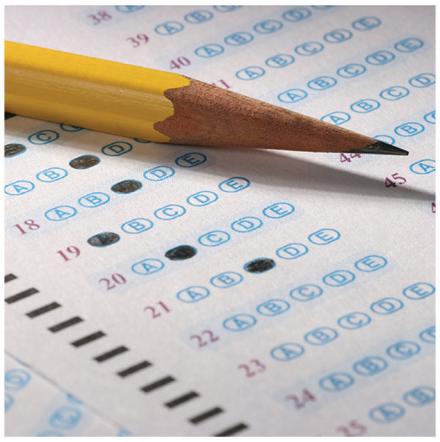
2015-16 NEW JERSEY MIDDLE SCHOOL RISK & PROTECTIVE FACTOR SURVEY

New Jersey Department of Human Services
Division of Mental Health and Addiction Services



2015-2016 New Jersey Middle School Risk and Protective Factor Survey

Prepared for:

New Jersey Department of Human Services
Division of Mental Health and Addiction Services

Prepared by:

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Executive Summary of Findings

Background

In July 2015, the New Jersey Department of Human Services (NJ DHS), Division of Addiction Services (DAS) contracted with the Edward J. Bloustein School of Planning and Public Policy, Bloustein Center for Survey Research (BCSR) at Rutgers University to conduct the 2015-2016 New Jersey Middle School Risk and Protective Factor Survey (NJ MS RPFS). The NJ MS RPFS continues efforts begun in 1999 to determine risk and protective factor items associated with substance use for New Jersey youth. County-level and municipal-level substance abuse coordinators will use the findings to evaluate needs for schools and communities, help plan prevention and intervention programs, and provide outcome measures to reduce adolescent gambling and alcohol, drug, and tobacco use.

The 2015-2016 NJ MS RPFS is a 69-item questionnaire that contains risk and protective factor items that show the strongest correlations to drug use, including the students' feelings about school and their neighborhood; participation in extracurricular activities; and membership in gangs. In addition, the NJ MS RPFS includes students' self-reported and peer use of tobacco, alcohol, and drugs and the availability of such substances.

Data from the New Jersey Middle School Risk and Protective Factor Survey is highly comparable to other concurrent survey initiatives, such as:

- the Youth Tobacco Survey, conducted by the New Jersey Department of Health (NJDOH), New Jersey Office of Tobacco Control; and
- the New Jersey Student Health Survey, previously known as the Youth Risk Behavior Survey, conducted by the New Jersey Department of Education (NJDOE).

Study Methods and Participation Rates

BCSR conducted the surveys with a target sample of 104 middle schools randomly selected throughout the state. The sample of schools was stratified by county. BCSR used a multi-stage sampling design. For middle schools, a sampling ratio of 1-to-6 schools was used with a minimum of three schools when a county had 17 or fewer schools. The final *participating* sample included 59 middle schools with the forecasted school participation goals achieved in eleven of the 21 counties. More detailed information can be found in a technical report on the administration of the 2015-2016 survey, entitled "*2015-16 New Jersey Risk and Protective Factor Middle School Survey Technical Report: Weighting Procedures and Statistical Tabulations"* provided to the NJDOH/DMHAS by BCSR.

It should be noted that the administration of the survey was conducted under standards established by state law *N.J.S.A.* 18A:36-34 which requires active parental consent for student participation – meaning that students could only participate if they returned a signed consent form from a parent/guardian. Overall, 68% of students returned a form that permitted participation; 6% returned a form that did not consent to participation, and 27% did not return a form at all.

In prior years, response rates on the NJ DHS DMHAS administration of the 'Communities that Care' survey, response rates were a concern. In 2003, the school participation rate of 32.2% and student response rate of 40.2% led to an overall participation rate of 12.9%. In both 2006-07 and 2009-10, BCSR improved these response rates considerably - obtaining school participation rates of 55.9% and 70.7%, respectively and student response rates of 64.4% and 73.7%, respectively, which led to overall participation rates of 36.0% and 52.1%, respectively. In 2011-12 response rates were in between the previous two administrations, with a school participation rate of 59.3% and a student participation rate of 68.6%, which led to an overall participation rate of 40.6%. The 2015-16 survey administration saw a drop in both the school and student participation rates. With 59 of 129 eligible schools participating (45.7% school

participation rate) and 4,640 of 7,066 students returning a completed questionnaire (65.7% student participation rate), the final overall survey response rate was 30.03% (school rate * student rate).

Further, an adequate overall response rate was not reached in ten of 21 counties. The cut-off rate for adequate performance was determined by the mean for all counties (30.35%). Any county whose performance was less than this point is presented in the list below and is marked with an asterisk(*) throughout this report. Results for these counties should not be considered as representative of the county overall. These counties are marked with an asterisk (*) throughout this report and their results should be interpreted with caution: Mercer* (8.6%), Burlington* (10.4%), Morris* (11.7%), Bergen* (14.6%), Atlantic* (19.6%), Cumberland* (22.0%), Sussex* (26.2%), Camden* (26.8%), Hunterdon* (27.7%), and Hudson* (29.1%). Details on participation rates by county can be found in Table 1 in the Introduction. In addition, because of extremely low rates in Mercer, Burlington, Morris and Bergen counties, these counties are not noted in this report and their results are hidden in the appendices.

While the overall participation rates obtained in the study are improvements on the prior administrations of the "Communities that Care" survey, they are lower than those rates generally regarded as acceptable to considering results as representative to a broader population. For example, CDC requires a 60% overall response rate on its Youth Risk Behavior Survey as a cut-off for having data weighted to the state's student population. Therefore, the possibility exists that a participation bias at either the school and/or student level may impact the results of the study. State, county and community representatives should consider these response rates and their potential bias on results when using the NJ MS RPFS report in any prevention planning efforts.

Profile of Middle School Students

Overall, 4,562 of the 4,640 completed surveys (98.3%) were eligible for analysis. Reasons for ineligibility include the following:

- incomplete surveys (answering less than 60% of the survey questions),
- use of *xallapax* (a fictitious drug used in questionnaires to test the reliability of answers received by students),
- or two or more inconsistent affirmative responses to drug questions (e.g., indicating use of a drug in the last 30 days and indicating *no use* in the last 12 months).

Table ES-1 shows the distribution of survey respondents by demographic subgroups. Based on weighted demographic data, the students were evenly split between 7th grade (49.0%) and 8th grade (51.0%). Survey respondents were evenly split between males (50.8%) and females (49.2%). Based on weighted demographic data, 49.6% were White, 20.8% were Hispanic or Latino (including Hispanics who also identified with a race or multiple races),13.6% were Black or African-American, 8.9% were Asians or Native Hawaiian/Pacific Islanders and 7.1% were Other (including American Indian/Alaskan Natives and non-Hispanic students who identified with multiple races).

Table ES-1: ***Profile of Middle School Students in the 2015-16 New Jersey Middle School Risk and Protective Factor Survey***

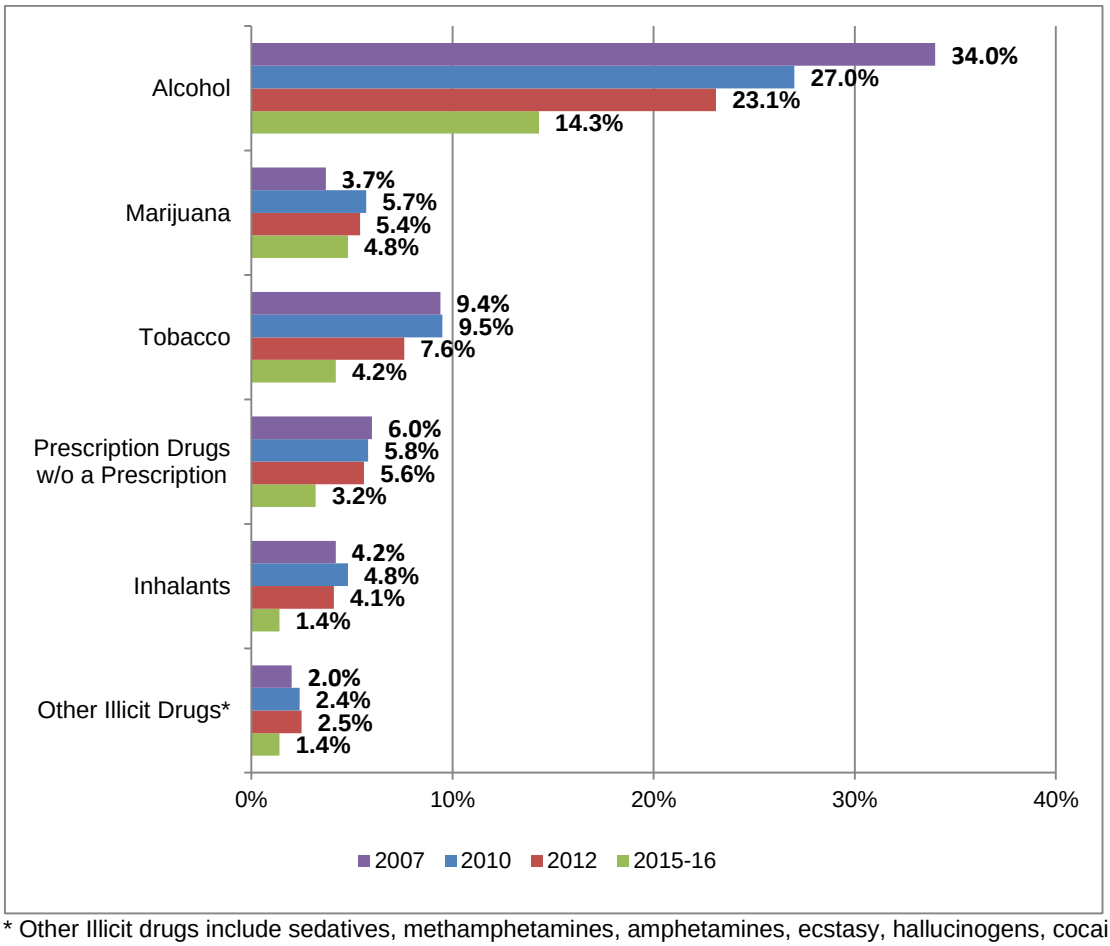
	Demographic Group	Sample (n)	Sample %	Weighted %
GENDER	Female	2460	54.7	49.2
	Male	2038	45.3	50.8
GRADE	7th	2395	52.6	49.0
	8th	2156	47.4	51.0
RACE/ETHNICITY	White	2259	49.9	49.6
	African-American	425	9.4	13.6
	Hispanic/Latino	1229	27.1	20.8
	Asian	272	6.0	8.9
	Other	344	7.5	7.1

Findings on Alcohol, Tobacco, and Other Drug Use

This section presents findings from the *2015-2016 New Jersey Middle School Risk and Protective Factor Survey* on lifetime, annual, and recent use of alcohol, tobacco, and other drugs. Specifically, students were asked how many times in their lifetime, in the past 12 months, and in the past 30 days they had used the substance. Figure ES-1 on this page depicts lifetime prevalence, whereas the following pages include Figure ES-2, which depicts annual use, and Figure ES-3, which depicts past 30 day use.

Notable findings on the prevalence and frequency of use of the five most used substances by New Jersey youth (alcohol, tobacco, prescription drugs, marijuana, and inhalants) are presented in the text below Figures ES-1 through ES-3. These findings are disaggregated by grade, gender, race/ethnicity, county, and compared to the previous survey. It is important to note that caution should be taken when interpreting the results from specific counties due to the relatively small number of participants from each county.

Figure ES-1: *Summary of Lifetime Substance Use for NJ Middle School Students*



* Other Illicit drugs include sedatives, methamphetamines, amphetamines, ecstasy, hallucinogens, cocaine, heroin, OxyContin, club drugs, and steroids.

Notable Differences by Grade

More 8th grade students than 7th grade students reported lifetime use of the following substances:

- Alcohol (20.6% vs. 7.9%).
- Cigarettes (6.7% vs. 1.7%).
- Marijuana (7.8% vs. 1.7%).

Notable Differences by Gender

- Females were slightly more likely to report lifetime marijuana use than males (6.3% vs. 3.2%).
- Females were slightly more likely to report lifetime prescription drug use without a prescription than males (4.1% vs. 2.3%).

Notable Differences by Race/Ethnicity

- Hispanic students reported a higher rate of lifetime alcohol use than African-American, White, and Asian students (20.2% vs. 16.4%, 13.1%, and 5.6%, respectively).
- Hispanic and African-American students were more than twice as likely as Asian and White students to report lifetime prescription drug use without a doctor's prescription (5.8% and 5.3% vs. 2.5% and 1.7%, respectively).

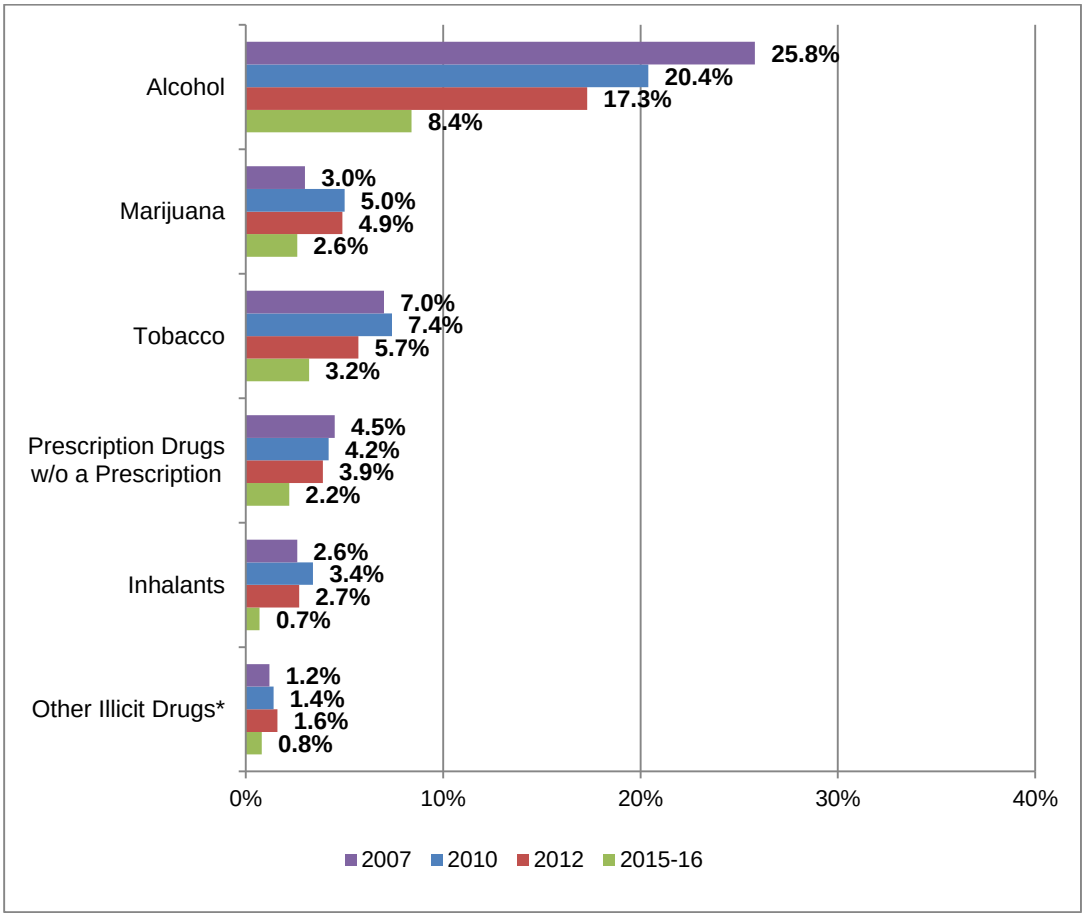
Notable Differences by County

- Camden* County had the highest lifetime alcohol use rate (20.9%), followed by Atlantic* County (20.4%). The lowest lifetime rate was found in Hunterdon County (6.2%).
- Salem county (6.3%) reported the highest rate for lifetime cigarette smoking while Hunterdon County (0.3%) had the lowest rate.
- Atlantic* and Salem counties (6.7% each) had the highest lifetime rate of marijuana use whereas Hunterdon* County had the lowest lifetime marijuana rate (1.1%).
- Union County had the highest lifetime use of prescription drugs (5.1%) and Warren County had the lowest rate (0.0%).

Notable Differences by Year of Survey

- Between 2012 and 2015-16, lifetime alcohol consumption decreased from 23.1% to 14.3%.
- Between 2007 and 2015-16, lifetime alcohol consumption decreased from 34.0% to 14.3%.
- Lifetime smoking decreased from 7.6% to 4.2% between 2012 and 2015-16.
- Lifetime smoking decreased from 9.4% to 4.2% between 2007 and 2015-16.

Figure ES-2: *Summary of Annual Substance Use for NJ Middle School Students*



* Other Illicit drugs include sedatives, methamphetamines, amphetamines, ecstasy, hallucinogens, cocaine, heroin, OxyContin, club drugs, and steroids.

Notable Differences by Grade

More 8th grade students than 7th grade students reported annual use of the following substances:

- Alcohol (11.9% vs. 4.8%).
- Cigarettes (5.3% vs. 0.9%).
- Marijuana (3.8% vs. 1.5%).
- Prescription drugs without a doctor's prescription (2.7% vs 1.6%).

Notable Differences by Gender

- Females were more likely than males to report annual cigarette use (4.6% vs. 1.7%).

Notable Differences by Race/Ethnicity

- Hispanic students reported a much higher rate of annual alcohol use than African-American, White, and Asian students (14.0% vs. 8.5%, 7.0%, and 3.1%, respectively).
- A slightly greater proportion of White students reported annual smoking than African-American, Hispanic, and Asian students (4.2% vs. 3.0%, 2.9%, and 0.2%, respectively).

- More African-American and Hispanic students reported annual marijuana use than White and Asian students (5.2% and. 5.0% vs. 1.4%, and 0.0%, respectively).
- African-American and Hispanic students (4.1% and 3.5%, respectively) were slightly more likely to report use of prescription drugs than Asian and White students (1.9%, and 1.1%, respectively).

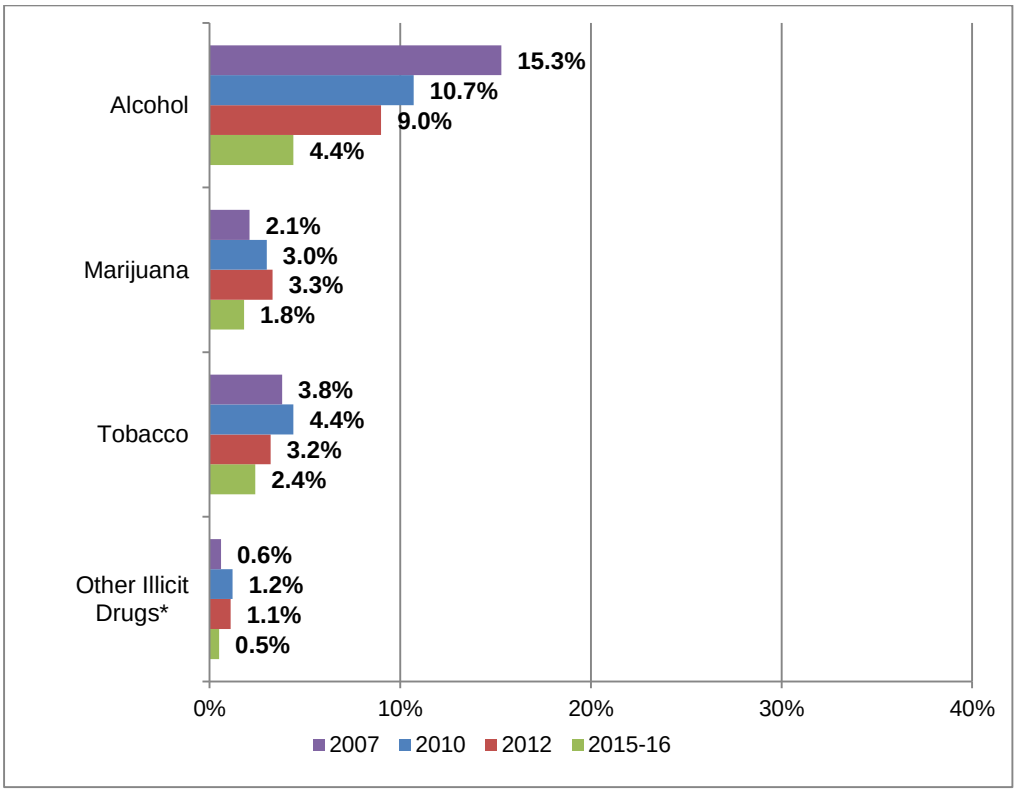
Notable Differences by County

- Atlantic* County had the highest annual alcohol use rate (14.7%), while Sussex* County had the lowest rate (3.3%).
- The highest rates for annual cigarette smoking were found in Salem (3.7%), Atlantic* (3.4%), and Gloucester counties (3.0%), while the lowest rates were reported in Hunterdon* and Somerset counties (0.3% each).
- Salem County had the highest annual rate of the use of marijuana (5.8%).
- Atlantic*, Hudson*, and Passaic counties had the highest annual rates of prescription drug use (3.3% each).

Notable Differences by Year of Survey

- Annual alcohol use decreased from 17.3% to 8.4% between 2012 and 2015-16.
- Annual alcohol use decreased from 25.8% to 8.4% between 2007 and 2015-16.
- Marijuana use in the past year decreased from 4.9% to 2.6% between 2012 and 2015-16.

Figure ES-3: *Summary of Past 30 Day Substance Use for NJ Middle School Students*



* Other Illicit drugs include sedatives, methamphetamines, amphetamines, ecstasy, hallucinogens, cocaine, heroin, OxyContin, club drugs, and steroids.

Notable Differences by Grade

More 8th grade students than 7th grade students reported past 30 day use of the following substances:

- Alcohol (6.4% vs. 2.2%).
- Cigarettes (4.2% vs. 0.6%).
- Marijuana (2.5% vs. 1.1%).

Notable Differences by Gender

- Females were more likely than males to smoke cigarettes in the past 30 days (4.1% vs. 0.2%).

Notable Differences by Race/Ethnicity

- Hispanic students reported a higher rate of past 30-day alcohol use than White, African-American, and Asian students (7.3% vs. 3.9%, 3.4%, and 1.4%, respectively).
- White students reported a higher rate of smoking cigarettes in the past 30 days than African-American, Hispanic, and Asian Students (3.7% vs. 1.8%, 1.6%, and 0.2%, respectively).

