, chewing tobacco) in your lifetime?	9.3	8.0	4.0	3.1	~	12.2	8.4	6.5	4.5	3.9	18.7	12.5	8.7	5.6	5.8	17.5	26.1	9.5	7.1	10.3
Past 30 day chewing tobacco	used smokeless tobacco (chew, snuff, plug, dipping tobacco, chewing tobacco) during the past 30 days?	3.0	1.9	1.2	1.2	~	4.7	4.5	1.5	1.6	1.2	7.2	5.5	3.5	2.4	2.5	8.1	8.7	4.8	3.1	3.2
Lifetime e-cigarette use	Have you ever tried electronic cigarettes, e-cigarettes, vape pens, or e-hookahs?	13.7	15.6	12.1	12.3	~	32.5	25.4	27.5	22.1	18.1	48.9	39.0	32.8	28.5	29.6	53.9	31.8	35.1	33.0	40.7
Past 30 day e-cigarette use	use electronic cigarettes, e-cigarettes, vape pens, or e-hookahs?	6.6	6.2	4.4	4.8	~	17.9	11.3	11.8	9.7	8.9	31.0	18.0	14.6	12.8	17.3	35.2	8.7	16.6	15.7	25.6
Lifetime marijuana	used marijuana (grass, pot) or hashish (hash, hash oil) in your lifetime?	0.9	1.5	0.9	1.4	~	9.9	6.0	7.3	5.7	11.0	23.4	14.5	12.1	12.0	24.2	34.2	8.7	19.0	18.3	38.3
Past 30 day marijuana	used marijuana (grass, pot) or hashish (hash, hash oil) during the past 30 days?	0.1	0.7	0.3	0.6	~	4.3	3.2	3.0	2.9	5.0	11.1	6.0	6.0	6.1	12.1	17.1	0.0	9.1	9.9	20.2
Lifetime inhalants	sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high in your lifetime?	5.2	7.0	4.8	5.6	~	8.1	6.8	8.0	6.6	9.8	6.7	4.7	5.7	5.7	7.5	4.2	4.3	3.2	3.8	5.8
Past 30 day inhalants	sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays, in order to get high during the past 30 days?	1.9	1.9	1.6	2.1	~	2.9	0.4	2.4	1.8	1.9	1.6	2.2	0.9	1.1	1.2	0.7	0.0	0.3	0.5	0.7

Table 4. Percentage of Students Who Used Other Illicit Drugs																					
				6th					8th					10th					12th		
On how many occasion (One or more occasion		LGE 2018	LGE 2020	LGE 2022	State 2022	MTF 2022	LGE 2018	LGE 2020	LGE 2022	State 2022	MTF 2022	LGE 2018	LGE 2020	LGE 2022	State 2022	MTF 2022	LGE 2018	LGE 2020	LGE 2022	State 2022	MTF 2022
Lifetime hallucinogens	used LSD (acid, blotter) or other hallucinogens (like PCP, mescaline, peyote, shrooms, or ketamine) in your lifetime?	0.3	1.1	0.6	0.4	~	1.1	2.4	1.3	0.8	2.0	3.2	1.3	1.8	1.2	3.4	5.2	4.3	2.8	2.6	7.1
Past 30 day hallucinogens	used LSD (acid, blotter) or other hallucinogens (like PCP, mescaline, peyote, shrooms, or ketamine) during the past 30 days?	0.2	0.4	0.3	0.2	~	0.5	1.2	0.6	0.4	0.5	1.1	0.9	0.5	0.5	0.7	1.3	0.0	1.2	1.0	1.4
Lifetime cocaine	used cocaine or crack in your lifetime?	0.2	1.1	0.3	0.4	~	1.4	0.8	0.9	0.5	0.8	1.7	1.7	0.9	0.6	0.8	2.5	0.0	0.9	1.0	2.4
Past 30 day cocaine	used cocaine or crack during the past 30 days?	0.1	0.7	0.2	0.2	~	0.6	0.4	0.4	0.2	0.3	0.4	0.4	0.2	0.3	0.2	0.4	0.0	0.5	0.5	0.8
Lifetime methamphetamine	used methamphetamines (meth, speed, crank, crystal meth) in your lifetime?	0.1	0.4	0.1	0.2	~	0.8	0.0	0.1	0.3	0.5	1.1	0.4	0.3	0.3	0.6	1.0	0.0	0.7	0.3	1.1
Past 30 day methamphetamine	used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days?	0.0	0.0	0.0	0.0	~	0.4	0.0	0.0	0.1	0.1	0.4	0.0	0.0	0.1	0.1	0.2	0.0	0.4	0.2	0.4
Lifetime other stimulants	used stimulants, other than methamphetamines (such as amphetamines, Adderall, Dexedrine, Ritalin) without a doctor telling you to take them, in your lifetime?	0.6	1.1	0.7	1.0	~	2.9	3.6	2.0	1.6	6.0	5.7	2.5	2.0	1.5	5.4	6.4	4.3	1.3	1.8	5.3
Past 30 day other stimulants	used stimulants, other than methamphetamines (such as amphetamines, Adderall, Dexedrine, Ritalin) without a doctor telling you to take them, during the past 30 days?	0.2	1.1	0.4	0.6	~	1.4	2.0	0.9	0.9	1.9	2.0	1.3	1.1	0.6	1.3	1.9	4.3	0.7	0.6	1.3
Lifetime sedatives**	used sedatives (tranquilizers, such as Ativan, Klonopin, Valium, Xanax, barbiturates, or sleeping pills) without a doctor telling you to take them, in your lifetime?	2.3	3.0	3.8	2.9	~	7.1	5.3	5.1	3.7	~	8.5	3.4	3.4	2.9	~	8.4	4.3	3.6	2.8	3.6
Past 30 day sedatives**	used sedatives (tranquilizers, such as Ativan, Klonopin, Valium, Xanax, barbiturates, or sleeping pills) without a doctor telling you to take them, during the past 30 days?	0.7	1.5	1.6	1.3	~	3.3	2.4	2.5	1.6	,	3.5	1.7	1.1	1.1	~	2.7	4.3	2.0	1.1	1.1
Lifetime heroin	used heroin in your lifetime?	0.0	0.4	0.1	0.4	~	0.4	0.4	0.3	0.4	0.4	0.5	0.9	0.3	0.3	0.5	0.6	0.0	0.8	0.4	0.5
Past 30 day heroin	used heroin during the past 30 days?	0.0	0.0	0.1	0.2	~	0.2	0.4	0.0	0.1	0.2	0.2	0.4	0.2	0.1	0.2	0.3	0.0	0.4	0.1	0.3
Lifetime prescription narcotics**	used narcotic prescription drugs (such as OxyContin, methadone, morphine, codeine, Demerol, Vicodin, Percocet, Suboxone, fentanyl, carfentanyl, or other oplates) without a doctor telling you to take them, in your lifetime?	0.7	1.1	0.4	0.7	~	2.8	1.6	1.0	0.9	~	4.7	2.6	1.4	1.1	~	5.9	4.3	2.0	1.5	3.2
Past 30 day prescription narcotics**	used narcotic prescription drugs (such as OxyContin, methadone, morphine, codeine, Demerol, Vicodin, Percocet, Suboxone, fentanyl, carfentanyl, or other opiates) without a doctor telling you to take them, during the past 30 days?	0.1	0.0	0.1	0.3	~	1.3	0.8	0.5	0.4	2	1.3	1.3	0.6	0.5	~	1.6	0.0	0.4	0.5	0.7
Lifetime ecstasy	used MDMA (X, E, "Molly", or ecstasy) in your lifetime?	0.0	0.4	0.3	0.3	~	1.6	0.8	0.7	0.5	1.2	2.1	0.4	0.9	0.7	1.4	2.8	0.0	1.7	1.3	3.0
Past 30 day ecstasy	used MDMA (X, E, "Molly", or ecstasy) in the past 30 days?	0.0	0.0	0.2	0.1	~	0.7	0.4	0.1	0.2	0.2	0.4	0.0	0.4	0.3	0.3	0.5	0.0	0.4	0.3	0.9
Past 30 day synthetic mariuana use**	used synthetic marijuana or herbal incense products (such as K2, Spice, or Gold) in the past 30 days?	0.1	0.4	0.4	0.4	~	1.6	0.8	0.8	0.8	~	1.7	0.9	1.5	0.9	~	1.2	0.0	0.9	0.9	~
Past 30 day other synthetic drug use**	used other synthetic drugs (such as Bath Salts like Ivory Wave or White Lightning) in the past 30 days?	0.8	0.4	1.8	1.2	~	1.2	1.7	1.3	1.0	,	0.3	0.0	0.9	0.6	~	0.3	0.0	0.3	0.4	2

 $[\]hbox{** No equivalent MTF data for these substances. Sedative and Prescription Narcotic data are only available for 12th grade.}$







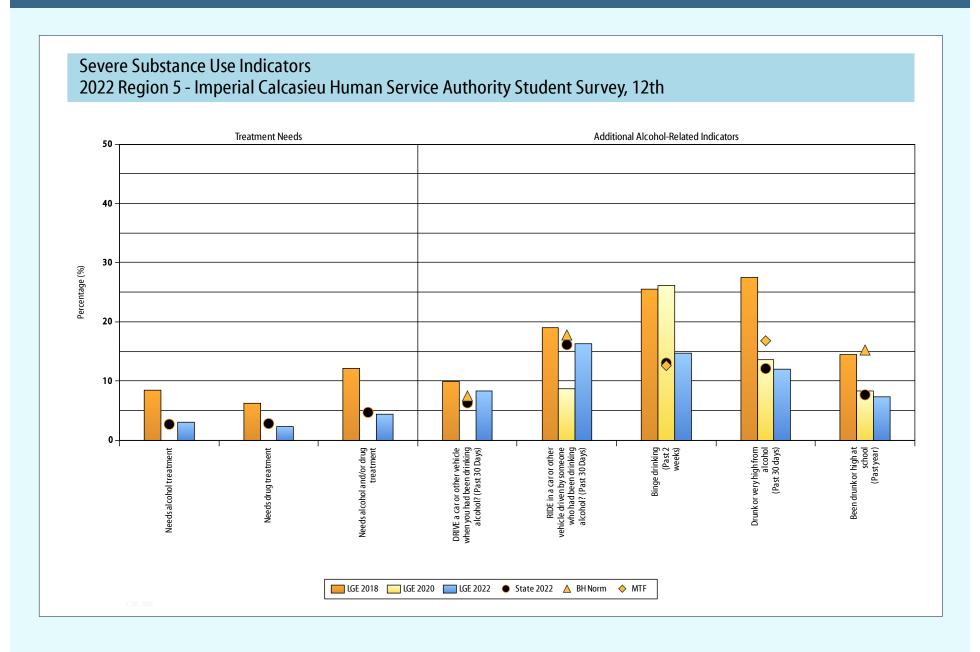




Table 5. Severe Substance Use Indicators																												
Additional alcohol related indicato	rs																											
				6th					8th					10th					12th		1 17.8 MTF 2022 0 12.6							
During the past 30 days, how many times	did you	LGE 2018	LGE 2020	LGE 2022	State 2022	BH Norm	LGE 2018	LGE 2020	LGE 2022	State 2022	BH Norm	LGE 2018	LGE 2020	LGE 2022	State 2022	BH Norm	LGE 2018	LGE 2020	LGE 2022	State 2022								
DRIVE a car when you had been drinking alcohol?	Drinking and driving	2.3	5.7	2.3	3.4	1.5	4.3	5.1	4.3	3.9	2.3	5.0	4.3	4.7	3.9	3.5	9.9	0.0	8.3	6.3	7.5							
RIDE in a car driven by someone drinking alcohol?	Riding with a drinking driver	19.4	18.4	18.8	19.3	12.4	21.6	18.2	20.8	19.4	17.8	26.8	18.6	21.8	18.3	17.8	18.9	8.7	16.3	16.1	17.8							
		LGE 2018	LGE 2020	LGE 2022	State 2022	MTF 2022	LGE 2018	LGE 2020	LGE 2022	State 2022	MTF 2022	LGE 2018	LGE 2020	LGE 2022	State 2022	MTF 2022	LGE 2018	LGE 2020	LGE 2022	State 2022								
How many times have you had 5 or more alcoholic drinks in a row in the past 2 weeks? (One or more times)	Binge drinking	4.5	4.8	3.3	3.5	~	9.2	8.6	7.3	5.7	2.2	19.1	16.9	13.6	9.7	5.9	25.5	26.1	14.7	13.0	12.6							
On how many occasions (if any) have you been drunk or very high from drinking alcoholic beverages during the past 30 days? (One or more times)	Drinking until drunk	0.8	1.9	0.8	0.8	~	5.6	5.2	3.8	3.0	1.5	17.4	12.9	9.7	7.8	5.7	27.5	13.6	12.0	12.1	16.8							
How many times in the past year (12 months) have you been drunk or high at school? (One or more times)	Been drunk or high at school	1.1	2.1	1.3	1.8	~	6.6	3.1	5.0	4.8	~	12.8	7.3	7.3	7.3	~	14.5	8.3	7.3	7.7	~							
Treatment Needs																												
Students who have used alcohol or drugs on 10 or more occasions in their lifetime and marked 3 or more of the following 6 items related to their past year drug or alcohol use:	Needs Alcohol Treatment	0.4	0.0	0.2	0.2	~	2.3	1.8	1.1	0.9	~	6.7	6.3	2.2	1.7	2	8.4	0.0	3.0	2.7	~							
Spent more time using than intended Neglected some of your usual responsibilities because of use Wanted to cut down on use	Needs Drug Treatment	0.0	0.4	0.1	0.1	~	1.7	1.8	0.8	0.6	~	4.7	1.8	1.3	1.5	2	6.2	0.0	2.3	2.8	~							
4) Others objected to your use 5) Frequently thought about using 6) Used alcohol or drugs to relieve feelings such as sadness, anger, or boredom.	Needs Alcohol and/or Drug Treatment	0.4	0.4	0.3	0.2	~	3.5	3.1	1.7	1.3	~	9.1	6.3	3.2	2.9	~	12.1	0.0	4.4	4.7	~							

The charts and tables that follow present the rates of a variety of antisocial behaviors, as well as gambling behavior among youth in your community who completed the survey. The first set of charts in this section present the percentage of youth who reported engaging in several forms of **antisocial behavior** (e.g., attacked someone with the idea of seriously hurting them, stolen a vehicle) or related consequences (e.g., been suspended from school, been arrested). The second set of charts in this section highlight the percentage of youth who indicated engaging in a variety of **gambling behaviors**. Rates of both antisocial behavior and gambling reflect reported behavior in the past year.

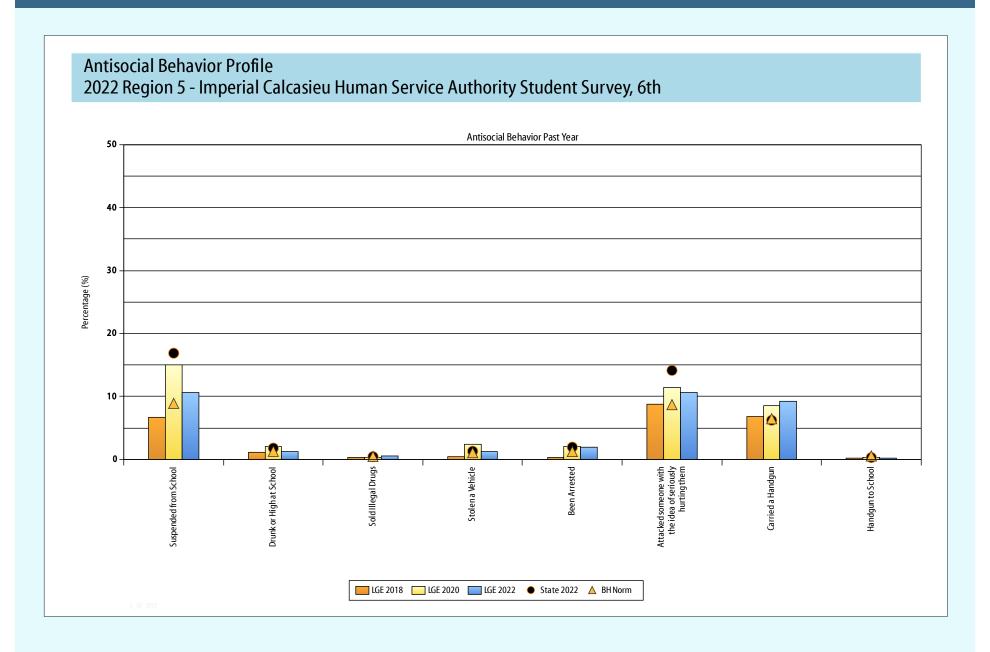
As with the substance use profile charts presented earlier, the **bars** on the following charts represent the percentage of students in that grade who reported the behavior, while the **dots** on the charts represent the percentage of all of the youth surveyed in Louisiana who reported the problem behavior. The **triangles** represent national data from the Bach Harrison Norm and allow a comparison of your antisocial and gambling behavior data to a national sample of students.

