



BLOOMINGTON YOUTH HEALTH UPDATE 2010 - 2011

ALCOHOL · MARIJUANA · PHYSICAL ACTIVITY & NUTRITION · TOBACCO · TEEN PREGNANCY PREVENTION

This **YOUTH HEALTH UPDATE** presents data from the Minnesota Student Survey for Bloomington students and summarizes information in the literature. Learn what you can do to support the health of Bloomington youth and what you can do to help youth avoid behaviors harmful to their health.

TOP 11 THINGS PARENTS AND OTHER ADULTS CAN DO

1. Role model the behavior you expect from your teen.
2. Be involved in your teen's life.
3. Show your interest by asking questions that need a response other than "yes" or "no" and then listen.
4. Get to know your teen's friends.
5. Set clear expectations and rules concerning alcohol use, other substance use and other unhealthy, risky behavior.
6. Follow through with consequences if rules and expectations are broken.
7. Be active and live a healthy lifestyle. Invite your children to walk, bike, or do other activities with you.
8. Be your teen's excuse not to break the rules. "My parents would be so angry if I . . ."
9. Eat together as a family at least 2-3 times a week.
10. Make it easy for teens to choose healthy foods at home and at school.
11. Let teens know when you think they've done well.

ALCOHOL

Alcohol is the most frequently used drug among adolescents.¹

- The earlier teens start drinking the greater the danger.²
- The most common place to drink is someone else's home.³
- Those who drink usually drink with friends and in groups of 3 or more.³
- Ninth graders are more likely than twelfth graders to drink with their parents.³
- Those who drink in large groups are more likely to have 5 or more drinks at one time.³

HEALTHY YOUTH DEVELOPMENT PRINCIPLES

1. The goal is to foster physical and mental health; competence at school, work and in the community; confidence; character and connectedness with family and peers.
2. The process is enduring, comprehensive and engages youth.
3. Strategies go beyond the basics and include nurturing relationships and opportunities to try new roles and help others.
4. The commitment of caring adults everywhere in the community is a major factor in successful youth development approaches.
5. All parties that contribute to youth development should be committed to a common purpose and to rational action toward the purpose.
6. All youth are developing, have strengths, have needs, can contribute to their communities and are valued. All youth need the opportunity to take responsible roles and act constructively within their communities.

Source: Pittman, K. and Irby, M., 1998. *Reflections on a Decade of Promoting Youth Development*.

TOBACCO

At least 80 percent of adults smokers report that they had their first cigarette before the age of 18.⁴

- Cigarette smoking by young people leads to immediate and serious health problems including respiratory and non-respiratory effects, addiction to nicotine, and the associated risk of other drug use.⁵
- Cigarette smoking has steadily declined since 2000, but there has been no reduction in use of smokeless tobacco.⁶
- Tobacco use continues to be the leading cause of premature death in the U.S.⁷

NUTRITION & PHYSICAL ACTIVITY

As a group, adolescents have poor eating and exercise habits which may result in nutritional deficiencies, obesity, eating disorders, and harmful long-term effects on their health.

One reason for this is an environment that makes it easy for adolescents to live and be entertained with almost no physical effort. They are also surrounded by cheap, attractive foods high in sugar, fat and sodium but low in nutrients. These foods provided by adults are readily available in places where youth hang out—school, parks, fast food restaurants, concession stands, movie theaters and malls.

Consequently, adolescents are:

- More obese—4.6% in 1963 to 18.1 in 2008⁸
- Snacking more — eating 23% of total daily calories from snacks in 2005-2006 compared to 14% of total daily calories from snacks in 1977-1978⁹
- Not eating enough fruits, vegetables and calcium-rich foods¹⁰
- Eating excessive amounts of sugar, fat and sodium resulting in higher cholesterol and increased risk of heart disease¹⁰
- Accumulating too much screen time—7 hours per day TV, computer, video games and movies¹¹

MARIJUANA

Marijuana is the most widely used illegal drug among America's youth.¹²

- Marijuana use during adolescence and young adulthood increases the risk of psychotic symptoms. Continued use may increase the risk for psychotic disorder in later life.¹³
- Marijuana is far more powerful today than it was 30 years ago. The chemical responsible for marijuana's effects (THC) has increased from a 1 percent potency level in the 1970's to more than 13 percent today (on average). Some samples contain levels of up to 33 percent.¹⁴
- Parents are the biggest reason teens chose not to use marijuana. Two-thirds of youth ages 13-17 say losing their parents' respect is one of the main reasons they don't smoke marijuana or use other drugs.¹⁵