Notable Differences by County

- Gloucester and Salem counties had the highest past 30 day alcohol use rate (9.9% each), more than four times higher than the findings for the county with the lowest reported rate, Warren County (1.8%).
- Salem County (4.9%) reported the highest rate of past 30 day marijuana use, while Warren County (0.0%) had the lowest rate.

Notable Differences by Year of Survey

- Between 2012 and 2015-16, past 30-day alcohol use decreased from 9.0% to 4.4%.
- Between 2007 and 2015-16, past 30-day alcohol use decreased from 15.3% to 4.4%.

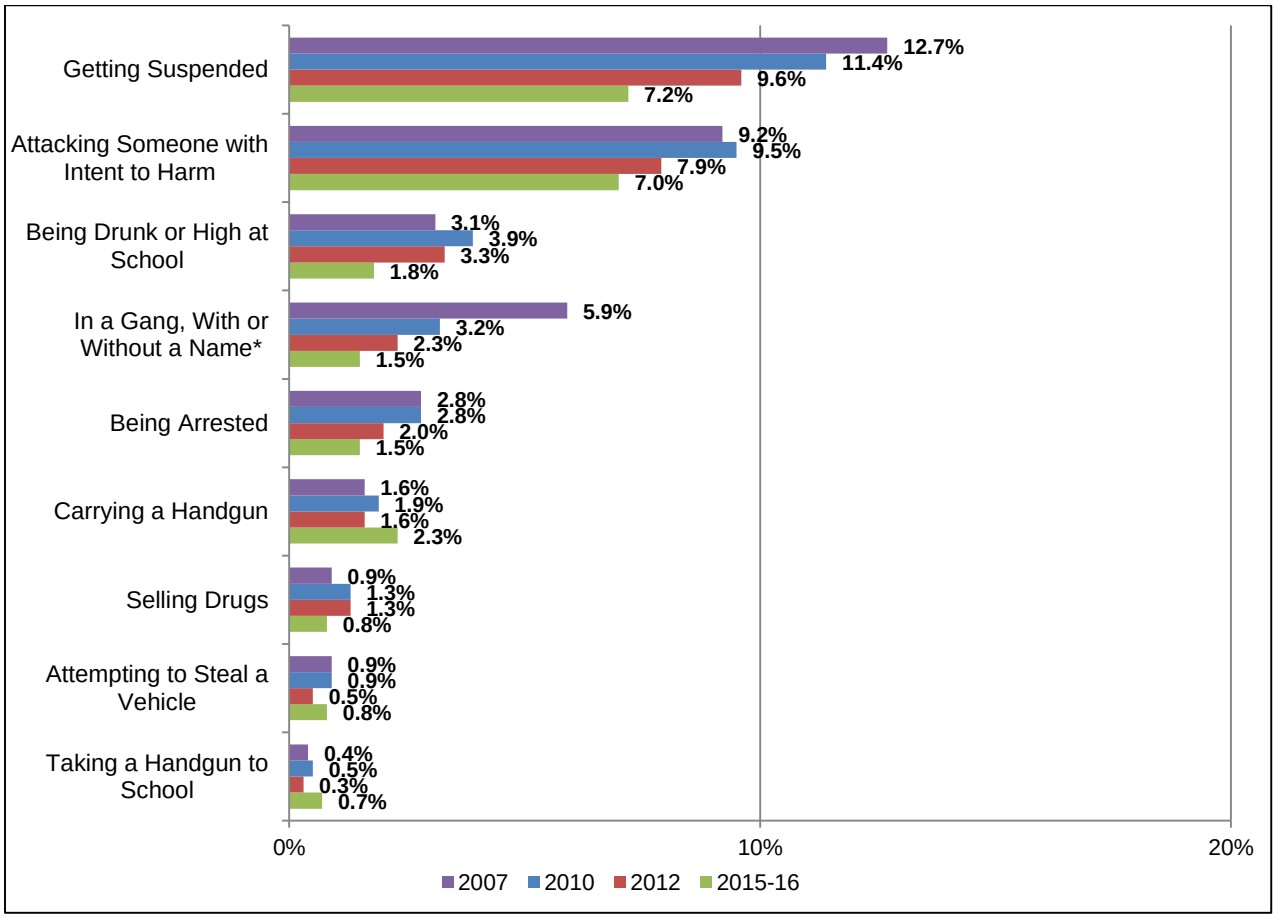
Findings on Antisocial Behavior

The *2015-16 New Jersey Middle School Risk and Protective Factor Survey* measured student reports of antisocial behavior (Figure ES-4). These actions are only measured for the 12 months prior to the survey. Specifically, students were asked how many times they had engaged in such behavior from the following response set: "Never", "1 to 2 times", "3 to 5 times," and "6 or more times." These nine antisocial behaviors are listed below:

- Getting Suspended
- Attacking Someone with Intent to Harm
- Being Drunk or High at School
- Belonging to a Gang
- Being Arrested
- Carrying a Handgun
- Selling Drugs
- Attempting to Steal a Vehicle
- Taking a Handgun to School

Findings are disaggregated by grade, gender, race/ethnicity, and county. It is important to note that, while countywide comparisons are presented, caution should be taken when interpreting the results from specific counties due to the relatively small number of participants from each county.

Figure ES-4: *Summary of Antisocial Behaviors in the Past 12 Months*



* The totals for "in a gang, with or without a name," denote lifetime involvement.

Notable Differences by Grade

- More 7th grade students than 8th grade students reported being suspended in the past year (8.0% vs. 6.4%).

Notable Differences by Gender

- More males than females reported carrying a handgun in the past year (3.6% vs. 0.9%).

Notable Differences by Race/Ethnicity

- African-American students reported a higher prevalence of attacking someone with intent to harm than Hispanic, White, and Asian students (10.6% vs 6.9%, 6.8%, and 3.1%, respectively).
- African-American and Hispanic students reported being suspended at much higher rates (16.0% and 11.2%, respectively) than Asian and White students (4.1% and 3.9%, respectively).
- Slightly more Hispanic and African-American students 3.1% and 2.9%, respectively) reported being in a gang than did White and Asian students (0.6% and 0.0%, respectively).

Notable Differences by County

- Sussex* County had the highest proportion of students who reported attacking someone with intent to harm (10.5%). In contrast, the county with the lowest rate was Somerset (2.3%).
- Cumberland* County had the highest proportion of students being drunk or high at school (8.4%) while Warren County had the lowest reported prevalence (0.0%).
- Counties that reported suspension rates over the 15% threshold included Cumberland* (18.2%), and Salem (15.1%).
- Camden* and Hudson* Counties reported the greatest proportion of students with gang affiliation (6.1% and 4.5%, respectively).

Notable Differences by Year of Survey

- There was no notable variation in anti-social behavior since the 2012 survey.
- Reports of students getting suspended in the past year decreased from 12.7% to 7.2% between 2007 and 2015-16.
- Rates of lifetime membership in a gang, with or without a name, decreased from 5.9% to 1.5% between 2007 and 2015-16.

Risk and Protective Factors

The *New Jersey Middle School Risk and Protective Factor Survey* contains six overarching domains – Community, Family, School, and Peer-Individual for the 20 risk factors and School and Peer-Individual for the five protective factors. Multiple survey items comprise each of these factors and there was a minimum number of questions that must be answered in order to calculate a scale score for that factor. BCSR computed scale scores for each risk and protective factor, their respective domains, and summary risk and protective factor scores, which were created by combining all 20 risk factors and all 5 protective factors, respectively.

Risk factors are characteristics of the students' community, family, school, and peer relationships that predict the likelihood of experimentation with alcohol, tobacco, and other drugs and participation in antisocial behavior while protective factors buffer students against these risks. These two factors are important in regard to prevention planning. While one may not be able to eliminate the risk factors in a students' environment, it is possible that the number of protective factors can be increased.

These variables have been standardized to a 0 to 1 scale. It is important to note that risk and protective factors are interpreted differently. Overall, it is better to have lower risk factor scores than higher. Research has shown that the more risk factors students are exposed to, the more likely they are to use drugs or participate in antisocial behaviors. Higher scores indicate more risks in the student's environment. Conversely, it is better to have higher protective factor scores. These scores represent characteristics in the students' environment that will protect them against risk factors.

Risk Factors

Risk factors are characteristics of the students' community, family, school, and peer relationships that predict the likelihood of experimentation with alcohol, tobacco, and other drugs and participation in antisocial behavior. Each question was scored so that the most negative behaviors received the highest score. For example, if a student indicated that he was 10 years old or younger when he began smoking cigarettes, then this would be scored as a 1. Conversely, a student who indicated having never smoked would receive a score of 0. Mean scores for each factor were then computed on a scale of 0 to 1, with a higher score indicating that the student is at greater risk of being influenced negatively by that factor. For example, if the mean score for *Early Initiation of Drug Use* factor was 0.60, then these students would be more likely than students with lower risk scores to use drugs at an early age.

Overall, as displayed in Table ES-2, mean scores on the risk factors show that New Jersey students are more likely to be at-risk for negative behaviors by factors in the school and community domains, which received the greatest mean scores. In particular, living in a community where drug use is acceptable (*Laws and Norms Favorable to Drug Use*) posed one of the greatest risks.

Table ES-2: *Summary of All Risk Factors by Domain*

Domain	*Risk Factors*	n	Mean 2007	Mean 2010	Mean 2012	Mean 2015-16
Community (mean= 0.22)	Laws and Norms Favorable to Drug Use	4495	0.34	0.34	0.33	0.29
	Community Transitions and Mobility	4475	0.29	0.27	0.26	0.26
	Low Neighborhood Attachment	4517	0.28	0.28	0.28	0.27
	Perceived Availability of Drugs	4502	0.25	0.26	0.24	0.21
	Community Disorganization	4489	0.24	0.22	0.21	0.20
	Perceived Availability of Handguns	4499	0.14	0.11	0.11	0.11
Family (mean= 0.11)	Poor Family Management	4507	0.20	0.21	0.20	0.18
	Parental Attitudes Favorable Toward Antisocial Behavior	4516	0.13	0.13	0.13	0.10
	Parental Attitudes Favorable Toward Drug Use	4521	0.05	0.05	0.05	0.04
School (mean= 0.32)	Low Commitment to School	4354	0.35	0.36	0.34	0.37
	Academic Failure	4341	0.31	0.30	0.27	0.28
Peer-Individual (mean= 0.09)	Perceived Risks of Drug Use	4529	0.20	0.21	0.22	0.24
	Favorable Attitudes Toward Antisocial Behavior	4542	0.18	0.18	0.16	0.12
	Peer Rewards for Antisocial Behavior	4518	0.13	0.15	0.15	0.15
	Favorable Attitudes Toward Drug Use	4550	0.09	0.09	0.09	0.07
	Early Initiation of Drug Use	4500	0.10	0.09	0.08	0.05
	Friends' Use of Drugs	4529	0.08	0.10	0.09	0.06
	Early Initiation of Antisocial Behavior	4504	0.07	0.06	0.05	0.04
	Gang Involvement	4402	0.05	0.03	0.02	0.02
	Interaction with Antisocial Peers	4539	0.05	0.05	0.05	0.04
Statewide Risk Factor Averages		**4491**	**0.18**	**0.17**	**0.17**	**0.15**

Notable Differences by Grade

- Eighth-grade students had a higher risk factor mean score (0.29) than 7th grade students (0.24) for *Low Neighborhood Attachment,* indicating that they are less bonded to where they live.
- Eighth-grade students had a higher risk factor mean score (0.25) than 7th grade students (0.16) for *Perceived Availability of Drugs*, indicating that ATOD were easier to get for 8th grade students.
- Eighth-grade students had higher risk factor mean scores than 7th grade students on *Laws and Norms Favorable to Drug Use* (0.34 vs. 0.25), *Friends' Use of Drugs* (0.08 vs. 0.03), and *Favorable Attitudes Toward Drug Use* (0.10 vs. 0.04), which suggests older students believe that their community and friends are more favorable to drug use.

Notable Differences by Gender

- Female students had a higher risk factor mean score (0.29) than male students (0.24) for *Low Neighborhood Attachment.*

Notable Differences by Race/Ethnicity

- Hispanic and African-American students were at higher risk to be influenced by *Low Neighborhood Attachment* (0.31 each) than Asian and White students (0.26 and 0.23, respectively).
- African-American and Hispanic students had substantially higher scores on the *Community Disorganization* factor (0.25 each) than White and Asian students (0.17 and 0.15, respectively), indicating that there are more threats to safety in their neighborhoods.
- African-American and Hispanic students had higher mean scores on the *Community Transitions and Mobility* factor (0.31 each) than Asian and White students (0.25 and 0.22, respectively), indicating that they had changed homes or schools more frequently.
- African-American students had the highest mean of 0.24 and Asian students had the lowest mean of 0.16 on the *Perceived Availability of Drugs* factor.
- African-American and Hispanic students had higher mean scores on the *Academic Failure* factor (0.34 and 0.32, respectively) than White and Asian students (0.27 and 0.21, respectively).
- African-American and Hispanic students had slightly higher mean scores on the *Gang Involvement* factor (0.04 each) than White and Asian students (0.01 and 0.0, respectively).
- African-American and Hispanic students had higher mean scores on the *Perceived Risks of Drug Use* factor (0.31 and 0.26, respectively) than White and Asian students (0.22 and 0.18, respectively).
- Mean scores were higher for Hispanic and African-American students on the *Early Initiation of Drug Use* factor (0.07 and 0.06, respectively) than for White and Asian students (0.04 and 0.01, respectively).
- Mean scores were higher for African-American and Hispanic students on the *Early Initiation of Antisocial Behavior* factor (0.08 and 0.06, respectively) than for White and Asian students (0.03 and 0.02, respectively).
- Asian students had the lowest risk factor scores for *Favorable Attitudes Toward Drug Use*, *Favorable Attitudes Toward Antisocial Behavior*, and *Rewards for Antisocial Behavior* (0.02, 0.08, and 0.10, respectively).

Notable Differences by County

- The average county level risk factor score ranged from a low of 0.12 in Warren County to a high of 0.18 in Cumberland* and Salem counties.

Notable Differences by Year of Survey

- In general, mean risk factor scores remained fairly constant from 2012 to 2015-16.
- The mean score of two risk factors changed by four or more points. Those were *Laws and Norms Favorable to Drug Use*, which fell from 0.33 to 0.29; and *Favorable Attitudes Toward Antisocial Behavior*, which fell from 0.16 to 0.12.
- Across all survey years, the risk factor mean scores decreased across 17 out of 20 risk factors. The largest decreases were seen in *Favorable Attitudes Toward Antisocial* Behavior, which fell from 0.18 in 2007 to 0.12 in 2015-16; *Laws and Norms Favorable to Drug Use*, which fell from 0.34 in 2007 to 0.29 in 2015-16; and *Early Initiation of Drug Use*, which fell from 0.10 in 2007 to 0.05 in 2015-16. These decreases across risk factor mean scores support the belief that prevention efforts work.

Protective Factors

Protective factors are characteristics of the students' school, and peer relationships that have been associated with buffering the risks in a students' environment and thereby reducing the likelihood of experimentation with alcohol, tobacco, and other drugs as well as antisocial behavior. Each question was scored so that the most positive behaviors received the highest score. For example, if a student indicated that she had done community service 40 or more times in the last year, then this would be scored as a 1. Conversely, a student who indicated having never done community service would receive a score of 0. Mean scores for each factor were then computed on a scale of 0 to 1, with a higher score indicating that the student has a greater chance of being protected by that factor. For example, if the mean score for the *Prosocial Involvement* factor was 0.60 then students would be more likely to be participating in positive activities.

Overall, mean scores on the protective factors show that NJ students are more likely to be protected from negative behaviors by factors in the school domain, which received the greatest mean scores (Table ES-3). Having increased interaction with prosocial peers also contributes to this protection.

Table ES-3: *Summary of All Protective Factors by Domain*

Domain	*Protective Factors*	n	Mean 2007	Mean 2010	Mean 2012	Mean 2015-16
Peer-Individual *(mean= 0.47)*	Interaction with Prosocial Peers	4490	0.63	0.62	0.64	0.63
	Peer Rewards for Prosocial Involvement	4509	0.48	0.45	0.46	0.47
	Prosocial Involvement	4547	0.28	0.30	0.31	0.30
School *(mean= 0.62)*	School Opportunities for Prosocial Involvement	4528	0.64	0.64	0.63	0.65
	School Rewards for Prosocial Involvement	4522	0.59	0.59	0.58	0.59
Statewide Protective Factor Averages		**4519**	**0.52**	**0.52**	**0.52**	**0.53**

Notable Differences by Grade

- Seventh-grade students had a higher mean score than 8th graders on *Interaction with Prosocial Peers* (0.65 vs. 0.62), *School Rewards for Prosocial Involvement* (0.60 vs 0.57) and *Peer Rewards for Prosocial Involvement* (0.50 vs. 0.44).
- Eighth-grade students had a higher mean score on *Prosocial Involvement* (0.31 vs 0.28)

Notable Differences by Gender

- Females had a higher mean score on the *Interaction with Prosocial Peers* factor (0.65 vs. 0.62), indicating that friends of females participate in more positive behaviors than friends of males.
- Females had a higher mean score than males on the *Prosocial Involvement* factor (0.33 vs. 0.27), indicating that females more frequently engaged in prosocial activities than males did.

Notable Differences by Race/Ethnicity

- Asian students had the highest mean score of 0.70 and Hispanic students had the lowest mean score of 0.59 on the *Interaction with Prosocial Peers* factor.
- Asian and White students (0.33 and 0.32, respectively) scored higher on the *Prosocial Involvement* factor than African-American and Hispanic students (0.26 and 0.24, respectively).
- Asian students scored highest on the *Peer Rewards for Prosocial Involvement* factor (0.49) versus the mean scores for White, Hispanic, and African-American students (0.47, 0.46, and 0.46

respectively), indicating that slightly more Asian students believe they would be seen as cool if they participated in prosocial activities.

Notable Differences by County

- The average county level protective factor score ranged from a low of 0.49 in Atlantic* County to a high of 0.58 in Ocean County.

Notable Differences by Year of Survey

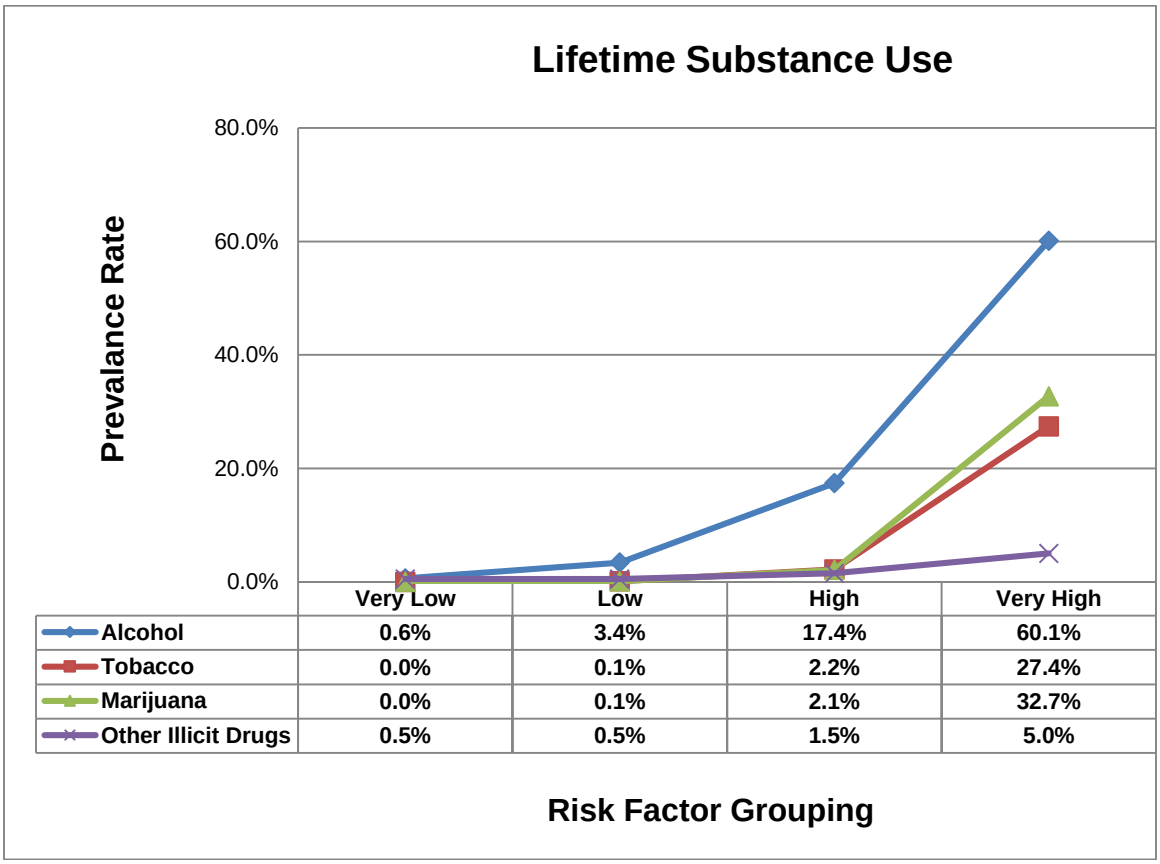
- There was very little variation with regards to protective factors across survey years.

Impact of Average Risk Factor Score on Substance Use

In order to better interpret the risk factor mean scores, four categories were calculated – *very low*, *low*, *high*, and *very high*. These categories were based on a normal distribution of scores, such that 68% of the scores are within one standard deviation of the mean. Risk categories were determined by examining the mean and standard deviations of the average risk factor score (0.15). Each quartile division of the following graphs was created using standard deviations. The ***low*** division represents one standard deviation *below* the mean while the ***high*** division represents scores one standard deviation *above* the mean. The ***very low*** division represents scores more than one standard deviation *below* the mean. Similarly, the ***very high*** division includes scores more than one standard deviation *above* the mean.

Once risk factor categories were established, the interaction of these categories with the prevalence of tobacco, alcohol, and other drug use was analyzed. The relationships between the average risk factor score and the rate of substance use are illustrated in Figure ES-5 below.