A comparison to state and national results provides additional information for your community in determining the relative importance of levels of antisocial and gambling behavior. Information about other students in the region and the nation can be helpful in determining the seriousness of a given level of problem behavior. Scanning across the charts will help you gain a better understanding of the issues affecting your community.

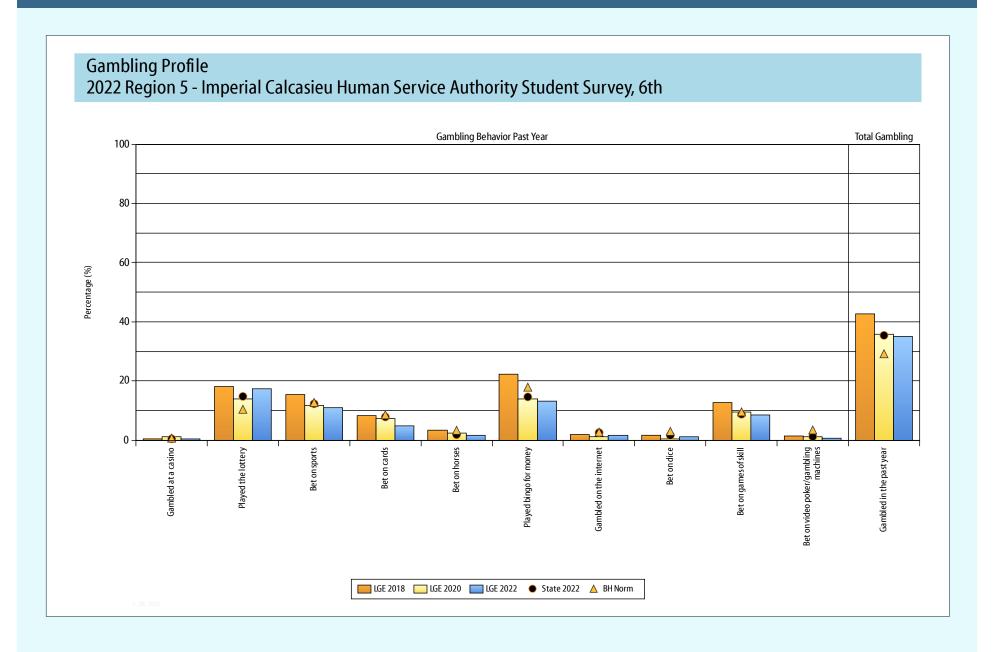
The following definitions and descriptions provide information for the substance use and severe substance use charts that follow.

- Antisocial behavior (ASB) is a measure of the percentage of students who report any involvement with the eight antisocial behaviors listed in the charts during the past year. In the charts, antisocial behavior is referred to as ASB.
- Gambling behavior charts show the percentage of students who engaged in each of the 10 types of gambling along with the percentage for any gambling behavior during the past year.

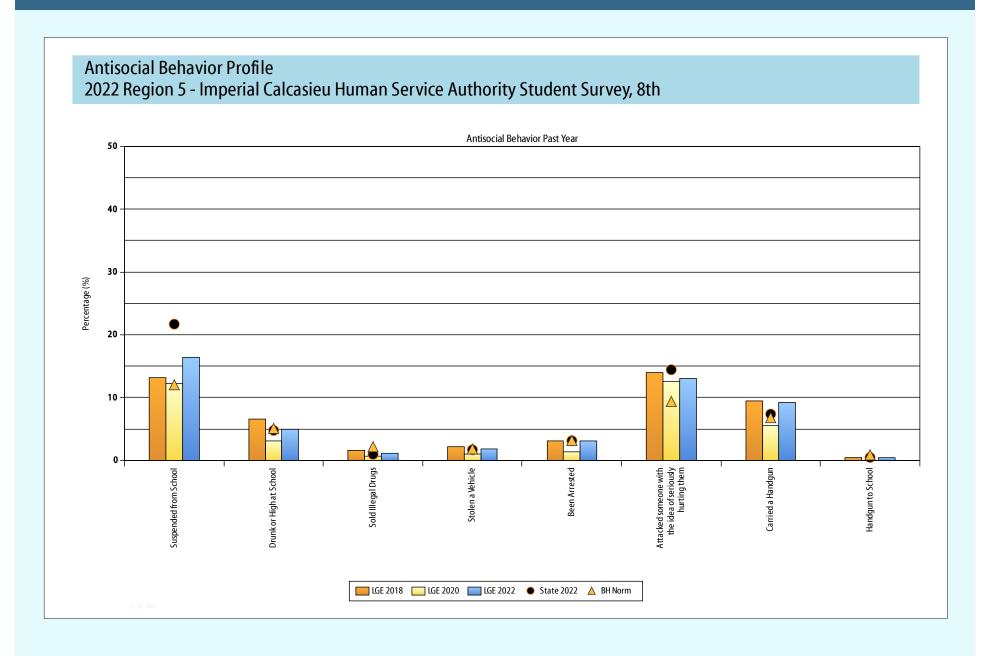




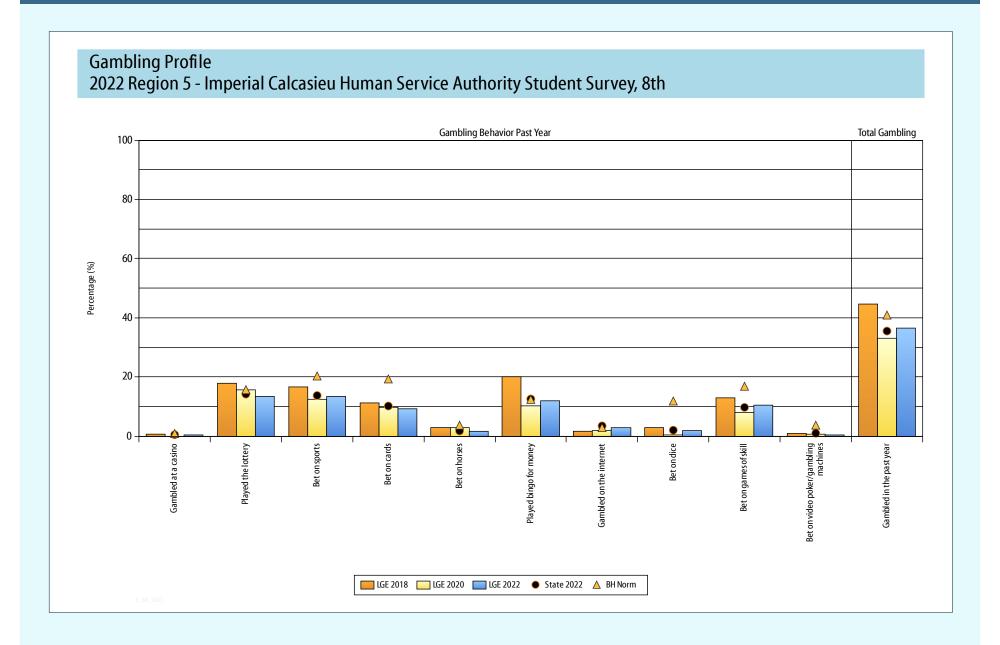




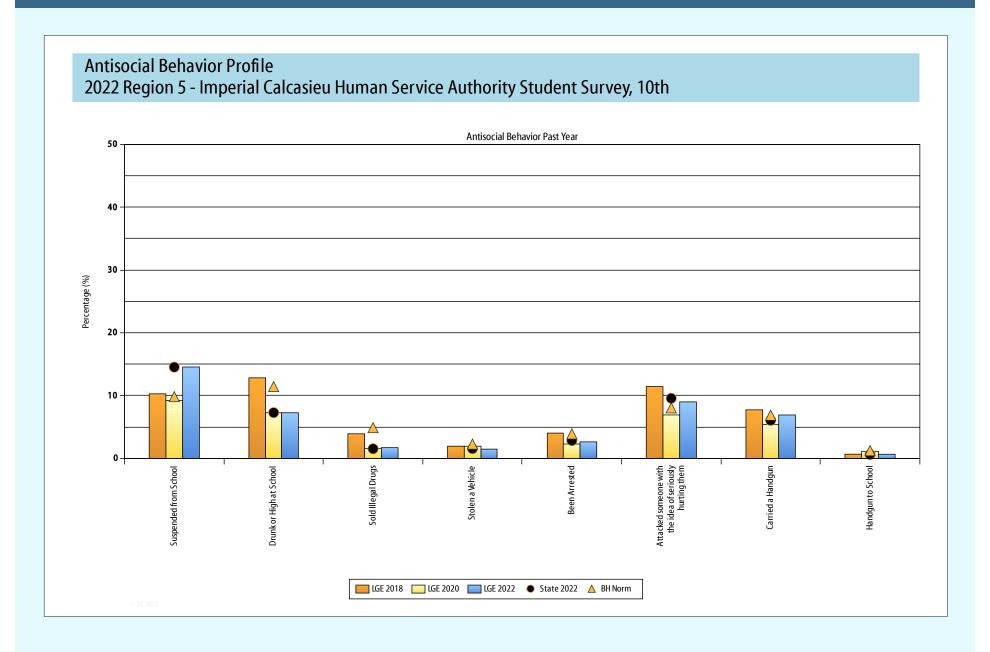




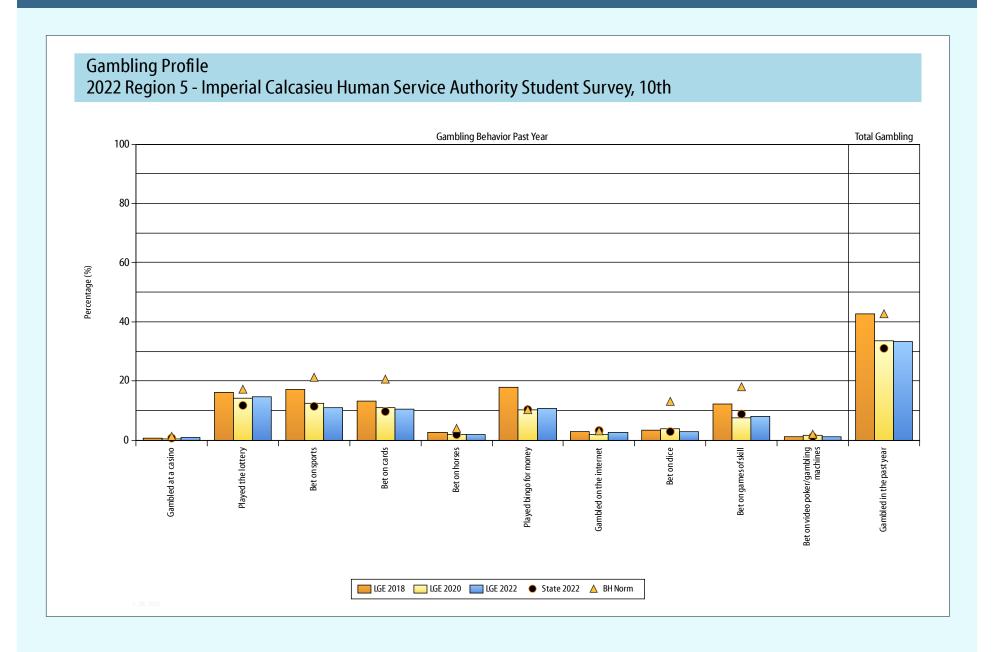




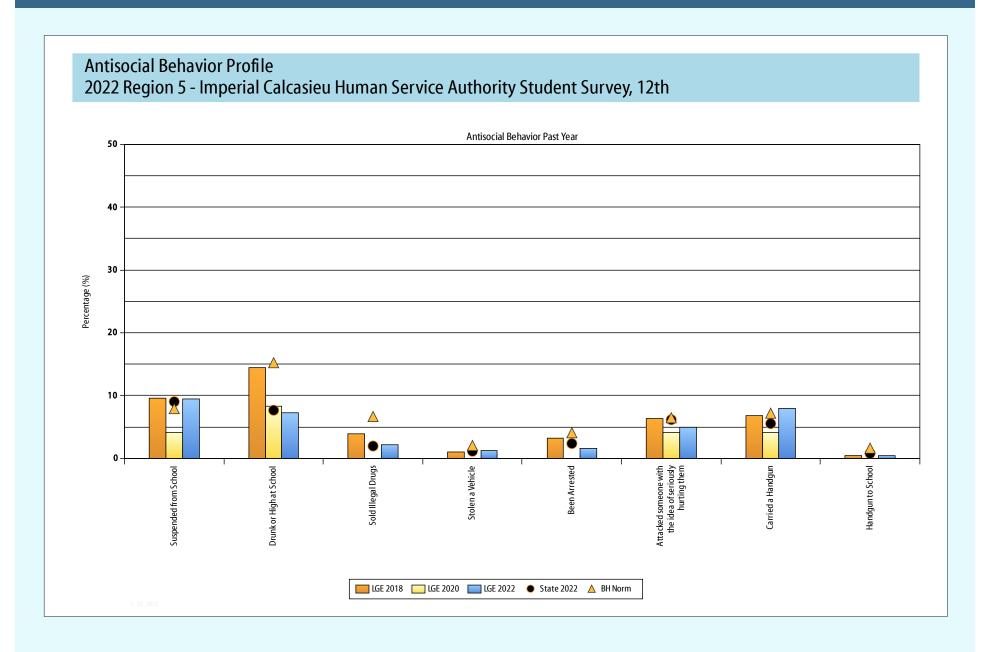




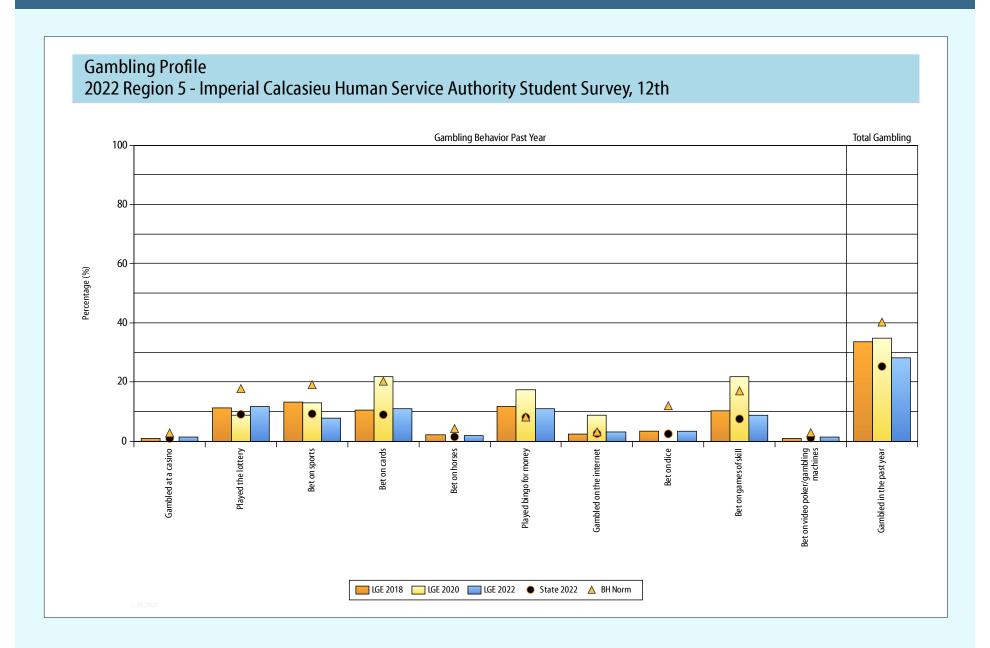














Antisocial Behavior and Gambling Profiles

Table 6. Percentage of Students Wi	th Antis	ocial Be	havior																	
How many times in the past year			6th					8th					10th					12th		
(12 months) have you: (One or more times)	LGE 2018	LGE 2020	LGE 2022	State 2022	BH Norm	LGE 2018	LGE 2020	LGE 2022	State 2022	BH Norm	LGE 2018	LGE 2020	LGE 2022	State 2022	BH Norm	LGE 2018	LGE 2020	LGE 2022	State 2022	BH Norm
Been suspended from school	6.7	15.1	10.7	16.9	8.9	13.2	12.2	16.4	21.7	12.1	10.2	9.2	14.6	14.5	9.8	9.6	4.2	9.5	9.0	7.9
Been drunk or high at school	1.1	2.1	1.3	1.8	1.3	6.6	3.1	5.0	4.8	5.1	12.8	7.3	7.3	7.3	11.4	14.5	8.3	7.3	7.7	15.2
Sold illegal drugs	0.3	0.3	0.5	0.4	0.5	1.5	0.7	1.1	1.0	2.2	3.9	1.5	1.7	1.5	4.9	3.9	0.0	2.2	2.0	6.7
Stolen or tried to steal a motor vehicle	0.4	2.4	1.3	1.3	1.1	2.1	1.0	1.9	1.7	1.8	2.0	1.9	1.5	1.5	2.3	1.0	0.0	1.3	1.1	2.1
Been arrested	0.3	2.1	1.9	1.9	1.3	3.1	1.4	3.1	3.1	3.2	4.1	2.3	2.6	2.8	3.9	3.2	0.0	1.5	2.4	4.1
Attacked someone with the idea of seriously hurting them	8.7	11.5	10.6	14.1	8.7	13.9	12.6	13.1	14.4	9.4	11.4	6.9	9.0	9.6	8.1	6.3	4.2	5.0	6.2	6.5
Carried a handgun	6.8	8.6	9.2	6.2	6.5	9.5	5.6	9.3	7.4	6.8	7.7	5.4	7.0	6.1	6.9	6.8	4.2	8.0	5.5	7.2
Carried a handgun to school	0.2	0.3	0.2	0.3	0.6	0.4	0.0	0.5	0.5	0.9	0.6	1.2	0.7	0.6	1.2	0.4	0.0	0.4	0.8	1.6

