

2017

HIGH SCHOOL RISK BEHAVIOR SURVEY REPORT



BUFFALO PUBLIC SCHOOLS

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Districtwide High School Summary of Trends

Buffalo Public Schools (BPS) has conducted a risk behavior survey every two years since 2011. The following are notable data trends in the four administrations of this survey. Comparisons between BPS high schoolers and other high schoolers in New York State (or the nation) are presented throughout the remainder of this report.

What's Better

for BPS High Schoolers



Schools are Safer

Carrying a weapon, being threatened with a weapon, physical fighting, and being offered, sold, or given drugs on school property are down since 2011. BPS higher schoolers are also less likely to be bullied at school or online than NYS high schoolers.



Students Experience Less Violence

Though still higher than among other high schoolers, physical fighting, physical dating violence, and being physically forced to have sex have declined among BPS high schoolers since 2011.



Tobacco, Alcohol, and Marijuana Use have Fallen

The number of BPS high schoolers who used tobacco, alcohol, and marijuana are at four-year lows, and are lower than among other high schoolers.



Sexual Activity has Declined

So has the number of students who had sex before age 13 and who have had 4 or more sexual partners. The percentage of BPS high schoolers who engage in these higher risk behaviors is still higher than among NYS high schoolers, though.



What's Worse

for BPS High Schoolers



The Community Feels Less Safe

Though there are fewer threats at school, nearly 10% of BPS high schoolers have missed school because they feel unsafe going to or from school. This perception has increased since 2011, and is higher than among NYS high schoolers.



Suicidal Ideation Continues to Rise

Nearly 30% of BPS high schoolers have experienced depression, and an increasing percentage have seriously considered, planned, or made a serious suicide attempt.



“Hard” Drug Use Has Risen

Though limited to a small number of students and lower than among other high schoolers, reported use of heroin, cocaine, methamphetamines, and injection drugs is up since 2011 among BPS high schoolers.



Protection During Sex is Lacking

Though sexual activity has declined, failure to use a condom has consistently risen since 2011 among BPS high schoolers. More sexually active students report not using any method to prevent pregnancy than in 2011, and almost 20% haven't learned about HIV/AIDS in school.

For most risk behaviors, BPS high schoolers have lower risk than NYS high schoolers. The few areas where BPS high schoolers have higher risk than NYS high schoolers are:

- Physical fighting, including at school and those serious enough to result in injury;
- Marijuana use under the age of 13;
- Some high risk sexual activity, including having sex before age 13 and having had 4 or more partners;
- Sedentary behaviors, including lack of physical exercise, and excessive TV watching and computer use; and
- Lack of seat belt use.



Introduction

Every two years since 2011, Buffalo Public Schools (BPS) has administered a risk behavior survey that includes questions from the US Centers for Disease Control and Prevention (CDC) Youth Risk Behavior Surveillance (YRBS) survey, as well as other questions¹. This survey, administered in the fall semester to all high school (i.e., 9th through 12th grade) students district-wide, helps the district understand areas in which their students may be at risk for negative health outcomes. The YRBS portion of the survey asks students questions about their experience with:

- unintentional injuries and violence,
- tobacco use,
- alcohol, and drug use,
- sexual activity, and
- other general health-related topics, such as eating breakfast and engaging in physical activity.

BPS also uses this opportunity to survey its students about other areas of interest to the district, including dental health, risk perception, and exposure to traumatic events.

This report presents the results of the district's 2017 administration of the BPS High School risk survey. For each item, the percent of students who reported risk behaviors in 2015 and 2017 is presented. The intention of this report is to provide BPS and the community with a general overview of the survey results, including a comparison to New York State (NYS) students and changes since the 2015 BPS administration. An additional summary report showing BPS High School YRBS indicator data and trends for 2011, 2013, 2015, and 2017 is included as Appendix A.

Report Structure

The structure of this report is intended to facilitate comparability and use of these data. Where possible, the YRBS indicators are presented in the format used by the CDC, with minor editing to assist in comprehension and brevity. In the cases of newly-added YRBS questions, indicator language is presumed, based on the approach used by the CDC for similar questions and indicators during past years.

Indicator tables containing the 2017 BPS High School results, 2015 BPS High School results, and NYS 2015 results are presented for each of the YRBS and BPS-added health topics. Each health topic (e.g., tobacco use, sexual activity) is presented in its own section of the report. Brief summaries are included at the beginning of each topic section to help direct readers' attention toward key data points and notable trends.

¹ The comprehensive survey is commonly referred to as the "BPS YRBS Survey," even though it includes non-YRBS questions (i.e., BPS-added questions).



Indicator Table Explanation

To maintain comparability between the CDC's national and state-level data reporting, most data were analyzed and presented to indicate risk. That is, higher percents of students responding indicate more risk, while lower percents indicate lower risk, except where otherwise noted on BPS-added questions (noted as "positively framed," where higher percents indicate lower risk and are desirable).

To aid in comprehension and usability of data, this report utilizes visual techniques and indicators, as discussed below.

Color Coding: Indicates the Percent Difference between NYS and BPS

To provide context for risk levels, this report provides a comparison between the percent of BPS students indicating risk to the percent of NYS² students indicating risk.

The percent difference between BPS 2017 and NYS 2015 was calculated by subtracting the NYS 2015 percent from BPS 2017 percent, then dividing by the average of the two and multiplying by 100%. In this report, negative percent difference indicates that the BPS percent is lower than the NYS percent (that is, BPS has lower risk than NYS); positive percent difference indicates that the BPS percent is higher than the NYS percent, and therefore has more risk.

The color shading applied to the BPS High School 2017 column in the indicator tables (on pages 14 through 24) indicates the degree to which BPS differs from NYS data. Indicators for which BPS has a lower risk are shaded green; statements for which BPS has a higher risk are shaded in red. The table below shows the meaning of each shade of green and red.

Key to Color Coding

BPS has Lower Risk than NYS	BPS has Higher Risk than NYS
0% to -10% Difference (no color)	0% to 10% Difference (no color)
-11% to -40% Difference	11% to 40% Difference
-41% to -70% Difference	41% to 70% Difference
-71% or Larger Difference	71% or Larger Difference

While the degree of difference from NYS may help BPS and the community to focus their risk-reduction efforts, it is also important to consider whether the percent of BPS High School students at-risk on each of these indicators is acceptable, even where the risk is lower than that of other high school students generally.

² In cases where the CDC does not share New York State data, national data are presented for comparison. An asterisk is used in the indicators tables to indicate when this is the case.



Arrows: Indicates the Percent Change in BPS from 2015 to 2017

To understand how risk is changing over time, this report uses arrows to indicate substantial change (i.e., 10% or more change) within BPS High Schools between the 2015 survey and the 2017 survey. Percent change between BPS High Schools 2015 and BPS High Schools 2017 was calculated by subtracting BPS High Schools 2017 percent from BPS High Schools 2015 percent, then dividing by BPS High Schools 2015 and multiplying the result by 100%.

In this report, arrows are included between the 2015 and 2017 BPS High Schools data. These arrows only appear when there was a percent change of 10% or more from 2015 to 2017. This threshold was chosen to highlight areas of substantial change. The table below summarizes these criteria.

Key to Arrows

Percent Change from 2015 to 2017	Meaning	Symbol
Increase of 10% or more	Increased Risk	↑
Percent Change of -9.9% to 9.9%	Little or No Change	(no symbol)
Decrease of 10% or more	Decreased Risk	↓

Absence of Data

In the tables, the “-” symbol indicates data that are unavailable, missing, or could not be reported because the indicator questions were newly added in 2017, or because of substantial differences between question wording or answer options in the 2015 and 2017 surveys. True zero percents (i.e., where no students indicated risk) are represented by 0.0%.



Survey Methodology

BPS administered its version of the High School risk survey district-wide to students in applicable grade levels (9th through 12th grades) via Survey Monkey in late October 2017. The surveys and responses were anonymous (i.e., no one could identify how any one student answered the questions).

