

Alcohol and Drug Use Among Middle School Students In West Virginia

How large is the problem?

The 2015 West Virginia Youth Risk Behavior Survey revealed that the following alcohol and drug use behaviors occurred among WV middle school students:

Alcohol Use

- 25.7% ever drank alcohol (other than a few sips)
- 10.6% drank alcohol for the first time before age 11 years (other than a few sips)

Marijuana Use

- 10.2% had ever used marijuana during their life
- 3.4% tried marijuana before age 11 years

Other Drug Use

- 2.7% had ever used any form of cocaine (such as powder, crack, or freebase) during their life
- 7.0% had ever used inhalants (sniffed glue, breathed the contents of spray cans, or inhaled paints or sprays) to get high during their life
- 1.4% had ever taken steroids (pills or shots) without a doctor's prescription during their life
- 4.5% had ever taken prescription drugs (such as Oxycontin, Percocet, Vicodin, codeine, Adderall, Ritalin, or Xanax) without a doctor's prescription during their life

What is being done to address the problem?

Solutions focus on improving alcohol and drug prevention education and creating healthier school environments. The 2014 West Virginia School Health Profiles indicated that WV middle schools implemented the following policies and practices:

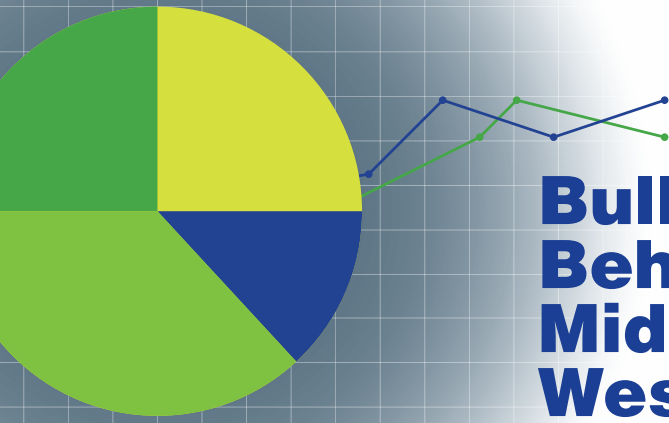
Alcohol and Drug Prevention Education

- 80.4% required students to take two or more health education courses
- 98.9% required a course designed to increase students' knowledge about alcohol or drug use prevention
- 35.3% of lead health education teachers received professional development in the past 2 years related to alcohol or drug use prevention

School Environment

- 34.6% participated in a program in which family or community members serve as role models or mentor students, such as the Big Brother Big Sisters program

For more information contact Birgit Shanholtzer, Office of Research, Accountability, and Data Governance, birgit.shanholtzer@k12.wv.us, 304-558-7881



Bullying and Suicidal Behaviors Among Middle School Students in West Virginia

How large is the problem?

The 2015 West Virginia Youth Risk Behavior Survey revealed that the following bullying and suicidal behaviors occurred among WV middle school students:

Bullying

- 52.4% were bullied on school property in the past year
- 28.8% were electronically bullied through e-mail, chat rooms, instant messaging, web sites, or texting in the past year

Suicidal Thoughts and Behaviors

- 21.1% seriously thought about killing themselves in the past year
- 15.5% made a plan about how they would kill themselves in the past year
- 7.2% tried to kill themselves in the past year

What is being done to address the problem?

Solutions focus on improving health education, increasing family and community involvement, and creating healthier school environments. The 2014 West Virginia School Health Profiles indicated that WV middle schools implemented the following policies and practices:

Health Education

- 80.4% required students to take two or more health education courses
- 97.0% required a course designed to increase students' knowledge about bullying
- 81.8% required a course that aims to increase students' knowledge about suicide prevention
- 62.6% of lead health education teachers received professional development in the past two years related to violence prevention (bullying, fighting, or dating violence prevention)
- 35.0% of lead health education teachers received professional development in the past two years related to suicide prevention