Table 7. Gambling Behavior																				
How often have you done the			6th					8th					10th					12th		
following for money, posessions or anything of value (during the past year):	LGE 2018	LGE 2020	LGE 2022	State 2022	BH Norm	LGE 2018	LGE 2020	LGE 2022	State 2022	BH Norm	LGE 2018	LGE 2020	LGE 2022	State 2022	BH Norm	LGE 2018	LGE 2020	LGE 2022	State 2022	BH Norm
gambled at a casino?	0.2	1.0	0.4	0.4	0.7	0.5	0.0	0.4	0.5	0.9	0.5	0.4	0.8	0.7	1.3	0.9	0.0	1.3	0.9	2.8
played the lottery or lottery scratch-off tickets?	18.0	14.0	17.2	14.8	10.4	17.9	15.7	13.4	14.2	15.7	16.1	14.1	14.6	11.7	17.2	11.3	8.7	11.7	9.1	17.8
bet on sporting events?	15.3	11.8	10.9	12.3	12.7	16.7	12.5	13.5	13.7	20.3	17.0	12.5	11.0	11.4	21.2	13.1	13.0	7.7	9.2	19.1
played cards for money?	8.3	7.3	4.7	7.8	8.6	11.1	9.6	9.2	10.2	19.3	13.3	10.9	10.4	9.7	20.6	10.4	21.7	10.9	9.0	20.3
bet money on horse races?	3.2	2.4	1.7	1.8	3.3	2.9	2.9	1.7	1.8	3.7	2.6	2.0	2.0	1.9	4.0	2.2	0.0	1.9	1.4	4.3
played bingo for money or prizes?	22.2	13.8	13.3	14.6	17.9	20.0	10.3	11.8	12.6	12.4	17.9	10.2	10.6	10.3	10.3	11.7	17.4	11.0	8.0	8.2
gambled on the internet?	1.8	1.0	1.6	2.5	2.7	1.6	1.8	2.8	3.5	2.9	2.9	2.0	2.6	3.2	3.1	2.4	8.7	3.1	2.5	3.2
bet on dice games such as craps?	1.6	0.3	1.2	1.6	3.0	2.9	0.4	1.8	2.0	11.9	3.3	3.9	2.9	2.9	13.1	3.3	0.0	3.3	2.5	12.0
bet on games of personal skill such as pool, darts or bowling?	12.6	9.4	8.4	8.7	9.6	12.9	7.9	10.4	9.7	16.9	12.1	7.4	8.0	8.8	18.1	10.1	21.7	8.7	7.5	17.0
bet on video poker or other gambling machines?	1.3	1.0	0.7	1.2	3.4	0.9	0.7	0.5	1.0	3.7	1.0	1.6	1.2	1.2	2.0	0.9	0.0	1.3	1.1	2.9
Total Gambling																				
Any gambing in the past year	42.6	35.7	34.9	35.4	29.2	44.7	33.0	36.6	35.5	40.9	42.6	33.6	33.4	31.0	42.7	33.5	34.8	28.2	25.3	40.3

Risk and Protective Factor, Alcohol, and Prescription Drug Environmental Risk Factor Profiles

The charts and tables that follow are intended to provide prevention professionals with data that are helpful in understanding the predictors and causes of substance use in your community. Data in the risk and protective factor profiles will provide you with an overview of the levels of risk and protection in your community. The Alcohol Environmental Risk Factors charts present data relevant to several community domain variables associated with increased alcohol consumption.

Risk and Protective Factor Profiles

The risk and protective factor charts show the percentage of students at risk and with protection for each of the risk and protective factor scales. The risk and protective factor scales measure specific aspects of a youth's life experience that are predictive of whether he/she will engage in problem behaviors. Higher risk and lower protection predict a greater likelihood that a youth with engage in problem behaviors, while lower risk and higher protection predict a greater likelihood that youth will not engage in problem behaviors.

The factors are grouped into four domains: *community*, *family*, *school*, and *peer/individual*. Brief definitions of the risk and protective factors scales are provided in Table 13 at the end of this report. For more information about risk and protective factors, please refer to the resources listed on the last page of this report under *Contacts for Prevention*.

Consistent with the other charts in this report the **bars** represent your community's levels of risk and protection, the **dots** represent the Louisiana state average, and the **triangles** represent a national comparison through the Bach Harrison norm, where available. Scanning across the charts, it is important to observe the factors that differ the most from the Bach Harrison Norm. This is the

first step in identifying the levels of risk and protection that are higher or lower than those in other communities. The risk factors that are higher than the Bach Harrison Norm and the protective factors are lower than the Bach Harrison Norm are probably the factors that your community should consider addressing when planning prevention programs. By looking at the percentage of youth at risk and with protection over time, it is possible to determine whether the percentage of students at risk or with protection is increasing, decreasing, or staying the same. This information is important when deciding which risk and protective factors warrant attention.

Alcohol Environmental Risk Factor Profiles

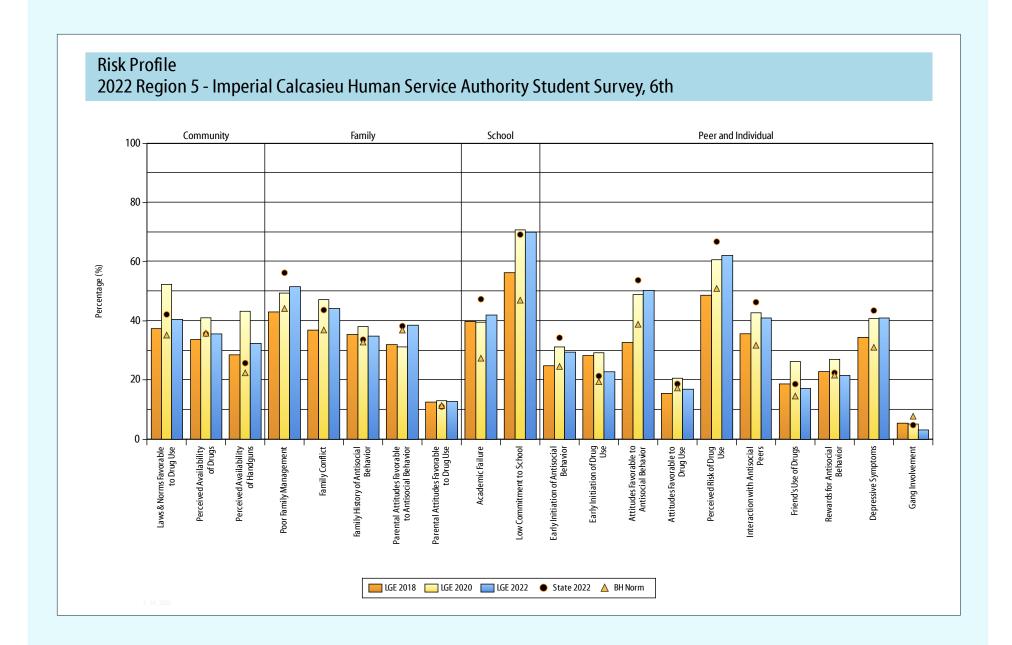
The alcohol environmental risk factors profiles include the percentage of students who obtained alcohol from specific sources and survey data gathered to shed light on the community norms about alcohol use. Percentages for the sources of alcohol are based upon only those students who reported having used alcohol in the past year. (Sample sizes are noted in the chart legend.)

Student perceptions of community norms are drawn from all students surveyed, regardless of whether they reported any alcohol use.

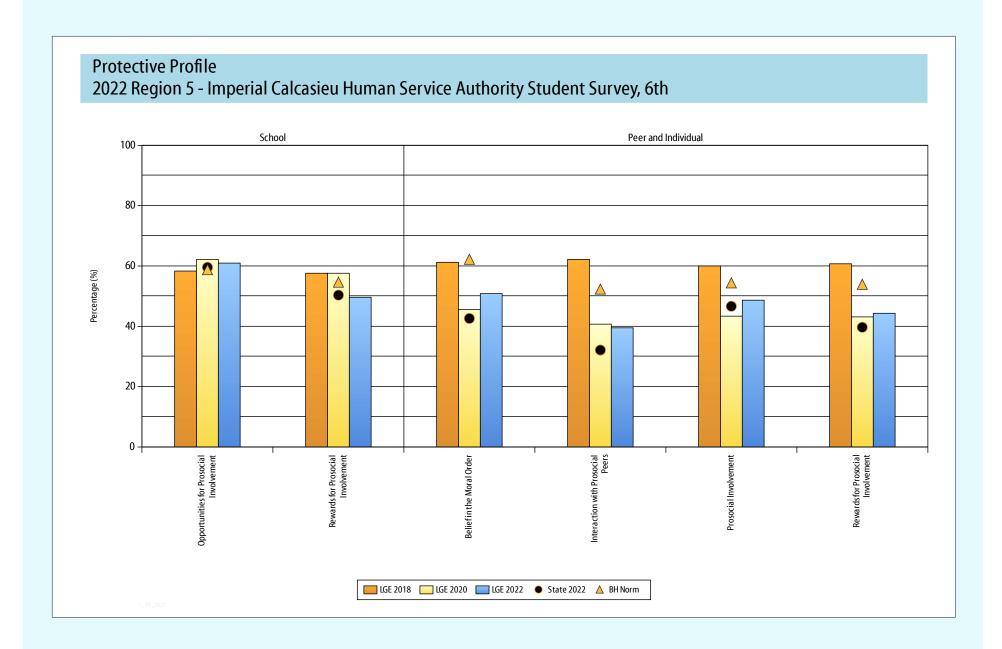
Prescription Drug Environmental Risk Factor Profiles

The prescription drug environmental risk factors profiles include the percentage of students who obtained prescription drugs from specific sources. Percentages for the sources of prescription drugs are based upon only those students who reported having abused prescription drugs in the past year. (Sample sizes are noted in the chart legend.)