Figure ES-5: *Prevalence of Lifetime Substance Use by Risk Factor Groupings*



	Very Low	Low	High	Very High
Alcohol	0.6%	3.4%	17.4%	60.1%
Tobacco	0.0%	0.1%	2.2%	27.4%
Marijuana	0.0%	0.1%	2.1%	32.7%
Other Illicit Drugs	0.5%	0.5%	1.5%	5.0%

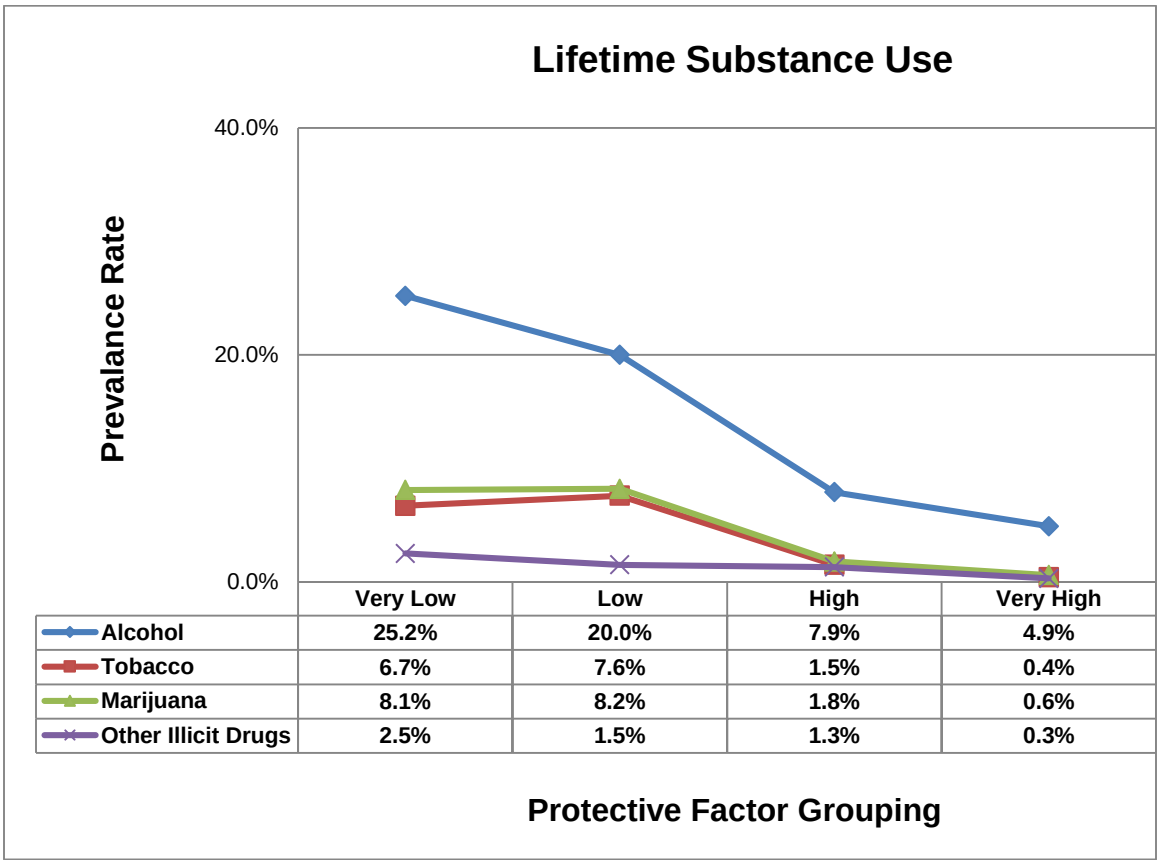
As shown, as risk scores increase, lifetime use of alcohol, tobacco, marijuana, and other illicit drugs increase. Alcohol, in particular, showed a positive linear relationship between risk factor and prevalence of use. Notably, alcohol consumption shows the strongest relationship with increased risk – a change of 59.5% over the four risk categories. Further, a striking increase occurs between those at *high* and *very high* risk and the use of tobacco (2.2% vs. 27.4%), marijuana (2.1% vs. 32.7%), and other illicit drugs (1.5% vs. 5.0%).

Impact of Average Protective Factor Score on Substance Use

As described above, in order to better interpret the protective factor mean scores, four categories were calculated – *very low*, *low*, *high*, and *very high*. These categories were based on a normal distribution of scores, such that 68% of the scores are within one standard deviation of the mean. Protective categories were determined by examining the mean and standard deviations of the average protective factor score (0.53). Each quartile division of the following graphs was created using standard deviations. The ***low*** division represents one standard deviation *below* the mean while the ***high*** division represents scores one standard deviation *above* the mean. The ***very low*** division represents scores more than one standard deviation *below* the mean. Similarly, the ***very high*** division includes scores more than one standard deviation *above* the mean.

The relationship between average protective factor score and substance use is illustrated in Figure ES-6 below. It is important to note that these are inverse relationships.

Figure ES-6: ***Prevalence of Lifetime Substance Use by Protective Factor Groupings***



	Very Low	Low	High	Very High
Alcohol	25.2%	20.0%	7.9%	4.9%
Tobacco	6.7%	7.6%	1.5%	0.4%
Marijuana	8.1%	8.2%	1.8%	0.6%
Other Illicit Drugs	2.5%	1.5%	1.3%	0.3%

As shown, as protective factor scores increase the likelihood of the use of alcohol, tobacco, marijuana, and other illicit drugs in middle school decreases. Even with very high protective factor scores, 4.9% of students will likely have tried alcohol in their lifetime by middle school. Further, there is a sharp decrease between those at *low* and *high* protective groups and the use of alcohol (20.0% vs. 7.9%), tobacco (7.6% vs. 1.5%), and marijuana (8.2% vs. 1.8%). This trend indicates that even with a small increase in the number of protective factors students have, ATOD use could be vastly decreased.

Introduction

A. Background

In July 2015, the New Jersey Department of Human Services (NJ DHS), Division of Addiction Services (DAS) contracted with the Edward J. Bloustein School of Planning and Public Policy, Bloustein Center for Survey Research (BCSR) at Rutgers University to conduct the 2015-2016 New Jersey Middle School Risk and Protective Factor Survey (NJ MS RPFS). The NJ MS RPFS continues efforts begun in 1999 to determine risk and protective factor items associated with substance use for New Jersey youth. County-level and municipal-level substance abuse coordinators will use the findings to evaluate needs for schools and communities, help plan prevention and intervention programs, and provide outcome measures to reduce adolescent gambling and alcohol, drug, and tobacco use.

Data from the New Jersey Middle School Risk and Protective Factor Survey is highly comparable other concurrent survey initiatives including the Youth Tobacco Survey conducted by the New Jersey Department of Health (NJDOH), Comprehensive Tobacco Control Program. Summary reports are available on the NJDHSS web site at http://www.nj.gov/health/fhs/tobacco/research/ In addition, the New Jersey Department of Education (NJDOE) has collected biennial data concerning student health in the ninth through twelfth grades since 1993. The New Jersey Student Health Survey, previously known as the Youth Risk Behavior Survey, features core questions promulgated nationally by the Centers for Disease Control and Prevention (CDC) concerning student self-reports on their attitudes and behaviors in areas that are highly related to preventable illness and premature death. While the questions are asked differently from those on the New Jersey Middle School Risk and Protective Factor Survey, the responses do provide a means to examine changes in student use with increasing age and grade. Results of the biennial NJ Student Health Survey can be found at http://www.state.nj.us/education/students/yrbs/.

B. Study Design and Methods

The following information outlines the major aspects of the study design, methods, field procedures, and participation rates. More detailed information can be found in a technical report on the administration of the 2015-16 survey, entitled "*2015-16 New Jersey Risk and Protective Factor Middle School Survey Technical Report: Weighting Procedures and Statistical Tabulations"* provided to the NJDOH/DMHAS by BCSR.

Sampling Design

BCSR aimed to conduct the survey with a targeted sample of 104 middle schools randomly selected throughout the state. The sample of schools was stratified by county. BCSR used a multi-stage sampling design. For the middle schools, a sampling ratio of 1-to-6 schools was used with a minimum of three schools when a county had 17 or fewer schools.

Using this sampling approach, the number of middle schools mailed initial recruitment packets was 132 with county samples ranging from 4 to 12 schools. Schools were rank-ordered by student population and randomly selected with the odds of selection proportional to the size of the school. The goal was to obtain weighted percentage data within each county that represented the total student population in the county with a margin of error of approximately +/- 5.0 percentage points at a 95% confidence interval. Within schools, a targeted 60% student response rate was assumed in calculating the total number of students to participate per county.

This method assumed that all schools were recruited prior to any survey administration. Since this was not possible, estimates for sample sizes were made based on school enrollment and weighted adjustments were made to the final dataset. The total number of middle school students intended to be sampled was 11,525 with a targeted sample of 6,915 assuming a 60% response rate.

After recruitment materials were sent out to the 132 schools selected for the sample, it was learned that three of the schools chosen were no longer eligible to participate because of changes to the grade levels housed within those schools. This left 129 eligible public middle schools in the sample.

The final participating sample included 59 middle schools with the forecasted school participation goals achieved in eleven of the 21 counties. Overall, 4,640 students submitted surveys in those 59 participating schools.

Field Procedures

BCSR staff members began contacting school superintendents and principals in October 2015 to obtain permission to conduct the survey at the school. Once a school agreed to participate, a list of all classes was provided to BCSR. Classes were then randomly selected in a manner that assured that all students were eligible for selection into the sample.[1]

It should be noted that the administration of the survey was conducted under standards established by state law *N.J.S.A.* 18A:36-34 which requires active parental consent for student participation – meaning that students could only participate if they returned a signed consent form from a parent/guardian. The parental consent requirement may act as a screening process whereby students not participating in the survey are the students who fail to bring home or return permission forms necessary for participation. At the same time, there is another group of students who are excluded because their parents have chosen not to consent to participation in this survey. While there is no empirical evidence to support the notion that these groups of students differ in any way from students who do return their consent form allowing survey participation, the active

[1] All classes in a required subject *or,* depending on the school's choice, all classes meeting during a particular period of the day were included in the sampling frame. Systematic equal probability sampling with a random start was used to select classes from each school that participated in the survey.

parental consent process creates an obvious screening criteria for inclusion in this study. Both of these non-participating groups are small. Overall, 68% of all students returned a form that permitted participation; 6% returned a form that did not consent to participation, and 27% did not return a form at all.

Participating schools were provided with parent consent letters and survey fact sheets to send home with students. In all cases, documented parental consent was required for a student to participate, consistent with New Jersey statute. Any student who did not want to participate on the day of administration was also excused.

The questionnaires were completely anonymous and confidential and, once completed, procedures were followed to protect the confidentiality of subjects and their data. All procedures are reviewed and approved on an annual basis by Rutgers University's Institutional Review Board (IRB) for compliance with federal guidelines for the treatment of human subjects. Participation is voluntary. Questionnaires are self-administered and formatted for optical scanning.

Participation Rates

For the 59-school sample, 5,195 of the 7,066 students sampled (73.5%) returned their parent consent forms. Among students who did return the parent consent form, most parents (92.1%, n=4,784) agreed to participate. A total of 408 parents refused permission (7.8%). There did not seem to be any common characteristics of schools with higher percentages of refusals.

In prior years, response rates on the NJ DHS DMHAS administration of the 'Communities that Care' survey, response rates were a concern. In 2003, the school participation rate of 32.2% and student response rate of 40.2% led to an overall participation rate of 12.9%. In both 2006-07 and 2009-10, BCSR improved these response rates considerably - obtaining school participation rates of 55.9% and 70.7%, respectively and student response rates of 64.4% and 73.7%, respectively, which led to overall participation rates of 36.0% and 52.1%, respectively. In 2011-12 response rates were in between the previous two administrations, with a school participation rate of 59.3% and a student participation rate of 68.6%, which led to an overall participation rate of 40.6%. The 2015-16 survey administration saw a drop in both the school and student participation rates. With 59 of 129 eligible schools participating (45.7% school participation rate) and 4,640 of 7,066 students returning a completed questionnaire (65.7% student participation rate), the final overall survey response rate was 30.03% (school rate * student rate).

Table 1 presents a summary of the school and student response rates by county, and the overall response rates by county. While these overall participation rates are greater than similar efforts in the past, they are still lower than those rates generally regarded as acceptable to considering results as representative to a broader population. For example, CDC requires a 60% overall response rate on its Youth Risk Behavior Survey as a cut-off for having data weighted to the state's student population. Therefore, since response rates were lower than these conventions, the possibility exists that a participation bias at either the school and/or student level may impact the results of the study. State, county and community representatives should consider these response rates and their potential bias on results when using the NJ MS RPFS report in any prevention planning efforts.

Table 1: ***Disposition by County: Summary of School and Student Response Rates***

COUNTY	# Schools Selected	Target	# Agreed	# Schools Completed	School Rate (%)	# Students Completed	Student Rate (%)	Overall Rate (%)
Atlantic*	6	4	2	2	33.33	156	58.87	19.62
Bergen*	9	9	2	2	22.22	108	65.45	14.55
Burlington*	6	4	1	1	16.67	94	62.67	10.44
Camden*	6	5	3	3	50.00	191	53.50	26.75
Cape May	7	4	4	4	57.14	331	64.02	36.58
Cumberland*	5	4	2	2	40.00	101	54.89	21.96
Essex	12	9	6	6	50.00	369	74.55	37.27
Gloucester	6	4	4	4	66.67	355	65.26	43.50
Hudson*	7	7	3	3	42.86	218	67.91	29.11
Hunterdon*	5	4	2	2	40.00	199	69.34	27.74
Mercer*	5	4	1	1	20.00	60	43.17	8.63
Middlesex	6	5	3	3	50.00	250	66.67	33.33
Monmouth	6	6	4	4	66.67	333	73.19	48.79
Morris*	6	4	1	1	16.67	103	70.07	11.68
Ocean	4	4	3	3	75.00	335	83.33	62.50
Passaic	6	5	4	4	66.67	306	64.83	43.22
Salem	5	4	3	3	60.00	199	51.42	30.85
Somerset	6	4	3	3	50.00	252	61.02	30.51
Sussex*	5	4	2	2	40.00	198	65.56	26.23
Union	7	6	4	4	57.14	312	73.41	41.95
Warren	4	4	2	2	50.00	170	64.39	32.20
TOTAL	**129**	**104**	**59**	**59**	**45.74**	**4640**	**65.67**	**30.03**

As shown in Table 1, overall survey response rates ranged from a low of 8.6% in Mercer County to a high of 62.5% in Ocean County. While it is not possible to ascertain differences between survey responders and non-responders, BCSR would urge readers to exercise caution in interpreting data from counties where response rates fall below 25%. In particular, Mercer (8.6%), Burlington (10.4%), Morris (11.7%), Bergen (14.6%), Atlantic (19.6%), and Cumberland (22.0%) counties had extremely low rates and their county survey results should be interpreted with this in mind. Also, Sussex (26.2%), Camden (26.8%) and Hunterdon (27.7%) had a participation rate at the lower end of the scale. Considering survey response rates are an important element in determining the quality of data collected, these rates must be considered when looking at survey analysis on the data compiled in the study.

The cut-off rate for adequate performance was determined by the mean for all counties (30.03%). An adequate overall response rate was not reached in ten of the 21 counties. All counties whose response rates were less than the state mean are listed below and are marked with an asterisk (*) throughout this report. Results for these counties with lower participation rates should be interpreted with caution as they may not be representative of the county overall:

- Mercer* (8.6%)
- Burlington* (10.4%)
- Morris* (11.7%)
- Bergen* (14.6%)
- Atlantic* (19.6%)
- Cumberland* (22.0%)
- Sussex* (26.2%)

- Camden* (26.8%)
- Hunterdon* (27.7%)
- Hudson* (29.1%)

In addition, because the response rates in Mercer, Burlington, Morris and Bergen counties were so low, their results are not noted in any section of the report and percentages are hidden in all appendices. However, their data was incorporated when calculating the overall statewide percentages.

C. Questionnaire

Background

From 1999 to 2003, the New Jersey Division of Mental Health and Addiction Services administered the Communities That Care Youth Survey (CTCYS) in a sample of middle schools on three occasions (1999, 2001, and 2003). The CTCYS instrument was developed out of a multi-state study funded by the Center for Substance Abuse Prevention (CSAP) in order to assess a wide range of risk and protective factors. Prior research had shown that a number of constructs exist to adequately predict the initiation of substance use and anti-social behaviors (Coie et al., 1993; Durlak, 1998; Hawkins, Arthur, and Catalano, 1995; Hawkins, Catalano, and Miller, 1992; Kellam, Koretz, and Moscicki, 1999; Mrazek and Haggerty, 1994).[2] During the CSAP project it was determined that no existing instrument measured the necessary array of risk and protective factors needed to focus prevention programs across geographic areas and subpopulations (Arthur, Hawkins, Pollard, Catalano, & Baglioni, 2002).[3] The instrument includes risk and

[2] Coie, J.D., Watt, N.F., West, S.G., Hawkins, J.D., Asarnow, J.R., Markman, H.J., Ramey, S.L., Shure, M.B., & Long, B. (1993). The science of prevention. A conceptual framework and some directions for a national research program. *American Psychologist* 48 (10): 1013-22.

Durlak, J. A. (1998). Common risk and protective factors in successful prevention programs. *American Journal of Orthopsychiatry* 68 (4): 512-20.

Hawkins, J.D., Arthur, M.W., & Catalano, R.F. (1995). Preventing substance abuse. In *Crime and justice: Vol. 19. Building a safer society: Strategic approaches to crime prevention*, edited by M. Tonry and D. Farrington, 343-427. Chicago: University of Chicago Press.

Hawkins, J.D., Catalano, R.F., & Miller, J.Y. (1992). Risk and protective factors for alcohol and other drug problems in adolescence and early adulthood: Implications for substance abuse prevention. *Psychological Bulletin* 112 (1): 64-105.

Kellam, S. G., D. Koretz, & E. K. Moscicki. 1999. Core elements of developmental epidemiologically based prevention research. *American Journal of Community Psychology* 27 (4): 463-82.

Mrazek, P.J., Haggerty, R.J. eds., & Committee on Prevention of Mental Disorders, Institute of Medicine. (1994). *Reducing risks for mental disorders: Frontiers for prevention intervention research*. Washington, DC: National Academy Press.

[3] Arthur, M.W., Hawkins, J.D., Pollard, J.A., Catalano, R.F., & Baglioni, A.J. (2002). Measuring risk and protective factors for substance use, delinquency, and other adolescent problem behaviors: The Communities That Care Youth Survey. *Evaluation Review*, 26, 575-601. Retrieved April 7, 2008, from http://www.pridesurveys.com/supportfiles/CTC_reliability.pdf.

protective factors that show the strongest correlations to drug use, including feelings about school and their neighborhood; self-reported and peer use of tobacco, drugs, and alcohol; and the availability of such substances. The original CTCYS includes 333 items measuring 32 constructs, or risk and protective factors depending on whether behavior is influenced negatively or positively.

Since the development of the Communities That Care Youth Survey in 1992, the instrument has been revised and condensed into the Pride Risk and Protective Factors Survey (RPF). Dr. Jack Pollard, one of the original developers of the CTCYS, led the charge to shorten the original 12-page survey into a more manageable four pages (the Pride RPF). To do this, Pollard considered the practicality of administration (four pages can be completed in one class period) as well as political and community issues around measuring sensitive topics (e.g., family conflict), whether intervention is possible (e.g., *Sensation Seeking* is interpreted as more of a personality trait rather than a risk factor), and the degree of importance to the domain (e.g., *Opportunities for Positive Involvement* in the community is less important factor than the community's *Laws and Norms Favorable to Drug Use*). Finally, the instrument was tested to determine that the items reliably and efficiently measured the constructs intended (Arthur et. al., 2002). In all, the final four-page RPF survey included 121 items measuring 29 risk and protective factor constructs.

The CTCYS and four-page RPF survey is appropriate for adolescents aged 11-18 years old and allows for the analysis of risk and protective factors at different ages (Arthur et. al., 2002). As a result, federal, state, and local agencies have found these factors to be useful for prevention needs assessments and the planning of prevention programs. The existing Pride RPF also fulfills requirements to report on Core Measures that are required by the Substance Abuse and Mental Health Services Administration (SAMHSA) for their Drug-Free Communities Grants.

In 2006, the Division of Mental Health and Addiction Services switched from the CTCYS to the Pride RPF. The current 69-item questionnaire, published by Pride Surveys, is a revised version of the final RPF survey and has been customized with recommendations from DMHAS. It includes 20 risk and five protective factors. Chapters 1-2 present the prevalence summaries of New Jersey middle school students' use of drugs and participation in antisocial behaviors. Chapter 3 presents analysis of the instrument's risk and protective factor items, as well as graphical representations of the impact of risk and protective factor scores on substance use.

Risk and Protective Factor Scales

The *New Jersey Middle School Risk and Protective Factor Survey* contains six overarching domains – Community, Family, School, and Peer-Individual for the 20 risk factors and School and Peer-Individual for the five protective factors. Multiple survey items comprise each of these factors and there was a minimum number of questions that must be answered in order to be calculate a scales score for that factor. BCSR computed scale scores for each risk and protective factor, their respective domains, and summary risk and protective factor scores, which were created by combining all 20 risk factors and all five protective factors, respectively.

Risk factors are characteristics of the students' community, family, school, and peer relationships that predict the likelihood of experimentation with alcohol, tobacco, and other drugs and participation in antisocial behavior. These variables have been standardized to a 0 to 1 scale. Each question was scored so that the most negative behaviors received the highest score. It is important to note that risk and protective factors are interpreted differently. *The higher the score*

on a risk factor, the more likely the student is 'at-risk' for using drugs or participating in delinquent behaviors.

Protective factors are characteristics of the students' school, and peer relationships that have been associated with reducing the likelihood of experimentation with alcohol, tobacco, and other drugs as well as antisocial behavior. Each question was scored so that the most positive behaviors received the highest score. For example, if a student indicated that she had done community service 40 or more times in the last year, then this would be scored as a 1. *The higher the score on a protective factor, the more likely the student is to be 'protected' from negative behaviors, such as using drugs and participating in antisocial activities.*

D. Weighting

The following outlines the steps used to generate the school/student weights used for the study to make the raw data more representative of the New Jersey middle school student population at the county and statewide level.

Overview of Weighting Procedure

The sampling and weighting strategies for this survey were designed and implemented to produce survey estimates that would be representative of the population of 7th and 8th grade students enrolled in public (non-charter) schools with 40 or more students in the state. The analysis of the survey data examines individual county level and state level data so the data were weighted to be representative of the 7th and 8th grade public school population at each level. The sample for the survey was designed to produce county and state level estimates and required that the data be weighted to compensate for the designed sample disproportionality at the county level.

The sample was a school-based sample selected at the county level. Schools within counties were selected with probabilities proportionate to enrollment size and, to the extent possible given school enrollment size; students were sampled equally across the selected schools within each county. Classes of students were selected randomly from among all 7th and 8th grade period two classes at each sampled school and attempts were made to collect completed surveys from all students within each sampled class.