Survey Instrument

As with prior administration, BPS convened a YRBS Advisory Committee, consisting of internal staff and community and higher education partners, to help determine the questions asked on the district's High School and Middle School risk surveys. This committee determined which of the CDC's 2017 Standard High School YRBS questions to include (identified in this report as YRBS questions and indicators), and reviewed and added questions to gather information pertinent to the district and community partners, such as items about trauma exposure, dental health, and risk perception (identified in this report as BPS-added questions and indicators). Through this process, the committee also removed several standard 2017 YRBS questions to ensure the survey was of an appropriate length to be completed during the administration timeframe (i.e., a single class period).

The final BPS High School risk survey tool was translated into Spanish, and both the English and Spanish³ versions were entered into BPS's Survey Monkey account. The survey tool is available online at <https://www.buffaloschools.org/Page/1977>.

Survey Administration

For the 2017 survey administration, BPS asked each school to designate a point-person who would be responsible for managing survey administration within the school. This person was asked to complete a short questionnaire detailing the process for survey administration, including dates and periods during which the survey would be given, as well as the process for informing parents and honoring student opt-outs. This process was managed by BPS's Health Related Services.

Survey Validity and Analyses

Once the survey administration was completed by BPS, Via Evaluation (VIA) was selected through a competitive bid process to analyze and report survey results. VIA obtained all individual survey results from BPS's Survey Monkey account in SPSS (IBM Corp. Released 2013. IBM SPSS Statistics for Windows, Version 24.0. Armonk, NY: IBM Corp.) format.

To determine each individual survey's validity (as well as to ensure comparability to state and national data), VIA applied the CDC's recommended validity checks to standard YRBS questions. VIA also applied additional internally-created checks to BPS-added questions.

³ The Spanish survey tool contained several differences in question format and language beginning at item 80. Therefore, responses to questions 1 through 79 on valid Spanish surveys (n=90) were included for analyses, but responses to questions 80 through 132 were removed from analysis.



This process invalidates individual responses that do not have logical consistency (e.g., a student answers that he has never had a drink of alcohol on one question, but then answers that he has had alcohol in the past 30 days), and invalidates complete surveys that are missing more than 20 valid answers (i.e., the survey has too many blank responses, or has too many invalid items). Invalid surveys were removed from analyses, and individual items deemed invalid within valid surveys were deleted, so that only data from valid surveys and from valid items within valid surveys is reported in this report. For number and percent of invalid surveys by school and overall, see Appendix C.

VIA applied the CDC's approach to analyzing standard YRBS data, where the percent of students indicating risk on individual items is reported. To this end, analyses aggregate responses that indicate risk in accordance with CDC reporting standards. For example, the answer options for the question "How old were you when you had your first drink of alcohol other than a few sips?" are: a) I have never had a drink of alcohol other than a few sips; b) 8 years old or younger; c) 9 or 10 years old; d) 11 or 12 years old; e) 13 or 14 years old; f) 15 or 16 years old; g) 17 years old or older. The CDC reports results from this question as the percent of students who drank alcohol for the first time before age 13; thus, the analysis aggregates students who select answer options b, c, and d into the percent of students who indicate risk on this indicator.

In cases where the indicator includes the clause "among those who [engaged in the risk behavior]," the percent of students indicating risk for that indicator is based *only* on those students who indicated that risk, typically in a prior question. For example, the indicator "smoked more than 10 cigarettes per day on the 30 days prior to the survey" is reported *only* among those students who reported that they had smoked at least one cigarette during the prior 30 days on another question.

Additional analyses (e.g., results disaggregated by gender or grade level) and more comprehensive statistical analyses (e.g., confidence intervals) are beyond the scope of this report. Entities that wish to conduct advanced analyses may apply for a copy of the cleaned dataset from BPS's Office of Shared Accountability. This dataset includes all surveys with individual valid responses (i.e., individual items that were determined to be invalid appear blank in this dataset).

Data Sources

Data presented in this report are from the following sources:

- **District and School Enrollment:** The overall district and school-level response rates were determined by dividing the number of valid surveys by the number of enrolled students. For the purposes of the high school report, district and school enrollment was determined by BPS's collection of Basic Educational Data System (BEDS) attendance, conducted on October 4, 2017. This count of students enrolled in grades 9 through 12 at each school on that day was provided to the BPS Health Related Services by BPS's Office of Shared Accountability, and shared with VIA.



- **New York 2015:** Data were retrieved from the CDC’s Youth Online: High School YRBS, October 2015 administration of the CDC’s National survey in New York State⁴. When New York State data are not available, the national 2015 YRBS data are presented (as noted by an asterisk following the indicator language).
- **BPS High Schools 2015:** Reported percents are the unweighted frequencies of risk indication from BPS’s district-wide administration of BPS High School YRBS in October 2015.
- **BPS High Schools 2017:** Reported percents are the unweighted frequencies of risk indication from the Buffalo Public Schools’ district-wide administration of BPS High School YRBS in October 2017.

⁴ The lag in national and state data availability is discussed in the Percent Difference between New York State and Buffalo Public Schools section.



Survey Participation Information

School Eligibility

All BPS schools serving students in grades 9, 10, 11, or 12 were invited to participate in the risk survey. Several special program schools did not participate. Those schools/programs, and their 9th through 12th grade 2017 BEDS enrollment, were: Virtual Pathways programs (102 students); PS 84 Erie County Health Center for Children (73 students); PS 131 Academy Programs (103 students). These students were removed from BPS's total 9th through 12th grade enrollment used to calculate the district's high school response rate. These results are not representative of students in these programs.

Respondents' School Identification

High school survey respondents are asked to select the school that they attend from a drop-down list of all BPS schools that serve 9th through 12th graders. They could also choose not to select an answer to this question. These responses are not verifiable; the school selected by the student is reported as the student's school.

For the purposes of school-level analyses and reporting, several schools' data were merged. These schools are co-located in buildings, and have student populations that may interact. The schools that were merged for school analyses include: PS 204 Lafayette High School and PS 207 Lafayette Academy; PS 205 Riverside Institute of Technology and PS 208 Riverside Academy; PS 307 East High School and PS 309 East Community High School; and PS 363 Lewis J Bennett School of Innovative Technology and PS 363 Research Lab Program for Bioinformatics & Life Sciences.

A total of 31 students selected schools that did not participate in the YRBS (29 of which had valid surveys), and 862 students did not provide a school (666 of which were valid surveys). These students' schools were classified as "Other/Missing." Their data are included in the BPS High School district data, but their responses are not included in any school-level reports.

Response Rates

BPS administers its risk behavior survey as an overall population survey, as opposed to through a random sampling approach. A high response rate does not guarantee that results are representative of the school population, but does increase the likelihood that the results are representative. Therefore, calculating and understanding district and school-level response rates is essential to interpreting survey results.

CDC guidelines suggest that response rates of 60% or higher can be considered representative of the population. The table on the next page presents the approximate level of generalizability of results based on response rates.



Response Rate Representation

Response Rate	Generalizability
80% or higher	Results are highly representative of population.
70% - 79%	Results are representative of population.
60% - 69%	Results are somewhat representative of population.
50% - 59%	Results may not be representative of population.
Below 50%	Results are not representative of population; no school-level report provided.

To calculate the 2017 response rate, VIA divided the number of valid surveys by the number of enrolled students in the district and at each participating school. The table on the following pages presents the school and district response rates for both 2017 and 2015. Schools with response rates below 60% are italicized in the table. These schools will not receive school-level reports, though these data are included in districtwide analyses.