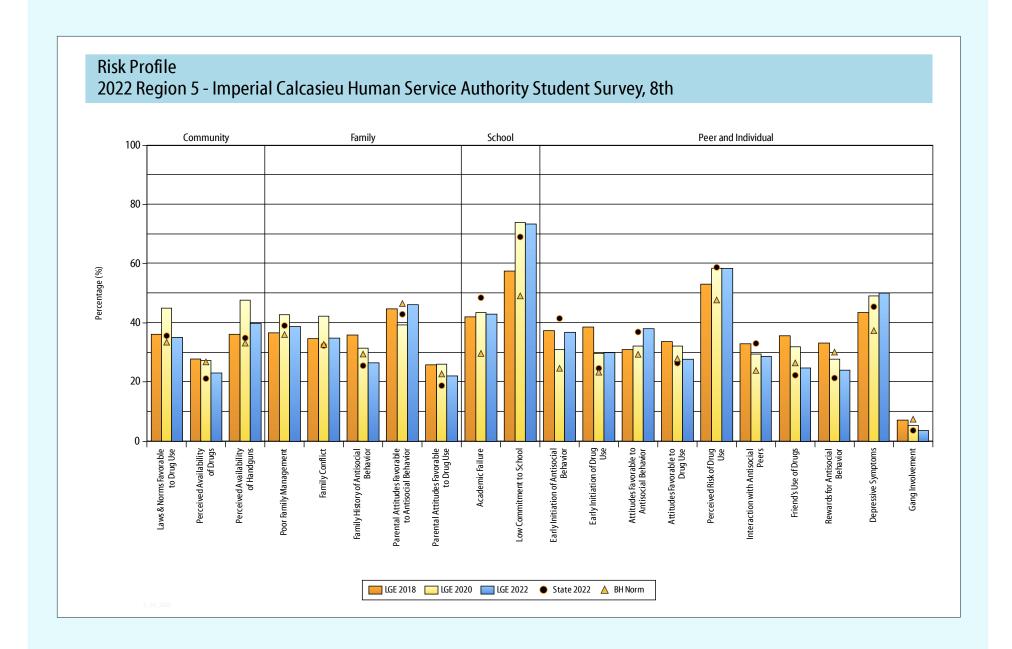




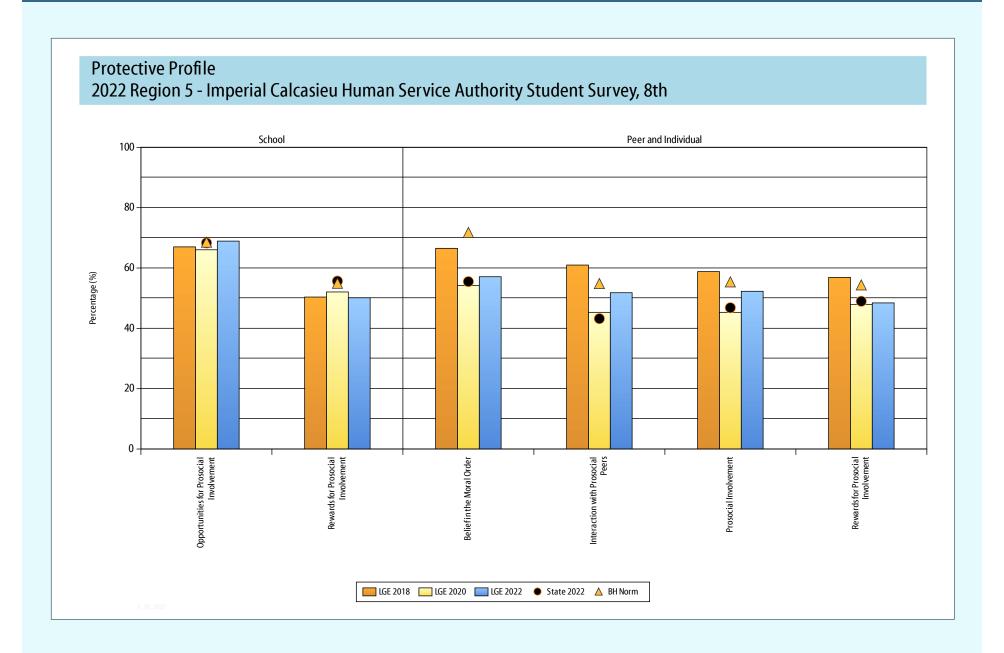




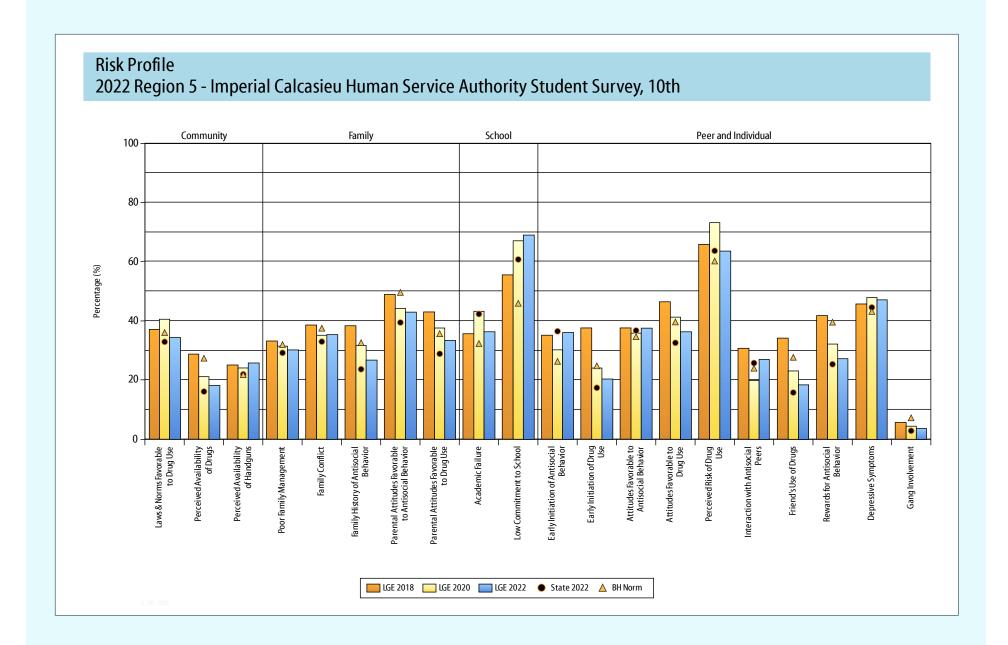




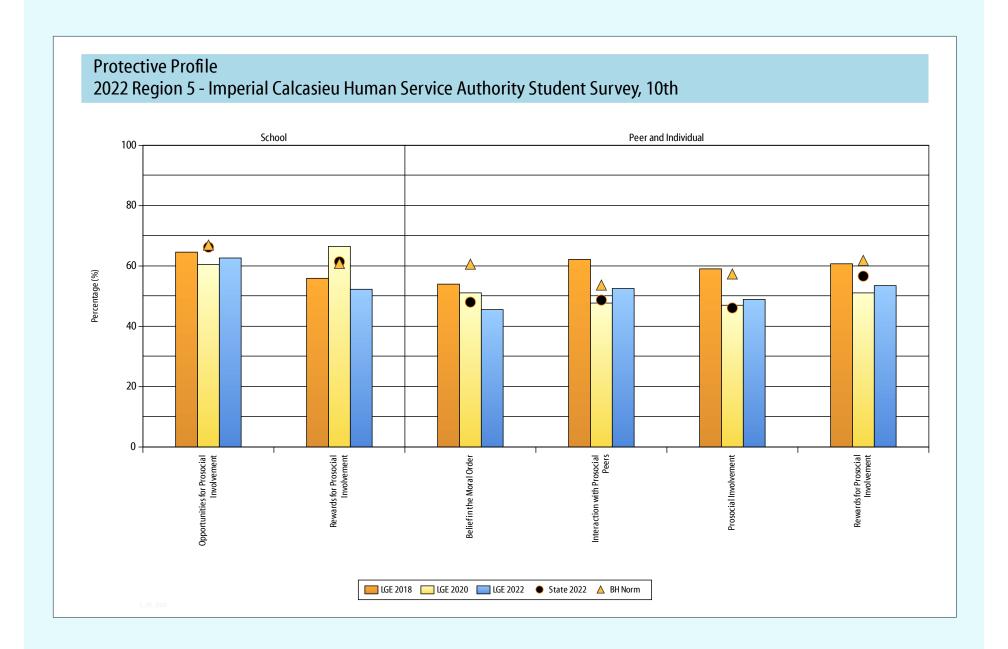




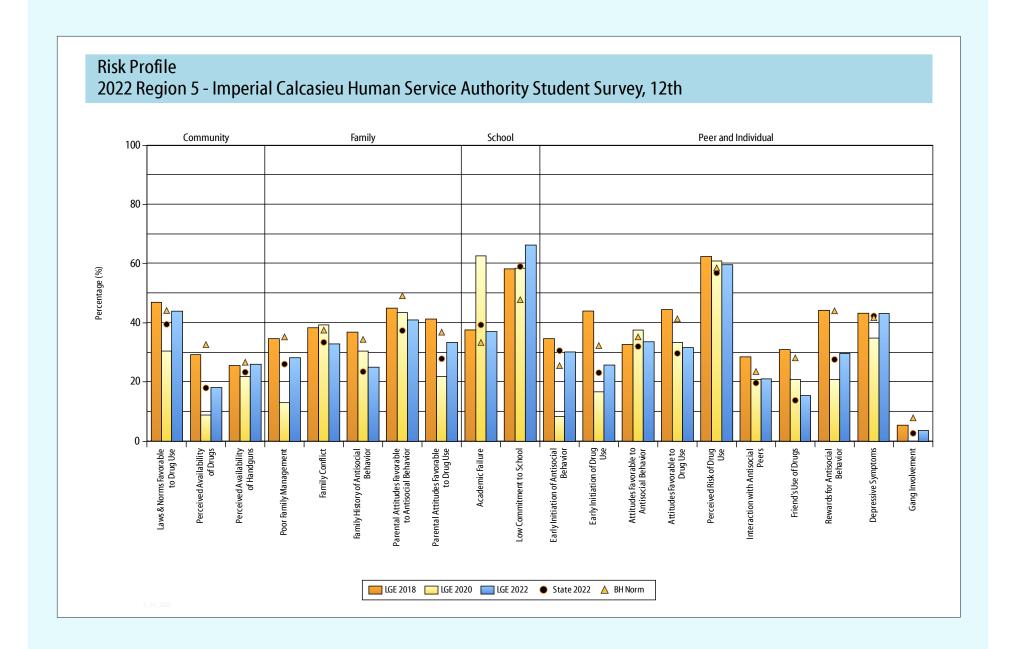














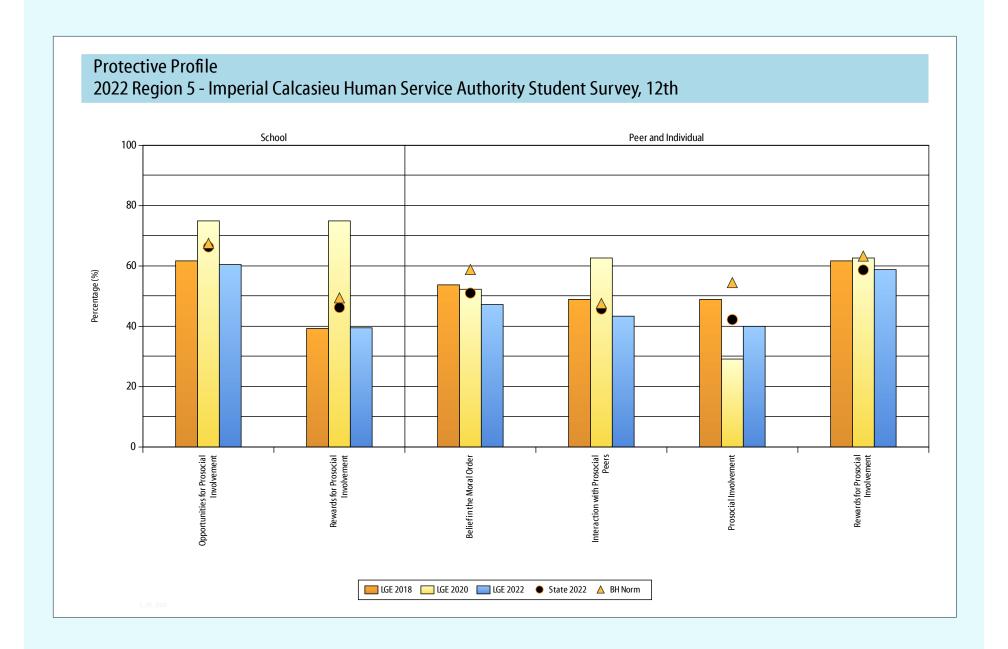


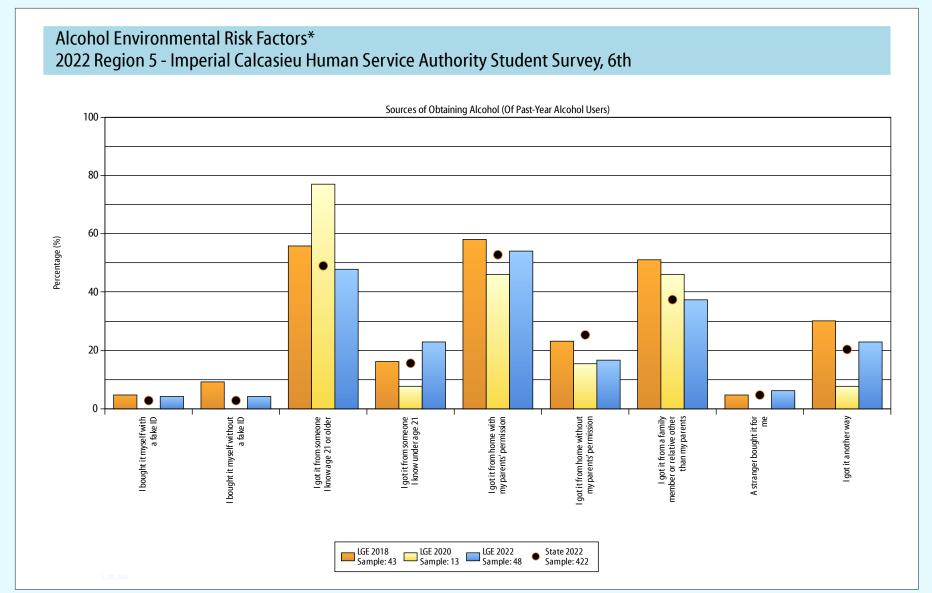


Table O Daysantana of Chadanta	. D4:	D: .l.																		
Table 8. Percentage of Students	Keporti	ing Kisk																		
Risk Factor	Ι,		6th					8th					10th				1 1	12th		ı
	LGE 2018	LGE 2020	LGE 2022	State 2022	BH Norm	LGE 2018	LGE 2020	LGE 2022	State 2022	BH Norm	LGE 2018	LGE 2020	LGE 2022	State 2022	BH Norm	LGE 2018	LGE 2020	LGE 2022	State 2022	BH Norm
Community Domain																				
Laws & Norms Favorable to Drug Use	37.1	52.3	40.3	42.2	35.2	35.9	44.8	35.0	35.6	33.5	37.1	40.4	34.4	32.9	36.0	46.7	30.4	43.8	39.5	44.2
Perceived Availability of Drugs	33.6	40.9	35.5	35.6	35.8	27.6	27.1	23.1	21.1	26.8	28.8	21.1	18.2	16.1	27.4	29.1	8.7	18.1	18.0	32.7
Perceived Availability of Handguns	28.4	43.2	32.3	25.7	22.4	36.0	47.7	39.8	34.9	33.2	25.0	23.9	25.7	21.9	21.8	25.5	21.7	25.9	23.3	26.7
Family Domain																				
Poor Family Management	42.8	49.4	51.6	56.2	44.2	36.5	42.7	38.7	39.1	36.0	33.0	31.4	30.1	29.2	32.0	34.6	13.0	28.3	26.0	35.2
Family Conflict	36.7	47.0	44.1	43.7	36.9	34.6	42.2	34.8	32.3	32.7	38.6	35.0	35.3	33.0	37.5	38.2	39.1	32.8	33.4	37.5
Family History of Antisocial Behavior	35.2	38.0	34.8	33.6	32.8	35.7	31.4	26.4	25.5	29.5	38.3	31.7	26.8	23.6	32.6	36.7	30.4	25.0	23.5	34.4
Parental Attitudes Favorable to Antisocial Behavior	31.8	31.1	38.5	38.2	36.9	44.6	39.3	46.2	42.9	46.5	48.8	44.2	42.9	39.4	49.6	44.8	43.5	40.8	37.4	49.1
Parental Attitudes Favorable to Drug Use	12.4	12.9	12.7	11.0	11.4	25.8	26.1	22.1	18.8	22.7	43.0	37.6	33.4	28.9	35.6	41.3	21.7	33.3	27.8	36.8
School Domain																				
Academic Failure	39.7	39.5	41.9	47.3	27.4	42.0	43.4	42.9	48.5	29.6	35.6	43.1	36.4	42.3	32.3	37.4	62.5	36.9	39.3	33.4
Low Commitment to School	56.1	70.6	70.0	69.2	47.0	57.4	73.9	73.3	69.1	49.1	55.4	66.9	68.9	60.8	45.9	58.1	58.3	66.3	59.0	47.8
Peer and Individual Domain																				
Early Initiation of Antisocial Behavior	24.7	31.0	29.4	34.3	24.6	37.2	30.9	36.8	41.5	24.6	34.9	30.2	36.0	36.5	26.3	34.6	8.3	30.1	30.6	25.5
Early Initiation of Drug Use	28.2	29.2	22.7	21.3	19.4	38.6	29.5	29.9	24.6	23.3	37.6	24.1	20.2	17.3	24.8	44.0	16.7	25.7	23.1	32.3
Attitudes Favorable to Antisocial Behavior	32.6	48.8	50.4	53.7	38.8	30.8	32.2	37.9	36.9	29.4	37.5	35.9	37.5	36.7	34.7	32.5	37.5	33.6	32.0	35.3
Attitudes Favorable to Drug Use	15.5	20.5	16.8	18.7	17.3	33.7	32.2	27.7	26.4	27.9	46.3	41.2	36.2	32.6	39.6	44.3	33.3	31.5	29.7	41.4
Perceived Risk of Drug Use	48.7	60.5	62.2	66.8	50.9	53.1	58.4	58.4	58.8	47.7	65.7	73.0	63.6	63.7	60.2	62.3	60.9	59.6	56.9	58.6
Interaction with Antisocial Peers	35.5	42.7	41.0	46.3	31.7	32.7	29.3	28.5	33.0	23.9	30.6	19.9	26.9	25.7	24.0	28.4	20.8	21.2	19.7	23.5
Friend's Use of Drugs	18.5	26.1	17.1	18.6	14.6	35.5	31.8	24.7	22.3	26.5	34.0	22.9	18.2	15.7	27.7	30.9	20.8	15.4	13.8	28.2
Rewards for Antisocial Behavior	22.8	27.0	21.6	22.4	21.6	33.0	27.7	23.9	21.3	30.1	41.8	32.2	27.2	25.3	39.5	44.2	20.8	29.7	27.6	44.1
Depressive Symptoms	34.3	40.6	41.0	43.5	31.1	43.5	49.0	50.0	45.4	37.4	45.6	47.8	47.0	44.5	43.2	43.1	34.8	43.1	42.3	41.8
Gang Involvement	5.3	5.1	3.2	4.7	7.7	7.1	5.2	3.5	3.6	7.4	5.6	4.3	3.6	2.8	7.2	5.2	0.0	3.5	2.6	7.9

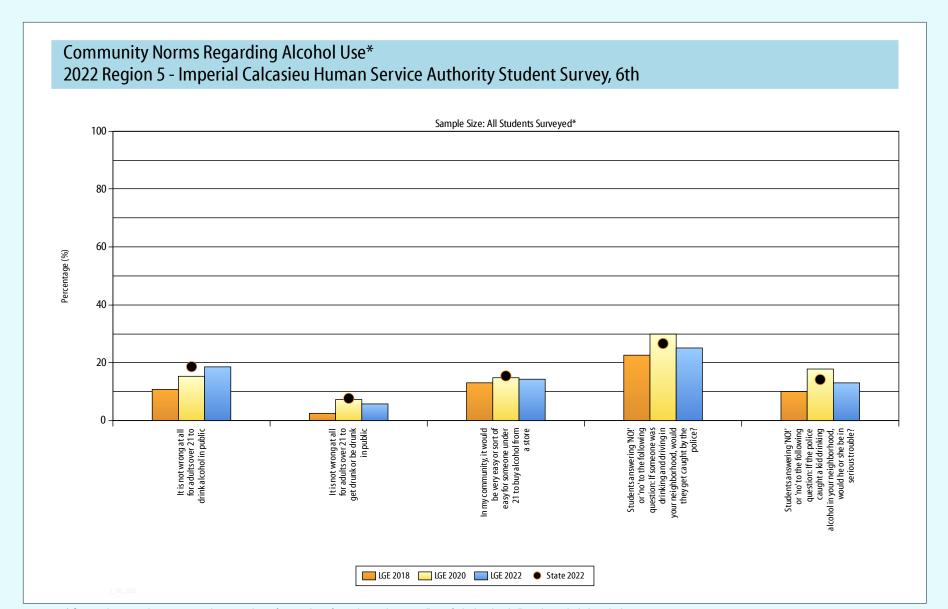


Table 9. Percentage of Students	Report	ing Prot	ection																	
Protective Factor			6th					8th					10th					12th		
	LGE 2018	LGE 2020	LGE 2022	State 2022	BH Norm	LGE 2018	LGE 2020	LGE 2022	State 2022	BH Norm	LGE 2018	LGE 2020	LGE 2022	State 2022	BH Norm	LGE 2018	LGE 2020	LGE 2022	State 2022	BH Norm
School Domain																				
Opportunities for Prosocial Involvement	58.4	62.0	61.0	59.5	58.8	67.0	65.9	68.8	68.3	68.5	64.6	60.5	62.7	66.2	66.9	61.7	75.0	60.4	66.3	67.5
Rewards for Prosocial Involvement	57.6	57.5	49.5	50.3	54.6	50.4	52.0	50.0	55.6	54.9	55.9	66.4	52.3	61.4	60.8	39.4	75.0	39.5	46.2	49.4
Peer and Individual Domain																				
Belief in the Moral Order	61.0	45.5	50.8	42.6	62.2	66.5	54.1	57.0	55.5	71.8	53.9	51.0	45.5	48.0	60.6	53.8	52.2	47.3	51.0	58.8
Interaction with Prosocial Peers	62.1	40.7	39.6	32.1	52.3	61.0	45.2	51.8	43.2	54.8	62.1	47.6	52.4	48.7	53.6	48.8	62.5	43.3	45.7	47.6
Prosocial Involvement	60.1	43.4	48.8	46.6	54.4	58.6	45.3	52.2	46.8	55.4	59.1	46.9	48.9	46.1	57.3	48.8	29.2	40.0	42.2	54.5
Rewards for Prosocial Involvement	60.8	43.1	44.3	39.7	53.9	56.9	48.0	48.5	49.0	54.4	60.6	50.9	53.4	56.6	61.8	61.6	62.5	58.7	58.7	63.3