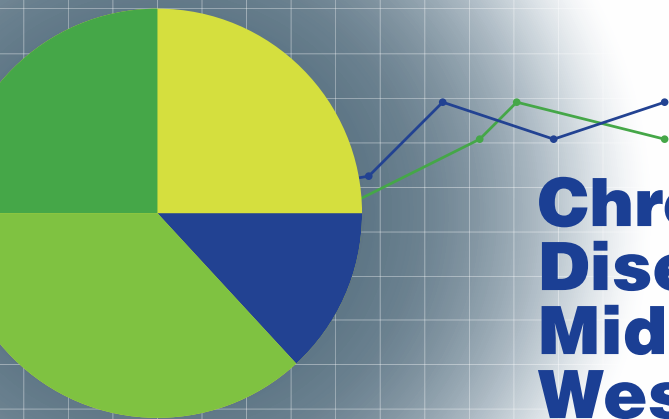
Family and Community Involvement

- 73.9% provided parents and families with health information designed to increase knowledge on prevention of student bullying and sexual harassment including electronic media
- 34.6% participated in a program in which family or community members serve as role models to students or mentor students, such as the Big Brothers Big Sisters program

School Environment

- 58.8% prevented bullying and sexual harassment, including electronic aggression, among all students
- 94.5% had staff who received professional development on preventing, identifying, and responding to student bullying and sexual harassment that takes place in person or via electronic media
- 98.2% had a designated staff member to whom students can confidentially report student bullying and sexual harassment, including by use of electronic media
- 96.3% used electronic, paper, or oral communication to publicize and disseminate policies, rules, or regulations on bullying and sexual harassment, including by use of electronic media

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Chronic Disease and Disease Prevention Among Middle School Students in West Virginia

How large is the problem?

The 2015 West Virginia Youth Risk Behavior Survey revealed that the following chronic disease and disease prevention behaviors occurred among WV middle school students:

Asthma

- 20.7% had ever been told by a doctor or nurse that they had asthma

Sleep

- 47.1% had 8 or more hours of sleep on an average school night

What is being done to address the problem?

Solutions focus on improving disease education and creating healthier school environments. The 2014 West Virginia School Health Profiles indicated that WV middle schools implemented the following policies and practices:

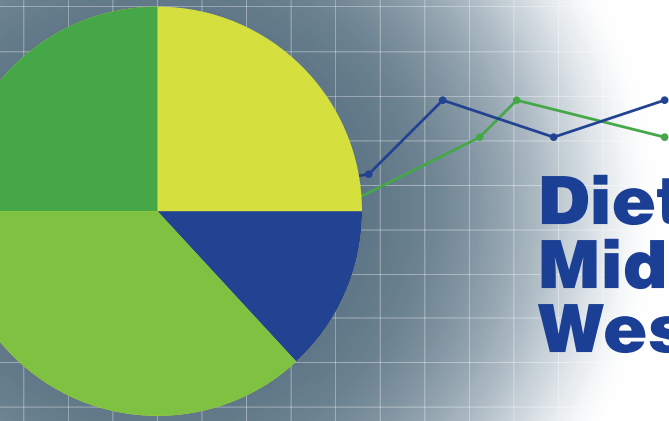
Disease Education

- 80.4% required students to take two or more health education courses
- 93.0% had a required course that taught infectious disease prevention
- 85.6% had a required course that taught the relationship between diet and chronic disease
- 28.2% provided parents and families with health information designed to increase parent and family knowledge about asthma
- 31.6% provided parents and families with health information designed to increase parent and family knowledge about diabetes
- 35.2% of lead health education teachers received professional development in the past 2 years related to infectious disease prevention (flu prevention)
- 16.2% of lead health education teachers received professional development in the past 2 years related to epilepsy or seizure disorder
- 22.3% of lead health education teachers received professional development in the past 2 years related to asthma
- 29.3% of lead health education teachers received professional development in the past 2 years related to diabetes

School Environment

- 50.4% of schools had a policy that addresses attendance of students with HIV infection, procedures to protect HIV-infected students and staff from discrimination, and maintains confidentiality of HIV-infected students and staff
- 98.2% of schools identified and tracked students with chronic conditions that may require daily or emergency management (asthma, diabetes, obesity, epilepsy, hypertension, food allergies, etc.)
- 76.6% had protocols that ensure students with a chronic condition that may require daily or emergency management are enrolled into private, state, or federally funded insurance programs if eligible
- 33.6% had a full-time registered nurse who provides health services to students
- 63.9% provided referrals to community-based medical care providers for students identified with chronic conditions or at risk for activity, diet, and weight-related chronic conditions

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Dietary Behaviors Among Middle School Students in West Virginia

How large is the problem?