High School Response Rates (from highest to lowest)

School	Number of Enrolled Students	Number of Valid Surveys	2017 Valid Survey Response Rate	2015 Valid Survey Response Rate
PS 195 City Honors School	609	538	88%	63%
PS 156 Frederick Law Olmsted	429	378	88%	84%
PS 302 Emerson School of Hospitality	490	421	86%	64%
PS 363 Lewis J Bennett School of Innovative Technology and PS 363 Research Lab Program for Bioinformatics & Life Sciences	230	196	85%	-
PS 335 Middle Early College High School	317	253	80%	68%
PS 192 Buffalo Academy for Visual & Performing Arts	474	369	78%	60%
PS 304 Hutchinson Central Technical High School	1143	799	70%	76%
PS 212 Leonardo da Vinci High School	381	255	67%	80%
PS 353 Newcomer Academy @ Lafayette	231	140	61%	-
PS 301 Burgard High School	481	285	59%	52%
PS 198 International Preparatory School	698	402	58%	56%
PS 205 Riverside Institute of Technology and PS 208 Riverside Academy	321	180	56%	57%
PS 355 Emerson Annex @ 28	305	165	54%	76%
<i>PS 206 South Park High School</i>	<i>827</i>	<i>406</i>	<i>49%</i>	<i>62%</i>

School	Number of Enrolled Students	Number of Valid Surveys	2017 Valid Survey Response Rate	2015 Valid Survey Response Rate
<i>PS 307 East High School and PS 309 East Community High School</i>	250	107	43%	64%
<i>PS 204 Lafayette High School and PS 207 Lafayette Academy</i>	313	114	36%	17%
<i>PS 305 McKinley High School</i>	1063	374	35%	58%
<i>PS 357 Pathways Academy @ East</i>	87	30	34%	58%
<i>PS 197 Math, Science and Technology Prep</i>	456	146	32%	34%
Other/Missing	-	695	-	-
Total	9105 ⁵	6253	69%	67%

Schools in italics have 2017 responses rates too low to receive school-level reports.

⁵ Total 9th through 12th grade enrollment for participating schools. See School Participation for schools that did not participate.



Although this year's overall high school district response rate (69%) is higher than 2015's (67%), there has been significant change in the school-level response rates. This year, six high schools have response rates below 50%, compared to just three schools in 2015. These schools will not receive school level reports.

Additionally, several schools that had modest response rates in 2015 now have very low response rates (for example, South Park, East, and McKinley High Schools). Similarly, other schools with modest response rates in 2015 now have very high response rates (for example, City Honors, Middle Early, and Performing Arts). District results may be more representative of some schools than others, and because of the changes in response rates within schools, may have limited comparability to districtwide results from 2015.

Grade Levels of Respondents

Valid survey responses were not equally distributed across grade levels. About 31% of valid surveys were completed by 9th graders, 27% by 10th graders, 22% by 11th graders, and 19% by 12th graders (the remaining 1% said they were ungraded or left this answer blank). This follows the general trend of BPS high school enrollment (the distribution of high schoolers declines each grade, from 28% enrolled in 9th grade to 23% enrolled in 12th grade), but still indicates that these survey results are more representative of freshman than older BPS high school students.

Survey Duration

The BPS High School risk behavior survey included 132 questions. The median survey completion time was just under 18 minutes. This is a relatively short amount of time to answer 132 questions, allowing just 8 seconds per question. Most schools administered the survey during a particular class period (e.g., during social studies class), and most BPS class periods are around 40 minutes.

Missing Responses

An analysis of the number of missing responses to individual items increases consistently across the survey, so that on the first questions, fewer than 5% of respondents did not answer the questions, compared with the final items, of which nearly 30% of respondents did not answer. See Appendix A for the percent of unanswered questions by survey item (prior to individual item invalidation, discussed in the Survey Validity and Analyses section below).

This variation in individual item response rate reduces the generalizability of results toward the end of the survey. This is particularly notable for later questions about respondents' sexual orientation and transgender identification, which had higher percents of missing answers during the 2017 administration, compared with the 2015 administration, and the newly-added non-YRBS concussion questions that appeared as the last questions on this survey and were left unanswered by about 30% of respondents⁶.

⁶ The BPS-added non-YRBS concussion questions are not discussed in this report, because they have no comparison reference and were unanswered by such a high percent of respondents.



Districtwide High School YRBS Survey Results

The results tables in this section are organized by health topic. A summary of results is provided before each health topic and table. The tables show each risk indicator, the percent of NYS students indicating risk on the CDC's 2015 administration of the US Standard High School YRBS, the percent of BPS students indicating risk in 2015, and the percent of BPS students indicating risk in 2017. **Higher percents indicate more risk.**

Indicator Notations

YRBS survey question and indicator language is identical to that used by the CDC's 2017 YRBS Standard High School survey tool. In some instances, the CDC has changed YRBS question or indicator language since the 2015 administration. These changes, as well as other important question or indicator information, are noted as superscripts following the applicable indicators in the results tables. The following notations are used:

YRBS Indicator Table Notations

Superscript	Meaning
*	Comparison data from US (NYS Data not available)
1	Question not included in BPS 2015 YRBS.
2	Significant change to question wording; no comparison data available.
3	Slight change to question wording; 2017 data may not be comparable to 2015 data.
4	Newly-added question in 2017.
5	Data from a BPS-added question incorporated into YRBS section.
6	No longer a YRBS question (but still asked by BPS); no comparison data available.

Appendix D (the final page of this document) contains the YRBS Indicator Table Notations and other keys to formatting used in the indicator tables on pages 14 through 32.



Unintentional Injuries and Violence Summary

The indicator table on pages 14-15 present the percent of students who are at-risk on Unintentional Injuries and Violence indicators. The following are highlights from these indicators:

Fights are more common and more severe among BPS high schoolers than among NYS high schoolers. More than one-quarter of BPS high schoolers were in a physical fight, and over 5% were injured while fighting.

Bullying is up since 2015, both in school and online (i.e., electronic bullying), though these rates are still lower than NYS averages.

Depression is a problem, with 28% of BPS high schoolers experiencing consistent feelings of sadness or hopelessness. Although depression and suicide indicators are near or below state levels, the percent of students considering, planning, and making serious suicide attempts increased since 2015.

BPS students are less likely to carry weapons, including on school property, than high schoolers statewide, even though they are more likely to avoid attending school because they feel unsafe at or on their way to school.

Unintentional Injuries and Violence Indicators	NYS 2015	BPS HS 2015	BPS Change	BPS HS 2017
Rarely or never wore a bicycle helmet among students who had ridden a bicycle during the 12 months before the survey	78.1%	85.5%		81.1%
Rarely or never wore a seat belt* when riding in a car	6.1%	10.0%	↑	11.6%
Rode with a driver who had been drinking alcohol* during the 30 days before the survey	20.0%	16.2%		15.7%
Drove a car when drinking alcohol¹ among students who had driven a car or other vehicle; during the 30 days before the survey	8.0%	-		5.7%
Texted or e-mailed while driving a car among students who had driven a car or other vehicle; during the 30 days before the survey	28.9%	21.1%	↓	16.9%
Carried a weapon such as a gun, knife, or club; during the 30 days before the survey	13.0%	12.5%		11.7%
Carried a gun² during the 12 months before the survey	-	-		3.0%
Carried a weapon on school property such as a gun, a knife, or club; during the 30 days before the survey	4.5%	3.3%		3.5%
Threatened or injured with a weapon on school property such as a gun, knife, or club; during the 12 months before the survey	8.3%	5.9%	↑	7.7%
In a physical fight during the 12 months before the survey	20.2%	28.5%		25.9%
Injured in a physical fight* injuries had to be treated by a doctor or nurse; during the 12 months before the survey	2.9%	4.5%	↑	5.2%
In a physical fight on school property* during the 12 months before the survey	7.8%	10.3%		10.4%

Unintentional Injuries and Violence Indicators, continued	NYS 2015	BPS HS 2015	BPS Change	BPS HS 2017
Did not go to school because they felt unsafe at school or on their way to or from school during the 30 days before the survey	7.6%	7.7%	↑	9.5%
Bullied electronically³ including through texting, Instagram, Facebook, or other social media; during the 12 months before the survey	15.7%	9.5%	↑	10.9%
Bullied on school property during the 12 months before the survey	20.6%	12.4%	↑	14.0%
Ever physically forced to have sexual intercourse* when they did not want to	6.7%	6.5%		6.4%
Forced to do unwanted sexual things⁴ including kissing, touching, or being physically forced to have sexual intercourse, during 12 months before the survey	-	-		8.4%
Experienced physical dating violence physically hurt on purpose by someone they were dating or going out with, among those who were dating or going out with someone during the 12 months before the survey	11.5%	12.2%	↓	10.6%
Experienced sexual dating violence unwanted kissing, touching, or being physically forced to have sexual intercourse when they did not want to by someone they were dating or going out with, among those who were dating or going out with someone during the 12 months before the survey	14.7%	8.9%		9.7%
Felt sad or hopeless almost every day for 2 or more weeks in a row so that they stopped doing some usual activities; during the 12 months before the survey	28.6%	25.7%		28.2%
Seriously considered attempting suicide during the 12 months before the survey	15.7%	13.2%	↑	15.2%
Made a plan about how they would attempt suicide* during the 12 months before the survey	14.6%	10.7%	↑	12.4%
Attempted suicide during the 12 months before the survey	9.9%	9.2%		8.8%
Suicide attempt resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse during the 12 months before the survey	4.4%	2.7%	↑	3.3%



Tobacco Use Summary

The indicator table on page 17 presents the percent of students who are at-risk on Tobacco Use indicators. The following are highlights from these indicators:

Use of all forms of tobacco is very low in BPS, both compared to NYS and since the 2015 BPS survey, with fewer than 1 in 10 high schoolers using any form of tobacco in the month before the survey.