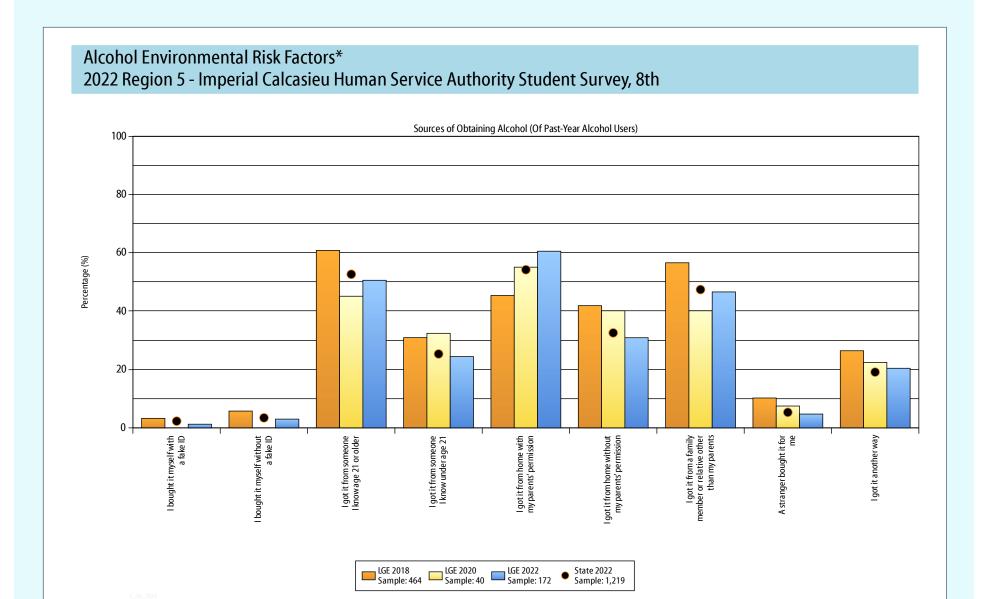


^{*} Students were initially asked if they drank alcohol in the past year. Students marking "no" were instructed to skip the question regarding sources of obtaining alcohol. Sample size represents the number of youth who chose at least one source of obtaining alcohol. Students who indicated they had not drunk alcohol in the past year are not included in the sample. In the case of smaller sample sizes, caution should be exercised before generalizing results to the entire community.

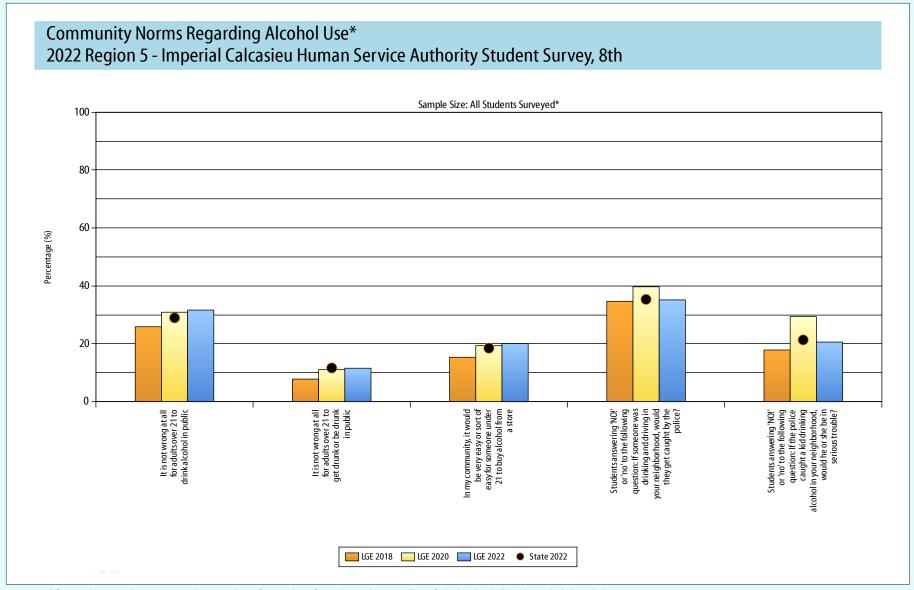


^{*} Community norms data represents the perceptions of respondents for each question, regardless of whether they indicated any alcohol use in the past year.



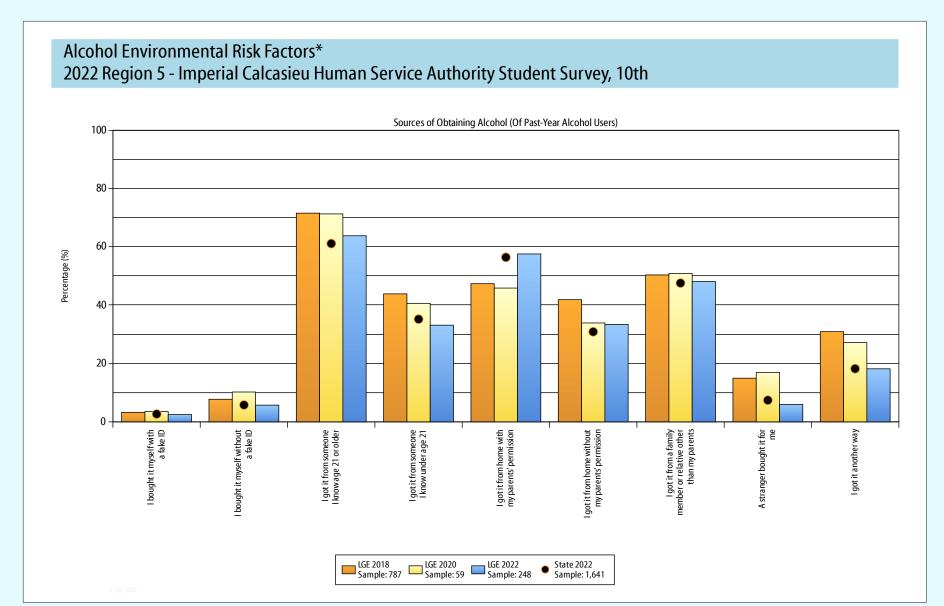


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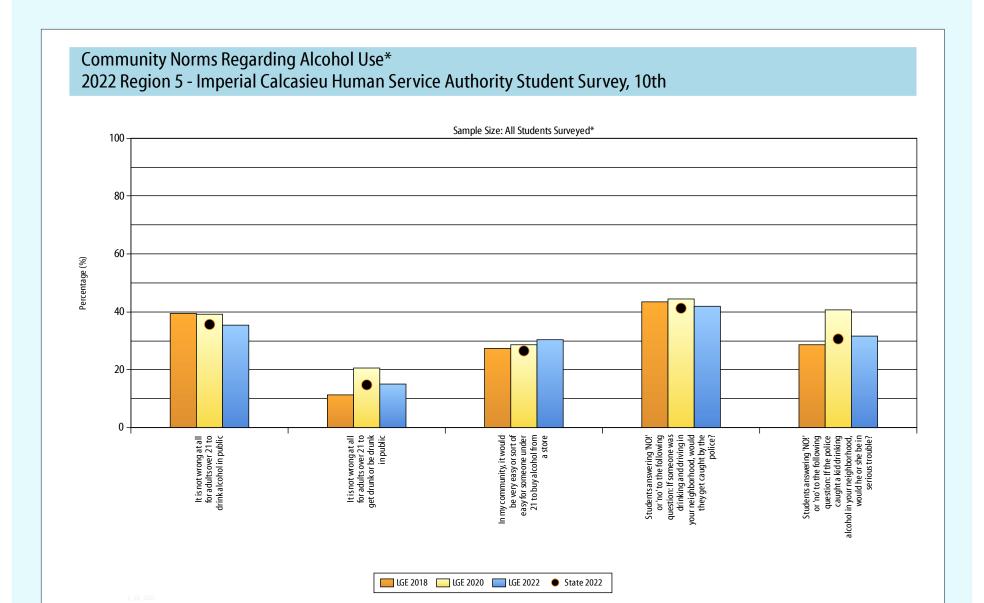


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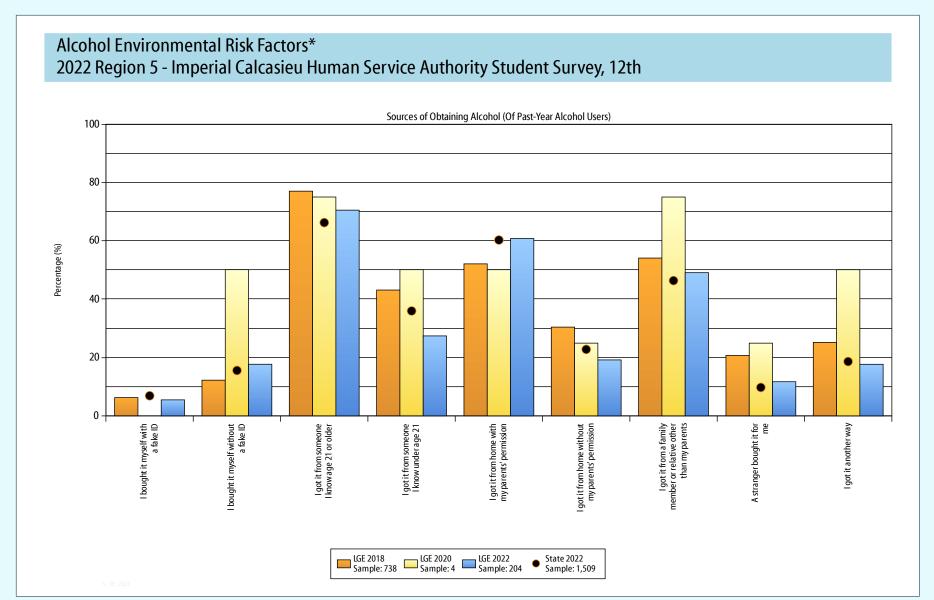


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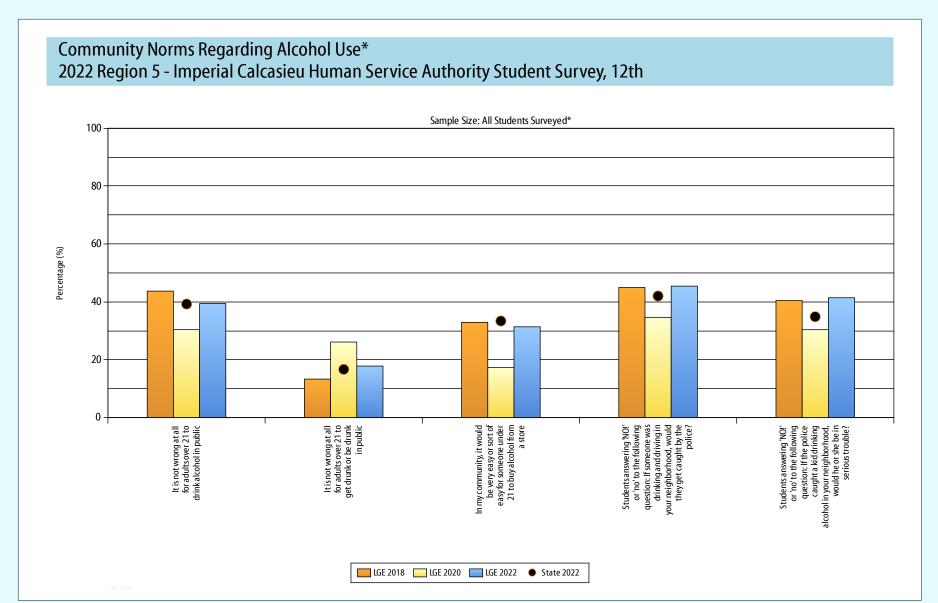


^{*} Community norms data represents the perceptions of respondents for each question, regardless of whether they indicated any alcohol use in the past year.





^{*} Students were initially asked if they drank alcohol in the past year. Students marking "no" were instructed to skip the question regarding sources of obtaining alcohol. Sample size represents the number of youth who chose at least one source of obtaining alcohol. Students who indicated they had not drunk alcohol in the past year are not included in the sample. In the case of smaller sample sizes, caution should be exercised before generalizing results to the entire community.



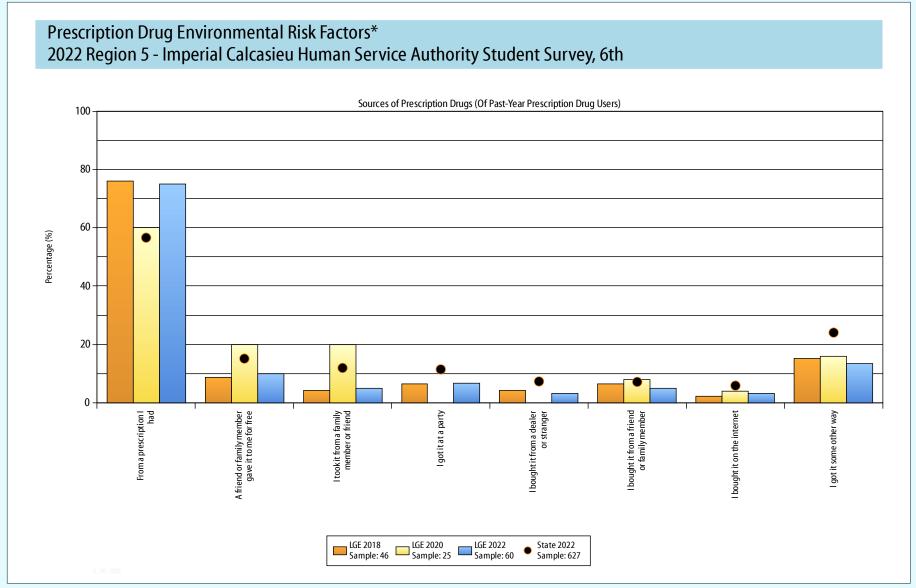
^{*} Community norms data represents the perceptions of respondents for each question, regardless of whether they indicated any alcohol use in the past year.