The 2015 West Virginia Youth Risk Behavior Survey revealed that the following unhealthy dietary behaviors occurred among WV middle school students:

Unhealthy Dietary Behaviors

- 9.4% did not eat breakfast in the past week

What is being done to address the problem?

Solutions focus on improving nutrition education, increasing healthy food options, and creating healthier school environments. The 2014 West Virginia School Health Profiles indicated that WV middle schools implemented the following policies and practices:

Nutrition Education

- 80.4% required students to take two or more health education courses
- 98.9% had a required course that taught the benefits of healthy eating
- 97.9% had a required course that taught the benefits of drinking plenty of water
- 95.8% had a required course that taught the benefits of eating breakfast every day
- 71.2% taught all 20 nutrition and dietary behavior topics
- 34.2% of lead health education teachers received professional development in the past 2 years related to nutrition and dietary behavior
- 56.1% provided parents and families with health information designed to increase parent and family knowledge about nutrition and healthy eating

Healthy Food Options

- 15.4% offered 100% fruit or vegetable juice from vending machines or school stores
- 27.2% conducted taste tests to determine food preferences for nutritious items
- 58.2% provided information to students and families on the nutritional content of available foods
- 76.6% placed fruits and vegetables near the cafeteria cashier, where they are easy to access
- 83.4% prohibited advertisements for candy, fast food restaurants, or soft drinks in the school building

School Environment

- 67.9% have used the School Health Index to assess school policies and activities related to nutrition
- 86.6% permitted students to have a drinking water bottle with them in either all locations or certain locations during the school day

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Injury Risk and Violence Among Middle School Students in West Virginia

How large is the problem?

The 2015 West Virginia Youth Risk Behavior Survey revealed that the following injury risk and violence behaviors occurred among WV middle school students:

Injury Risk

- 73.2% rarely or never wore a helmet when they rode a bicycle in the past year
- 74.9% rarely or never wore a helmet when they rollerbladed or skateboarded in the past year
- 6.9% rarely or never wore a seat belt when riding in a car in the past month
- 21.4% rode in a car in the past month that was driven by someone that had been drinking alcohol

Violence

- 46.1% carried a weapon such as a gun, knife, or club in the past month
- 46.4% were in a physical fight in the past year
- 4.7% were injured in a physical fight and had to be treated by a doctor or nurse

What is being done to address the problem?

Solutions focus on improving health education, increasing family and community involvement, and creating healthier school environments. The 2014 West Virginia School Health Profiles indicated that WV middle schools implemented the following policies and practices:

Health Education

- 80.4% required students to take two or more health education courses
- 97.0% required a course designed to increase students' knowledge on injury prevention, safety, and violence prevention, including bullying, fighting, and dating violence prevention
- 62.6% of lead health education teachers received professional development in the past 2 years related to violence prevention (bullying, fighting, or dating violence prevention)
- 33.4% of lead health education teachers received professional development in the past 2 years related to injury prevention and safety

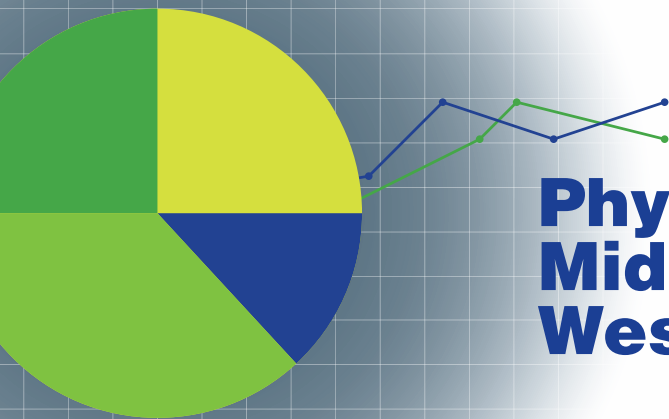
Family and Community Involvement

- 34.6% participated in a program in which family or community members serve as role models to students or mentor students, such as the Big Brothers Big Sisters program