Cigarette smoking is far below 2015 levels in NYS and BPS. Only 4% of high schoolers recently smoked, and 1% (fewer than 65 students) smoked cigarettes frequently. However, among these few recent smokers, a small handful smoked heavily (16.5% of recent smokers, or less than 40 students).

E-vapor product use has fallen. Although 28% of high schoolers have tried e-vaping at some point in their lives, only 7% have used e-vapor products in the month before the survey, a decline of 50% from 2015.

Tobacco Use Indicators	NYS 2015	BPS HS 2015	BPS Change	BPS HS 2017
Ever tried cigarette smoking even one or two puffs	27.6%	20.4%	↓	16.2%
Tried smoking before age 13² even one or two puffs	-	-		7.2%
Recently smoked cigarettes smoked at least one cigarette during the 30 days before the survey	8.8%	5.7%	↓	4.1%
Recently smoked cigarettes frequently smoked on 20 or more days during the 30 days before the survey	2.9%	2.2%	↓	1.2%
Smoked cigarettes on all 30 days during the 30 days before the survey	1.8%	1.9%	↓	1.0%
Engaged in heavy smoking smoked more than 10 cigarettes per day on the days they smoked, among students who recently smoked cigarettes; during the 30 days before the survey	11.6%	12.0%	↑	16.5%
Recently used smokeless tobacco³ used chewing tobacco, snuff, dip, snus or dissolvable tobacco products (but not electronic vapor products) during the 30 days before the survey	6.7%	2.8%		3.0%
Recently smoked cigars, cigarillos, or little cigars smoked these products during the 30 days before the survey	10.2%	7.4%	↓	5.4%
Recently used <u>any</u> tobacco used cigarettes, smokeless tobacco, or cigars during 30 days before the survey	28.8%	10.8%	↓	7.8%
Ever used an electronic vapor product* such as e-cigarettes, e-cigars, e-pipes, vape pipes, vaping pens, e-hookahs, and hookah pens	44.9%	29.6%		28.3%
Recently used an electronic vapor product used an electronic vapor product during the 30 days before the survey	21.7%	14.7%	↓	7.4%
Did not try to quit all tobacco products⁴ including cigarettes, cigars, shisha or hookah tobacco, and electronic vapor products (among those who used tobacco products during past 12 months)	-	-		53.6%



Alcohol and Drug Use Summary

The indicator table on pages 19-20 present the percent of students who are at-risk on Alcohol and Drug Use indicators. The following are highlights from these indicators:

Alcohol use continues to decline and is lower among BPS high schoolers than among NYS high school students.

Marijuana use has declined among BPS students while generally increasing among American high schoolers, so that (for the first time since 2011), BPS students are at less risk for marijuana use than high schoolers nationwide. They are still more likely to have tried marijuana at a young age, but just as likely to have used marijuana recently as other NYS high schoolers.

Non-marijuana drug use is lower than among other high schoolers, but has increased since 2015. Though this drug use is limited to a small number of students, there were increases of over 50% in students reporting injecting illegal drugs and recently using prescription drugs without a doctor's prescription.

Alcohol and Drug Use Indicators	NYS 2015	BPS HS 2015	BPS Change	BPS HS 2017
Ever had at least one drink of alcohol*	63.2%	40.2%		36.7%
Drank alcohol for the first time before age 13 other than a few sips	16.1%	11.9%		12.8%
Recently drank alcohol during the 30 days before the survey	29.7%	17.1%		15.7%
Recently engaged in binge drinking³ had 5 or more (for males) or 4 or more (for females) drinks of alcohol in a row on at least one day during the 30 days before the survey	15.6%	8.8%	↓	7.6%
Recently had 10 or more drinks in a row³ during the 30 days before the survey	3.0%	1.6%	↑	1.9%
Usually obtained the alcohol they drank by someone giving it to them among students who drank alcohol during the 30 days before the survey	32.2%	38.5%		38.8%
Ever used marijuana*	38.6%	33.2%		30.8%
Tried marijuana for the first time before age 13 years	6.5%	9.0%		8.9%
Recently used marijuana during the 30 days before the survey	19.3%	21.2%		19.9%
Ever used synthetic marijuana such as K2, Spice, fake weed, King Kong, Yucatan Fire, Skunk, or Moon Rocks	10.0%	5.5%		5.1%
Ever used cocaine including any form of cocaine, such as powder, crack, or freebase	7.6%	3.1%	↑	3.7%
Ever used inhalants* sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high	7.0%	5.1%	↑	5.8%
Ever used ecstasy	5.0%	3.3%		3.3%

Alcohol and Drug Use Indicators, continued	NYS 2015	BPS HS 2015	BPS Change	BPS HS 2017
Ever used heroin	4.8%	2.1%	↑	2.7%
Recently used heroin⁵ during the 30 days before the survey	-	1.4%	↑	1.8%
Ever used methamphetamines	3.0%	2.2%	↑	2.9%
Ever took steroids without a doctor's prescription*	3.5%	2.6%	↑	3.1%
Ever took prescription drugs without a doctor's prescription or differently than prescribed by a doctor*³ such as codeine, Vicodin, OxyContin, Hydrocodone, and Percocet	16.8%	6.4%		6.1%
Recently took prescription drugs without a doctor's prescription⁵ during the 30 days before the survey	-	2.0%	↑	3.0%
Ever injected any illegal drug	3.4%	1.6%	↑	2.5%
Offered, sold, or given an illegal drug on school property* during the 12 months before the survey	21.7%	10.9%		11.9%



Sexual Behavior Summary

The indicator table on page 22 presents the percent of students who are at-risk on Sexual Behavior indicators. The following are highlights from these indicators:

Sexual activity has consistently declined since 2011, including an approximately 40% drop in the percent of high schoolers who have ever had sex and the percent who had sex recently (i.e., within 30 days of taking the survey). In prior administrations, BPS students were far more likely to engage in sexual activity than NYS students, but they are now at about the same likelihood.

Early sexual initiation and having four or more partners have both dropped by more than 50% since 2011. However, BPS students still engage in these risk behaviors more than NYS students.

Many students aren't using condoms when having sex. While sexual activity has declined steadily since 2011, the percent of sexually active students who did not use a condom the last time they had sex has risen each year, increasing by 30% since 2011. On the 2017 survey, about 16% of sexually active BPS high schoolers did not use any method to prevent pregnancy the last time they had sex.