There are two components to the weighting procedure: (a) one adjustment is associated with school/student probability of selection, and (b) the other adjustment is to insure demographic comparability. A weight is associated with each questionnaire to reflect the likelihood of sampling each student. The sample is weighted by the probability of selection at the school and classroom level and to reflect the county and state student population parameters. The weight used for estimation is given by:

$$W = W1 * W2 * f1$$

W1 = the inverse of the probability of selecting the school;
W2 = the inverse of the probability of selecting the classroom within the school;
f1 = a post-stratification adjustment factor calculated by gender within grade and by race/ethnicity.

The weighted percentages used in this report are a more accurate reflection of the total New Jersey middle school population than if the results were to be used in their non-weighted form. Although the response rate only reached 30%, weighting the data in this manner allows the weighted results to more closely match the attitudes and behaviors of all regular public school students in grades 7 and 8 in New Jersey to improve inferences concerning the substance use prevalence.

The sampling strategy is an equal probability of selection method in design involving three stages of adjustments. The county level sample is first weighted by the probability of selection at the school and student level. Additionally, weighting on student demographic characteristics was necessary at the county level to mitigate the effects of student and school selection on the survey estimates. Finally, state level weighting was necessary to ensure that the weighted sample estimates would accurately represent the entire student population in the state. The calculation of sample and demographic weights was accomplished in multiple stages and different weights are calculated for analysis at the county level and the state level. More information on the specific steps used to calculate weight coefficients are presented in "*2015-16 New Jersey Middle School Risk and Protective Factor Survey: Weighting Procedures and Statistical Tabulations."*

E. Profile of Middle School Students

As discussed, the survey results are representative of all New Jersey middle school students in grades 7-8. Overall, 4,562 of the 4,640 completed surveys (98.3%) were eligible for analysis. Reasons for ineligibility include the following:

- incomplete surveys (answering less than 60% of the survey questions);
- use of *xallapax* (a fictitious drug used in questionnaires to test the reliability of answers received by students);
- or, two or more inconsistent affirmative responses to drug questions (e.g., indicating use of a particular drug in the last 30 days for one question and indicating *no use* in the last 12 months).

The weighted and unweighted demographic characteristics of the sample are included in Table 2 below.

Age: Overall, 29.1% of the students were 12 or younger, 45.2% were 13 years old, 23.0% were 14 years old, and 2.8% were 15 or older.

Grade: Based on weighted demographic data, the students were evenly split between 7th grade (49.0%) and 8th grade (51.0%).

Sex: Overall, an equivalent number of males (50.8%) and females (49.2%) responded to the survey.

Race/Ethnicity: Based on weighted demographic data, 49.6% were White, 20.8% were Hispanic or Latino (including Hispanics who also identified with a race or multiple races), 13.6% were Black or African-American, 8.9% were Asians, and 7.1% were Other (including American Indian/Alaskan Natives and non-Hispanic students who identified with multiple races).

Table 2: ***Profile of Middle School Students in the 2015-16 New Jersey Middle School Risk and Protective Factor Survey***

	Demographic Group	Sample (n)	Sample %	Weighted %
GENDER	Female	2460	54.7	49.2
	Male	2038	45.3	50.8
AGE	12 Years Old or Younger	1355	29.8	29.1
	13 Years Old	2092	46.0	45.2
	14 Years Old	1041	22.9	23.0
	15 Years Old or Older	62	1.4	2.8
GRADE	7th	2395	52.6	49.0
	8th	2156	47.4	51.0
RACE/ETHNICITY	White	2259	49.9	49.6
	African-American	425	9.4	13.6
	Hispanic/Latino	1229	27.1	20.8
	Asian	272	6.0	8.9
	Other	344	7.6	7.1

Chapter 1: Alcohol, Tobacco, and Other Drug Use

A. Presentation of the Findings

The following section presents the findings on the alcohol, tobacco, and other drug use collected by the *2015-16 New Jersey Middle School Risk and Protective Factor Survey*. The survey focuses on New Jersey middle school students, specifically 7th and 8th graders. The drug information collected includes the prevalence and frequency of use of alcohol, marijuana, tobacco, prescription drugs without a prescription[4], inhalants, cocaine, methamphetamines, amphetamines and tranquilizers/sedatives,[5] hallucinogens, heroin, steroids, ecstasy, OxyContin, cough medicine, and club drugs.

Many of the items on the *2015-16 New Jersey Middle School Risk and Protective Factor Survey* were comparable to the *Monitoring the Future* survey, a national study of drug use by middle and high school students conducted each year by the University of Michigan's Institute for Social Research's Survey Research Center. The survey provides data on the national prevalence of use for alcohol, tobacco, and other illicit drugs (ATOD) using a representative sample of 8th, 10th, and 12th grade students. For many years, the *Monitoring the Future* survey served as the primary reference for determining the ATOD use among adolescents in the United States.

The use of ATODs by middle school students in New Jersey is shown in Tables 3 to 25. Students' ATOD use is shown in two distinct ways – by prevalence tables and by frequency tables.

1. **Prevalence tables** display the percentage of students who reported use of a drug at least once in the specified time period. These results are presented for three prevalence periods: ***lifetime*** (whether the student has ever used the substance); ***annual*** (whether the student has used the substance within 12 months prior to the survey date); and, ***past 30 days*** (whether the student has used the substance within 30 days prior to the survey date). ATOD prevalence table results are presented by grade, sex, and race/ethnicity. *Caution should be taken when interpreting the results of some of these groups, especially when comparing differences, because of small subsample sizes.*

2. **Frequency tables** illustrate the number of occasions that students reported using a particular drug in a specified time period. It is important to note that, due to rounding errors, the frequency of use for a substance (divided amongst multiple categories) does not precisely match the prevalence of use.

County-level results are discussed throughout the report and are included in the appendices. Please be advised that caution should be taken when interpreting the results from specific counties due to the low participation rates obtained in some counties. One should not assume that the findings reported for counties having low response rates are representative of that county. Tables in the appendices include sample sizes for each county.

[4] Item wording for prescription drugs without a prescription asks "Used prescription drugs not prescribed".
[5] Amphetamines are asked about using the term "Uppers" and tranquilizers and sedatives are asked about using the term "Downers" in the survey.

B. Summary of the Alcohol, Tobacco, and Other Drug Findings

Tables 3 and 4 display the results from the 2015-16 NJ MS RPF survey while a comparison to the national results from the 2016 *Monitoring the Future* survey is presented in Table 5.

Each of the substances displayed in Tables 3 and 4 are discussed in greater detail in the following sections. Tables 6-25 show the lifetime, annual, and recent (past 30 day) use of alcohol, tobacco, and other drugs. Use in the 30 days prior to the survey date was only asked for alcohol, cigarettes, marijuana, cocaine, inhalants, and prescription drugs without a prescription.

Table 3: ***Summary of the Prevalence of Use of Primary Substances for the 2015-16 New Jersey Middle School Risk and Protective Factor Survey***

		7th		8th		Overall	
		n	%	n	%	n	%
Alcohol	**Lifetime**	2348	7.9	2105	20.6	4462	14.3
	Annual	2367	4.8	2118	11.9	4495	8.4
	Past 30 Days	2376	2.2	2138	6.4	4525	4.4
Alcohol - Binge	**Lifetime**	2355	1.6	2116	4.8	4482	3.2
	Annual	2385	1.2	2134	3.9	4530	2.5
Marijuana	**Lifetime**	2326	1.7	2091	7.8	4428	4.8
	Annual	2356	1.5	2112	3.8	4479	2.6
	Past 30 Days	2368	1.1	2129	2.5	4508	1.8
Cigarettes	**Lifetime**	2362	1.7	2126	6.7	4499	4.2
	Annual	2386	0.9	2142	5.3	4539	3.2
	Past 30 Days	2388	0.6	2146	4.2	4545	2.4
E-Cigarettes/Vape[6]	**Lifetime**	2354	5.4	2119	15.4	4484	10.5
	Annual	2373	4.2	2128	13.3	4512	8.8
	Past 30 Days	2383	2.3	2140	8.5	4534	5.5
Prescription Drugs w/o Prescription	**Lifetime**	2353	2.5	2118	3.9	4482	3.2
	Annual	2375	1.6	2132	2.7	4518	2.2
	Past 30 Days	2379	1.1	2137	1.5	4527	1.3
Inhalants	**Lifetime**	2360	0.9	2130	1.8	4501	1.4
	Annual	2388	0.7	2145	0.8	4544	0.7
	Past 30 Days	2385	0.4	2145	0.5	4541	0.5
Cough Medicine	**Annual**	2391	0.7	2149	1.7	4551	1.2

Note: "n" represents the number of responses for a given survey item, and '%' represents the percentage of students reporting use.

[6] Item wording for e-cigarettes/vape asks "used e-cigarettes/vape". This item appears in the summary above however, it is unclear which % of these respondents were using tobacco, marijuana, or flavored liquids in these devices. As such, e-cigarettes/vape will not be referred to in this report as the 2nd most prevalent substance used by NJ 7th and 8th graders in 2015-16.

Table 4: ***Summary of the Prevalence of the Use of Other Illicit Drugs for the 2015-16 New Jersey Middle School Risk and Protective Factor Survey***

		7th		8th		Overall	
		n	%	n	%	n	%
Sedatives	**Lifetime**	2359	0.4	2130	0.8	4499	0.6
	Annual	2391	0.3	2150	0.3	4551	0.3
Steroids	**Lifetime**	2362	0.3	2135	0.3	4508	0.3
	Annual	2386	0.1	2151	0.1	4548	0.1
Hallucinogens	**Lifetime**	2365	0.2	2135	0.2	4511	0.2
	Annual	2389	0.0	2152	0.2	4552	0.1
Amphetamines	**Lifetime**	2360	0.1	2136	0.3	4507	0.2
	Annual	2387	0.1	2148	0.3	4546	0.2
Cocaine	**Lifetime**	2355	0.1	2129	0.3	4495	0.2
	Annual	2388	0.0	2146	0.2	4545	0.1
	Past 30 Days	2378	0.0	2146	0.1	4535	0.0
Methamphetamines	**Lifetime**	2347	0.2	2125	0.1	4483	0.1
	Annual	2383	0.2	2141	0.0	4535	0.1
Ecstasy	**Lifetime**	2362	0.0	2133	0.2	4506	0.1
	Annual	2390	0.0	2151	0.2	4552	0.1
Heroin	**Lifetime**	2365	0.1	2136	0.1	4512	0.1
	Annual	2392	0.0	2151	0.1	4554	0.0
OxyContin	**Lifetime**	2353	0.1	2119	0.2	4483	0.2
	Annual	2383	0.0	2146	0.2	4540	0.1
Club Drugs	**Lifetime**	2362	0.1	2136	0.1	4509	0.1
	Annual	2391	0.1	2149	0.0	4551	0.1
Total of Other Illicit Drugs	**Lifetime**	2366	1.1	2137	1.6	4514	1.4
	Annual	2392	0.6	2153	0.9	4556	0.8

Note: “n” represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use. ‘Total of Other Illicit Drugs’ is the combined prevalence of all the drugs listed in this table.

Table 5 compares substance use that was reported in the *2015-16 New Jersey Middle School Risk and Protective Factor Survey* with the national level *2016 Monitoring the Future* study. It is important to note that *Monitoring the Future* data are based on 8th grade students only; therefore, the only direct comparison possible is with New Jersey's 8th grade data. Notably, New Jersey 8th grade students reported lower levels of substance use than their national counterparts for *every single substance across lifetime and annual use.* For many substances, the national lifetime and annual use rates for 8th grade students were two to three times higher than those found among New Jersey 8th graders. The only substance where New Jersey 8th graders reported a higher prevalence of past 30 day use is cigarettes.

Table 5: ***Lifetime, Annual, and Recent Use of Alcohol, Tobacco, and Other Drugs from the 2015-16 NJ MS RPF Survey Compared to the 2016 "Monitoring the Future" Study***

	2015-16 NJ MS RPF Survey (8th Grade) %	2016 Monitoring the Future (8th Grade) %
Lifetime Use		
Alcohol	20.6	22.8
Marijuana	7.8	12.8
Cigarettes	6.7	9.8
E-Cigarettes/Vape[7]	10.5	17.5
Inhalants	1.8	7.7
Ecstasy	0.2	1.7
Cocaine or Crack[8]	0.3	1.4
Heroin	0.1	0.5
Annual Use		
Alcohol	11.9	17.6
Marijuana	3.8	9.4
Cigarettes	5.3	*
E-Cigarettes/Vape	8.8	*
Inhalants	0.8	3.8
Cough Medicine	1.7	2.6
Ecstasy	0.2	1.0
Cocaine or Crack	0.2	0.8
Heroin	0.1	0.3
Recent Use (Past 30 days)		
Alcohol	6.4	7.3
Marijuana	2.5	5.4
Cigarettes	4.2	2.6
E-Cigarettes/Vape	5.5	6.2
Inhalants	0.5	1.8
Cocaine or Crack	0.1	0.3

* *Monitoring the Future* does not provide annual prevalence rates for use of cigarettes or any vaping.

[7] *Monitoring the Future* only asked about e-cigarettes and vaping in separate questions. The percentage depicted only represents the numbers saying they had used any vaping.

[8] *Monitoring the Future* only asked about Cocaine and Crack in separate questions. The percentage depicted only represents the numbers saying they had used powder cocaine.

Noticeable differences between New Jersey and the nation were found for the lifetime use of cigarettes (6.7% vs. 9.8%), marijuana (7.8% vs. 12.8%), and inhalants (1.8% vs. 7.7%) as well as for the annual use of marijuana (3.8% vs. 9.4%) and inhalants (0.8% vs. 3.8%). New Jersey 8th graders reported smaller margins, but consistently lower rates, of alcohol use than their national counterparts in terms of lifetime (20.6% vs. 22.8%), past year (11.9% vs. 17.6%), and past 30 day use (6.4% vs. 7.3%).

Alcohol

Alcohol, which includes beer, wine, and hard liquor, is the drug used most often by adolescents. Findings for alcohol use by New Jersey middle school students surveyed in 2015-16 are presented in Tables 6 and 7.

Among New Jersey middle school students, 14.3% of 7th and 8th graders reported having used alcohol at some time in their lives. The lifetime rate for New Jersey 8th graders was higher than for 7th graders (20.6% and 7.9%, respectively). For 8th graders nationwide in 2016, the *Monitoring the Future* study found slightly higher lifetime alcohol prevalence (22.8% vs. 20.6%). As shown in Table 6, 4.4% of all the surveyed 7th and 8th grade students in New Jersey had used alcohol in the 30 days prior to the survey, with 6.4% of 8th graders and 2.2% of 7th graders reporting such use. The past 30 day prevalence rate for NJ 8th graders roughly matched the *Monitoring the Future* study rate of 7.3%.

The biggest difference in reported lifetime alcohol use was between New Jersey male and female middle school students (12.4% vs 16.1%, respectively). Females were also slightly more likely to have used alcohol than males in both the past year (8.9% to 7.8%) and the 30 days prior to the survey (5.0% to 3.5%).

Differences among race/ethnicity groups regarding the lifetime use of alcohol were vast, with Hispanic students reporting higher rates than African-American, White, and Asian students (20.2% vs. 16.4%, 13.1%, and 5.6%, respectively). Similarly, Hispanic students were the most likely to have drunk in the past year (14.0% vs. 8.5%, 7.0%, and 3.1%, respectively) and the past 30 days (7.3% vs. 3.4%, 3.9%, and 1.4%, respectively).

Some counties showed more than three times the lifetime alcohol use rates than other counties (Table A1). For example, Camden* County had the highest lifetime alcohol use rate (20.9%), followed by Atlantic* County (20.4%). The lowest lifetime rate was found in Hunterdon County (6.2%). Atlantic* County also had the highest annual alcohol use rate (14.7%), while Sussex* County had the lowest rate (3.3%).However, because of low response rates in some counties caution must be used when interpreting county-level findings.

Table 7 presents the past 30 day frequency of alcohol. The number of occasions of use has been broken down into four categories: *Never*, *1 to 2 occasions*, *3 to 5 occasions*, and *6 or more occasions*. In this study, 4.4% of 8th graders indicated that they had used alcohol 1 to 2 times in the past month. Further, only small proportions of 8th graders reported drinking alcohol on 3 or more occasions (1.1% in the *3 to 5 occasions* category and just 0.9% in the *6 or more occasions* category).

Table 6: ***Lifetime, Annual, and Recent Use of Alcohol by Demographic Subgroups***

	Lifetime		Annual		Past 30 Days	
	n	%	n	%	n	%
NJ Middle School Students	4462	14.3	4495	8.4	4525	4.4
Grade						
7th	2348	7.9	2367	4.8	2376	2.2
8th	2105	20.6	2118	11.9	2138	6.4
Sex						
Male	1985	12.4	2011	7.8	2020	3.5
Female	2417	16.1	2422	8.9	2442	5.0
Race/Ethnicity						
White	2212	13.1	2234	7.0	2245	3.9
African-American	414	16.4	418	8.5	424	3.4
Hispanic	1201	20.2	1203	14.0	1211	7.3
Asian	266	5.6	267	3.1	271	1.4
Other	338	13.0	341	9.3	341	4.8

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use.

Table 7: ***Frequency of Alcohol Use during the Past 30 Days by Demographic Subgroups***

		Prevalence		*Number of Occasions*		
		Never	Any Occasion	1-2	3-5	6+
	n	%	%	%	%	%
NJ Middle School Students	4525	95.6	4.4	3.0	0.8	0.6
Grade						
7th	2376	97.8	2.2	1.5	0.4	0.3
8th	2138	93.6	6.4	4.4	1.1	0.9
Sex						
Male	2020	96.5	3.5	2.4	0.5	0.7
Female	2442	95.0	5.0	3.4	1.0	0.6
Race/Ethnicity						
White	2245	96.1	3.9	2.6	0.7	0.6
African-American	424	96.6	3.4	2.4	0.3	0.7
Hispanic	1211	92.7	7.3	4.8	1.6	0.9
Asian	271	98.6	1.4	1.4	0.0	0.0
Other	341	95.2	4.8	3.3	0.5	0.9

Note: The two prevalence categories ('Never' and 'Any Occasion') generally sum to 100% and represent the total number of valid cases ("n") for the survey question. However, rounding can produce totals that do not equal 100%. The three 'Number of Occasions' categories generally sum to the 'Any Occasion' category. However, again, rounding can produce slightly different sums.

Binge Use of Alcohol

Binge use of alcohol is defined as having 3 or more drinks of alcohol in a row within a couple of hours. Findings for binge alcohol use by New Jersey middle school students surveyed in 2015-16 are presented in Table 8.

Among New Jersey middle school students, 3.2% of 7th and 8th graders reported having binged on alcohol at some time in their lives. The lifetime rate for 8th graders was higher than for 7th graders (4.8% vs. 1.6%). The past year rate for NJ 8th graders was 3.9% and, which was a higher annual rate than 7th graders (1.2%).

There was virtually no difference between New Jersey male and female middle school students in reported lifetime (2.8% and 3.4%) or past year (2.3% and 2.7%) binge alcohol use.

Differences among race/ethnicity groups regarding the binge use of alcohol mirrored that of non-binge use. Hispanic students reported higher lifetime rates than African-American, White, and Asian students (5.8% vs. 3.6%, 2.4%, and 0.7%, respectively). Past year binge use rates were also higher for Hispanic students than for White, African-American, and Asian students (4.4% vs. 2.2%, 2.1%, and 0.4%, respectively).

Binge use of alcohol by county varied widely, with some counties showing over four times the lifetime binge rates than others (Table A1). For example, Gloucester had the highest lifetime binge use rate (6.9%), whereas the lowest lifetime rate was found in Sussex* County (1.5%). Gloucester County also had the highest past year rate (5.8%). This was over four times higher than the findings for Morris County, the county with the lowest past year prevalence (1.3%). However, because of low response rates in some counties caution must be used when interpreting county-level findings.

Table 8: ***Lifetime and Annual Binge Use of Alcohol by Demographic Subgroups***

		Lifetime		Annual	
		n	%	n	%
NJ Middle School Students		4482	3.2	4530	2.5
Grade					
	7th	2355	1.6	2385	1.2
	8th	2116	4.8	2134	3.9
Sex					
	Male	1995	2.8	2025	2.3
	Female	2425	3.4	2441	2.7
Race/Ethnicity					
	White	2221	2.4	2243	2.2
	African-American	412	3.6	420	2.1
	Hispanic	1209	5.8	1222	4.4
	Asian	269	0.7	270	0.4
	Other	338	4.2	342	3.4

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use.

Marijuana

New Jersey students reported substantially lower lifetime rates of marijuana use in 2015-16 than the *Monitoring the Future* 8th graders surveyed in 2016 (4.8% vs. 12.8%). Past 30 day use was 1.8% among 2015-16 New Jersey 8th graders compared to 5.4% among 2016 *Monitoring the Future* 8th graders.

The lifetime, annual, and past 30 day rates of marijuana use by demographic subgroups is presented in Table 9. A total of 4.8% of the students surveyed reported using marijuana in their lifetime. A smaller proportion (2.6%) reported using marijuana in the past year, and past 30 days (1.8%). The reported lifetime, annual, and recent marijuana use rates were lower among 7th graders (1.7%, 1.5%, and 1.1%, respectively) than 8th graders (7.8%, 3.8%, and 2.5%, respectively).

Slightly more females than males reported lifetime marijuana use (6.3% vs. 3.2%). This slight difference by gender narrowed for annual use (2.9% and 2.3%, respectively) and past 30 day rates (2.0% and 1.6%, respectively). Across racial/ethnic categories, African-American and Hispanic students reported a greatest proportion of lifetime use (6.7% and 6.6%, respectively) than White students (4.6%).

At the county level, lifetime marijuana use varied widely, from a high of 6.7% in Atlantic* and Salem counties to a low of 1.1% in Hunterdon* County (See Table A1).

Table 9: *Lifetime, Annual, and Recent Prevalence of Marijuana Use by Demographic Subgroups*

		Lifetime		Annual		Past 30 Days	
		n	%	n	%	n	%
NJ Middle School Students		4428	4.8	4479	2.6	4508	1.8
Grade							
	7th	2326	1.7	2356	1.5	2368	1.1
	8th	2091	7.8	2112	3.8	2129	2.5
Sex							
	Male	1961	3.2	2004	2.3	2014	1.6
	Female	2405	6.3	2411	2.9	2431	2.0
Race/Ethnicity							
	White	2201	4.6	2221	1.4	2237	0.8
	African-American	405	6.7	417	5.2	419	4.0
	Hispanic	1191	6.6	1203	5.0	1213	3.4
	Asian	263	0.0	268	0.0	268	0.0
	Other	335	3.0	337	2.8	338	1.8

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use.