TEEN PREGNANCY PREVENTION

The teen birth rate in the United States declined 6 percent in 2009 and is now at a record low.¹⁶ The U.S. still has the highest rates of teen pregnancy and births when weighted against other comparable countries, however. Communities must continue working together to help teens delay the onset of sexual activity until they are older and out of high school.¹⁷

- Teen girls (73%) are just as likely as teen boys (69%) to believe that sexting leads to real-life hook-ups.¹⁷
- Most teens (65% of girls and 57% of boys) who have had sex say they wish they had waited.¹⁷
- Among those teens who have watched MTV's *16 and Pregnant*, 82% think the show helps teens better understand the challenges of teen pregnancy and parenthood and how to avoid it.¹⁷
- Eight in ten teens (80%) say that it would be much easier for teens to delay sexual activity and avoid teen pregnancy if they were able to have more open, honest conversations about these topics with their parents.¹⁷

References

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- 2 Institute of Medicine, 2004.
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- 4 Clearway Minnesota, Blue Cross and Blue Shield of Minnesota, and Minnesota Department of Health, 2008. *Creating a Healthier Minnesota: Progress in Reaching Tobacco Use 2-33.*
- 5 National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health, 2010. *Tobacco Use and the Health of Young People.* Available at: <http://www.cdc.gov/HealthyYouth/tobacco/facts.htm>
- 6 Minnesota Department of Health Division of Health Policy Center for Health Statistics, 2008. *Teens and Tobacco in Minnesota, the View from 2008 Results from the Minnesota Youth Tobacco and Asthma Survey Executive Summary.*
- 7 Minnesota Department of Health, 2004. *Nutrition and Physical Activity in Children and Adolescents Fact Sheet.*
- 8 Ogden and Carroll, 2010. *Prevalence of Obesity Among Children and Adolescents: United States, Trends 1963-1965 Through 2007-2008 Health E-Stat (National Center for Health Statistics).*
- 9 U.S. Department of Agriculture, Agricultural Research Service, Beltsville Human Nutrition Research Center, Food Surveys Research Group, 2010. *Snacking Patterns of U.S. Adolescents, What We Eat in America, NHANES 2005-2006 Data Brief.*
- 10 Cavadini, Siega-Ruiz and Popkin, 2000. "US Adolescent Food Intake Trends from 1965 to 1996." *Western Journal of Medicine* 173(6): 378-383.
- 11 Rideout, Foehr and Roberts, 2010. *Generation M2: Media in the Lives of 8- to 18-Year-Olds—A Kaiser Family Foundation Study*
- 12 National Center on Addiction and Substance Abuse at Columbia University (CASA).
- 13 Kuepper, van Os, Lieb, Wittchen, Höfler and Henquet, 2011. "Continued cannabis use and risk of incidence and persistence of psychotic symptoms: 10 year follow-up cohort study." *British Medical Journal* DOI: 10.1136/bmj.d738.
- 14 Office of National Drug Control Policy (ONDCP), 2008.
- 15 Partnership for a Drug-Free America. *Attitude Tracking Study.*
- 16 Centers for Disease Control and Prevention, 2010. Found at <http://www.thenationalcampaign.org/press/press-release.aspx?releaseID=202>.
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Survey responses* from 9th grade students in Bloomington		2001	2004	2007	2010	MN '10
Alcohol	Had any alcoholic beverages (beer, wine, wine coolers, or liquor) in the last 30 days. **	25%	22%	20%	18%	19%
	Binge drinking (5 or more drinks in a row) in the past 2 weeks.	14%	14%	10%	9%	10%
	Student use of alcohol or drugs is a problem at this school. (answered "agree" or "strongly agree")	62%	64%	64%	58%	56%
	Answered yes to "Do you ever use alcohol or other drugs before school?"	10%	9%	6%	5%	6%
Marijuana & other drugs	Used marijuana in the last 30 days.**	15%	11%	11%	11%	10%
	During the last 12 months, has anyone offered, sold, or given you an illegal drug on school property? (answered "yes")	27%	22%	17%	15%	15%
Tobacco	Smoked cigarettes in the last 30 days.	16%	15%	8%	7%	9%
	Of those who used tobacco in the last 30 days, percent who got tobacco from friends.**	62%	51%	45%	57%	59%
Healthy youth development	Can talk to your mother about your problems most or some of the time?	76%	76%	80%	74%	80%
	Can talk to your father about your problems most or some of the time?	60%	56%	62%	62%	65%
	How many of your teachers are interested in you as a person? (answered "most" or "all")	36%	35%	37%	40%	40%
	Answered "Yes, almost more than I could take" to the question, "During the last 30 days, have you felt you were under any stress or pressure?"	14%	16%	12%	11%	13%
Physical activity	Students reporting they feel adults in the community care about them "quite a bit" or "very much."	30%	31%	36%	38%	42%
	Active 5 or more days of last week for 30 minutes a day (moderate activity).	41%	45%	50%	55%	56%
Nutrition	Spent 11 or more hours in a typical school week watching TV, DVDs, or videos (not including playing video or computer games).	21%	24%	23%	22%	20%
	Had 5 or more servings of fruits and vegetables yesterday.	19%	14%	19%	18%	18%
	Had no milk yesterday (girls only).	23%	27%	28%	33%	25%
	Students who used unhealthy methods to lose weight (e.g., fasting, cigarettes, diet pills, vomit, laxatives).	31%	28%	20%	16%	17%
Sex	At the present time, do you think you are overweight? (answered "yes")	19%	21%	21%	21%	21%
	Received most of your information about sex from friends or peers.**	69%	66%	66%	61%	65%
Violence	Have you ever had sexual intercourse ("had sex")? (answered "yes")**	21%	24%	20%	23%	20%
	Answered yes to, "Has any adult in your household hit you so hard that you had marks or were afraid of that person?"	14%	14%	12%	13%	10%
	Students who agree or strongly agree that illegal gang activity is a problem at school.	12%	31%	27%	28%	18%
	During the last 12 months, have you been pushed, shoved, or grabbed on school property? (answered "yes")	46%	40%	41%	35%	37%