Sexual Behavior Indicators	NYS 2015	BPS HS 2015	BPS Change	BPS HS 2017
Ever had sexual intercourse	30.4%	38.2%	↓	31.1%
Had sexual intercourse before age 13 years	3.7%	7.4%	↓	5.5%
Had sexual intercourse with four or more persons during their life	7.2%	12.3%	↓	8.4%
Recently sexually active had sexual intercourse during the 3 months before the survey	23.6%	27.8%	↓	21.6%
Did not use a condom during last sexual intercourse, among those who were recently sexually active	41.9%	39.5%		40.0%
Did not use birth control pills to prevent pregnancy before last sexual intercourse, among those who were recently sexually active	77.9%	87.1%		87.0%
Did not use any method to prevent pregnancy before or during last sexual intercourse, among those who were recently sexually active	15.1%	14.7%		15.7%
Drank alcohol or used drugs before last sexual intercourse among those who were recently sexually active	24.6%	19.2%		21.1%
Were never taught in school about AIDS or HIV infection⁶	-	16.6%		18.1%
Were never tested for HIV or not sure; not including test done while donating blood	82.0%	79.9%		83.8%



Other YRBS Health Indicators Summary

The indicator table on page 24 presents the percent of students who are at-risk on Other YRBS Health indicators. The following are highlights from these indicators:

BPS high schoolers are more sedentary than NYS high schoolers. Almost 50% report spending 3 or more hours each day playing video games or using a computer (for non-school uses), and over one-quarter spent 3 or more hours watching TV. Only about half play on a sports team, compared with nearly 60% in NYS.

Asthma rates continue to decline, having fallen each year, and by nearly 20% since 2011.

Not enough students are getting a good night's sleep, with two-thirds of high schoolers getting fewer than the recommended 8 hours on an average school night. This rate is better than among NYS high schoolers, but is still worth consideration.

Other YRBS Health Indicators	NYS 2015	BPS HS 2015	BPS Change	BPS HS 2017
Skipped breakfast one or more times during the 7 days before the survey	65.4%	69.6%		66.6%
Skipped breakfast every day during the 7 days before the survey	17.4%	17.2%		18.9%
Not physically active for at least 60 minutes on any day doing physical activity that increased heart rate and made them breathe hard some of the time during 7 days before the survey	18.8%	19.7%		21.4%
Not physically active for at least 60 minutes on 5 or more days during the 7 days before the survey (i.e., engaged in physical activity on less than 5 days)	54.7%	58.4%		57.9%
Played video or computer games or used a computer for 3 or more hours per day³ for something that was not school work; on an average school day	37.2%	48.9%		47.0%
Watched television 3 or more hours per day on an average school day	24.2%	37.7%	↓	28.8%
Did not play on a sports team* run by their school or community groups, during the 12 months before the survey	42.4%	45.0%		47.7%
Received a concussion from playing a sport or being physically active⁴ during 12 months before survey	-	-		17.3%
Ever told by a doctor or nurse that they had asthma	25.6%	23.7%		22.2%
Did not get 8 or more hours of sleep on an average school night	78.1%	66.5%		68.2%
Reported that their overall health is poor⁶	-	1.2%	↑	1.8%



Districtwide High School BPS-Added Questions

The following indicator tables are based on questions added to the YRBS survey by BPS. Because these are not standard YRBS questions, there is no NYS or US comparison data available. Additionally, some of these questions have been significantly changed or are newly added in 2017.

Adverse Childhood Experiences (ACEs)-Like Indicators

In 2015, BPS added five questions about students' exposure to traumatic experiences. Four of these questions were based on concepts addressed through the CDC's Adverse Childhood Experience (ACEs) questionnaire, while a fifth question ("Have you ever seen someone get shot stabbed, or beaten in your neighborhood?") was added to probe a topic of interest to BPS and community partners.

In 2017, BPS added the word "often" to two of these questions and changed the wording of the question about living with someone who was depressed to more closely align with the original items from the ACEs questionnaire. Because of these significant changes, these indicators are not comparable to 2015 results.

ACEs-Like Indicators	BPS HS 2015	BPS HS 2017
Has had a parent or adult in their home often swear at them, insult them or put them down	-	33.1%
Has seen someone get shot, stabbed or beaten in their neighborhood	34.7%	31.6%
Has lived with someone who was depressed or mentally ill, or had a household member attempt suicide	-	19.0%
Has lived with someone who was an alcoholic, problem drinker, used illegal street drugs, took prescriptions drugs to get high or was a problem gambler	23.5%	22.1%
Has had a parent or adult in their home often hit, beat, kick or physically hurt them	-	11.8%



Community Safety Indicators

BPS added two new questions to further probe students' perceptions of safety on their way to and from school. These items were newly added in 2017; therefore, there is no 2015 comparison data.

Additionally, these questions are positively-framed, meaning that higher percentages are desirable (as opposed to other portions of the survey, on which higher percentages indicate greater risk, and are therefore less desirable).

Community Safety Indicators (positively-framed)	BPS HS 2017
Felt safe on their way to school	86.8%
Felt safe on their way home from school	87.3%

Dental Health Indicators

BPS, in partnership with the University at Buffalo School of Dentistry, added several questions about dental health to the survey beginning in 2013.

Dental Health Indicators	BPS HS 2015	BPS HS 2017
Did not brush their teeth <u>every</u> day i.e., did not brush their teeth daily during the 7 days before the survey	28.2%	30.5%
Has not seen a dentist during 12 months before the survey (for any reason)	34.1%	35.7%
Has never seen a dentist	3.0%	↑ 5.1%
Has had pain in mouth during the 12 months before the survey	35.4%	36.7%
Has missed school because of pain in mouth	10.6%	↑ 12.5%



Tobacco, Alcohol, and Drug Use Risk Perception Indicators

These questions were added to the BPS risk survey to help understand students' perceptions of risk and harm associated with tobacco, alcohol, and drug use. The questions were developed for the national evaluation of the federally-funded Drug Free Community (DFC) program, and are reported on by Buffalo State College for the purposes of the local DFC program evaluation.

Similar to the Community Safety Indicators, these indicators are positively-framed. That is, **higher percentages are more desirable.**

Tobacco, Alcohol, and Drug Use Risk Perception Indicators (positively-framed)	BPS HS 2015	BPS HS 2017
Think there is moderate or great risk of people harming themselves physically or in other ways if they smoke one or more pack of cigarettes a day	71.2%	74.8%
Think their <u>parents</u> feel that it would be wrong or very wrong for them to smoke tobacco	87.4%	88.4%
Think their <u>friends</u> feel it would be wrong or very wrong for them to smoke tobacco	66.2%	69.1%
Think there is moderate or great risk of people harming themselves physically or in other ways if they take one or two drinks of an alcoholic beverage nearly every day	64.9%	68.7%
Think there is moderate or great risk of people harming themselves physically or in other ways if they have five or more drinks of an alcoholic beverage once or twice a week	71.0%	73.6%
Think their <u>parents</u> would feel that it would be wrong or very wrong for them to have one or two drinks of an alcoholic beverage nearly every day	83.4%	85.9%
Think their <u>friends</u> would feel that it would be wrong or very wrong for them to have one or two drinks of an alcoholic beverage nearly every day	66.0%	70.4%
Somewhat or strongly disapprove of someone their age having one or two drinks of an alcoholic beverage nearly every day	62.4%	65.1%



Tobacco, Alcohol, and Drug Use Risk Perception Indicators, continued (positively-framed)	BPS HS 2015	BPS HS 2017
Think there is moderate or great risk of people harming themselves physically or in other ways if they smoke marijuana once or twice a week	42.2%	43.7%
Think their <u>parents</u> would feel that it would be wrong or very wrong for them to smoke marijuana	74.3%	74.1%
Think their <u>friends</u> would feel that it would be wrong or very wrong for them to smoke marijuana	46.2%	45.6%
Think there is moderate or great risk of people harming themselves physically or in other ways if they use prescription drugs that are not prescribed to them	74.1%	75.8%
Think their <u>parents</u> would feel that it would be wrong or very wrong for them to use prescription drugs not prescribed to them	85.3%	86.9%
Think their <u>friends</u> would feel that it would be wrong or very wrong for them to use prescription drugs not prescribed to them	77.8%	80.6%
Have talked with at least one parent (or primary caregiver) about the dangers of tobacco, alcohol, or drug use during the past 12 months	42.2%	43.3%



Positive Self-Perception Indicators

BPS added several questions to assess students' positive self-perceptions. These items are positively-framed, with **higher percentages more desirable** than lower percentages.