School Environment

- 54.0% had a club that gives students opportunities to learn about people different from them, such as students with disabilities, homeless youth, or people from different cultures
- 53.2% used the School Health Index or other self-assessment tool to assess school policies, activities, and programs related to injury and violence prevention

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Physical Activity Among Middle School Students in West Virginia

How large is the problem?

The 2015 West Virginia Youth Risk Behavior Survey revealed that the following physical activity behaviors occurred among WV middle school students:

Physical Inactivity

- 7.0% did not participate in at least 60 minutes of physical activity on at least 1 day during the past week
- 28.4% watched TV for 3 or more hours per day on an average school day
- 46.6% played video or computer games or used a computer for something that was not school work for 3 or more hours per day on an average school day

Physical Education

- 73.1% attended physical education classes at least 1 day a week
- 48.5% attended physical education classes on all 5 days
- 62.3% played on at least one sports team in the past year

What is being done to address the problem?

Solutions focus on better health education, more physical activity opportunities, and healthier school environments. The 2014 West Virginia School Health Profiles indicated that WV middle schools implemented the following policies and practices:

Health Education

- 80.4% required students to take two or more health education courses
- 95.9% required a course that taught the benefits of balancing food intake and physical activity
- 51.6% of lead health education teachers received professional development in the past 2 years related to physical activity and fitness
- 87.0% of physical education teachers or specialists received professional development on physical education or physical activity during the past year

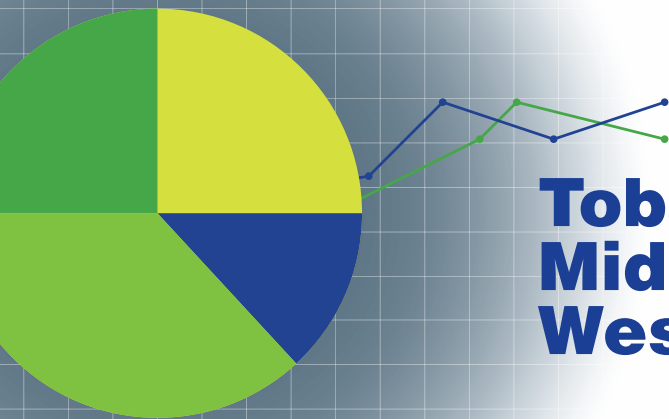
Physical Activity

- 61.8% offered opportunities for all students to participate in intramural sports or physical activity clubs
- 87.2% offered interscholastic sports to students
- 31.0% offered physical activities before the school day through organized physical activities or access to facilities or equipment
- 59.1% had a joint-use agreement for shared use of the school or community physical activity facilities

School Environment

- 72.1% provided opportunities for students to participate in physical activity breaks in the classroom outside of physical education
- 72.8% prohibited staff from excluding students from physical education or physical activity to punish them for bad behavior or failure to complete class work in another class
- 76.3% had used the School Health Index to assess school policies and activities around physical activity
- 7.4% had established, implemented, or evaluated a Comprehensive School Physical Activity Program (CSPAP)

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Tobacco Use Among Middle School Students in West Virginia

How large is the problem?