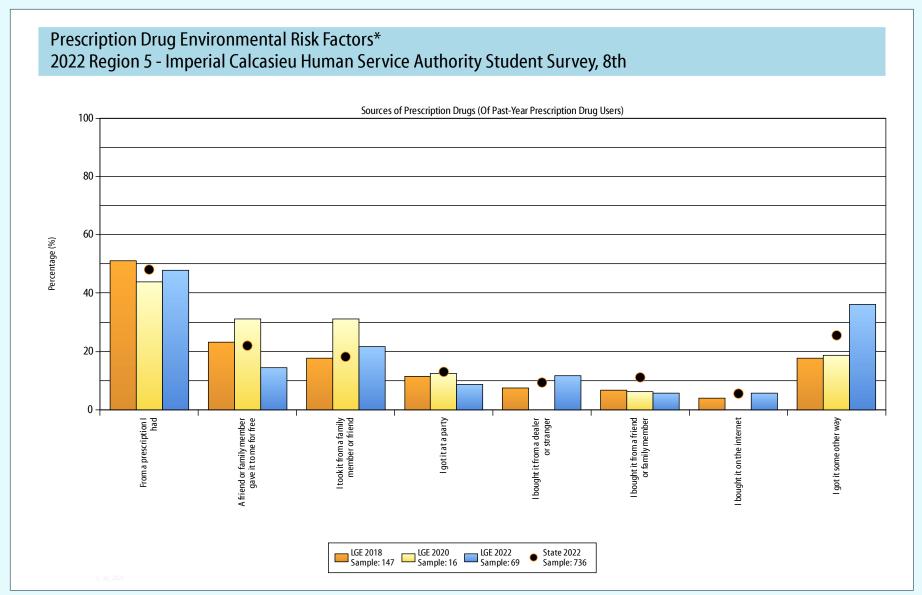
Sources of obtaining alcohol:		61	:h			8t	h			101	th			12	th	
If you drank alcohol (not just a sip or taste) in the past year, how did you get it?	LGE 2018	LGE 2020	LGE 2022	State 2022	LGE 2018	LGE 2020	LGE 2022	State 2022	LGE 2018	LGE 2020	LGE 2022	State 2022	LGE 2018	LGE 2020	LGE 2022	State 2022
Sample size*	43	13	48	422	464	40	172	1,219	787	59	248	1,641	738	4	204	1,509
I bought it myself with a fake ID	4.7	0.0	4.2	2.8	3.2	0.0	1.2	2.3	3.2	3.4	2.4	2.7	6.1	0.0	5.4	6.9
I bought it myself without a fake ID	9.3	0.0	4.2	2.8	5.8	0.0	2.9	3.4	7.8	10.2	5.6	5.8	12.2	50.0	17.6	15.6
I got it from someone I know age 21 or older	55.8	76.9	47.9	49.1	60.8	45.0	50.6	52.7	71.4	71.2	63.7	61.1	77.1	75.0	70.6	66.3
I got it from someone I know under age 21	16.3	7.7	22.9	15.6	30.8	32.5	24.4	25.3	44.0	40.7	33.1	35.2	43.1	50.0	27.5	36.0
I got it from home with my parents' permission	58.1	46.2	54.2	52.8	45.3	55.0	60.5	54.2	47.3	45.8	57.7	56.4	52.2	50.0	60.8	60.3
I got it from home without my parents' permission	23.3	15.4	16.7	25.4	41.8	40.0	30.8	32.6	41.8	33.9	33.5	30.9	30.4	25.0	19.1	22.8
I got it from a family member or relative other than my parents	51.2	46.2	37.5	37.4	56.5	40.0	46.5	47.4	50.4	50.8	48.0	47.6	54.1	75.0	49.0	46.4
A stranger bought it for me	4.7	0.0	6.3	4.7	10.1	7.5	4.7	5.3	15.0	16.9	6.0	7.4	20.6	25.0	11.8	9.7
I got it another way	30.2	7.7	22.9	20.4	26.3	22.5	20.3	19.1	31.0	27.1	18.1	18.2	25.2	50.0	17.6	18.6
Community Norms Regarding Alcohol Use: Stud	dent Perceptio	ns**														
It is not wrong at all for adults over 21 to drink alcohol in public.	10.7	15.3	18.7	18.7	26.0	30.9	31.6	29.0	39.3	39.1	35.5	35.7	43.7	30.4	39.4	39.3
It is not wrong at all for adults over 21 to get drunk or be drunk in public.	2.5	7.4	5.7	7.8	7.9	11.2	11.6	11.7	11.4	20.5	15.0	14.8	13.3	26.1	18.0	16.7
In my community, it would be very easy or sort of easy for someone under 21 to buy alcohol from a store.	13.2	14.7	14.3	15.5	15.3	19.5	20.1	18.5	27.3	28.6	30.5	26.6	32.9	17.4	31.5	33.4
Students answering 'NO!' or 'no' to the following question: If someone was drinking and driving in your neighborhood, would they get caught by the police?	22.7	29.9	25.1	26.7	34.7	39.7	35.1	35.4	43.6	44.5	42.0	41.3	44.9	34.8	45.5	42.1
Students answering 'NO!' or 'no' to the following question: If the police caught a kid drinking alcohol in your neighborhood, would he or she be in serious trouble?	10.2	18.0	13.1	14.2	17.9	29.5	20.7	21.4	28.7	40.8	31.6	30.7	40.5	30.4	41.4	34.5

^{*} Students were initially asked if they drank alcohol in the past year. Students marking "no" were instructed to skip the question regarding sources of obtaining alcohol. Sample size represents the number of youth who chose at least one source of obtaining alcohol. Students who indicated they had not drunk alcohol in the past year are not included in the sample. In the case of smaller sample sizes, caution should be exercised before generalizing results to the entire community.

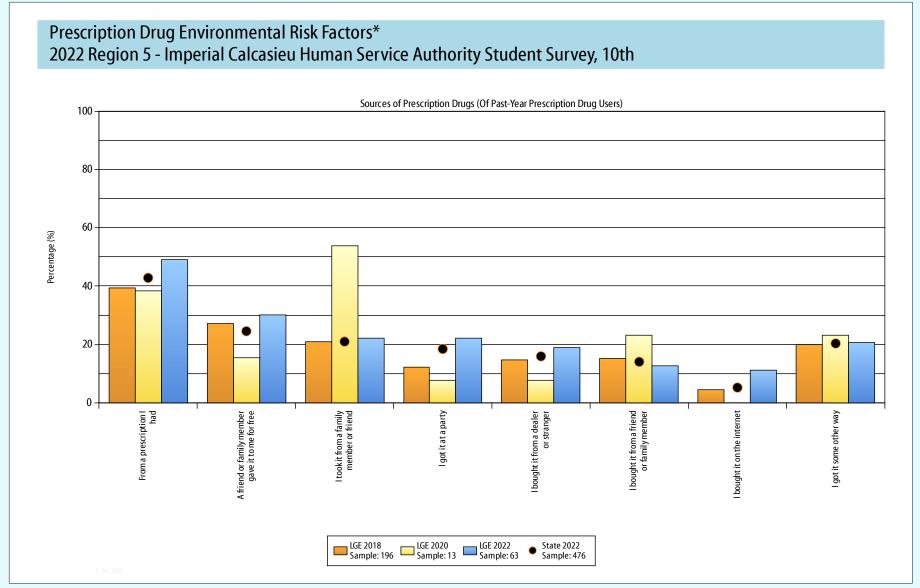
^{**} Community norms data represent the perceptions of all students surveyed, regardless of whether they indicated any alcohol use in the past year.



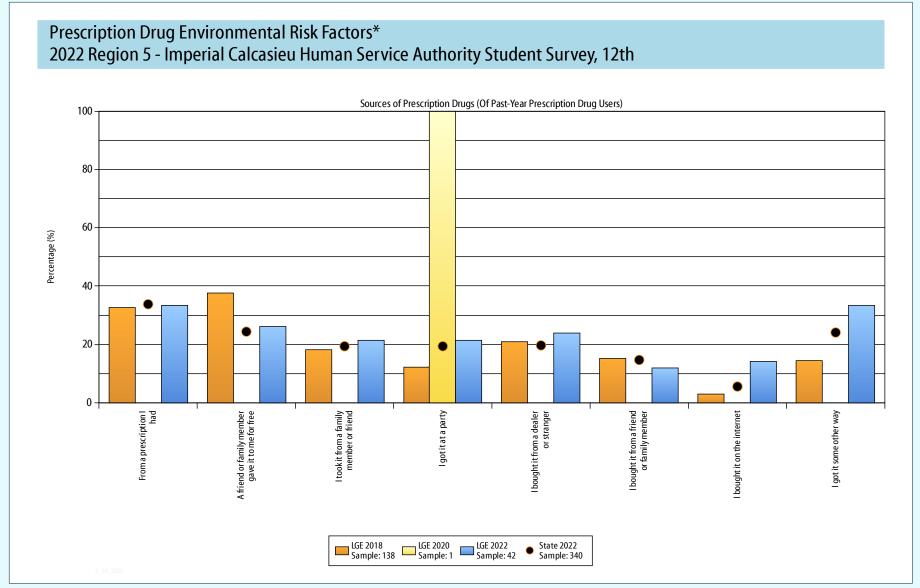
^{*} Sample size represents the number of youth who obtained prescription drugs from at least one source. Students indicating they did not misuse prescription drugs in the past year are not included in the sample. In the case of smaller sample sizes, caution should be exercised before generalizing results to the entire community.



^{*} Sample size represents the number of youth who obtained prescription drugs from at least one source. Students indicating they did not misuse prescription drugs in the past year are not included in the sample. In the case of smaller sample sizes, caution should be exercised before generalizing results to the entire community.



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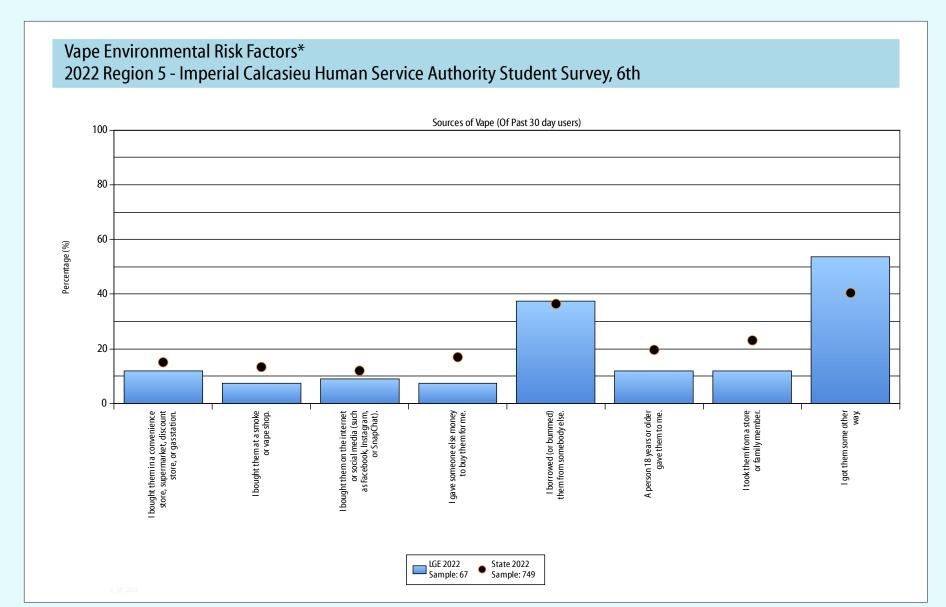


^{*} Sample size represents the number of youth who obtained prescription drugs from at least one source. Students indicating they did not misuse prescription drugs in the past year are not included in the sample. In the case of smaller sample sizes, caution should be exercised before generalizing results to the entire community.

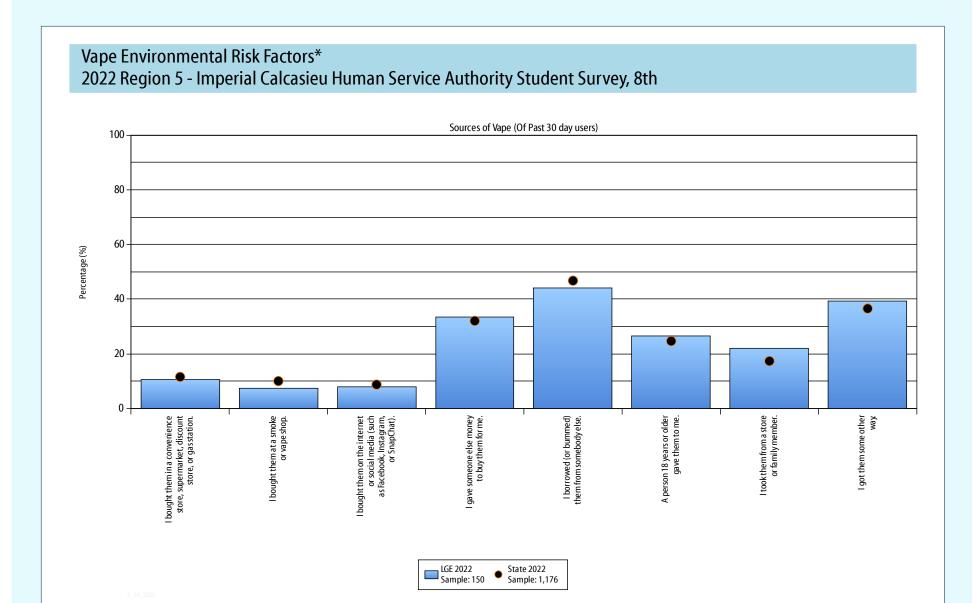


Table 11. Prescription Drug Envi	ronmenta	al Risk Fac	tors													
Sources of obtaining prescription drugs:		61	th			81	th			10	th			12	th	
Where did you get the prescription drugs you misused during the past year?	LGE 2018	LGE 2020	LGE 2022	State 2020												
Sample size*	46	25	60	855	147	16	69	999	196	13	63	527	138	1	42	372
From a prescription I had	76.1	60.0	75.0	68.4	51.0	43.8	47.8	57.3	39.3	38.5	49.2	49.1	32.6	0.0	33.3	40.1
A friend or family member gave it to me for free	8.7	20.0	10.0	13.0	23.1	31.3	14.5	20.9	27.0	15.4	30.2	25.2	37.7	0.0	26.2	28.5
I took it from a family member or friend	4.3	20.0	5.0	9.8	17.7	31.3	21.7	17.8	20.9	53.8	22.2	16.5	18.1	0.0	21.4	14.8
I got it at a party	6.5	0.0	6.7	7.7	11.6	12.5	8.7	10.6	12.2	7.7	22.2	11.0	12.3	100.0	21.4	15.1
I bought it from a dealer or stranger	4.3	0.0	3.3	4.4	7.5	0.0	11.6	9.8	14.8	7.7	19.0	14.2	21.0	0.0	23.8	16.4
I bought it from a friend or family member	6.5	8.0	5.0	6.0	6.8	6.3	5.8	11.1	15.3	23.1	12.7	11.4	15.2	0.0	11.9	14.0
I bought it on the internet	2.2	4.0	3.3	3.3	4.1	0.0	5.8	5.0	4.6	0.0	11.1	5.5	2.9	0.0	14.3	5.1
I got it some other way	15.2	16.0	13.3	15.6	17.7	18.8	36.2	16.6	19.9	23.1	20.6	18.8	14.5	0.0	33.3	22.6

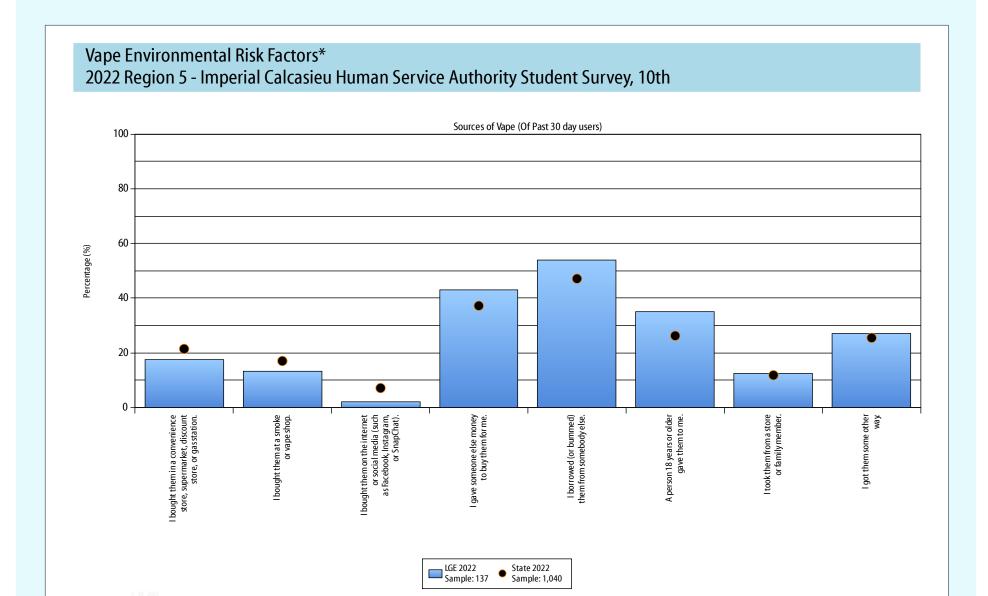
^{*}Sample size represents the number of youth who obtained prescription drugs from at least one source. Students indicating they did not misuse prescription drugs in the past year are not included in the sample. In the case of smaller sample sizes, caution should be exercised before generalizing results to the entire community.