Positive Self-Perception Indicators (positively-framed)	BPS HS 2015	BPS HS 2017
Feel in control of their life and future	66.0%	63.2%
Feel good about themselves	64.4%	63.3%
Care about school	66.5%	67.6%
Plan ahead and make good choices	68.1%	68.0%
Feel valued and appreciated by others	56.5%	56.1%
Accept people who are different from them	81.5%	83.9%
Take responsibility for what they do	76.2%	78.4%
Enjoy learning	58.0%	59.2%
Feel good about their future	71.1%	70.5%
Resist bad influences	64.5%	64.7%
Resolve conflicts without anyone getting hurt	60.5%	62.1%



Living Situation Indicators

In 2017, BPS developed and added questions asking students about whether they were a parent (and if so, if their child lived with them), where they slept the night before taking the survey⁷, and whether their parent also slept in that same location with them. These questions were asked for the first time in 2017; therefore, there are no comparison data.

Parenting and Living Situation Indicators	BPS HS 2017
Is a parent	3.5%
-If <u>yes</u> , has their own child(ren) living with them	25.0%
Has a parent/guardian sleeping in same location as them	92.6%

Where did you sleep last night?	BPS HS 2017
In family's house/apartment with parents/guardians	72.2%
In own house/apartment not with parents/guardians	4.1%
A temporary location with friends, relatives, or other people e.g. "couch-surfing"	1.6%
At a shelter	0.9%
In transitional housing or an independent living program	0.4%
At a motel	0.3%
In a car, tent, park, bus or train station, abandoned building, or other public place	0.7%
Missing/Did not answer	19.8%

⁷ Students were instructed to "check all that apply" when answering this question, but the survey was formatted to only allow one answer selection.



Self-Identification Indicators

Beginning in 2015, BPS asked two questions related to student sexual orientation and gender identity⁸. The question asking students to identify their sexual orientation was added to the 2015 YRBS by the CDC.

Which of the following best describes you?	BPS High Schools 2015	BPS High Schools 2017
Heterosexual (straight)	78.4%	70.0%
Gay or Lesbian	2.2%	3.2%
Bisexual	8.5%	9.9%
Not Sure	6.2%	8.9%
Missing/Did not answer	4.8%	8.0%

BPS also added a question about gender identity, which was developed by and asked on the Massachusetts School-Based Health Survey.

A transgender person is someone whose biological sex at birth does not match the way they think or feel about themselves. Are you transgender?	BPS High Schools 2015	BPS High Schools 2017
No, I am not transgender	89.4%	72.7%
Yes, I am transgender and I think of myself as really a boy	0.7%	1.1%
Yes, I am transgender and I think of myself as really a girl	0.6%	1.2%
Yes, I am transgender and I think of myself in some other way	0.6%	0.9%
I do not know if I am transgender	0.8%	1.2%
I do not know what this question is asking	3.2%	3.2%
Missing/Did not answer	4.7%	19.7%

⁸ Because of the large percent of missing responses to these questions in 2017, the data may not be comparable to 2015 responses.



Reasons for Absence from School

Since the 2011 administration, BPS has asked students to identify the top three reasons that they were absent from school during the prior year. The table below shows the percent of students indicating the reason for absences from school (students were instructed to select the top three reasons that they were absent from school, but they were able to select as many as they wanted; therefore, the total does not equal 100%).

This year, BPS added more reasons for absence; therefore, these results should not be compared to results from prior years. In addition, many students who selected “I was not absent from school” also identified reasons for having been absent from school. For these reasons, these results should be interpreted with caution.

Percent of Respondents Indicating Reasons for Absences from School	BPS High Schools 2015	BPS High Schools 2017
Had an appointment (doctor, dentist, therapist, etc.)	-	49.3%
Illness	52.9%	44.8%
Overslept or alarm did not go off	-	30.6%
Transportation Issue	23.8%	15.3%
Funeral or family/close relative's death	-	14.1%
Caring for family member(s)	23.3%	12.2%
Suspension	12.3%	10.7%
School work is not interesting	13.9%	9.7%
Tooth pain or dental related problem	8.6%	6.9%
Worried about what teachers or other adults may say or do to me because of my school performance	4.7%	3.6%
School feels too unsafe	3.2%	3.0%
Embarrassed about school performance	3.4%	2.9%
Pregnant or parenting	2.2%	1.9%
I was not absent from school	22.6%	9.5%



Appendix A: YRBS Indicator Data and Trends from 2011 through 2017

The following table shows the percent of BPS high schoolers who indicated risk on each 2017 YRBS indicator at the 2011, 2013, 2015, and 2017 administration of the survey. Following these data, a symbol indicating the overarching trend is presented, followed by the percent change between 2011 and 2017 (or 2013 and 2017, where 2011 data are not available). Explanations of the trend symbols used are presented in the table below.

Key to Trend Symbols

Symbol	Meaning
	Percent of students indicating risk declined each year for all years.
	Percent is lower in 2017 than in 2011, and is on a downward trend (i.e., declined most years).
	Percent was increasing, but declined in 2017, and is now lower than in 2011.
	There has been little change between 2011 and 2017, with fluctuations in interceding years.
	Percent was declining, but increased in 2017, and is now higher than in 2011.
	Percent is higher in 2017 than in 2011, and is on an upward trend (i.e., increased most years).
	Percent of students indicating risk increased each year for all years.

When data are not available (because the indicator was not included on the survey, or the 2017 wording has changed significantly so the data are no longer comparable to prior versions), a “-“ appears.

Unintentional Injuries and Violence Indicators	BPS 2011	BPS 2013	BPS 2015	BPS 2017	Trend	% Change
Rarely or never wore a bicycle helmet among students who had ridden a bicycle during the 12 months before the survey	90.2%	86.3%	85.5%	81.1%	↓	-10.1%
Rarely or never wore a seat belt when riding in a car	11.9%	11.5%	10.0%	11.6%	≈	-2.5%
Rode with a driver who had been drinking alcohol during the 30 days before the survey	20.1%	17.6%	16.2%	15.7%	↓	-21.9%
Drove a car when drinking alcohol among students who had driven a car or other vehicle; during the 30 days before the survey	4.1%	-	-	5.7%		
Texted or e-mailed while driving a car among students who had driven a car or other vehicle; during the 30 days before the survey	-	22.0%	21.1%	16.9%	↓	-23.3%
Carried a weapon such as a gun, knife, or club; during the 30 days before the survey	12.5%	10.3%	12.5%	11.7%	≈	-6.4%
Carried a gun during the 12 months before the survey	-	-	-	3.0%		
Carried a weapon on school property such as a gun, a knife, or club; during the 30 days before the survey	4.6%	4.2%	3.3%	3.5%	↓	-23.9%
Threatened or injured with a weapon on school property such as a gun, knife, or club; during the 12 months before the survey	9.0%	8.4%	5.9%	7.7%	↓	-14.4%
In a physical fight during the 12 months before the survey	37.7%	32.4%	28.5%	25.9%	↓	-31.3%
Injured in a physical fight injuries had to be treated by a doctor or nurse; during the 12 months before the survey	5.4%	5.2%	4.5%	5.2%	≈	-3.7%
In a physical fight on school property during the 12 months before the survey	13.2%	12.5%	10.3%	10.4%	↓	-21.2%
Did not go to school because they felt unsafe at school or on their way to or from school during the 30 days before the survey	8.2%	8.1%	7.7%	9.5%	↻	15.9%
Bullied electronically including through texting, Instagram, Facebook, or other social media; during the 12 months before the survey	11.1%	10.8%	9.5%	10.9%	≈	-1.8%
Bullied on school property during the 12 months before the survey	13.6%	13.4%	12.4%	14.0%	≈	2.9%
Ever physically forced to have sexual intercourse when they did not want to	7.4%	8.2%	6.5%	6.4%	↓	-13.5%
Forced to do unwanted sexual things including kissing, touching, or being physically forced to have sexual intercourse, during 12 months before the survey	-	-	-	8.4%		
Experienced physical dating violence physically hurt on purpose by someone they were dating or going out with, among those who were dating or going out with someone during the 12 months before the survey	-	12.6%	12.2%	10.6%	↓	-16.0%
Experienced sexual dating violence unwanted kissing, touching, or being physically forced to have sexual intercourse when they did not want to by someone they were dating or going out with, among those who were dating or going out with someone during the 12 months before the survey	-	-	8.9%	9.7%		
Felt sad or hopeless almost every day for 2 or more weeks in a row so that they stopped doing some usual activities; during the 12 months before the survey	27.8%	28.5%	25.7%	28.2%	≈	1.4%
Seriously considered attempting suicide during the 12 months before the survey	13.7%	13.8%	13.2%	15.2%	↗	10.9%
Made a plan about how they would attempt suicide during the 12 months before the survey	10.2%	11.2%	10.7%	12.4%	↗	21.6%
Attempted suicide during the 12 months before the survey	9.6%	10.2%	9.2%	8.8%	≈	-8.3%
Suicide attempt resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse during the 12 months before the survey	2.7%	3.6%	2.7%	3.3%	≈	22.2%