New questions in 2007 and 2010

Bullying	Answered about once a week or more to "During the last 30 days, how often has another student or group of students made fun of or teased in a hurtful way, or excluded you from friends or activities?"	-	-	40%	35%	38%
	Answered about once a week or more to "During the last 30 days, how often have you on your own or as part of a group, made fun of or teased in a hurtful way, or excluded someone from friends or activities?"	-	-	52%	45%	45%
Parental disapproval	Students who think their parents would disapprove or strongly disapprove if they smoked cigarettes.	-	-	-	95%	96%
	Students who think their parents would disapprove or strongly disapprove if they have drunk alcohol.	-	-	-	90%	92%
	Students who think their parents would disapprove or strongly disapprove if they smoked marijuana.	-	-	-	95%	96%
	Students who think their parents would disapprove or strongly disapprove if they used other illegal drugs.	-	-	-	96%	98%
Perception of risk/harm	Students who think there is great risk or moderate risk if they smoke one or more packs of cigarettes per day.	-	-	90%	91%	91%
	Students who think there is great risk or moderate risk if they have five or more drinks of an alcoholic beverage once or twice a week.	-	-	85%	83%	84%
	Students who think there is great risk or moderate risk if they smoke marijuana once or twice a week.	-	-	80%	75%	77%

* Minnesota Student Survey

** The text for this question or response options changed slightly in 2007.



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ABOUT TRI-CITY PARTNERS COALITION FOR HEALTHY YOUTH AND COMMUNITIES

Tri-City Partners for Healthy Youth and Communities (TCP) is a collaboration of individuals and various community sectors to promote health, reduce risks and build assets in our youth and communities.

Started in 1995 to work on youth health issues, Tri-City Partners has increased its focus area and membership. TCP has a Steering Committee consisting of Bloomington, Edina and Richfield community members representing the faith community, parents, law enforcement, youth service organizations, city governments, youth, business, media, school districts and other citizens.



STATEWIDE HEALTH IMPROVEMENT PROGRAM

SHIP (Statewide Health Improvement Program) aims to give youth a brighter future by changing environmental conditions that contribute to a shortened life expectancy: poor nutrition, physical inactivity and tobacco exposure.

SHIP is at the heart of a health reform package passed by the Minnesota Legislature. The Minnesota Department of Health awarded SHIP grant money to Bloomington Public Health Division in June 2010 to create environments that support health in Bloomington, Edina and Richfield.



Youth Health Updates are a publication of Bloomington Public Health in collaboration with Tri-City Partners for Healthy Youth and Communities. Information in the publication includes data from the 2001, 2004, 2007 and 2010 Minnesota Student Surveys. Data from 1995 and 1998 is available upon request.

More information:
952-563-8900 or www.tricitypartners.org.

One question sometimes raised about student surveys is whether students' responses are honest and accurate. Researchers use a variety of data analysis techniques to examine the likely accuracy of anonymous surveys and these were applied to the student survey as well. Additionally, results are consistent over time and with state and National trends.

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