The 2015 West Virginia Youth Risk Behavior Survey revealed that the following tobacco use behaviors occurred among WV middle school students:

- 20.4% had ever tried smoking cigarettes, even one or two puffs
- 5.7% smoked a whole cigarette for the first time before age 11 years
- 5.5% were current smokers (smoked cigarettes on at least 1 day in the past month)
- 1.7% were current frequent smokers (smoked on 20 or more days in the past month)
- 1.3% were current daily smokers (smoked every day in the past month)
- 6.9% currently used chewing tobacco, snuff, or dip (at least once in the past month)
- 4.4% currently smoked cigars, cigarillos, or little cigars (at least once in the past month)
- 24.9% had ever used electronic vapor products (e-cigarettes, e-cigars, e-pipes, vape pipes, vaping pens, e-hookahs, or hookah pens)
- 11.0% currently used electronic vapor products (at least once in the past month)
- 17.5% currently used any type of tobacco product (cigarette, smokeless tobacco, cigar, or electronic vapor product at least once in the past month)

What is being done to address the problem?

Solutions focus on improving tobacco education, increasing tobacco cessation classes, and creating healthier school environments. The 2014 West Virginia School Health Profiles indicated that WV middle schools implemented the following policies and practices:

Tobacco Education

- 80.4% required students to take two or more health education courses
- 99.0% required a course designed to increase student's knowledge about tobacco-use prevention
- 68.1% taught all 18 tobacco-use prevention topics in a required class
- 35.5% of lead health education teachers received professional development in the past 2 years related to tobacco use prevention

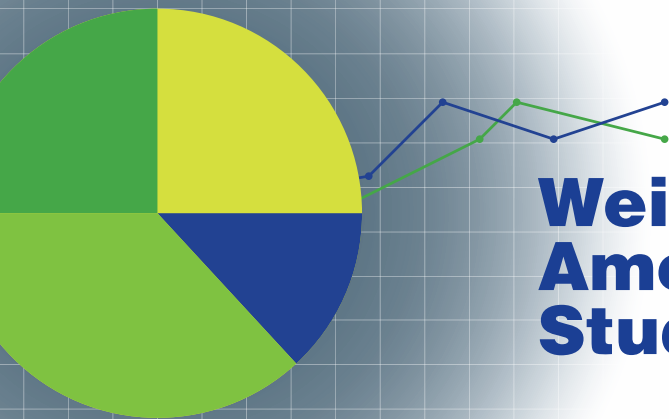
Tobacco Cessation

- 67.7% provided tobacco cessation services to students and 42.6% provided services to faculty/staff
- 49.5% had arrangements with organizations or health care professionals not on school property to provide tobacco cessation services for students

School Environment

- 63.6% had ever assessed their policies and programs using the School Health Index or similar self-assessment tool in tobacco-use prevention
- 100% had adopted a policy prohibiting tobacco use
- 78.0% followed a policy that mandates a "tobacco free environment"
- 94.5% posted signs marking a tobacco-free school zone, that is, a specified distance from school grounds where tobacco use is not allowed
- 49.0% provided parents and families with health information designed to increase their knowledge about tobacco-use prevention

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Weight Management Among Middle School Students in West Virginia

How large is the problem?

The 2015 West Virginia Youth Risk Behavior Survey revealed that the following weight management behaviors occurred among WV middle school students:

Weight Status

- 25.5% described themselves as slightly or very overweight
- 45.1% were trying to lose weight

Dieting

- 12.2% went without eating for 24 or more hours (fasted) to lose weight or to keep from gaining weight in the past month
- 2.6% took some diet pills, powders, or liquids without a doctor's advice to lose weight or to keep from gaining weight during the past month
- 3.8% vomited or took laxatives to lose weight or to keep from gaining weight in the past month

What is being done to address the problem?

Solutions focus on improving nutrition education, increasing healthy food options, and creating healthier school environments. The 2014 West Virginia School Health Profiles indicated that WV middle schools implemented the following policies and practices:

- 80.4% required students to take two or more health education courses
- 100% had a required course that increased student knowledge about nutrition and dietary behavior and physical activity and fitness
- 95.8% had a required course that taught the risks of unhealthy weight control practices
- 95.8% had a required course that taught about accepting body size differences
- 92.8% had a required course that taught the signs, symptoms, and treatment for eating disorders
- 87.7% had a required course that taught how to assess body mass index (BMI)
- 34.2% of lead health education teachers received professional development in the past 2 years related to nutrition and dietary behavior
- 51.6% of lead health education teachers received professional development in the past 2 years related to physical activity and fitness

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