Cigarettes

Tobacco was the third most commonly used substance among surveyed New Jersey middle school students in 2015-16, after alcohol and marijuana. However, New Jersey 8th grade students reported lower rates of lifetime cigarette smoking in comparison to the national prevalence of cigarette smoking reported on the 2016 *Monitoring the Future* study (6.7% vs. 9.8%).

Table 10 presents the lifetime, annual, and recent prevalence rates for cigarette smoking. As shown, overall 4.2% of NJ middle school students had smoked cigarettes in their lifetimes. In addition, 3.2% reported use in the past year and 2.4% reported smoking cigarettes in the past 30 days. Eighth grade students were more than three times as likely as 7th graders to report having smoked cigarettes during their lifetime (6.7% vs. 1.7%), the past year (5.3% vs. 0.9%), and the past 30 days (4.2% vs. 0.6%).

Females were slightly more likely than males to have smoked cigarettes in their lifetime (5.3% and 3.1%, respectively). Differences occurred across racial/ethnic groups, with a much smaller proportion of Asian students (0.3%) than White, Hispanic, and African-American students (4.7%, 4.7%, and 4.1%, respectively) reporting smoking in their lifetime.

Table 11 presents the frequency of cigarette use in the past 30 days in terms of the number of occasions on which the students smoked. A small proportion of students (2.4%) reported smoking on at least one occasion during the past 30 days prior to the survey, with only 0.1% reporting that they had smoked on more than 6 occasions in the last 30 days.

The findings at the county level indicate that Salem County (6.3%) had the highest rate for lifetime cigarette smoking, while Hunterdon County (0.3%) reported the lowest rate.

Table 10: ***Lifetime, Annual, and Recent Prevalence of Cigarette Smoking by Demographic Subgroups***

	Lifetime		Annual		Past 30 Days	
	n	%	n	%	n	%
NJ Middle School Students	4499	4.2	4539	3.2	4545	2.4
Grade						
7th	2362	1.7	2386	0.9	2388	0.6
8th	2126	6.7	2142	5.3	2146	4.2
Sex						
Male	2000	3.1	2025	1.7	2027	0.7
Female	2437	5.3	2450	4.6	2454	4.1
Race/Ethnicity						
White	2235	4.7	2256	4.2	2256	3.7
African-American	414	4.1	420	3.0	422	1.8
Hispanic	1210	4.7	1218	2.9	1221	1.6
Asian	269	0.3	271	0.2	271	0.2
Other	338	4.6	341	1.2	342	0.3

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use.

Table 11: ***Frequency of Cigarette Smoking During the Past 30 Days by Demographic Subgroups***

		Prevalence		*Number of Occasions*		
		Never	Any Occasion	1-2	3-5	6+
	n	%	%	%	%	%
NJ Middle School Students	4545	97.6	2.4	2.2	0.2	0.1
Grade						
7th	2388	99.4	0.6	0.4	0.0	0.1
8th	2146	95.8	4.2	3.9	0.3	0.0
Sex						
Male	2027	99.3	0.7	0.4	0.2	0.1
Female	2454	95.9	4.1	3.9	0.1	0.0
Race/Ethnicity						
White	2256	96.3	3.7	3.5	0.1	0.0
African-American	422	98.2	1.8	1.5	0.0	0.3
Hispanic	1221	98.4	1.6	0.8	0.5	0.2
Asian	271	99.8	0.2	0.2	0.0	0.0
Other	342	99.7	0.3	0.3	0.0	0.0

Note: The two prevalence categories ('Never' and 'Any Occasion') generally sum to 100% and represent the total number of valid cases ("n") for the survey question. However, rounding can produce totals that do not equal 100%. The three 'Number of Occasions' categories generally sum to the 'Any Occasion' category. However, again, rounding can produce slightly different sums.

E-Cigarettes and Vaping

Table 12 presents the lifetime, annual, and recent prevalence rates for e-cigarette use and vaping. As shown, 10.5% of NJ middle school students reported using e-cigarettes/vaping in their lifetimes. In addition, 8.8% reported use in the past year and 5.5% reported use in the past 30 days. Eighth grade students were about three times more likely than 7th graders to report having used e-cigarettes/vaped during their lifetime (15.4% vs. 5.4%), the past year (13.3% vs. 4.2%), and the past 30 days (8.5% vs. 2.3%).

Females were slightly more likely than males to report use of e-cigarettes/vape in their lifetime (11.5% and 9.4%, respectively). Differences occurred across racial/ethnic groups, with a much smaller proportion of Asian students (4.0%) than White, Hispanic, and African-American students (10.0%, 15.1%, and 11.2%, respectively) reporting lifetime.

Table 13 presents the frequency of e-cigarette use in the past 30 days in terms of the number of occasions on which the students used them. About one-in-twenty students (5.5%) reported using e-cigarettes or vaping on at least one occasion during the past 30 days prior to the survey, with only 1.2% reporting that they had used on more than 6 occasions in the last 30 days.

Of the students who indicated that they had used e-cigarettes/vaped in the past 30 days, about three-quarters (74.1%) indicated that they had used less than one cigarette per day and one-quarter (25.9%) indicated using more than one cigarette per day.

The findings at the county level indicate that Gloucester and Passaic counties (17.7% and 17.4%, respectively) along with Atlantic* County (13.5%) had the highest rates for lifetime e-cigarette use, while Hunterdon* (3.5%) reported the lowest rate.

Table 12: ***Lifetime, Annual, and Recent Prevalence of E-Cigarette/Vape Use by Demographic Subgroups***

	Lifetime		Annual		Past 30 Days	
	n	%	n	%	n	%
NJ Middle School Students	4484	10.5	4512	8.8	4534	5.5
Grade						
7th	2354	5.4	2373	4.2	2383	2.3
8th	2119	15.4	2128	13.3	2140	8.5
Sex						
Male	1995	9.4	2017	7.9	2025	4.1
Female	2427	11.5	2431	9.7	2445	6.8
Race/Ethnicity						
White	2227	10.0	2243	9.2	2250	6.1
African-American	416	11.2	420	7.7	423	4.9
Hispanic	1203	15.1	1206	12.3	1216	6.7
Asian	268	4.0	270	3.7	271	1.5
Other	337	8.3	340	5.8	341	4.2

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use.

Table 13: ***Frequency of E-Cigarette/Vape Use During the Past 30 Days by Demographic Subgroups***

		Prevalence		*Number of Occasions*		
		Never	Any Occasion	1-2	3-5	6+
	n	%	%	%	%	%
NJ Middle School Students	4534	94.5	5.5	3.7	0.6	1.2
Grade						
7th	2383	97.7	2.3	1.2	0.4	0.8
8th	2140	91.5	8.5	6.1	0.8	1.6
Sex						
Male	2025	95.9	4.1	2.1	0.5	1.5
Female	2445	93.2	6.8	5.2	0.7	0.9
Race/Ethnicity						
White	2250	93.9	6.1	4.6	0.6	0.9
African-American	423	95.1	4.9	3.6	0.3	1.0
Hispanic	1216	93.3	6.7	3.1	1.1	2.5
Asian	271	98.5	1.5	1.1	0.0	0.4
Other	341	95.8	4.2	2.8	0.5	1.0

Note: The two prevalence categories ('Never' and 'Any Occasion') generally sum to 100% and represent the total number of valid cases ("n") for the survey question. However, rounding can produce totals that do not equal 100%. The three 'Number of Occasions' categories generally sum to the 'Any Occasion' category. However, again, rounding can produce slightly different sums.

Prescription Drugs without a Prescription

Prescription drug use without a prescription was the fourth most frequently used substance among New Jersey middle school students. Presented in Table 14, 3.2% of students reported lifetime prescription drug use without a prescription (2.2% in the past year).

New Jersey 8th graders were slightly more likely to have used prescription drugs in their lifetime than 7th graders (3.9% to 2.5%). By the same margin, females were more likely to report lifetime use of prescription drugs (4.1% to 2.3%). With respect to race/ethnicity, White and Asian students (1.7, and 2.5%, respectively) were less likely than Hispanic or African-American students to report lifetime prescription drug use (5.8% and 5.3%, respectively).

County-level findings on prescription drugs without a prescription showed that Union County (5.1%) had the highest rate for lifetime use while Warren County (0.0%) had the lowest rate.

Table 14: ***Lifetime and Annual Prevalence of Prescription Drug Use by Demographic Subgroups***

	Lifetime		Annual		Past 30 Days	
	n	%	n	%	n	%
NJ Middle School Students	4482	3.2	4518	2.2	4527	1.3
Grade						
7th	2353	2.5	2375	1.6	2379	1.1
8th	2118	3.9	2132	2.7	2137	1.5
Sex						
Male	1990	2.3	2024	1.5	2024	0.7
Female	2431	4.1	2431	2.8	2439	1.8
Race/Ethnicity						
White	2224	1.7	2246	1.1	2248	0.7
African-American	413	5.3	414	4.1	421	1.8
Hispanic	1210	5.8	1215	3.5	1213	2.0
Asian	267	2.5	271	1.9	272	1.2
Other	336	3.4	340	2.6	341	2.0

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use.

Inhalants

New Jersey 8th grade students reported substantially lower rates of inhalant use in 2015-16 than the *Monitoring the Future* 8th graders surveyed in 2016 (1.8% vs. 7.7%). Annual use of inhalants was 0.8% among 2015-16 New Jersey 8th graders compared to 3.8% among 2016 *Monitoring the Future* 8th graders.

After alcohol, marijuana, cigarettes, and prescription drugs without prescriptions, inhalants were the fifth most commonly used drug among surveyed New Jersey middle school students (see Table 3). As shown in Table 15, 1.4% of students reported using inhalants sometime in their lifetime and 0.7% reported using them some time in the past year. Eighth grade students were more likely than 7th grade students to report lifetime use (1.8% vs 0.9%), though this was the only notable variation shown by grade or gender. Hispanic students reported the greatest rate of use (3.1%) while White students were the least likely to report use (0.5%).

County-level findings on inhalant use are presented in Table A1. There were notable variations among the counties for lifetime inhalant use. Union County reported the highest lifetime use of inhalants (3.2%), while Sussex* and Warren counties reported the lowest (0.0% each).

Table 15: *Lifetime and Annual Prevalence of Inhalant Use by Demographic Subgroups*

		Lifetime		Annual		Past 30 Days	
		n	%	n	%	n	%
NJ Middle School Students		4501	1.4	4544	0.7	4541	0.5
Grade							
	7th	2360	0.9	2388	0.7	2385	0.4
	8th	2130	1.8	2145	0.8	2145	0.5
Sex							
	Male	1999	1.1	2031	0.6	2030	0.4
	Female	2440	1.6	2450	0.9	2448	0.5
Race/Ethnicity							
	White	2229	0.5	2251	0.4	2253	0.3
	African-American	418	2.2	423	1.0	423	0.6
	Hispanic	1215	3.1	1223	1.3	1220	1.0
	Asian	270	0.7	272	0.7	272	0.2
	Other	336	1.8	342	1.0	340	0.2

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use.

Cough Medicine

New Jersey 8th grade students reported slightly lower rates of annual cough medicine use in 2015-16 than the *Monitoring the Future* 8th graders surveyed in 2016 (1.7% vs. 2.6%).

Table 16 shows that 1.2% of students reported using cough medicine to get high sometime in the past year. Little variation was shown by gender, but 7th graders were slightly less likely to report use than 8th graders (0.7% vs. 1.7%). By race/ethnicity, Asian and White students were slightly less likely to use cough medicine (0.5% and 0.6%, respectively) than African-American and Hispanic students (2.8%, and 1.9%, respectively).

County-level findings on cough medicine use are presented in Table A1. Cumberland* County reported the highest use (3.8%) while Hunterdon* and Warren counties reported the lowest (0.0%).

Table 16: ***Annual Prevalence of Cough Medicine Use by Demographic Subgroups***

		Annual	
		n	%
NJ Middle School Students		4551	1.2
Grade			
	7th	2391	0.7
	8th	2149	1.7
Sex			
	Male	2034	1.3
	Female	2454	1.1
Race/Ethnicity			
	White	2253	0.6
	African-American	422	2.8
	Hispanic	1229	1.9
	Asian	271	0.5
	Other	343	1.4

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use.

Other Illicit Drugs

The *Other illicit drugs* category includes cocaine or crack, Ecstasy, methamphetamines, other club drugs, OxyContin, hallucinogens, heroin, amphetamines, sedatives/tranquilizers, and steroids. Tables 17 through 27 present the results for these drugs. Overall, the use of these other illicit drugs was much lower than the rates for alcohol, tobacco, prescription drugs, marijuana, inhalants, and cough medicine. With such low overall prevalence rates, differences between subgroups are not meaningful and are therefore not discussed.

Sedatives/Tranquilizers

Table 17 reports the findings for prevalence of sedatives/tranquilizers use of New Jersey middle school students. Only 0.6% reported using sedatives/tranquilizers in their lifetime with 0.3% reporting use in the past year.

Steroids

The lifetime and annual prevalence of steroid use is presented in Table 18. Only 0.3% of students reported lifetime use of steroids and just 0.1% reported use in the past year.

Hallucinogens

Lifetime and past year hallucinogen use was quite low among surveyed New Jersey middle school students (Table 19). Only 0.2% reported use at least once in their lifetime and 0.1% reported use in the past year.

Amphetamines

Table 20 reports the findings for prevalence of amphetamine use of New Jersey middle school students. Only 0.2% of 7th and 8th graders reported using amphetamines in their lifetime. Past year use was also reported for 0.2% of students.

Cocaine or Crack

New Jersey 8th grade students reported using less cocaine than the nationally reported use rates in the *Monitoring the Future* survey across lifetime (0.3% vs. 2.2%), annual (0.2% vs. 1.4%), and past 30 day categories (0.1% vs. 0.8%). As shown in Table 21, only 0.2% of New Jersey middle school students reported using cocaine or crack in their lifetimes, with 0.1% reporting use in the past year and 0.0% in the past 30 days.

Methamphetamine

Table 22 reports the lifetime and annual prevalence rates for methamphetamine use. The percentage of students who reported using methamphetamines in their lifetime and in the past year was 0.1% each.

Ecstasy

The reported lifetime Ecstasy use among New Jersey middle school students was 0.1%, with 0.1% also reporting use in the past year (Table 23). Lifetime and past year Ecstasy use by 8th graders in New Jersey was less than one quarter of the national *Monitoring the Future* rate (0.2% vs. 1.7% and 0.2% vs. 1.0%, respectively).

Heroin

New Jersey students reported lower rates of heroin use in 2015-16 than the *Monitoring the Future* 8th graders surveyed in 2016 (0.1% vs. 0.5%). Past year use was 0.1% among 2015-16 New Jersey 8th graders compared to 0.3% among 2016 *Monitoring the Future* 8th graders. The prevalence of use of heroin is summarized on Table 24. Overall, only 0.1% of surveyed New Jersey middle school students reported heroin use in their lifetimes.

OxyContin

Table 25 reports the lifetime and annual prevalence rates of OxyContin use by 7th and 8th grade students. Only 0.2% of students reported having used OxyContin in their lifetime and 0.1% reported having used it in the past year.

Club Drugs

Club drug use is summarized in Table 26, with 0.1% of students reporting use in their lifetime and 0.1% of students reporting use in the past year.

Total of Other Illicit Drugs

Table 27 presents information on the total other illicit drug use. This is a combined category, and includes New Jersey middle school students who reported use of any of the following: hallucinogens, Ecstasy, methamphetamines, club drugs, OxyContin, heroin, steroids, cocaine or crack, amphetamines, and sedatives/tranquilizers. The combined results show that 1.4% of 7th and 8th graders reported using at least one of these drugs in their lifetime. The past year prevalence rate was 0.8% for these drugs.

Table 17: ***Lifetime and Annual Prevalence of Sedative and Tranquilizer Use by Demographic Subgroups***

	Lifetime		Past Year	
	n	%	n	%
NJ Middle School Students	4499	0.6	4551	0.3
Grade				
7th	2359	0.4	2391	0.3
8th	2130	0.8	2150	0.3
Sex				
Male	1998	0.8	2035	0.3
Female	2439	0.3	2452	0.3
Race/Ethnicity				
White	2231	0.5	2254	0.3
African-American	417	0.0	424	0.0
Hispanic	1211	0.7	1226	0.3
Asian	270	1.6	272	0.8
Other	337	1.1	342	0.2

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use.

Table 18: ***Lifetime and Annual Prevalence of Steroid Use by Demographic Subgroups***

	Lifetime		Past Year	
	n	%	n	%
NJ Middle School Students	4508	0.3	4548	0.1
Grade				
7th	2362	0.3	2386	0.1
8th	2135	0.3	2151	0.1
Sex				
Male	2000	0.3	2030	0.1
Female	2446	0.3	2455	0.2
Race/Ethnicity				
White	2232	0.1	2253	0.0
African-American	418	0.0	424	0.0
Hispanic	1219	0.6	1225	0.5
Asian	269	0.4	272	0.0
Other	337	0.7	342	0.2

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use.

Table 19: ***Lifetime and Annual Prevalence of Hallucinogen Use by Demographic Subgroups***

	Lifetime		Past Year	
	n	%	n	%
NJ Middle School Students	4511	0.2	4552	0.1
Grade				
7th	2365	0.2	2389	0.0
8th	2135	0.2	2152	0.2
Sex				
Male	2002	0.2	2034	0.1
Female	2447	0.2	2454	0.1
Race/Ethnicity				
White	2233	0.1	2252	0.1
African-American	418	0.5	424	0.0
Hispanic	1220	0.4	1228	0.3
Asian	270	0.0	272	0.0
Other	337	0.0	343	0.0

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use.

Table 20: ***Lifetime and Annual Prevalence of Amphetamine Use by Demographic Subgroups***

	Lifetime		Past Year	
	n	%	n	%
NJ Middle School Students	4507	0.2	4546	0.2
Grade				
7th	2360	0.1	2387	0.1
8th	2136	0.3	2148	0.3
Sex				
Male	2002	0.2	2030	0.2
Female	2443	0.2	2452	0.1
Race/Ethnicity				
White	2235	0.1	2253	0.1
African-American	417	0.2	423	0.2
Hispanic	1214	0.5	1224	0.4
Asian	270	0.3	271	0.3
Other	338	0.1	342	0.1

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use.

Table 21: ***Lifetime, Annual, and Recent Prevalence of Cocaine or Crack Use by Demographic Subgroups***

	Lifetime		Annual		Past 30 Days	
	n	%	n	%	n	%
NJ Middle School Students	4495	0.2	4545	0.1	4535	0.0
Grade						
7th	2355	0.1	2388	0.0	2378	0.0
8th	2129	0.3	2146	0.2	2146	0.1
Sex						
Male	1994	0.2	2029	0.2	2024	0.0
Female	2439	0.2	2452	0.0	2447	0.1
Race/Ethnicity						
White	2225	0.1	2250	0.1	2249	0.0
African-American	416	0.0	424	0.0	424	0.0
Hispanic	1213	0.3	1227	0.1	1216	0.1
Asian	270	0.5	271	0.5	271	0.0
Other	338	0.0	340	0.0	342	0.0

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use.

Table 22: ***Lifetime, Annual, and Recent Prevalence of Methamphetamine Use by Demographic Subgroups***

	Lifetime		Past Year	
	n	%	n	%
NJ Middle School Students	4483	0.1	4535	0.1
Grade				
7th	2347	0.2	2383	0.2
8th	2125	0.1	2141	0.0
Sex				
Male	1995	0.0	2026	0.0
Female	2426	0.2	2447	0.2
Race/Ethnicity				
White	2221	0.0	2249	0.0
African-American	412	0.5	421	0.5
Hispanic	1211	0.2	1220	0.1
Asian	269	0.0	271	0.0
Other	337	0.0	342	0.0

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use.

Table 23: ***Lifetime and Annual Prevalence of Ecstasy Use by Demographic Subgroups***

	Lifetime		Past Year	
	n	%	n	%
NJ Middle School Students	4506	0.1	4552	0.1
Grade				
7th	2362	0.0	2390	0.0
8th	2133	0.2	2151	0.2
Sex				
Male	2000	0.2	2034	0.2
Female	2444	0.1	2454	0.1
Race/Ethnicity				
White	2233	0.1	2252	0.1
African-American	416	0.0	424	0.0
Hispanic	1218	0.4	1228	0.4
Asian	268	0.0	272	0.0
Other	338	0.0	343	0.0

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use.

Table 24: ***Lifetime and Annual Prevalence of Heroin Use by Demographic Subgroups***

	Lifetime		Past Year	
	n	%	n	%
NJ Middle School Students	4512	0.1	4554	0.0
Grade				
7th	2365	0.1	2392	0.0
8th	2136	0.1	2151	0.1
Sex				
Male	2004	0.0	2035	0.0
Female	2446	0.1	2455	0.1
Race/Ethnicity				
White	2232	0.0	2254	0.0
African-American	419	0.0	424	0.0
Hispanic	1220	0.2	1228	0.2
Asian	270	0.0	272	0.0
Other	338	0.0	343	0.0

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use.

Table 25: ***Lifetime and Annual Prevalence of OxyContin Use by Demographic Subgroups***

	Lifetime		Past Year	
	n	%	n	%
NJ Middle School Students	4483	0.2	4540	0.1
Grade				
7th	2353	0.1	2383	0.0
8th	2119	0.2	2146	0.2
Sex				
Male	1993	0.2	2028	0.1
Female	2429	0.1	2449	0.1
Race/Ethnicity				
White	2220	0.1	2250	0.0
African-American	417	0.3	422	0.1
Hispanic	1208	0.3	1221	0.3
Asian	268	0.1	272	0.0
Other	337	0.0	342	0.0

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use.

Table 26: ***Lifetime and Annual Prevalence of Club Drug Use by Demographic Subgroups***

	Lifetime		Past Year	
	n	%	n	%
NJ Middle School Students	4509	0.1	4551	0.1
Grade				
7th	2362	0.1	2391	0.1
8th	2136	0.1	2149	0.0
Sex				
Male	2004	0.1	2031	0.1
Female	2443	0.1	2457	0.1
Race/Ethnicity				
White	2234	0.0	2253	0.0
African-American	418	0.2	423	0.2
Hispanic	1218	0.2	1227	0.1
Asian	269	0.0	272	0.0
Other	337	0.0	343	0.0

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use.

Table 27: ***Lifetime and Annual Prevalence of Total of Other Illicit Drug Use by Demographic Subgroups***

	Lifetime		Past Year	
	n	%	n	%
NJ Middle School Students	4514	1.4	4556	0.8
Grade				
7th	2366	1.1	2392	0.6
8th	2137	1.6	2153	0.9
Sex				
Male	2005	1.7	2035	0.8
Female	2447	1.0	2457	0.8
Race/Ethnicity				
White	2235	0.8	2256	0.4
African-American	419	1.0	424	0.8
Hispanic	1219	2.3	1228	1.4
Asian	270	2.9	272	1.7
Other	338	1.6	343	0.3

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use.