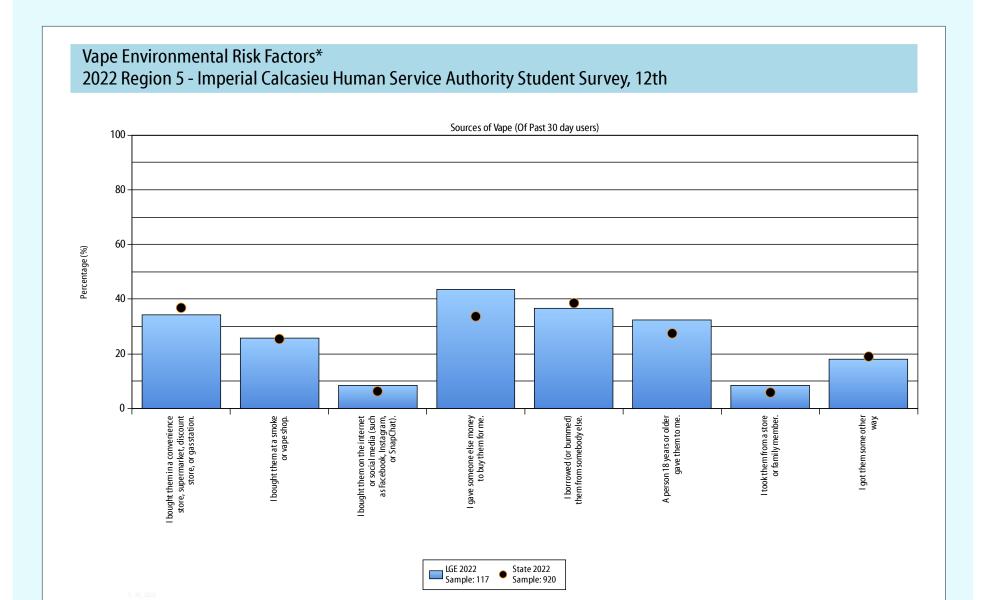
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Table 12. Vape Environmental R	isk Factor	S						
Sources of Vape: If you used vape products in	61	:h	81	th	10	th	12	th
the past 30 days, how did you get your own vape products?	LGE 2022	State 2022	LGE 2022	State 2022	LGE 2022	State 2022	LGE 2022	State 2022
Sample size*	67.0	749.0	150.0	1176.0	137.0	1040.0	117.0	920.0
I bought them in a convenience store, supermarket, discount store, or gas station.	11.9	15.1	10.7	11.6	17.5	21.4	34.2	36.8
I bought them at a smoke or vape shop.	7.5	13.4	7.3	10.0	13.1	17.0	25.6	25.4
I bought them on the internet or social media (such as Facebook, Instagram, or SnapChat).	9.0	12.0	8.0	8.8	2.2	7.1	8.5	6.3
I gave someone else money to buy them for me.	7.5	17.0	33.3	32.1	43.1	37.2	43.6	33.7
I borrowed (or bummed) them from somebody else.	37.3	36.4	44.0	46.8	54.0	47.1	36.8	38.6
A person 18 years or older gave them to me.	11.9	19.6	26.7	24.7	35.0	26.3	32.5	27.5
I took them from a store or family member.	11.9	23.1	22.0	17.3	12.4	11.8	8.5	5.9
I got them some other way.	53.7	40.5	39.3	36.6	27.0	25.5	17.9	19.0

^{*} Sample size represents the number of youth who obtained prescription drugs from at least one source. Students indicating they did not misuse prescription drugs in the past year are not included in the sample. In the case of smaller sample sizes, caution should be exercised before generalizing results to the entire community.

In addition to substance abuse and antisocial behaviors, mental health and suicide are important public health and prevention issues affecting youth. The CCYS collects several indicators related to mental health and suicide. These indicators are presented in the tables and charts that follow.

Mental Health Treatment Needs were estimated using the K6 Scale that was developed with support from the National Center for Health Statistics for use in the National Health Interview Survey. The tool screens for psychological distress by asking students "During the past 30 days, how often did you: 1) feel nervous? 2) feel hopeless? 3) feel restless or fidgety? 4) feel so depressed that nothing could cheer you up? 5) feel that everything was an effort? and 6) feel worthless?"

Answers were scored based on responses: None of the time (0 points), A little of the time (1 point), Some of the time (2 points), Most of the time (3 points), All of the time (4 points). Students with a score of 13 or more points were determined to be in need of mental health treatment.

In addition to need for mental health treatment, the percentage of participants who indicated currently taking medication that was prescribed because of problems with "your behavior or emotions" is provided.

Depressive Symptoms were calculated from by asking students about the following statements: 1) Sometimes I think that life is not worth it, 2) At times I think I am no

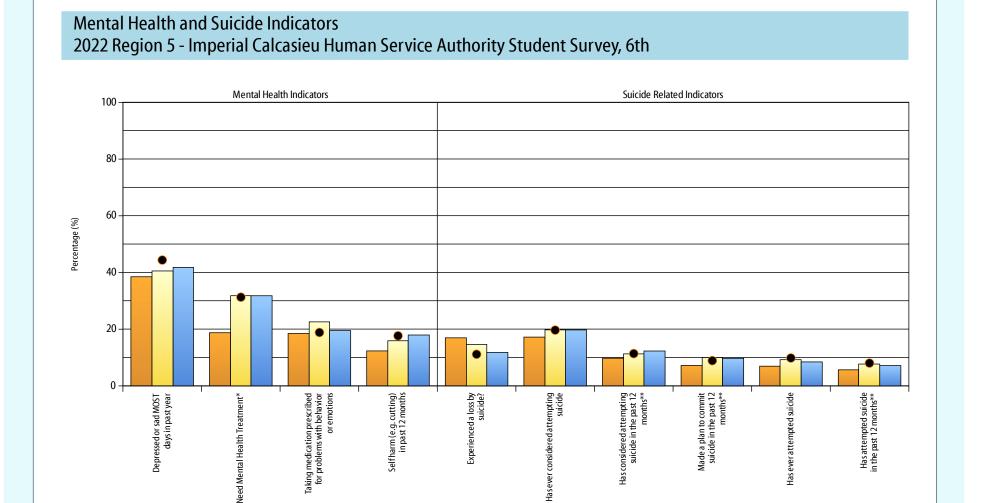
good at all, 3) All in all, I am inclined to think that I am a failure, and 4) In the past year, have you felt depressed or sad MOST days, even if you felt OK sometimes?

These four depressive symptoms questions were scored on a scale of 1 to 4 (NO!, no, yes, YES!). The survey respondents were divided into three groups. The first group was the High Depressive Symptoms group who scored at least a mean of 3.75 on the depressive symptoms. This meant that those individuals marked "YES!" to all four items or marked "yes" to one item and "YES!" to three. The second group was the No Depressive Symptoms group who marked "NO!" to all four of the items, and the third group was a middle group who comprised the remaining respondents.

The survey also includes a series of questions about suicide. These questions provide information about suicidal ideation and suicide attempts (e.g., "Have you ever considered attempting suicide?" and "Have you ever attempted suicide?"), as well as the impact of suicide on participants (e.g., Have you ever been impacted by someone's suicide?" and "Has there ever been a time in your life when you experienced a loss by suicide?").

The Xs represent national mental health data gathered by the 2019 Youth Risk Behavior Survey (YRBS). Comparison data are available for grades 10 and 12 on the topic of about suicidal ideation and suicide attempts. (Note these are national data, not data from the Louisiana Youth Risk Behavior Survey.)

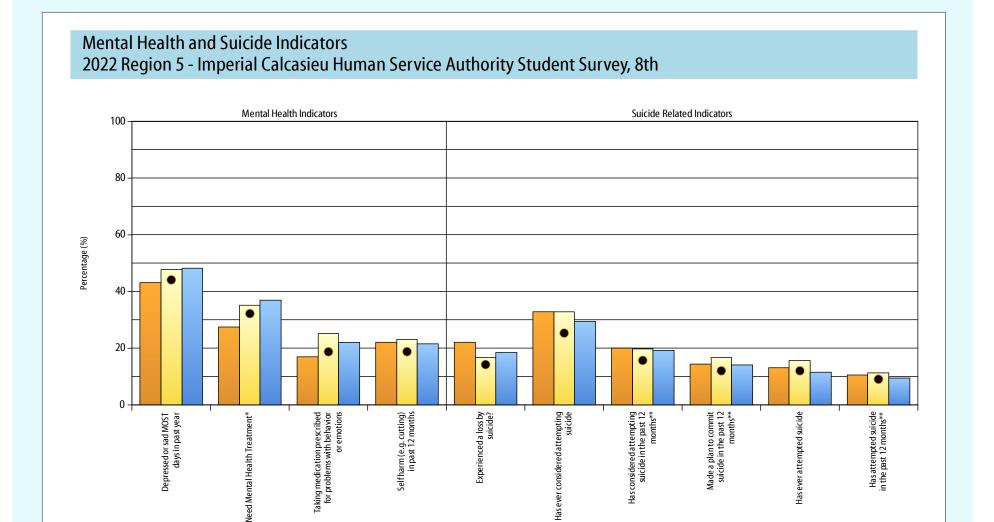




^{*} Mental health treatment needs are calculated from student responses to several questions. See text for a complete explanation, and the mental health table for additional calculated variables.

[†] A student that indicates they have considered or attempted suicide in the past 12 months is automatically coded as also having "ever considered" or "ever attempted" suicide. Please see the appendix for more information.



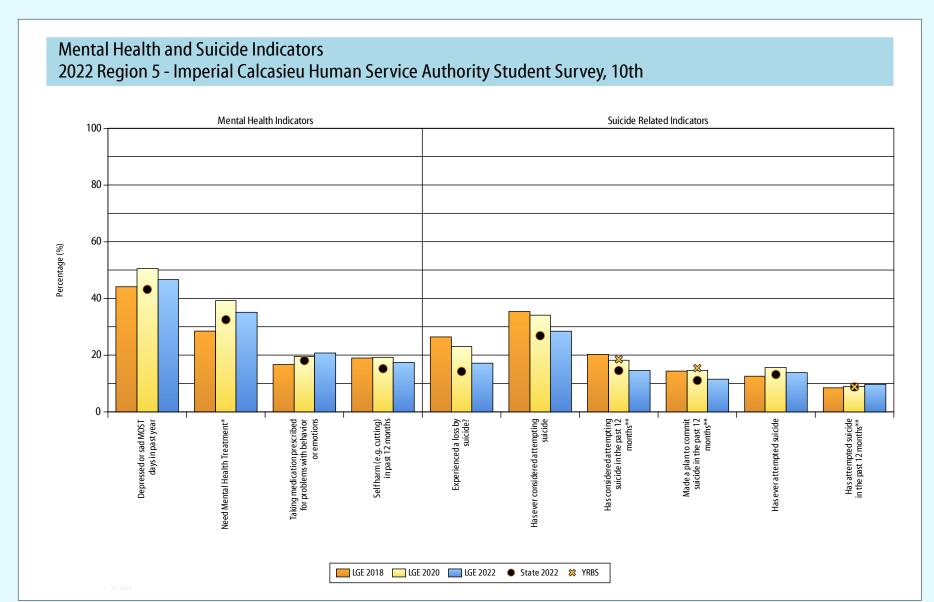


☐ LGE 2018 ☐ LGE 2020 ☐ LGE 2022 ● State 2022 💢 YRBS

^{*} Mental health treatment needs are calculated from student responses to several questions. See text for a complete explanation, and the mental health table for additional calculated variables.

[†] A student that indicates they have considered or attempted suicide in the past 12 months is automatically coded as also having "ever considered" or "ever attempted" suicide. Please see the appendix for more information.

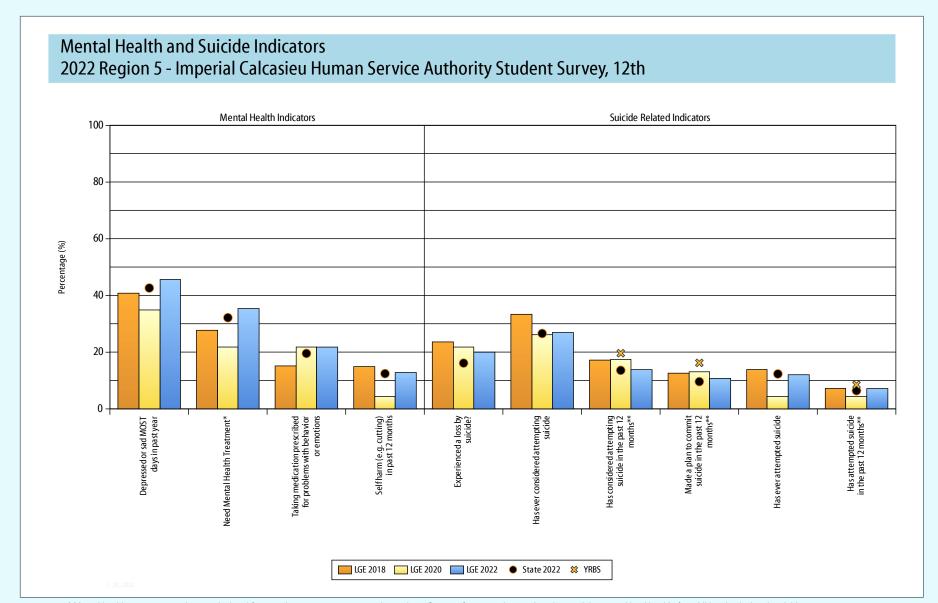




^{*} Mental health treatment needs are calculated from student responses to several questions. See text for a complete explanation, and the mental health table for additional calculated variables.

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^{*} Mental health treatment needs are calculated from student responses to several questions. See text for a complete explanation, and the mental health table for additional calculated variables.

[†] A student that indicates they have considered or attempted suicide in the past 12 months is automatically coded as also having "ever considered" or "ever attempted" suicide. Please see the appendix for more information.



Table 13. Percent	t of Students Respon	ding to M	ental Hea	alth and S	uicide Ind	dicators											
			61	th			81	th			10	th			12	th	
		LGE 2018	LGE 2020	LGE 2022	State 2022												
In the past year, have you f days, even if you felt okay s	elt depressed or sad MOST cometimes?	38.4	40.4	41.7	44.3	43.0	47.7	48.2	44.1	44.1	50.4	46.5	43.2	40.8	34.8	45.5	42.6
Needs Mental Health Treat (Scored 13 or more points of psychological distress. See	ment on the K6 screening scale for text for further explanation.)	18.6	31.7	31.8	31.3	27.5	35.1	37.0	32.2	28.3	39.1	35.0	32.5	27.7	21.7	35.4	32.1
Are you currently taking an prescribed for you because your behavior or emotions:	you had problems with	18.5	22.4	19.3	18.8	16.8	25.0	21.9	18.7	16.7	19.5	20.8	18.1	15.0	21.7	21.7	19.5
	High depressive symptoms	3.0	5.8	6.2	5.4	6.8	8.9	8.0	5.7	6.6	8.5	6.1	4.9	5.5	0.0	5.0	4.0
Depressive symptoms calculation*	Moderate depressive symptoms	70.9	72.8	71.8	75.1	68.9	72.4	73.2	74.4	72.6	73.3	74.1	75.0	71.4	73.9	75.0	75.0
	No depressive symptoms	26.1	21.4	22.0	19.5	24.3	18.7	18.8	19.8	20.9	18.2	19.8	20.1	23.1	26.1	19.9	21.0
something to purposefully	, how many times did you do hurt yourself without wanting urning yourself on purpose? es)	12.2	15.8	17.9	17.6	22.1	23.0	21.5	18.7	18.9	19.1	17.5	15.2	14.9	4.3	12.9	12.4

 $[\]hbox{*-} Calculated from student responses to four depressive symptoms questions. See text for further explanation.}$