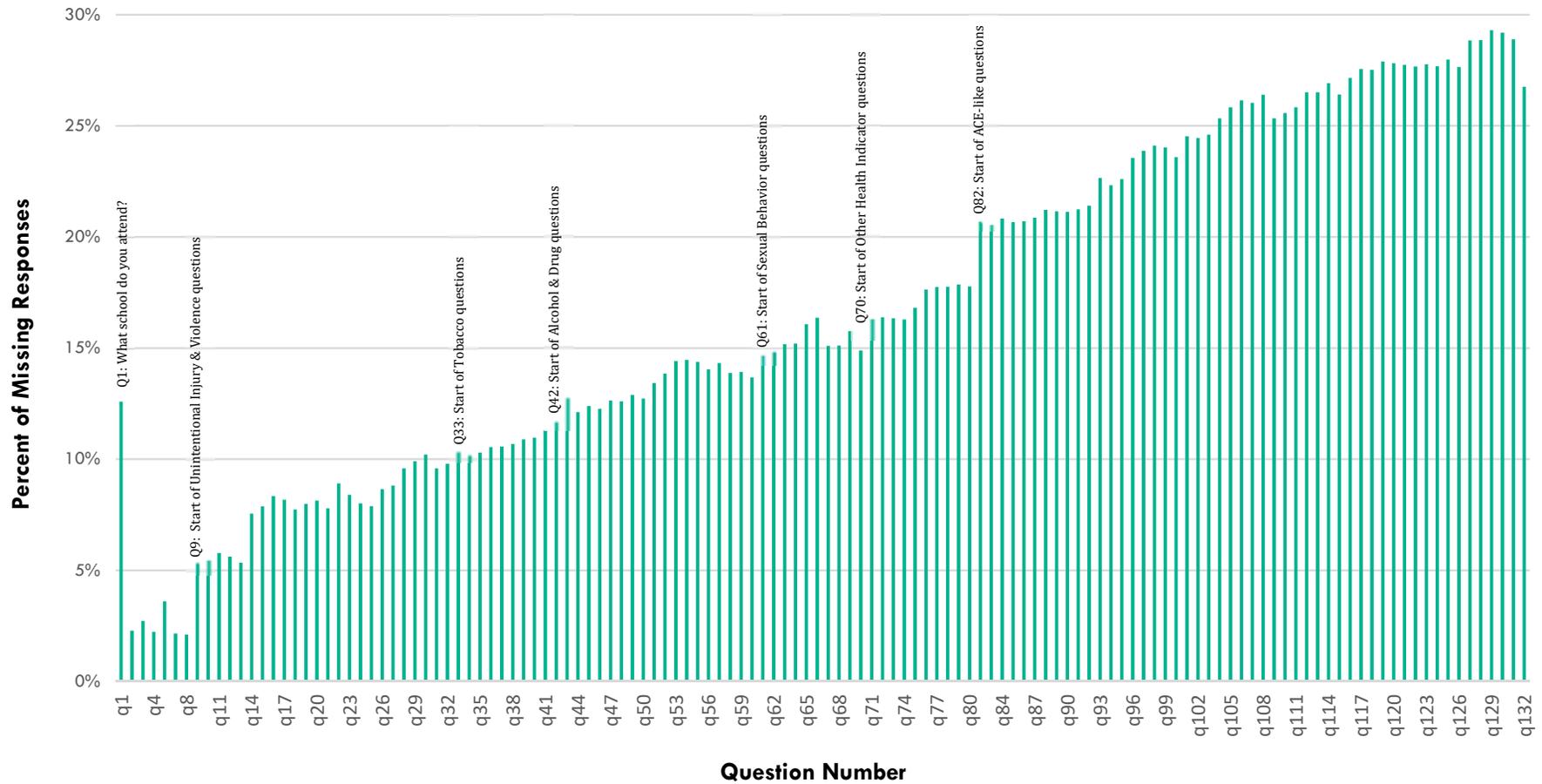
Tobacco Use Indicators	BPS 2011	BPS 2013	BPS 2015	BPS 2017	Trend	% Change
Ever tried cigarette smoking even one or two puffs	30.9%	26.7%	20.4%	16.2%	↓	-47.6%
Tried smoking before age 13 even one or two puffs	-	-	-	7.2%		
Recently smoked cigarettes smoked at least one cigarette during the 30 days before the survey	10.1%	7.7%	5.7%	4.1%	↓	-59.4%
Recently smoked cigarettes frequently smoked on 20 or more days during the 30 days before the survey	4.2%	2.9%	2.2%	1.2%	↓	-71.4%
Smoked cigarettes on all 30 days during the 30 days before the survey	-	2.4%	1.9%	1.0%	↓	-58.3%
Engaged in heavy smoking smoked more than 10 cigarettes per day on the days they smoked, among students who recently smoked cigarettes; during the 30 days before the survey	9.6%	13.4%	12.0%	16.5%	↗	71.9%
Recently used smokeless tobacco used chewing tobacco, snuff, dip, snus or dissolvable tobacco products (but not electronic vapor products) during the 30 days before the survey	2.7%	3.1%	2.8%	3.0%	~	11.1%
Recently smoked cigars, cigarillos, or little cigars smoked these products during the 30 days before the survey	7.0%	7.1%	7.4%	5.4%	↻	-22.9%
Recently used <u>any</u> tobacco used cigarettes, smokeless tobacco, or cigars during 30 days before the survey	-	11.9%	10.8%	7.8%	↓	-34.5%
Ever used an electronic vapor product such as e-cigarettes, e-cigars, e-pipes, vape pipes, vaping pens, e-hookahs, and hookah pens	-	-	29.6%	28.3%		
Recently used an electronic vapor product used an electronic vapor product during the 30 days before the survey	-	-	14.7%	7.4%		
Did not try to quit all tobacco products including cigarettes, cigars, shisha or hookah tobacco, and electronic vapor products (among those who used tobacco products during past 12 months)	-	-	-	53.6%		