C. Age of Onset of Substance Use

Students self-reported the age at which they began using alcohol, tobacco, and other drugs. Students could choose from nine categories – '10 or younger', '11', '12', '13', '14', '15', '16', '17 or older', or 'Never Have'. In order to best show ATOD use at early ages, the age groups were combined into a dichotomous response set – onset of use at 11 or younger and onset of use at 12 or older. As shown in Table 28, students were more likely to try ATOD when they were 12 or older. For all substances, with the exception of alcohol, differences between age groups were four percentage points or less. It is important to note that 4.5% of students had consumed alcohol at age 11 or younger.

Table 28: ***Summary of the Age of Onset of Primary Substances for the 2015-16 New Jersey Middle School Risk and Protective Factor Survey***

	Lifetime Use %	Onset at Age 11 or Younger %	Onset at Age 12 or Older %	Total n
Alcohol	14.3	4.5	9.8	4462
Cigarettes	4.2	1.0	3.2	4499
E-Cigarettes/Vape[9]	10.5	1.5	9.0	4484
Prescription Drugs w/o Prescription	3.2	1.3	1.9	4482
Marijuana	4.8	0.5	4.3	4428
Inhalants	1.4	0.5	0.9	4501
Other Illicit Drugs	1.4	0.6	0.7	4514

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use. Rounding can produce totals that do not equal 100%.

[9] Item wording for e-cigarettes/vape asks "used e-cigarettes/vape". It is not clear which % of these respondents were using tobacco, marijuana, or flavored liquids in these devices.

D. Gambling

Overall, 11.7% of surveyed middle school students reported having gambled in the past year. As shown in Table 29, 8.2% of 7th grade students and 15.2% of 8th grade students reported gambling. Males were much more likely to have gambled in the past year than females (15.1% vs. 8.4%). With respect to race/ethnicity, White students were most likely to report gambling (13.3%) and African-American students the least likely (8.3%).

Table 29: ***Gambling during the Past Year, by Demographic Subgroups***

			Gambling Past Year		
			Never/Before, but not in the past year	**A few times in the past year**	**Monthly, weekly, or almost everyday**
		n	**%**	**%**	**%**
NJ Middle School Students		4546	88.3	9.7	2.0
Grade					
	7th	2386	91.8	6.9	1.3
	8th	2149	84.8	12.4	2.8
Sex					
	Male	2029	84.9	12.2	2.9
	Female	2454	91.6	7.2	1.2
Race/Ethnicity					
	White	2250	86.7	11.4	1.9
	African-American	423	91.7	6.6	1.7
	Hispanic	1225	88.7	8.1	3.2
	Asian	272	87.8	10.9	1.2
	Other	343	91.9	6.8	1.3

Note: "n" represents the number of responses for a given survey item, and "%" represents the percentage of students reporting use. Rounding can produce totals that do not equal 100%.

E. Trends over Time

Table 30 compares data on the top five substances used by New Jersey middle school students across the survey years of 2007, 2010, 2012 and 2015-16. It should be noted that question wording on alcohol, marijuana and prescription drug items differed across survey years, thus comparisons on these substance across all survey years are not reliable[10]. Looking at alcohol trends across 2010, 2012, and 2015-16, when the item was identical, reported alcohol use declined in terms of lifetime (27.0% vs. 23.1% vs. 14.3%, respectively), past year (20.4% vs. 17.3% vs. 8.4%, respectively), and past 30 day use (10.7% vs. 9.0% vs. 4.4%, respectively).

Table 30: ***Lifetime, Annual, and Recent Use of Alcohol, Tobacco and Other Drugs from the 2015-16 NJ MS RPF Survey Compared to the 2007, 2010 and 2012 NJ MS RPF Surveys***

	New Jersey Middle School Risk and Protective Factor Survey			
	2007 %	**2010 %**	**2012 %**	**2015-16 %**
Lifetime Use				
Alcohol	34.0	27.0	23.1	14.3
Alcohol-Binge	*	9.5	7.6	3.2
Marijuana	3.7	5.7	5.4	4.8
Cigarettes	9.4	9.5	7.6	4.2
Prescription drugs	6.0	5.8	5.6	3.2
Inhalants	4.2	4.8	4.1	1.4
Other Illicit Drugs	2.0	2.4	2.5	1.4
Annual Use				
Alcohol	25.8	20.4	17.3	8.4
Alcohol-Binge	*	7.6	6.3	2.5
Marijuana	3.0	5.0	4.9	2.6
Cigarettes	7.0	7.4	5.7	3.2
Prescription drugs	4.5	4.2	3.9	2.2
Inhalants	2.6	3.4	2.7	0.7
Other Illicit Drugs	1.2	1.4	1.6	0.8
Recent Use (Past 30 days)				
Alcohol	15.3	10.7	9.0	4.4
Marijuana	2.1	3.0	3.3	1.8
Cigarettes	3.8	4.4	3.2	2.4
Prescription drugs	*	2.7	2.0	1.3

* 2007 survey contained no question about binge drinking or past 30 day use of prescription drugs.

[10] Wording was changed in order to more accurately measure these behaviors. For alcohol, the current survey item "Within the [time frame] how often have you had a drink of alcohol, other than a few sips" was updated on the 2010 survey. For marijuana, wording was updated in the 2015-16 survey to ask "used marijuana". Previous versions of the survey instrument used the phrase "smoked marijuana". For prescription drugs, wording was updated in the 2015-16 survey to ask "prescription drugs not prescribed". Previous versions of the survey used the wording "any prescription drug without a doctor's prescription".

Table 31 compares data on the age of onset for the top substances used by New Jersey middle school students across the survey years of 2007, 2010, 2012 and 2015-16. Early onset of all top substances used diminished; most notably, early onset of Alcohol decreased from 7.8% in 2012 to 4.5% in 2015-16. Again, alcohol does not provide a reliable comparison across all survey years as the question wording differed in 2007.

Table 31: ***Lifetime, Annual, and Recent Use of Alcohol, Tobacco and Other Drugs from the 2015-16 NJ MS RPF Survey Compared to the 2007, 2010 and 2012 NJ MS RPF Surveys***

	Onset at Age 11 or Younger			
	2007 %	2010 %	2012 %	2015-16 %
Alcohol	14.9	8.6	7.8	4.5
Marijuana	0.8	0.5	0.6	0.5
Cigarettes	3.5	3.0	2.7	1.0
Prescription Drugs w/o Prescription	2.5	2.6	2.7	1.3
Inhalants	1.8	1.6	1.6	0.5
Other Illicit Drugs	0.7	0.8	0.9	0.6

Table 32 compares gambling behaviors of New Jersey middle school students across the survey years. There was a notable decrease in the percentage of student who said they had gambled in the past year across 2007, 2010, 2012, and 2015-16 (24.2%, 21.4%, 15.6% and 11.7%, respectively). Decreases were also shown for those gambling *a few times in the past year* (18.0%, 16.8%, 12.4% and 9.7, respectively) and those saying they gambled *monthly, weekly, or almost every day* (6.2%, 4.7%, 3.2% and 2.0%, respectively).

Table 32: ***Annual Participation in Gambling Activities from the 2015-16 NJ MS RPF Survey Compared to the 2007, 2010, and 2012 NJ MS RPF Surveys***

	Gambling during Past Year			
	2007 %	2010 %	2012 %	2015-16 %
Never/Before, but not in the past year	75.8	78.6	84.4	88.3
A few times in the past year	18.0	16.8	12.4	9.7
Monthly, weekly, or almost everyday	6.2	4.7	3.2	2.0

F. Cigarettes and Use of Other Substances

Table 33 compares data on the lifetime use of alcohol, marijuana, prescription drugs without a prescription, and all other illicit drugs by lifetime use of cigarettes. As shown, a student who has smoked cigarettes during their lifetime is overwhelmingly more likely than one who has never smoked a cigarette to have used alcohol (85.0% vs. 11.1%), marijuana (69.5% vs. 2.0%), prescription drugs (15.5% vs. 2.7%), and all other illicit drugs (8.4% vs. 1.1%).

Table 33: ***Lifetime Use of Alcohol, Marijuana, Prescription Drugs, and All Other Illicit Drugs by Lifetime Use of Cigarettes***

	Has Smoked Cigarettes in Their Lifetime		Has NOT Smoked Cigarettes in Their Lifetime	
	n	%	n	%
Lifetime Use				
Alcohol	135	85.0	4311	11.1
Marijuana	**133**	69.5	4282	2.0
Prescription Drugs	137	15.5	4329	2.7
All Other Illicit Drugs	139	8.4	4357	1.1

E-Cigarettes/Vape and Use of Other Substances

Table 34 compares data on the lifetime use of alcohol, marijuana, prescription drugs without a prescription, and all other illicit drugs by lifetime use of e-cigarettes/vapes. As shown, a student who has reported use of an e-cigarette/vape during their lifetime is overwhelmingly more likely to have used alcohol (65.0% vs. 8.3%), marijuana (36.8% vs. 1.1%), prescription drugs (11.6% vs. 2.2%), and all other illicit drugs (4.8% vs. 1.0%).

Table 34: ***Lifetime Use of Alcohol, Marijuana, Prescription Drugs, and All Other Illicit Drugs by Lifetime Use of Cigarettes***

	Has Used E-Cigarette/Vape in Their Lifetime		Has NOT Used E-Cigarettes/Vapes in Their Lifetime	
	n	%	n	%
Lifetime Use				
Alcohol	445	65.0	3986	8.3
Marijuana	433	36.8	3964	1.1
Prescription Drugs	449	11.6	4000	2.2
All Other Illicit Drugs	456	4.8	4024	1.0

Chapter 2: Other Antisocial Behavior

The *2015-16 New Jersey Middle School Risk and Protective Factor Survey* measured conduct that goes against established cultural norms, rules, or laws by a series of nine other problem or antisocial behaviors. These nine antisocial behaviors are only measured for a prevalence period of the last 12 months and are listed below:

- Getting Suspended
- Attacking Someone with Intent to Harm
- Being Drunk or High at School
- Belonging to a Gang
- Being Arrested
- Carrying a Handgun
- Selling Drugs
- Attempting to Steal a Vehicle
- Taking a Handgun to School

Each behavior is described in detail in the subsections that follow. Note that, for most behaviors, the possible responses included 'Never', '1 to 2 times', '3 to 5 times,' and '6 or more times.' 'Belonging to a Gang,' however, has its own unique set of responses. These include 'Never in a gang', 'In a gang, without a name,' and 'In a gang, has a name.'

Table 35 is a summary table giving the reported 7th grade, 8th grade and combined prevalence rates of the given behavior. Tables 35 through 44 give specific information for each of the nine antisocial behaviors by grade, sex, and race/ethnicity, as well as information on frequency. County data is presented in Table A3. Please note that given the small proportion of students that reported engaging in any antisocial behaviors, differences by grade, sex, and race/ethnicity should be interpreted with caution.

Table 35: ***Summary of the Prevalence of Delinquent Behaviors for New Jersey Middle School Students in Past Year***

	7th		8th		Overall	
	n	%	n	%	n	%
Getting Suspended	2391	8.0	2155	6.4	4557	7.2
Attacking Someone with Intent to Harm	2389	5.5	2148	8.4	4548	7.0
Being Drunk or High at School	2388	1.2	2147	2.4	4546	1.8
In a Gang, With or Without a Name*	2317	1.9	2078	2.4	4406	2.1
Being Arrested	2362	0.8	2141	2.3	4514	1.5
Carrying a Handgun	2391	1.9	2152	2.6	4554	2.3
Selling Drugs	2370	0.5	2139	1.0	4520	0.8
Attempting to Steal a Vehicle	2390	0.5	2153	1.1	4554	0.8
Taking a Handgun to School	2347	0.5	2118	1.0	4475	0.7

Note: “n” represents the number of responses for a given survey item, and “%” represents the percentage of students reporting use.
* The totals for “in a gang, with or without a name,” denote lifetime involvement.

A. Getting Suspended

Getting suspended had the highest prevalence rate of any of the nine antisocial behaviors measured. (*It is important to note that 'suspension' is captured by the question "How many times in the past year have you been suspended from school?" The question does not define 'suspension.' Rather, it is left to the individual student to make that definition. It should also be noted that school suspension rates are difficult to interpret because policies vary substantially from district to district. Therefore, these rates should be interpreted with caution*.)

As presented in Table 36, 7.2% of middle school students reported having been suspended at least once in the past year, with very few reporting more than two suspensions in the past year (1.8%). This majority, in the 1-2 suspension range, was consistent across most demographic subgroups.

Findings appeared fairly consistent across the two grade levels but more males (8.6%) than females (5.5%) reported being suspended in the past year. There were wide disparities among racial/ethnic groups. African-American and Hispanic students reported being suspended much higher rates (16.0% and 11.2%, respectively) than Asian and White students (4.1% and 3.5%, respectively).

County-wide suspension prevalence also varied considerably. The counties with the highest reported suspension rates were Cumberland* (18.2%), Salem (15.1%), and Union (12.4%) and the county with the lowest was Hunterdon* (1.3%).

Table 36: *Getting Suspended During the Past Year, by Demographic Subgroups*

		Prevalence		*Number of Occasions*		
		Never	Any Occasion	1-2	3-5	6+
	n	%	%	%	%	%
NJ Middle School Students	4557	92.8	7.2	5.4	0.9	0.9
Grade						
7th	2391	92.0	8.0	6.2	1.2	0.6
8th	2155	93.6	6.4	4.7	0.7	1.1
Sex						
Male	2036	91.4	8.6	6.7	1.0	1.0
Female	2458	94.5	5.5	3.8	0.9	0.8
Race/Ethnicity						
White	2259	96.5	3.5	2.9	0.3	0.3
African-American	424	84.0	16.0	10.7	3.5	1.8
Hispanic	1227	88.8	11.2	8.9	1.3	0.9
Asian	271	95.9	4.1	1.4	0.0	2.7
Other	344	91.7	8.3	7.6	0.8	0.0

Note: The two prevalence categories ('Never' and 'Any Occasion') generally sum to 100% and represent the total number of valid cases ("n") for the survey question. However, rounding can produce totals that do not equal 100%. The three 'Number of Occasions' categories generally sum to the 'Any Occasion' category. However, again, rounding can produce slightly different sums.

B. Attacking Someone with Intent to Harm

Overall, 7.0% of surveyed students reported having attacked someone with intent to harm in the past year (see Table 37). Only the category 'Getting Suspended' had higher prevalence rates than 'Attacking Someone with Intent to Harm.' Findings appeared fairly consistent across gender but a higher amount of 8th graders as opposed to 7th graders (8.4% vs. 5.5%) had reported this behavior. African-American students reported the highest prevalence of this behavior (10.6%).

Overall, 5.2% reported attacking someone with the idea of seriously hurting them only *1 to 2 times* in the past year and very few students reported this behavior occurred on more than two occasions (1.8%). This pattern was similar across demographic subgroups. However, the response rates are so low in some of the frequency categories that caution should be taken when interpreting the results.

County-wide results are presented for this behavior in Table A3. Sussex* County had the highest proportion of students reporting attacking someone with intent to harm (10.5) and Somerset County had the lowest rate (2.3%).

Table 37: ***Attacking Someone with Intent to Harm During the Past Year, by Demographic Subgroups***

		Prevalence		***Number of Occasions***		
		Never	**Any Occasion**	**1-2**	**3-5**	**6+**
	n	**%**	**%**	**%**	**%**	**%**
NJ Middle School Students	4548	93.0	7.0	5.2	0.8	1.0
Grade						
7th	2389	94.5	5.5	4.0	0.6	0.9
8th	2148	91.6	8.4	6.3	0.9	1.2
Sex						
Male	2032	93.2	6.8	4.9	1.0	0.9
Female	2452	92.9	7.1	5.4	0.6	1.1
Race/Ethnicity						
White	2253	93.2	6.8	6.0	0.4	0.4
African-American	423	89.4	10.6	6.4	1.1	3.1
Hispanic	1226	93.1	6.9	4.0	1.6	1.3
Asian	270	96.9	3.1	2.1	0.0	1.0
Other	343	93.2	6.8	4.7	1.5	0.6

Note: The two prevalence categories ('Never' and 'Any Occasion') generally sum to 100% and represent the total number of valid cases ("n") for the survey question. However, rounding can produce totals that do not equal 100%. The three 'Number of Occasions' categories generally sum to the 'Any Occasion' category. However, again, rounding can produce slightly different sums.

C. Being Drunk or High at School

As shown in Table 38, 1.8% of New Jersey middle school students reported having been drunk or high at school in the year prior to the survey. More 8th graders (2.4%) than 7th graders (1.2%) report having been drunk or high at school. Additionally, slightly more females than males reported this behavior (1.9% vs. 1.7%). African-American students reported the greatest rate of being drunk or high at school (3.9%) and White students reported the least (0.5%). County data revealed that the highest reported prevalence rate was in Cumberland* County at 8.4% and the lowest reported prevalence was in Warren County (0.0%).

Table 38: ***Being Drunk or High at School During the Past Year, by Demographic Subgroups***

		Prevalence		*Number of Occasions*		
		Never	**Any Occasion**	**1-2**	**3-5**	**6+**
	n	**%**	**%**	**%**	**%**	**%**
NJ Middle School Students	4546	98.2	1.8	1.1	0.3	0.4
Grade						
7th	2388	98.8	1.2	0.6	0.4	0.3
8th	2147	97.6	2.4	1.7	0.2	0.5
Sex						
Male	2031	98.3	1.7	1.2	0.3	0.3
Female	2452	98.1	1.9	1.1	0.3	0.5
Race/Ethnicity						
White	2253	99.5	0.5	0.1	0.1	0.3
African-American	422	96.1	3.9	2.2	1.0	0.7
Hispanic	1225	96.7	3.3	2.2	0.4	0.7
Asian	271	96.7	3.3	3.3	0.0	0.0
Other	342	98.8	1.2	0.7	0.3	0.1

Note: The two prevalence categories ('Never' and 'Any Occasion') generally sum to 100% and represent the total number of valid cases ("n") for the survey question. However, rounding can produce totals that do not equal 100%. The three 'Number of Occasions' categories generally sum to the 'Any Occasion' category. However, again, rounding can produce slightly different sums.

D. Belonging to a Gang

Students' involvement with gangs was captured by the cross-product of the two questions, "Have you ever belonged to a gang?" and "If you have you ever belonged to a gang, did the gang have a name?" The results are shown in Table 39. Discordant responses were considered a non-response and consequently removed from the response list[11].

Overall, 1.9% of students reported being in a gang, with 1.6% reporting that their gang had a name. Since only 0.3% percent of New Jersey middle school students reported being in a gang without a name, the following percentages incorporate their data. Analyzing membership in gangs with and without names separately would be unreliable with such small percentages.

More males than females reported being in a gang (2.3% vs. 1.5%) though there were no differences between 7th and 8th grade students. There were slightly larger differences observed when gang membership was broken down by racial/ethnic categories. Notably, more than four times as many African-American and Hispanic students (3.9% each) reported being in a gang than did White and Asian students (0.9% and 0.0%, respectively).

County-wide data showed a wide variation in gang affiliation. The counties with the largest reported the greatest proportion of students with gang affiliation were Camden* and Hudson* counties (6.1% and 4.5%, respectively) while Somerset had the lowest rate (0.5%).

Table 39: ***Belonging to a Gang, by Demographic Subgroups***

		Never in a gang	In a gang, without a name	In a gang, gang has a name	Total in a gang
	n	%	%	%	%
NJ Middle School Students	4286	98.1	0.3	1.6	1.9
Grade					
7th	2260	98.1	0.4	1.5	1.9
8th	2015	98.1	0.3	1.6	1.9
Sex					
Male	1877	97.7	0.5	1.8	2.3
Female	2349	98.6	0.2	1.3	1.4
Race/Ethnicity					
White	2147	99.1	0.4	0.5	0.9
African-American	382	96.1	0.3	3.6	3.9
Hispanic	1140	96.1	0.4	3.5	3.9
Asian	262	100.0	0.0	0.0	0.0
Other	322	97.7	0.4	1.9	2.3

Note: The two prevalence categories ('Never' and 'Any Occasion') generally sum to 100% and represent the total number of valid cases ("n") for the survey question. However, rounding can produce totals that do not equal 100%. The three 'Number of Occasions' categories generally sum to the 'Any Occasion' category. However, again, rounding can produce slightly different sums.

[11] For example, if an individual said they were never in a gang in the first question, but then responded on the second question that they had been in a gang and it did not have a name, the response was considered discordant, and thus removed.

E. Being Arrested

As shown in Table 40, in the year prior to the survey, 1.5% of New Jersey middle school students reported being arrested. Though 1.5% reported ever having been arrested in the past year, 1.3% indicated that it had only been 1 to 2 times. Only 0.2% reported being arrested three or more times in the past year. All demographic subgroups with this behavior followed this pattern. More than twice as many 8th graders when compared to 7th graders reported being arrested (2.3% vs. 0.8%), but only slightly more males than females reported this behavior (1.8% vs. 1.2%). There were no notable differences by race/ethnicity.

Table 40: ***Being Arrested During the Past Year, by Demographic Subgroups***

		Prevalence		***Number of Occasions***		
		Never	**Any Occasion**	**1-2**	**3-5**	**6+**
	n	**%**	**%**	**%**	**%**	**%**
NJ Middle School Students	4514	98.5	1.5	1.3	0.0	0.2
Grade						
7th	2362	99.2	0.8	0.5	0.1	0.2
8th	2141	97.7	2.3	2.0	0.0	0.3
Sex						
Male	2018	98.2	1.8	1.7	0.1	0.0
Female	2433	98.8	1.2	0.8	0.0	0.4
Race/Ethnicity						
White	2240	99.1	0.9	0.6	0.0	0.3
African-American	418	97.8	2.2	1.9	0.0	0.3
Hispanic	1215	98.0	2.0	1.7	0.1	0.2
Asian	268	97.3	2.7	2.7	0.0	0.0
Other	340	98.3	1.7	1.5	0.3	0.0

Note: The two prevalence categories ('Never' and 'Any Occasion') generally sum to 100% and represent the total number of valid cases ("n") for the survey question. However, rounding can produce totals that do not equal 100%. The three 'Number of Occasions' categories generally sum to the 'Any Occasion' category. However, again, rounding can produce slightly different sums.

F. Carrying a Handgun

Overall, only 2.3% of surveyed New Jersey middle school students reported carrying a handgun in the past year and most of these students carried a handgun just once or twice (1.4%) (Table 41). There were only slight differences by grade. However, more than three times as many males (3.6%) than females (0.9%) reported carrying a handgun. There was little difference by race/ethnicity on this behavior. Percentages included in this table are low and should thus be interpreted with caution.