Table 13. Percent of	of Students Responding to	Menta	al Healt	h and S	uicide	Indicat	ors (Co	nt'd)													
				6th					8th					10th					12th		
		LGE 2018	LGE 2020	LGE 2022	State 2022	YRBS 2019	LGE 2018	LGE 2020	LGE 2022	State 2022	YRBS 2019	LGE 2018	LGE 2020	LGE 2022	State 2022	YRBS 2019	LGE 2018	LGE 2020	LGE 2022	State 2022	YRBS 2019
Has there ever been a time in experienced a loss by suicide?	your life when you '(Answered 'Yes')	16.8	14.5	11.8	11.1	?	22.1	16.5	18.3	14.2	?	26.3	23.1	17.2	14.2	?	23.4	21.7	20.0	16.1	~
If you marked 'Yes' on the	Within the last year.	76.1	82.9	80.1	77.3	~	81.9	83.8	88.9	83.8	~	86.5	94.0	89.0	84.7	~	85.3	80.0	93.6	85.6	~
question above, how long ago did the suicide happen?*	Within the past two or three months (60-90 days)	18.8	8.6	15.1	15.5	2	13.5	13.5	8.1	11.2	~	10.8	6.0	6.6	10.5	~	10.0	20.0	4.3	7.2	~
паррет	In the past month (30 days).	5.1	8.6	4.8	7.2	~	4.6	2.7	3.0	5.0	~	2.7	0.0	4.4	4.8	~	4.7	0.0	2.1	7.3	~
	Friend/peer	4.5	3.2	3.7	2.8	~	6.2	6.3	5.6	4.4	~	12.3	8.9	5.2	5.0	~	10.4	4.3	8.7	7.0	~
If you marked 'Yes' on the question above, was the loss	Blood relative	6.2	5.6	4.6	4.7	~	8.3	6.3	7.4	6.0	~	6.9	8.5	7.6	5.9	~	5.6	17.4	7.1	5.4	~
a blood relative or friend? (Mark all that apply)*	Friend/family	5.8	8.5	6.2	5.0	~	6.5	10.7	8.4	6.0	~	7.0	10.7	8.1	5.8	~	7.0	8.7	7.6	6.3	~
	Best friend	1.2	2.4	1.6	1.6	~	3.2	1.3	3.2	2.0	~	1.9	0.4	1.6	1.3	~	1.6	0.0	2.1	1.7	~
If you marked 'Yes' to the question above, have you	No	43.8	51.4	56.1	56.1	~	52.8	61.1	50.8	53.9	~	54.7	51.0	50.3	52.1	~	50.6	60.0	46.8	45.3	~
spoken to anyone about your loss?*	Yes	56.2	48.6	43.9	43.9	~	47.2	38.9	49.2	46.1	~	45.3	49.0	49.7	47.9	~	49.4	40.0	53.2	54.7	~
	1 (It had no effect on me.)	6.7	11.1	10.1	10.2	~	7.3	10.8	5.7	8.4	~	7.7	9.6	8.4	9.1	~	5.8	0.0	6.9	7.6	~
If you marked 'Yes' on the	2 (It had little effect on me.)	16.8	11.1	11.4	13.0	~	12.0	10.8	14.3	15.0	~	14.3	23.1	16.8	16.2	~	18.8	20.0	10.3	12.8	~
question above, please rate on a scale of 1-5 how it	3 (It had some effect on me.)	16.0	27.8	19.5	22.0	~	24.6	27.0	20.4	25.0	~	30.6	30.8	31.4	29.3	~	34.3	40.0	33.8	32.6	~
impacted you.*	4 (It had considerable effect on me.)	19.3	19.4	17.4	20.6	~	21.8	27.0	24.9	22.9	~	21.3	13.5	19.4	22.8	~	20.4	0.0	26.2	23.2	~
	5 (It had great effect on me.)	41.2	30.6	41.6	34.1	~	34.4	24.3	34.7	28.6	~	26.1	23.1	24.1	22.6	~	20.7	40.0	22.8	23.9	~
Have you ever considered atte	empting suicide? (Answered 'Yes')	17.2	19.8	19.6	19.6	~	32.7	32.9	29.4	25.3	~	35.3	34.1	28.5	26.8	~	33.2	26.1	26.8	26.5	~
During the past 12 months, di attempting suicide? (Answere	id you ever seriously consider ed 'Yes')**	9.8	11.2	12.4	11.3	~	20.0	19.6	19.1	15.6	~	20.3	18.1	14.5	14.5	18.5	17.2	17.4	13.8	13.6	19.6
During the past 12 months, di would attempt suicide? (Answ	id you make a plan about how you vered 'Yes')	7.2	10.0	9.6	8.9	?	14.4	16.5	14.0	12.0	2	14.2	14.6	11.4	11.1	15.4	12.5	13.0	10.8	9.6	16.2
Have you ever attempted suic	ide? (Answered 'Yes')	6.8	9.2	8.4	9.8	~	13.1	15.6	11.6	12.0	~	12.5	15.7	13.7	13.1	~	13.8	4.3	12.0	12.3	~
During the past 12 months, ho attempt suicide? (Answered '1	ow many times did you actually ' or more times)**	5.5	7.8	7.2	8.0	2	10.4	11.2	9.4	9.0	2	8.3	8.9	9.8	8.8	8.8	7.1	4.3	7.2	6.4	8.5

^{*} Percentages are out of the subset of students who a) marked 'Yes' to the lead-in question and b) did not skip this question.

[†] A student indicating they have considered or attempted suicide in the past 12 months is coded as also having "ever considered" or "ever attempted" suicide. Please see the appendix for more information about suicide data.



Additional Data for Prevention Planning

Table 14. Percent of	f Students Responding	g to Viole	nce and E	Bullying I	ndicators	;											
			6t	h			81	th			10	th			12	th	
		LGE 2018	LGE 2020	LGE 2022	State 2022												
Violence on school grounds (Answered 'NO!' or 'no' to statement)	I feel safe at my school.	14.5	17.5	19.4	24.3	22.3	25.4	30.8	29.3	26.5	21.4	38.8	32.2	22.7	8.3	34.4	28.7
Prevalence of violence (Answered one or more times in the past year)	How many times in the past year have you attacked someone with the idea of seriously hurting them?	8.7	11.5	10.6	14.1	13.9	12.6	13.1	14.4	11.4	6.9	9.0	9.6	6.3	4.2	5.0	6.2
Perception of peer disapproval (Answered 'Wrong' or 'Very Wrong' to question)	How wrong do you think it is for someone your age to attack someone with the idea of seriously hurting them?	95.4	90.9	93.5	90.3	88.8	88.7	86.8	86.5	87.9	85.1	88.0	88.0	91.8	95.8	90.7	91.2
Avoidance of school in the past month due to bullying (Answered 1 or more days to question)	During the past 30 days, on how many days did you NOT got to school because you felt you would be unsafe at school or on the way to or from school?	9.3	12.9	15.8	15.5	10.9	8.7	14.4	13.3	8.7	12.6	18.7	13.1	7.2	9.1	13.9	10.8
Bullying in the past year	During the past 12 months, how often have you been picked on or bullied by a student ON SCHOOL PROPERTY?	24.7	31.3	26.2	24.4	29.0	26.1	26.8	21.8	20.0	18.5	19.2	14.1	10.2	18.2	10.3	9.1



Additional Data for Prevention Planning

			6	th	81	h	10	th	12	th	Ma	ale	Fem	nale
Core Measure	Definition	Substance	Percent	Sample										
	have five or more drinks of an alcoholic beverage in a row once or twice a week	Binge drinking	63.6	1,359	66.9	1,406	69.3	1,168	67.8	766	63.2	2,232	69.9	2,44
Perception of risk (People are at moderate or	smoke one or more packs of cigarettes per day	Tobacco	68.0	1,362	73.2	1,410	73.3	1,173	71.4	767	69.2	2,241	73.5	2,452
great risk of harming themselves if they)	smoke marijuana regularly	Marijuana	69.8	1,344	67.5	1,395	62.0	1,169	50.5	762	60.4	2,222	67.4	2,42
, .	use prescription drugs that are not prescribed to them	Prescription drugs	70.3	1,344	75.8	1,404	75.9	1,168	74.9	761	70.8	2,226	77.1	2,43
Perception of risk (People are at moderate or great risk of harming themselves if they)	try vape products (such as e-cigarettes, vape pens, mods, or pod vapes like JUUL or Puff Bars)?	Vape	64.0	1,354	61.5	1,406	59.8	1,173	60.0	762	0.0	0	63.6	2,448
Perception of parental disapproval	have one or two drinks of an alcoholic beverage nearly every day	Alcohol	96.0	1,313	93.5	1,353	85.8	1,133	77.9	733	89.5	2,143	89.9	2,373
(Parents feel it would be wrong or very wrong to)	smoke cigarettes	Tobacco	98.6	1,310	98.3	1,351	97.2	1,132	94.4	731	97.0	2,139	97.9	2,369
wrong or very wrong to)	smoke marijuana	Marijuana	98.9	1,300	97.2	1,347	92.3	1,126	89.8	728	94.8	2,136	95.7	2,349
Perception of parental disapproval (Parents feel it would be wrong or very wrong to)	use prescription drugs not prescribed to you	Prescription drugs	98.7	1,307	98.7	1,339	96.8	1,124	96.9	731	98.1	2,124	97.8	2,36
Perception of peer disapproval	have one or two drinks of an alcoholic beverage nearly every day	Alcohol	95.0	1,320	86.3	1,365	76.2	1,137	73.3	738	84.5	2,159	84.0	2,38
(Friends feel it would be wrong or very wrong to)	smoke tobacco	Tobacco	97.1	1,317	89.4	1,364	85.9	1,135	81.5	736	88.4	2,155	90.6	2,38
	smoke marijuana	Marijuana	97.9	1,306	86.4	1,363	76.1	1,132	67.1	735	83.7	2,144	84.3	2,37
Perception of peer disapproval (Friends feel it would be wrong or very wrong to)	use prescription drugs not prescribed to you	Prescription drugs	97.5	1,307	92.6	1,355	91.5	1,127	90.5	736	93.3	2,141	93.5	2,36
	had beer, wine, or hard liquor	Alcohol	5.0	1,349	13.0	1,388	19.7	1,164	23.2	757	13.3	2,215	14.7	2,42
Past 30-day use	smoked cigarettes	Tobacco	0.5	1,341	1.5	1,381	2.7	1,158	3.9	753	2.3	2,200	1.5	2,410
(at least one use in the past 30 days)	used marijuana	Marijuana	0.3	1,350	3.0	1,387	6.0	1,162	9.1	755	3.4	2,214	4.5	2,42
	combined results of prescription stimulant/sedative/narcotics questions	Prescription drugs	2.1	1,350	3.5	1,389	2.1	1,164	2.0	755	2.2	2,214	2.7	2,427

^{*} For Past 30-Day Use, Perception of Risk, and Perception of Parental/Peer Disapproval, the "Sample" column represents the sample size - the number of people who answered the question and whose responses were used to determine the percentage. The "Percent" column represents the percentage of youth in the sample answering the question as specified in the definition.

The male and female values allow a gender comparison for youth who completed the survey. However, unless the percentage of students who participated from each grade is similar, the gender results are not necessarily representative of males and females in the community. In order to preserve confidentiality, male or female values may be omitted if the total number surveyed for that gender is under 20.



Risk and Protective Scale Definitions

Table 15. Scales that Measure the Risk and Protective Factors Shown in the Profiles **Community Domain Risk Factors** Laws and Norms Research has shown that legal restrictions on alcohol and tobacco use, such as raising the legal drinking age, **Favorable Toward Drug** restricting smoking in public places, and increased taxation have been followed by decreases in consumption. Moreover, national surveys of high school seniors have shown that shifts in normative attitudes toward drug use have preceded changes in prevalence of use. Perceived Availability of The availability of cigarettes, alcohol, marijuana, and other illegal drugs has been related to the use of these **Drugs and Handguns** substances by adolescents. The availability of handguns is also related to a higher risk of crime and substance use by adolescents. **Family Domain Risk Factors Poor Family** Parents' use of inconsistent and/or unusually harsh or severe punishment with their children places them at Management higher risk for substance use and other problem behaviors. Also, parents' failure to provide clear expectations and to monitor their children's behavior makes it more likely that they will engage in drug abuse whether or not there are family drug problems. **Family Conflict** Children raised in families high in conflict, whether or not the child is directly involved in the conflict, appear at risk for both delinquency and drug use. When children are raised in a family with a history of problem behaviors (e.g., violence or ATOD use), the Family History of **Antisocial Behavior** children are more likely to engage in these behaviors. **Parental Attitudes** In families where parents use illegal drugs, are heavy users of alcohol, or are tolerant of children's use, children **Favorable Toward** are more likely to become drug abusers during adolescence. The risk is further increased if parents involve Antisocial Behavior & children in their own drug (or alcohol) using behavior, for example, asking the child to light the parent's Drugs cigarette or get the parent a beer from the refrigerator. **School Domain Risk Factors Academic Failure** Beginning in the late elementary school (grades 4-6) academic failure increases the risk of both drug abuse and delinquency. It appears that the experience of failure itself, for whatever reasons, increases the risk of problem Low Commitment to Surveys of high school seniors have shown that the use of drugs is significantly lower among students who expect School to attend college than among those who do not. Factors such as liking school, spending time on homework, and perceiving the coursework as relevant are also negatively related to drug use. **School Domain Protective Factors** Opportunities for When young people are given more opportunities to participate meaningfully in important activities at school, **Prosocial Involvement** they are less likely to engage in drug use and other problem behaviors.

When young people are recognized and rewarded for their contributions at school, they are less likely to be

involved in substance use and other problem behaviors.

Rewards for Prosocial

Involvement



Risk and Protective Scale Definitions

Table 15. Scales that Measure the Risk and Protective Factors Shown in the Profiles

Peer-Individual Risk Fac	tors
Early Initiation of Antisocial Behavior and Drug Use	Early onset of drug use predicts misuse of drugs. The earlier the onset of any drug use, the greater the involvement in other drug use and the greater frequency of use. 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.
Attitudes Favorable Toward Antisocial Behavior and Drug Use	During the elementary school years, most children express anti-drug, anti-crime, and pro-social attitudes and have difficulty imagining why people use drugs or engage in antisocial behaviors. However, in middle school, as more youth are exposed to others who use drugs and engage in antisocial behavior, their attitudes often shift toward greater acceptance of these behaviors. Youth who express positive attitudes toward drug use and antisocial behavior are more likely to engage in a variety of problem behaviors, including drug use.
Perceived Risk of Drug Use	Young people who do not perceive drug use to be risky are far more likely to engage in drug use.
Interaction with Antisocial Peers	Young people who associate with peers who engage in problem behaviors are at higher risk for engaging in antisocial behavior themselves.
Friends' Use of Drugs	Young people who associate with peers who engage in alcohol or substance abuse are much more likely to engage in the same behavior. Peer drug use has consistently been found to be among the strongest predictors of substance use among youth. Even when young people come from well-managed families and do not experience other risk factors, spending time with friends who use drugs greatly increases the risk of that problem developing.
Rewards for Antisocial Behavior	Young people who receive rewards for their antisocial behavior are at higher risk for engaging further in antisocial behavior and substance use.
Depressive Symptoms	Young people who are depressed are overrepresented in the criminal justice system and are more likely to use drugs. Survey research and other studies have shown a link between depression and other youth problem behaviors.
Gang Involvement	Youth who belong to gangs are more at risk for antisocial behavior and drug use.
Peer-Individual Protecti	ive Factors
Belief in the Moral Order	Young people who have a belief in what is "right" or "wrong" are less likely to use drugs.
Interaction with Prosocial Peers	Young people who associate with peers who engage in prosocial behavior are more protected from engaging in antisocial behavior and substance use.
Prosocial Involvement	Participation in positive school and community activities helps provide protection for youth.
Rewards for Prosocial Involvement	Young people who are rewarded for working hard in school and the community are less likely to engage in problem behavior.

Contacts for Prevention

Region I

Metropolitan Human Services District

3100 General de Gaule New Orleans, LA70114 504-568-3130 504-568-3137 (Fax)

Region II

Capital Area Human Services

7389 Florida Blvd. Suite 100A Baton Rouge, LA 70806 225-925-3827 225-925-1987 (Fax)

Region III

South Central Louisiana Human Services Authority

158 Regal Row Houma, LA 70374 985-857-3615 x 143 985-876-8824 (Fax)

Region IV

Acadiana Area Human Services District

302 Dulles Drive Lafayette, LA 70506 337-262-1105 337-262-1103 (Fax)

Region V

Imperial Calcasieu Human Services Authority

1 Lakeshore Drive Suite 2000 Lake Charles, LA 70629 337-475-4861 337-475-3105 (Fax)

Region VI

Central Louisiana Human Services District

5411 Colisuem Blvd. Alexandria, LA 71303 318-484-2169 318-487-5453 (Fax)

Region VII

Northwest Louisiana Human Services District

1310 North Hearne Ave. Shreveport, LA 71107 318-676-5102 318-676-5944 (Fax)

Region VIII

Northeast Delta Human Services Authority

2513 Ferrand Street Monroe, LA 71201 318-362-5483 318-362-3268 (Fax)

Region IX

Florida Parishes Human Services Authority

835 Pride Drive Suite B Hammond, LA 70401 985-543-4730 985-543-4752 (Fax)

Region X

Jefferson Parish Human Services Authority

3616 South 1-10 Service Road West Metairie, LA 70001 504-838-5702 504-838-5706 (Fax)

Contacts for Prevention

State Contacts

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Governor's Office Office of Community Programs

State Office Building 1201 North 3rd Street, G219 Baton Rouge, LA 70802 (225) 342-3423 / (800) 827-5885 (225) 342-7081 (Fax) www.gov.louisiana.gov/

Louisiana Office for Behavioral Health Reports new.dhh.louisiana.gov/index.cfm/ newsroom/category/57

Louisiana Department of Education Division of School and Community Support

1201 North Third Street Baton Rouge, LA 70802 (225) 342-3338 (225) 219-1691 (Fax) www.louisianabelieves.com **National Contacts & Resources**

SAMHSA/Center for Substance Abuse Prevention (CSAP)

www.samhsa.gov/prevention/

DOJ/Office of Juvenile Justice and Delinquency Prevention (OJJDP) www.ojjdp.gov

ED/Office of Safe and Healthy Students (OSHS)

www2.ed.gov/oese/oshs

SAMHSA/Strategic Prevention Framework (SPF)

www.samhsa.gov/spf

Social Development Research Group, University of Washington

www.sdrg.org

National Council on Alcoholism and Drug Dependence, Inc. www.ncadd.org

NIH/National Institute of Mental Health www.nimh.nih.gov

National Suicide Prevention Lifeline www.suicidepreventionlifeline.org

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