Alcohol and Drug Use Indicators	BPS 2011	BPS 2013	BPS 2015	BPS 2017	Trend	% Change
Ever had at least one drink of alcohol	57.7%	50.9%	40.2%	36.7%	↓	-36.4%
Drank alcohol for the first time before age 13 other than a few sips	17.6%	14.9%	11.9%	12.8%	↘	-27.3%
Recently drank alcohol during the 30 days before the survey	29.5%	25.7%	17.1%	15.7%	↓	-46.8%
Recently engaged in binge drinking had 5 or more (for males) or 4 or more (for females) drinks of alcohol in a row on at least one day during the 30 days before the survey	15.3%	12.7%	8.8%	7.6%	↓	-50.3%
Recently had 10 or more drinks in a row during the 30 days before the survey	-	3.2%	1.6%	1.9%	↘	-40.6%
Usually obtained the alcohol they drank by someone giving it to them among students who drank alcohol during the 30 days before the survey	35.8%	38.3%	38.5%	38.8%	↗	8.4%
Ever used marijuana	38.1%	37.1%	33.2%	30.8%	↓	-19.2%
Tried marijuana for the first time before age 13 years	10.0%	9.7%	9.0%	8.9%	↓	-11.0%
Recently used marijuana during the 30 days before the survey	24.8%	22.8%	21.2%	19.9%	↓	-19.8%
Ever used synthetic marijuana such as K2, Spice, fake weed, King Kong, Yucatan Fire, Skunk, or Moon Rocks	-	-	5.5%	5.1%		
Ever used cocaine including any form of cocaine, such as powder, crack, or freebase	3.0%	3.1%	3.1%	3.7%	↑	23.3%
Ever used inhalants sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high	6.6%	5.8%	5.1%	5.8%	≈	-12.1%
Ever used ecstasy	4.4%	3.8%	3.3%	3.3%	↘	-25.0%
Ever used heroin	1.9%	2.3%	2.1%	2.7%	↗	42.1%
Recently used heroin during the 30 days before the survey	-	-	1.4%	1.8%		
Ever used methamphetamines	2.1%	2.1%	2.2%	2.9%	↗	38.1%
Ever took steroids without a doctor's prescription	2.7%	2.3%	2.6%	3.1%	↗	14.8%
Ever took prescription drugs without a doctor's prescription or differently than prescribed by a doctor such as codeine, Vicodin, OxyContin, Hydrocodone, and Percocet	7.4%	6.6%	6.4%	6.1%	↓	-17.6%
Recently took prescription drugs without a doctor's prescription during the 30 days before the survey	-	-	2.0%	3.0%		
Ever injected any illegal drug	1.8%	1.8%	1.6%	2.5%	↻	38.9%
Offered, sold, or given an illegal drug on school property during the 12 months before the survey	16.4%	13.9%	10.9%	11.9%	↘	-27.4%

Sexual Behavior Indicators	BPS 2011	BPS 2013	BPS 2015	BPS 2017	Trend	% Change
Ever had sexual intercourse	51.1%	44.6%	38.2%	31.1%	↓	-39.1%
Had sexual intercourse before age 13 years	11.8%	10.2%	7.4%	5.5%	↓	-53.4%
Had sexual intercourse with four or more persons during their life	20.3%	16.5%	12.3%	8.4%	↓	-58.6%
Recently sexually active had sexual intercourse during the 3 months before the survey	37.9%	33.3%	27.8%	21.6%	↓	-43.0%
Did not use a condom during last sexual intercourse, among those who were recently sexually active	30.8%	35.5%	39.5%	40.0%	↑	29.9%
Did not use birth control pills to prevent pregnancy before last sexual intercourse, among those who were recently sexually active	89.3%	87.1%	87.1%	87.0%	~	-2.6%
Did not use any method to prevent pregnancy before or during last sexual intercourse, among those who were recently sexually active	-	14.7%	14.7%	15.7%	↗	6.8%
Drank alcohol or used drugs before last sexual intercourse among those who were recently sexually active	23.4%	24.5%	19.2%	21.1%	~	-9.8%
Were never taught in school about AIDS or HIV infection	16.2%	17.2%	16.6%	18.1%	~	11.7%
Were never tested for HIV or not sure; not including test done while donating blood	-	77.0%	79.9%	83.8%	↑	8.8%
Other YRBS Health Indicators	BPS 2011	BPS 2013	BPS 2015	BPS 2017	Trend	% Change
Skipped breakfast one or more times during the 7 days before the survey	-	69.5%	69.6%	66.6%	~	-4.2%
Skipped breakfast every day during the 7 days before the survey	-	17.5%	17.2%	18.9%	~	8.0%
Not physically active for at least 60 minutes on any day doing physical activity that increased heart rate and made them breathe hard some of the time during 7 days before the survey	17.3%	20.0%	19.7%	21.4%	↗	23.7%
Not physically active for at least 60 minutes on 5 or more days during the 7 days before the survey (i.e., engaged in physical activity on less than 5 days)	59.5%	63.1%	58.4%	57.9%	~	-2.7%
Played video or computer games or used a computer for 3 or more hours per day for something that was not school work; on an average school day	33.4%	39.2%	48.9%	47.0%	↗	40.7%
Watched television 3 or more hours per day on an average school day	43.4%	42.1%	37.7%	28.8%	↓	-33.6%
Did not play on a sports team run by their school or community groups, during the 12 months before the survey	42.0%	41.8%	45.0%	47.7%	↗	13.6%
Received a concussion from playing a sport or being physically active during 12 months before survey	-	-	-	17.3%		
Ever told by a doctor or nurse that they had asthma	27.2%	25.2%	23.7%	22.2%	↓	-18.4%
Did not get 8 or more hours of sleep on an average school night	-	68.1%	66.5%	68.2%	~	0.1%
Reported that their overall health is poor	-	-	1.2%	1.8%		

Appendix B: Missing Responses

This chart shows the percent of missing responses to each survey item⁹, prior to individual item validation.



⁹ Questions with multiple response options (i.e., “What is your race?” and Reasons for Absence) are not included in this chart.



Appendix C: Invalid Surveys

The following table presents the total number of surveys completed by school, along with the number and percent of those surveys that were invalid after CDC validity checks were conducted. The number of valid surveys by school are listed in the Response Rates table within the body of this report.

High School Total and Invalid Survey Counts

School	Total Number of Surveys	Number of Invalid Surveys	Percent of Surveys Invalidated
PS 195 City Honors School	554	16	3%
PS 156 Frederick Law Olmstead	401	23	6%
PS 302 Emerson School of Hospitality	459	38	8%
PS 363 Lewis J Bennett School of Innovative Technology and PS 363 Research Lab Program for Bioinformatics & Life Sciences	210	14	7%
PS 335 Middle Early College High School	263	10	4%
PS 192 Buffalo Academy of Visual & Performing Arts	386	17	4%
PS 304 Hutchinson Central Technical High School	845	46	5%
PS 212 Leonardo da Vinci High School	266	11	4%
PS 353 Newcomer Academy @ Lafayette	174	34	20%
PS 301 Burgard High School	310	25	8%
PS 198 International Preparatory School	434	32	7%
PS 205 Riverside Institute of Technology and PS 208 Riverside Academy	187	7	4%
PS 355 Emerson Annex @ 28	181	16	9%
<i>PS 206 South Park High School</i>	435	29	7%
<i>PS 307 East High School and PS 309 East Community High School</i>	110	3	3%
<i>PS 204 Lafayette High School and PS 207 Lafayette Academy</i>	133	19	14%



School	Total Number of Surveys	Number of Invalid Surveys	Percent of Surveys Invalidated
<i>PS 305 McKinley High School</i>	401	27	7%
<i>PS 357 Pathways Academy @ East</i>	30	0	0%
<i>PS 197 Math, Science and Technology Prep</i>	160	14	9%
Other/Missing	893	198	22%
Total	6832	579	8%



Appendix D: Key to Indicator Tables

This page is intended to be used by report readers while reviewing the indicator tables on pages 14 through 32. Detailed explanations of the keys are included elsewhere in the report.

Key to Color Coding (shows difference between BPS and NYS)

BPS has Lower Risk than NYS	BPS has Higher Risk than NYS
0% to -10% Difference (no color)	0% to 10% Difference (no color)
-11% to -40% Difference	11% to 40% Difference
-41% to -70% Difference	41% to 70% Difference
-71% or Larger Difference	71% or Larger Difference

Key to Arrows (shows change in BPS results from 2015 to 2017)

Percent Change from 2015 to 2017	Meaning	Symbol
Increase of 10% or more	Increased Risk	↑
Percent Change of -9.9% to 9.9%	Little or No Change	(no symbol)
Decrease of 10% or more	Decreased Risk	↓

YRBS Indicator Table Notations (information related to questions/indicators)

Superscript	Meaning
*	Comparison data from US (NYS Data not available)
1	Question not included in BPS 2015 YRBS.
2	Significant change to question wording; no comparison data available.
3	Slight change to question wording; 2017 data may not be comparable to 2015 data.
4	Newly-added question in 2017.
5	Data from a BPS-added question incorporated into YRBS section.
6	No longer a YRBS question (but still asked by BPS); no comparison data available.