Table 41: ***Carrying a Handgun during the Past Year, by Demographic Subgroups***

		Prevalence		*Number of Occasions*		
		Never	**Any Occasion**	**1-2**	**3-5**	**6+**
	n	**%**	**%**	**%**	**%**	**%**
NJ Middle School Students	4554	97.7	2.3	1.4	0.1	0.8
Grade						
7th	2391	98.1	1.9	1.4	0.1	0.4
8th	2152	97.4	2.6	1.4	0.1	1.1
Sex						
Male	2036	96.4	3.6	2.4	0.1	1.1
Female	2455	99.1	0.9	0.4	0.0	0.5
Race/Ethnicity						
White	2256	97.9	2.1	1.5	0.0	0.6
African-American	424	98.2	1.8	1.2	0.0	0.5
Hispanic	1227	97.4	2.6	2.2	0.1	0.3
Asian	270	97.0	3.0	0.0	0.0	3.0
Other	344	97.7	2.3	0.3	0.8	1.1

Note: The two prevalence categories ('Never' and 'Any Occasion') generally sum to 100% and represent the total number of valid cases ("n") for the survey question. However, rounding can produce totals that do not equal 100%. The three 'Number of Occasions' categories generally sum to the 'Any Occasion' category. However, again, rounding can produce slightly different sums.

G. Selling Drugs

Overall, just 0.8% of surveyed middle school students reported having sold illegal drugs in the past year. It is important to mention that, 'selling drugs' is captured by the question, "How many times in the past year have you sold illegal drugs?" Note that the question asks about, but does not define, 'illegal drugs.'

As shown in Table 42, 0.5% of 7th grade students and 1.0% of 8th grade students reported selling drugs. This trend has remained consistent across all measured antisocial behaviors – with 8th grade students demonstrating more delinquent behavior than 7th grade students. However, it should be noted that with such a low overall prevalence, individual variations in the demographic subgroups should be interpreted with caution.

When disaggregated by county, no county had a prevalence rate for selling drugs higher than 2.5%, with Camden* County showing the highest at 2.3%.

Table 42: ***Selling Drugs during the Past Year, by Demographic Subgroups***

		Prevalence		***Number of Occasions***		
		Never	**Any Occasion**	**1-2**	**3-5**	**6+**
	n	**%**	**%**	**%**	**%**	**%**
NJ Middle School Students	4520	99.2	0.8	0.2	0.2	0.4
Grade						
7th	2370	99.5	0.5	0.0	0.1	0.4
8th	2139	99.0	1.0	0.4	0.2	0.4
Sex						
Male	2016	99.2	0.8	0.2	0.2	0.4
Female	2442	99.2	0.8	0.3	0.1	0.4
Race/Ethnicity						
White	2243	99.6	0.4	0.0	0.0	0.4
African-American	419	98.3	1.7	0.8	0.2	0.8
Hispanic	1215	98.4	1.6	0.5	0.6	0.5
Asian	269	100.0	0.0	0.0	0.0	0.0
Other	342	99.5	0.5	0.0	0.0	0.5

Note: The two prevalence categories ('Never' and 'Any Occasion') generally sum to 100% and represent the total number of valid cases ("n") for the survey question. However, rounding can produce totals that do not equal 100%. The three 'Number of Occasions' categories generally sum to the 'Any Occasion' category. However, again, rounding can produce slightly different sums.

H. Attempting to Steal a Vehicle

Among New Jersey middle school students, 0.8% reported having stolen, or having attempted to steal, a motor vehicle in the past year (Table 43). There were only slight differences in prevalence between 8th graders and 7th graders (1.1% vs. 0.5%) and among males opposed to females (1.0% vs. 0.6%). This prevalence data along with the frequency and demographic subgroup information for 'Attempting to Steal a Vehicle' should be interpreted with caution considering the overall low prevalence rate of the behavior.

Table 43: *Stealing/Attempting to Steal a Vehicle During the Past Year, by Demographic Subgroups*

		Prevalence		*Number of Occasions*		
		Never	Any Occasion	1-2	3-5	6+
	n	%	%	%	%	%
NJ Middle School Students	4554	99.2	0.8	0.2	0.3	0.3
Grade						
7th	2390	99.5	0.5	0.3	0.0	0.2
8th	2153	98.9	1.1	0.2	0.5	0.4
Sex						
Male	2036	99.0	1.0	0.3	0.5	0.2
Female	2454	99.4	0.6	0.2	0.0	0.4
Race/Ethnicity						
White	2255	99.6	0.4	0.1	0.0	0.3
African-American	423	99.1	0.9	0.6	0.0	0.3
Hispanic	1228	98.8	1.2	0.4	0.2	0.6
Asian	271	97.3	2.7	0.0	2.7	0.0
Other	344	99.8	0.2	0.2	0.0	0.0

Note: The two prevalence categories ('Never' and 'Any Occasion') generally sum to 100% and represent the total number of valid cases ("n") for the survey question. However, rounding can produce totals that do not equal 100%. The three 'Number of Occasions' categories generally sum to the 'Any Occasion' category. However, again, rounding can produce slightly different sums.

I. Taking a Handgun to School

As presented in Table 44, only 0.7% of New Jersey middle school students reported having taken a handgun to school in the past year. Rates were very low across all demographic subgroups and should be interpreted with extra caution. The county-level data reflect the same low rates and should be reviewed in the same fashion.

Table 44*: Taking a Handgun to School during the Past Year, by Demographic Subgroups*

		Prevalence		*Number of Occasions*		
		Never	Any Occasion	1-2	3-5	6+
	n	%	%	%	%	%
NJ Middle School Students	4475	99.3	0.7	0.2	0.2	0.3
Grade						
7th	2347	99.5	0.5	0.2	0.0	0.2
8th	2118	99.0	1.0	0.1	0.5	0.4
Sex						
Male	2009	99.2	0.8	0.2	0.5	0.1
Female	2403	99.5	0.5	0.1	0.0	0.5
Race/Ethnicity						
White	2226	99.6	0.4	0.1	0.0	0.3
African-American	412	99.2	0.8	0.5	0.0	0.3
Hispanic	1203	99.3	0.7	0.4	0.0	0.3
Asian	267	97.3	2.7	0.0	2.7	0.0
Other	334	99.8	0.2	0.0	0.0	0.2

Note: The two prevalence categories ('Never' and 'Any Occasion') generally sum to 100% and represent the total number of valid cases ("n") for the survey question. However, rounding can produce totals that do not equal 100%. The three 'Number of Occasions' categories generally sum to the 'Any Occasion' category. However, again, rounding can produce slightly different sums.

J. Trends over Time

Table 45 compares data on the nine antisocial behaviors exhibited by New Jersey middle school students across the survey years of 2007, 2010, 2012, and 2015-16. The most substantial decrease between the years occurred for being in a gang, which has been more than halved, falling from 5.9% in 2007 to 2.1% this year. Other overall decreases across survey years include getting suspended, which fell from 12.7% in 2007 to 11.4% in 2010 and then further to 9.6% in 2012 and 7.2% this year; and for attacking someone with intent to harm, which went from 9.2% in 2007 up to 9.5% in 2010 and then back down to 7.9% in 2012 and falling further to 7.0% this year. There was a slight increase across survey years in prevalence of both carrying a handgun and taking a handgun to school however, due to the low percentage of respondents reporting either behavior, these results should be interpreted with caution.

Table 45: ***Summary of the Prevalence of Delinquent Behaviors for New Jersey Middle School Students, by Year***

	2007 %	2010 %	2012 %	2015-16 %
Getting Suspended	12.7	11.4	9.6	7.2
Attacking Someone with Intent to Harm	9.2	9.5	7.9	7.0
Being Drunk or High at School	3.1	3.9	3.3	1.8
In a Gang, With or Without a Name	5.9	3.2	2.3	2.1
Being Arrested	2.8	2.8	2.0	1.5
Carrying a Handgun	1.6	1.9	1.6	2.3
Selling Drugs	0.9	1.3	1.3	0.8
Attempting to Steal a Vehicle	0.9	0.9	0.5	0.8
Taking a Handgun to School	0.4	0.5	0.3	0.7

Chapter 3: Risk and Protective Factors

The following chapter presents the risk and protective factors from the *2015-16 New Jersey Middle School Risk and Protective Factor Survey*. The survey contains six overarching domains – Community, Family, School, and Peer-Individual for the 20 risk factors and School and Peer-Individual for the five protective factors. Multiple survey items comprise each of these factors and a minimum number of questions must be answered in order to calculate a score for each factor. Scores on these factors have been standardized to a 0 to 1 scale. Standardization is commonly achieved by subtracting the lowest outcome value from all values in an array, which forces the low value to equal 0. Then, all values in the array are divided by the upper end of the adjusted array range. This second step forces the high value to equal 1.

Risk factors are characteristics of the students' community, family, school, and peer relationships that predict the likelihood of experimentation with alcohol, tobacco, and other drugs and participation in antisocial behavior while protective factors buffer students against these risks. These two factors are important in regard to prevention planning. While one may not be able to eliminate the risk factors in a students' environment, it is possible that the number of protective factors can be increased.

It is important to note that risk and protective factors are interpreted differently. Overall, it is better to have lower risk factor scores than higher. Research has shown that the more risk factors students are exposed to, the more likely they are to use drugs or participate in antisocial behaviors. Higher scores indicate more risks in the student's environment. Conversely, it is better to have higher protective factor scores. These scores represent characteristics in the students' environment that protect them against risk factors. For example, a student who lives in a community where drug use is acceptable may be less likely to use drugs if they have friends who have made commitments to stay drug-free or are rewarded for positive behavior at school.

The first two sections describe the 20 risk factors and 5 protective factors, their specific survey items, and respective mean scores. The third section provides the average state risk and protective factor scores. The fourth and fifth sections show graphs of the relationships between the average risk and protective scores and cigarette, alcohol, marijuana, and any other illicit drug use.[12] All survey items that define the factors are presented with the mean score for the factor. Table 46 presents the mean scores for all 20 risk factors and all 5 protective factors, by domain. In addition, each domain mean score is shown. For data disaggregated by demographic subgroups for each of the risk and protective factor domains, see Table B2 in Appendix B.

[12] Any other illicit drug is a combined category, and includes New Jersey middle school students who reported use of any of the following: hallucinogens, Ecstasy, methamphetamines, club drugs, OxyContin, heroin, steroids, cocaine or crack, amphetamines, sedatives, and tranquilizers.

Trends over Time

Table 46 on the next page presents data from both the 2007, 2010, 2012, and 2015-16 surveys. Note that the means of the 25 factors changed very little so trends over time will not be discussed in further detail. The only factor scores that changed more than 0.04 between 2012 and 2015-16 were *Laws and Norms Favorable to Drug Use* and *Favorable Attitudes Toward Antisocial Behavior*, which each fell by 0.04. When considering all four survey administration years, decreases of more than 0.03 were found for *Favorable Attitudes Toward Antisocial* Behavior (-0.06), *Laws and Norms Favorable to Drug Use* and *Early Initiation of Drug Use* (-0.05 each), *Perceived Availability of Drugs*, and *Community Disorganization* (-0.04 each). There was only one overall increase larger than 0.02, which was found for *Perceived Risks of Drug Use* (+0.04).

Table 46: ***Summary of All Risk and Protective Factors by Domain, by Survey Year***

Domain	*Risk Factors*	n	Mean 2007	Mean 2010	Mean 2012	Mean 2015-16
Community (mean= 0.22)	Laws and Norms Favorable to Drug Use	4495	0.34	0.34	0.33	0.29
	Community Transitions and Mobility	4475	0.29	0.27	0.26	0.26
	Low Neighborhood Attachment	4517	0.28	0.28	0.28	0.27
	Perceived Availability of Drugs	4502	0.25	0.26	0.24	0.21
	Community Disorganization	4489	0.24	0.22	0.21	0.20
	Perceived Availability of Handguns	4499	0.14	0.11	0.11	0.11
Family (mean= 0.11)	Poor Family Management	4507	0.20	0.21	0.20	0.18
	Parental Attitudes Favorable Toward Antisocial Behavior	4516	0.13	0.13	0.13	0.10
	Parental Attitudes Favorable Toward Drug Use	4521	0.05	0.05	0.05	0.04
School (mean= 0.32)	Low Commitment to School	4354	0.35	0.36	0.34	0.37
	Academic Failure	4341	0.31	0.30	0.27	0.28
Peer-Individual (mean= 0.09)	Perceived Risks of Drug Use	4529	0.20	0.21	0.22	0.24
	Favorable Attitudes Toward Antisocial Behavior	4542	0.18	0.18	0.16	0.12
	Peer Rewards for Antisocial Behavior	4518	0.13	0.15	0.15	0.15
	Favorable Attitudes Toward Drug Use	4550	0.09	0.09	0.09	0.07
	Early Initiation of Drug Use	4500	0.10	0.09	0.08	0.05
	Friends' Use of Drugs	4529	0.08	0.10	0.09	0.06
	Early Initiation of Antisocial Behavior	4504	0.07	0.06	0.05	0.04
	Gang Involvement	4402	0.05	0.03	0.02	0.02
	Interaction with Antisocial Peers	4539	0.05	0.05	0.05	0.04
Statewide Risk Factor Averages		**4491**	**0.18**	**0.17**	**0.17**	**0.15**

Domain	*Protective Factors*	n	Mean 2007	Mean 2010	Mean 2012	Mean 2015-16
Peer-Individual (mean= 0.47)	Interaction with Prosocial Peers	4490	0.63	0.62	0.64	0.63
	Peer Rewards for Prosocial Involvement	4509	0.48	0.45	0.46	0.47
	Prosocial Involvement	4547	0.28	0.30	0.31	0.30
School (mean= 0.62)	School Opportunities for Prosocial Involvement	4528	0.64	0.64	0.63	0.65
	School Rewards for Prosocial Involvement	4522	0.59	0.59	0.58	0.59
Statewide Protective Factor Averages		**4519**	**0.52**	**0.52**	**0.52**	**0.53**

A. Statewide Risk Factors

This section presents each of the risk domains and their respective risk factors, including individual questions from the survey. As mentioned previously, risk factors are characteristics of the students' community, family, school, and peer relationships that predict the likelihood of experimentation with alcohol, tobacco, and other drugs and participation in antisocial behavior. Each question was scored so that the most negative behaviors received the highest score. For example, if a student indicated that he was 10 years old or younger when he began smoking cigarettes, then this would be scored as a 1. Conversely, a student who indicated having never smoked would receive a score of 0. Mean scores for each factor were then computed on a scale of 0 to 1, with a higher score indicating that the student is at greater risk of being influenced negatively by that factor. For example, if the mean score for *Early Initiation of Drug Use* factor was 0.60 then it would be more likely than students' with lower risk scores to use drugs at an early age.

Community Domain Risk Factor

The *Community Domain Risk Factor* refers to neighborhoods where residents feel little attachment to the community; where there is a high population density, physical deteriorations, and high crime rates; where children experience frequent residential moves; and where drugs and weapons are perceived to be readily available. The *Community Domain Risk Factor* scores by demographic subgroup are presented in Tables 47 and 48.

Low Neighborhood Attachment

- I'd like to get out of my neighborhood.
- If I had to move, I would miss the neighborhood I now live in.
- I like my neighborhood.

Higher mean scores on the *Low Neighborhood Attachment* factor indicate that the group is at greater risk for using drugs and participating in antisocial behaviors because of feelings of low neighborhood attachment. The overall mean was 0.27. Eighth-grade students reported more negative feelings about their neighborhood (0.29) than 7th grade students (0.24). The same divide was found between female (0.29) and male students (0.24). When broken down by race/ethnicity, Hispanic and African-American students were at higher risk to be influenced by *Low Neighborhood Attachment* (0.31 each) than Asian or White students (0.26 and 0.23, respectively).

Community Disorganization

- I feel safe in my neighborhood.
- How much do the following statements describe your neighborhood: crime and/or drug selling?
- How much do the following statements describe your neighborhood: fights?
- How much do the following statements describe your neighborhood: lots of empty or abandoned buildings?
- How much do the following statements describe your neighborhood: lots of graffiti?

Higher mean scores on the *Community Disorganization* factor indicate that the group is at greater risk for using drugs and participating in antisocial behaviors because of issues related to community disorganization. The overall mean was 0.20. Eighth-grade students had a mean of 0.22 while the mean for 7th grade students was slightly lower (0.18). A similar difference was found between female and male student means (0.21 vs. 0.18, respectively). By race/ethnicity, African-American and Hispanic students had moderately higher scores on the *Community Disorganization* factor (0.25 each) than White and Asian students (0.17 and 0.15, respectively).

Community Transitions and Mobility

- Have you changed homes in the past year?
- How many times have you changed homes since kindergarten?
- Have you changed schools (…) in the past year?
- How many times have you changed schools (…) since kindergarten?

Higher mean scores on the *Community Transitions and Mobility* factor indicate that the group is at greater risk for using drugs and participating in antisocial behaviors because of issues related to community transitions and mobility. The overall mean was 0.26 with higher means reported for 7th grade students (0.27) than 8th grade students (0.24). A similar difference was found between female and male students (0.28 vs. 0.24, respectively). In terms of race/ethnicity, African-American and Hispanic students had higher mean scores (0.31 each) than Asian or White students (0.25 and 0.22, respectively).

Table 47: Community Domain Risk Factor Demographics – Low Neighborhood Attachment, Community Disorganization, and Community Transitions and Mobility

	Low Neighborhood Attachment		***Community Disorganization***		***Community Transitions and Mobility***	
	n	**Mean**	**n**	**Mean**	**n**	**Mean**
NJ Middle School Students	4517	0.27	4489	0.20	4475	0.26
Grade						
7th	2371	0.24	2351	0.18	2344	0.27
8th	2135	0.29	2128	0.22	2120	0.24
Sex						
Male	2018	0.24	2002	0.18	1995	0.24
Female	2436	0.29	2425	0.21	2419	0.28
Race/Ethnicity						
White	2239	0.23	2229	0.17	2227	0.22
African-American	421	0.31	415	0.25	408	0.31
Hispanic	1213	0.31	1207	0.25	1203	0.31
Asian	272	0.26	269	0.15	269	0.25
Other	339	0.28	339	0.19	337	0.27

Note: Higher scores indicate higher risk.

Perceived Availability of Drugs

- If you wanted to, how easy would it be for you to get: some beer, wine or hard liquor (…)?
- If you wanted to, how easy would it be for you to get: some cigarettes?
- If you wanted to, how easy would it be for you to get: some marijuana?
- If you wanted to, how easy would it be for you to get: a drug like cocaine, LSD, or amphetamines?

Higher mean scores on the *Perceived Availability of Drugs* factor indicate that the group is at greater risk for using drugs and participating in antisocial behaviors because of the ease of obtaining ATOD. The overall mean was 0.21. Eighth-grade students had a substantially higher

risk factor mean score (0.25) than 7th grade students (0.16), indicating that ATOD were easier to get for 8th grade students. Male and female students had similar means (0.20 vs 0.22, respectively) but a greater variance existed for race/ethnicity categories. African-American and Hispanic students had the highest means (0.24 and 0.22, respectively) and Asian students had the lowest mean of 0.16.

Perceived Availability of Handguns

- If you wanted to, how easy would it be for you to get: a handgun?

Higher mean scores on the *Perceived Availability of Handguns* factor indicate that the group is at greater risk for using drugs and participating in antisocial behaviors because of the ease of obtaining handguns. The overall mean was 0.11 and there were only minor differences by gender and grade. By race/ethnicity, African-American and Hispanic students had the highest mean scores of 0.12 each and Asian students had the lowest (0.06).

Laws and Norms Favorable to Drug Use

- If a kid used marijuana in your neighborhood would he or she be caught by the police?
- If a kid drank some beer, wine or hard liquor (…) in your neighborhood would he or she be caught by the police?
- If a kid carried a handgun in your neighborhood would he or she be caught by the police?
- If a kid smoked a cigarette in your neighborhood would he or she be caught by the police?
- How wrong would most adults (…) in your neighborhood think it is for kids your age: to use marijuana.
- How wrong would most adults (…) in your neighborhood think it is for kids your age: to drink alcohol.
- How wrong would most adults (…) in your neighborhood think it is for kids your age: to smoke cigarettes.

Higher mean scores on the *Laws and Norms Favorable to Drug Use* factor indicate that the group is at greater risk for using drugs and participating in antisocial behaviors because the laws and norms of their community are favorable to drug use. The overall mean was 0.29. The 8th grade students had a higher mean score than the 7th grade students (0.34 vs. 0.25, respectively), which suggests that older students believe that their community is more favorable to drug use. There was minimal difference between male and female student mean scores (0.28 vs 0.31, respectively). By race/ethnicity, African-American students had the highest mean score (0.32) and Asian students had the lowest (0.26).

Table 48: ***Community Domain Risk Factor Demographics – Perceived Availability of Drugs, Perceived Availability of Handguns, and Laws and Norms Favorable to Drug Use***

		Perceived Availability of Drugs		*Perceived Availability of Handguns*		*Laws And Norms Favorable to Drug Use*	
		n	**Mean**	**n**	**Mean**	**n**	**Mean**
NJ Middle School Students		4502	0.21	4499	0.11	4495	0.29
Grade							
	7th	2364	0.16	2362	0.10	2357	0.25
	8th	2127	0.25	2126	0.12	2128	0.34
Sex							
	Male	2010	0.20	2008	0.10	2009	0.28
	Female	2429	0.22	2428	0.11	2425	0.31
Race/Ethnicity							
	White	2236	0.20	2233	0.11	2234	0.29
	African-American	412	0.24	412	0.12	414	0.32
	Hispanic	1216	0.22	1215	0.12	1211	0.30
	Asian	270	0.16	271	0.06	268	0.26
	Other	337	0.20	337	0.10	336	0.28

Note: Higher scores indicate higher risk.

Family Domain Risk Factor

The *Family Domain Risk Factor* refers to dysfunctional family dynamics defined by the following characteristics: little parental supervision, unclear behavioral expectations, and inconsistent rewards/punishments for behavior, parents are tolerant of children's antisocial behaviors or drug/alcohol use; and parents engage in criminal behavior or drug/alcohol abuse. The *School Domain Risk Factor* scores by demographic subgroup are presented in Table 49.

Poor Family Management

- My parents ask if I've gotten my homework done.
- Would your parents know if you did not come on time?
- When I am not at home, one of my parents knows where I am and who I am with.
- The rules in my family are clear.
- My family has clear rules about alcohol and drug use.
- If you drank some beer or wine or liquor (…) without your parent's permission, would you be caught by your parents?
- If you carried a handgun without your parents' permission, would you be caught by your parents?
- If you skipped school would you be caught by your parents?

Higher mean scores on the *Poor Family Management* factor indicate that the group is at greater risk for using drugs and participating in antisocial behaviors because their family is poorly managed. The overall mean was 0.18. The 8th grade mean was higher than the 7th grade mean (0.21 vs. 0.15). There was no difference between male and female students. By race/ethnicity, Hispanic and African-American students had the highest mean of 0.19 each while White and Asian students had a mean of 0.17 each.

Parental Attitudes Favorable Toward Drug Use

- How wrong do your parents feel it would be for you to: drink beer, wine or hard liquor (…) regularly (…)?
- How wrong do your parents feel it would be for you to: smoke cigarettes?
- How wrong do your parents feel it would be for you to: use marijuana?

Higher mean scores on the *Parental Attitudes Favorable Toward Drug Use* factor indicate that the group is at greater risk for using drugs and participating in antisocial behaviors because their parents' attitudes are favorable to drug use. The overall mean was 0.04. The mean of 8th grade students was only slightly higher than the one for 7th grade students (0.05 and 0.03, respectively). This difference was also appeared between female and male students (0.05 and 0.03, respectively). There was no notable difference among racial/ethnic groups.

Parental Attitudes Favorable Toward Antisocial Behavior

- How wrong do your parents feel it would be for you to: steal something worth more than $5?
- How wrong do your parents feel it would be for you to: draw graffiti, or write things or draw pictures on building or other property (…)?
- How wrong do your parents feel it would be for you to: pick a fight with someone?

Higher mean scores on the *Parental Attitudes Favorable Toward Antisocial Behavior* factor indicate that the group is at greater risk for using drugs and participating in antisocial behaviors because their parents' attitudes are favorable to antisocial behavior. The overall mean was 0.10. The 8th grade mean of 0.12 for students was higher than the mean of 0.08 for 7th grade students. The mean of 0.11 for male students was slightly higher than the mean of 0.09 for female students, indicating that the parents of boys would perceive these behaviors as less wrong. Racial/ethnic differences were slight. Hispanic students scored a high of 0.12 while Asian students scored a low of 0.08.

Table 49: ***Family Domain Risk Factor Demographics – Poor Family Management, Parental Attitudes Favorable Toward Drug Use, and Parental Attitudes Favorable Toward Antisocial Behavior***

	Poor Family Management		***Parental Attitudes Favorable Toward Drug Use***		***Parental Attitudes Favorable Toward Antisocial Behavior***	
	n	**Mean**	**n**	**Mean**	**n**	**Mean**
NJ Middle School Students	4507	0.18	4521	0.04	4516	0.10
Grade						
7th	2363	0.15	2374	0.03	2370	0.08
8th	2134	0.21	2136	0.05	2135	0.12
Sex						
Male	2008	0.18	2018	0.03	2015	0.11
Female	2438	0.18	2441	0.05	2439	0.09
Race/Ethnicity						
White	2237	0.17	2242	0.04	2241	0.10
African-American	417	0.19	417	0.03	417	0.10
Hispanic	1216	0.19	1218	0.05	1218	0.12
Asian	268	0.17	271	0.02	270	0.08
Other	339	0.16	341	0.04	338	0.08

Note: Higher scores indicate higher risk.

School Domain Risk Factor

The *School Domain Risk Factor* refers to students achieving failing grades and having little commitment to school, as demonstrated by not liking school, seeing schoolwork as irrelevant, and skipping or cutting class. The *School Domain Risk Factor* scores by demographic subgroup are presented in Table 50.

Academic Failure

- Putting them all together what were your grades like last year?
- Are your school grades better than the grades of most students in your class?

Higher mean scores on the *Academic Failure* factor indicate that the group is at greater risk for using drugs and participating in antisocial behaviors because they achieve poor or failing grades in school. The overall mean was 0.28. There was no real difference between male and female students although 8th grade students scored slightly higher than 7th grade students (0.30 vs. 0.27, respectively). For race/ethnicity in this domain, African-American students had the highest mean of 0.34, followed by Hispanic (0.32), White (0.27), and Asian students (0.21).

Low Commitment to School

- During the LAST FOUR WEEKS how many whole days have you missed: because you skipped or "cut"?
- How interesting are most of your courses to you?
- Now, thinking back over the past year in school, how often did you: enjoy being in school?
- Now, thinking back over the past year in school, how often did you: hate being in school?
- Now, thinking back over the past year in school, how often did you: try to do your best work in school?
- How often do you feel that the schoolwork you are assigned is meaningful and important?
- How important do you think the things you are learning in school are going to be for your later life?

Higher mean scores on the *Low Commitment to School* factor indicate that the group is at greater risk for using drugs and participating in antisocial behaviors because they have a low commitment to school. The overall mean was 0.37. By grade, 8th grade students scored slightly higher than 7th graders (0.39 vs. 0.35, respectively). There was no difference between male and female students on this domain; however, White students were at greatest risk to be impacted by their low commitment to school (0.38) versus Asian students, who had the lowest mean (0.35).

Table 50: ***School Domain Risk Factor Demographics – Academic Failure and Low Commitment to School***

		Academic Failure		*Low Commitment to School*	
		n	**Mean**	**n**	**Mean**
NJ Middle School Students		4341	0.28	4354	0.37
Grade					
	7th	2265	0.27	2270	0.35
	8th	2067	0.30	2073	0.39
Sex					
	Male	1938	0.29	1933	0.37
	Female	2347	0.28	2362	0.37
Race/Ethnicity					
	White	2166	0.27	2185	0.38
	African-American	390	0.34	398	0.37
	Hispanic	1170	0.32	1143	0.37
	Asian	264	0.21	267	0.35
	Other	324	0.26	332	0.35

Note: Higher scores indicate higher risk.

Peer-Individual Domain Risk Factor

The *Peer-Individual Domain Risk Factor* refers to youths' attitudes about drug use and antisocial behavior, the age which they began using drugs and engaging in antisocial behavior, whether or not their friends use drugs or are delinquents, and if there are peer rewards for delinquent behavior. The *Community Domain Risk Factor* scores by demographic subgroup are presented in Tables 51 to 54.

Gang Involvement

- Think of your four best friends (…). In the past year (…) how many of your best friends have: been members of a gang?
- Have you ever belonged to a gang?
- If you have ever belonged to a gang, did the gang have a name?
- How old were you when you first: belonged to a gang?

Higher mean scores on the *Gang Involvement* factor indicate that the group is at greater risk for using drugs and participating in antisocial behaviors because of their involvement with gangs. The overall mean was 0.02. There was no variation between grade levels or between genders. For race/ethnicity in this category, African-American and Hispanic students (0.04 each) had slightly higher mean scores than White and Asian students (0.01 and 0.00, respectively).

Perceived Risks of Drug Use

- How much do you think people risk harming themselves (…) if they: smoke one or more packs of cigarettes per day.
- How much do you think people risk harming themselves (…) if they: try marijuana once or twice.
- How much do you think people risk harming themselves (…) if they: use marijuana regularly.
- How much do you think people risk harming themselves (…) if they: have one or two drinks of an alcoholic beverage (…) nearly every day.

Higher mean scores on the *Perceived Risks of Drug Use* factor indicate that the group is at greater risk for using drugs and participating in antisocial behaviors because they believe that using ATOD is of little risk to their health. The overall mean was 0.24. A difference is shown by grade, with the 8th grade mean score being higher than the 7th grade one (0.26 vs. 0.21). The male mean score was similar to the female mean (0.23 vs. 0.24). By race/ethnicity, African-American students (0.31) perceived much less risk of harm from drugs and alcohol, as compared to Asian students (0.18).

Table 51: ***Peer-Individual Domain Risk Factor Demographics – Gang Involvement and Perceived Risks of Drug Use***

		Gang Involvement		*Perceived Risks of Drug Use*	
		n	**Mean**	**n**	**Mean**
NJ Middle School Students		4402	0.02	4529	0.24
Grade					
	7th	2312	0.02	2377	0.21
	8th	2079	0.02	2141	0.26
Sex					
	Male	1934	0.02	2020	0.23
	Female	2406	0.02	2445	0.24
Race/Ethnicity					
	White	2184	0.01	2243	0.22
	African-American	400	0.04	422	0.31
	Hispanic	1186	0.04	1221	0.26
	Asian	266	0.00	269	0.18
	Other	333	0.02	342	0.24

Note: Higher scores indicate higher risk.

Early Initiation of Drug Use

- How old were you when you first: smoked cigarettes?
- How old were you when you first: drank alcoholic beverages?
- How old were you when you first: used marijuana?
- How old were you when you first: began drinking alcoholic beverages regularly, that is, at least once or twice a month?

Higher mean scores on the *Early Initiation of Drug Use* factor indicate that the group is at greater risk for using drugs and participating in antisocial behaviors because they began using ATOD at an early age. The overall mean was 0.05. The 8th grade student mean was 0.07 while the mean score for 7th grade students was 0.03, indicating that 8th graders first used ATOD at earlier ages. There was no notable difference between the male and female student means. The highest mean by racial/ethnic groups was for Hispanic students (0.07), while the lowest mean was for Asian students (0.01).

Early Initiation of Antisocial Behavior

- How old were you when you first: got suspended from school?
- How old were you when you first: got arrested?
- How old were you when you first: carried a handgun?
- How old were you when you first: attacked someone with the idea of seriously hurting them?

Higher mean scores on the *Early Initiation of Antisocial Behavior* factor indicate that the group is at greater risk for using drugs and participating in antisocial behaviors because they began engaging in antisocial behaviors at an early age. The overall mean was 0.04. There was

little difference by grade level but the mean for male students (0.05) was slightly higher than the mean for females (0.03), which suggests that males were younger when they first started engaging in anti-social behavior. Broken down by race/ethnicity in this domain, mean scores were higher for African-American and Hispanic students (0.08 and 0.06, respectively) than for White and Asian students (0.03 and 0.02, respectively).

Table 52: ***Peer-Individual Domain Risk Factor Demographics – Early Initiation of Drug Use and Early Initiation of Antisocial Behavior***

		Early Initiation of Drug Use		***Early Initiation of Antisocial Behavior***	
		n	**Mean**	**n**	**Mean**
NJ Middle School Students		4500	0.05	4504	0.04
Grade					
	7th	2360	0.03	2357	0.04
	8th	2130	0.07	2136	0.05
Sex					
	Male	1999	0.04	1998	0.05
	Female	2439	0.05	2444	0.03
Race/Ethnicity					
	White	2229	0.04	2233	0.03
	African-American	415	0.06	417	0.08
	Hispanic	1215	0.07	1212	0.06
	Asian	269	0.01	270	0.02
	Other	339	0.04	339	0.05

Note: Higher scores indicate higher risk.

Favorable Attitudes Toward Drug Use

- How wrong do you think it is for someone your age to: drink beer, wine or hard liquor (…) regularly (…)?
- How wrong do you think it is for someone your age to: smoke cigarettes?
- How wrong do you think it is for someone your age to: use marijuana?
- How wrong do you think it is for someone your age to: use LSD, cocaine, amphetamines or another illicit drug?

Higher mean scores on the *Favorable Attitudes Toward Drug Use* factor indicate that the group is at greater risk for using drugs and participating in antisocial behaviors because they perceive drug use as less wrong. The overall mean was 0.07. The 8th grade student mean was 0.10 and the 7th grade student mean was 0.04, which suggests that 8th graders believed it was less wrong for someone their age to use ATOD. No significant difference was shown by gender or by race/ethnicity.

Favorable Attitudes Toward Antisocial Behavior

- How wrong do you think it is for someone your age to: take a handgun to school?
- How wrong do you think it is for someone your age to: steal something worth more than $5?
- How wrong do you think it is for someone your age to: pick a fight with someone?
- How wrong do you think it is for someone your age to: attack someone with the idea of seriously hurting them?
- How wrong do you think it is for someone your age to: stay away from school all day when their parents think they are at school?

Higher mean scores on the *Favorable Attitudes Toward Antisocial Behavior* factor indicate that the group is at greater risk for using drugs and participating in antisocial behaviors because they perceive antisocial behavior as less wrong. The overall mean was 0.12. The mean for 8th grade students was 0.14 and the mean for 7th grade students was 0.11. The mean did not differ much by gender; however, by race/ethnicity African-American and Hispanic students had higher mean scores (0.15 and 0.14, respectively) than White and Asian students (0.11 each).

Rewards for Antisocial Behavior

- What are the chances you would be seen as cool if you: smoked cigarettes.
- What are the chances you would be seen as cool if you: began drinking alcoholic beverages regularly, that is, at least once or twice a month.
- What are the chances you would be seen as cool if you: used marijuana.
- What are the chances you would be seen as cool if you: carried a handgun.

Higher mean scores on the *Rewards for Antisocial Behavior* factor indicate that the group is at greater risk for using drugs and participating in antisocial behaviors because they perceive more rewards for drug use and antisocial behavior. The overall mean was 0.15 and the 8th grade student mean was higher than the 7th grade student mean (0.17 vs. 0.13), indicating that 8th graders felt that there were more rewards for antisocial behavior. There was no real difference by gender. The racial/ethnic category with the highest mean was African-American students at 0.19 and the lowest mean was for Asian students at 0.10.

Table 53*: Peer-Individual Domain Risk Factor Demographics – Favorable Attitudes Toward Drug Use, Favorable Attitudes Toward Antisocial Behavior, and Rewards for Antisocial Behavior*

		Favorable Attitudes Toward Drug Use		*Favorable Attitudes Toward Antisocial Behavior*		*Rewards for Antisocial Behavior*	
		n	**Mean**	**n**	**Mean**	**n**	**Mean**
NJ Middle School Students		4550	0.07	4542	0.12	4518	0.15
Grade							
	7th	2385	0.04	2382	0.11	2374	0.13
	8th	2154	0.10	2149	0.14	2134	0.17
Sex							
	Male	2034	0.07	2027	0.13	2017	0.14
	Female	2455	0.08	2454	0.11	2439	0.16
Race/Ethnicity							
	White	2251	0.07	2248	0.11	2244	0.15
	African-American	424	0.08	422	0.15	416	0.19
	Hispanic	1227	0.09	1225	0.14	1216	0.16
	Asian	272	0.06	272	0.11	269	0.10
	Other	344	0.06	343	0.11	342	0.12

Note: Higher scores indicate higher risk.

Friends' Use of Drugs

- Think of your four best friends (…). In the past year (…) how many of your best friends have: smoke cigarettes.
- Think of your four best friends (…). In the past year (…) how many of your best friends have: tried beer, wine or hard liquor (…) when their parents didn't know about it.
- Think of your four best friends (…). In the past year (…) how many of your best friends have: used marijuana.
- Think of your four best friends (…). In the past year (…) how many of your best friends have: used LSD, cocaine, amphetamines or other illegal drugs.

Higher mean scores on the *Friends' Use of Drugs* factor indicate that the group is at greater risk for using drugs and participating in antisocial behaviors because more of their friends have used ATOD. The overall mean was 0.06. The 8th grade student mean was 0.08, more than twice the 7th grade mean of 0.03. Male students had a slightly lower mean than female students (0.05 vs.0.07). With regards to race/ethnicity, African-American students had the highest mean of 0.10 while Asian students had the lowest (0.02).

Interaction with Antisocial Peers

- Think of your four best friends (…). In the past year (…) how many of your best friends have: been suspended from school.
- Think of your four best friends (…). In the past year (…) how many of your best friends have: carried a handgun.
- Think of your four best friends (…). In the past year (…) how many of your best friends have: sold illegal drugs.
- Think of your four best friends (…). In the past year (…) how many of your best friends have: stolen or tried to steal a motor vehicle such as a car or motorcycle.
- Think of your four best friends (…). In the past year (…) how many of your best friends have: been arrested.
- Think of your four best friends (…). In the past year (…) how many of your best friends have: dropped out of school.

Higher mean scores on the *Interaction with Antisocial Peers* factor indicate that the group is at greater risk for using drugs and participating in antisocial behaviors because more of their friends have engaged in antisocial behavior. The overall mean was 0.04. There was no difference between males and females, though 8th grade students had a higher mean than 7th grade students (0.05 vs. 0.03, respectively). For race/ethnicity in this category, African-American students had the highest mean of 0.07 while Asian students reported the lowest mean of 0.02.

Table 54: *Peer-Individual Domain Risk Factor Demographics – Friends' Use of Drugs and Interaction with Antisocial Peers*

		Friends' Use of Drugs		***Interaction with Antisocial Peers***	
		n	**Mean**	**n**	**Mean**
NJ Middle School Students		4529	0.06	4539	0.04
Grade					
	7th	2377	0.03	2384	0.03
	8th	2141	0.08	2145	0.05
Sex					
	Male	2015	0.05	2025	0.04
	Female	2452	0.07	2451	0.04
Race/Ethnicity					
	White	2247	0.05	2251	0.03
	African-American	421	0.10	421	0.07
	Hispanic	1216	0.08	1220	0.05
	Asian	272	0.02	272	0.02
	Other	343	0.04	344	0.03

Note: Higher scores indicate higher risk.

B. Statewide Protective Factors

This section presents each of the protective domains and their respective risk factors, including individual questions from the survey. As mentioned previously, protective factors are characteristics of the students' school and peer relationships that have been associated with reducing the likelihood of experimentation with alcohol, tobacco, and other drugs and antisocial behavior by buffering the effects of risks in their environment. Each question was scored so that the most positive behaviors received the highest score. For example, if a student indicated that she had done community service 40 or more times in the last year, then this would be scored as a 1. Conversely, a student who indicated having never done community service would receive a score of 0. Mean scores for each factor were then computed on a scale of 0 to 1, with a higher score indicating that the student has a greater chance of being protected by that factor. For example, if the mean score for the *Prosocial Involvemen*t factor was 0.60 then students would be more likely than average than students with lower protective scores to be participating in positive activities.

Peer-Individual Domain Protective Factors

The *Peer-Individual Domain Protective Factor* refers to youths' attitudes about school, their participation in extra-curricular activities, whether or not their friends engage in prosocial behaviors, and if there are peer rewards for prosocial behavior. The *Peer-Individual Domain Protective Factor* scores by demographic subgroup are presented in Table 55.

Interaction with Prosocial Peers

- Think of your four best friends (…). In the past year (…) how many of your best friends have: participated in clubs, organizations or activities at school.
- Think of your four best friends (…). In the past year (…) how many of your best friends have: made a commitment to stay drug-free.
- Think of your four best friends (…). In the past year (…) how many of your best friends have: liked school.
- Think of your four best friends (…). In the past year (…) how many of your best friends have: regularly attended religious services.
- Think of your four best friends (…). In the past year (…) how many of your best friends have: tried to do well in school.

Higher mean scores on the *Interaction with Prosocial Peers* factor indicate that the group has a greater chance for being protected from using drugs and participating in antisocial behaviors because more of their friends have engaged in prosocial behavior. The overall mean was 0.63. The mean for 8th grade students was slightly lower than the mean for 7th grade students (0.62 and 0.65, respectively), indicating that the four best friends of 7th grade students have participated in more positive behaviors than the four best friends of 8th grade students. Distinctions were also shown by gender and race/ethnicity. Females had a mean score of 0.65 higher than that of male students (0.62). By racial/ethnic group, Asian students had the highest mean (0.70) versus the lowest mean score of 0.59 for Hispanic students.

Prosocial Involvement

- How many times in the past year (…) have you: participated in clubs, organizations or activities at school.
- How many times in the past year (…) have you: done extra work on your own for school.
- How many times in the past year (…) have you: volunteered to do community service.

Higher mean scores on the *Prosocial Involvement* factor indicate that the group has a greater chance for being protected from using drugs and participating in antisocial behaviors because of more frequent involvement with prosocial activities. The overall mean was 0.30. The mean score for 7th grade students was lower than for 8th grade students (0.28 vs. 0.31, respectively). By gender, the female student mean was (0.33) greater than the male student mean (0.27), indicating that females more frequently engaged in prosocial activities than males did. Asian and White students (0.33 and 0.32, respectively) reported more prosocial involvement than did African-American and Hispanic students (0.26 and 0.24, respectively).

Peer Rewards for Prosocial Involvement

- What are the chances you would be seen as cool if you: worked hard at school?
- What are the chances you would be seen as cool if you: defended someone who was being verbally abused at school?
- What are the chances you would be seen as cool if you: regularly volunteered to do community service?
- What are the chances you would be seen as cool if you: made a commitment to stay drug-free?

Higher mean scores on the *Peer Rewards for Prosocial Involvement* factor indicate that the group has a greater chance for being protected from using drugs and participating in antisocial behaviors because they perceive peer rewards for participation in prosocial activities. The overall mean was 0.47. The mean score for 7th grade students (0.50) was higher than the 8th grade student mean (0.44). There was little difference by gender with a mean score for males of 0.46 compared to a mean score of 0.48 for females. The racial/ethnic group with the highest mean was Asian students (0.49), indicating that more Asian students believe that they would be seen as cool if they participated in prosocial activities.

Table 55: ***Peer-Individual Domain Protective Factor Demographics – Interaction with Prosocial Peers, Prosocial Involvement, and Rewards for Prosocial Involvement***

	Interaction with Prosocial Peers		***Prosocial Involvement***		***Peer Rewards for Prosocial Involvement***	
	n	**Mean**	**n**	**Mean**	**n**	**Mean**
NJ Middle School Students	4490	0.63	4547	0.30	4509	0.47
Grade						
7th	2356	0.65	2386	0.28	2367	0.50
8th	2127	0.62	2151	0.31	2132	0.44
Sex						
Male	2001	0.62	2032	0.27	2015	0.46
Female	2429	0.65	2451	0.33	2431	0.48
Race/Ethnicity						
White	2229	0.65	2250	0.32	2238	0.47
African-American	421	0.60	425	0.26	418	0.46
Hispanic	1205	0.59	1225	0.24	1214	0.46
Asian	265	0.70	271	0.33	268	0.49
Other	341	0.64	343	0.30	339	0.49

Note: Higher scores indicate higher protection.

School Domain Protective Factors

The School Domain Protective Factor is defined by students who have positive relationships with teachers; have opportunities to make decisions in class; and/or receive rewards, recognition, or praise for such success both in and out of school. The *School Domain Protective Factor* scores by demographic subgroup are presented in Table 56.

School Opportunities for Prosocial Involvement

- In my school, students have lots of chances to help decide things like class activities and rules.
- Teachers ask me to work on special classroom projects.
- There are lots of chances for students in my school to get involved in sports, clubs, and other school activities outside of class.
- There are lots of chances for students in my school to talk with a teacher one-on-one.
- There are lots of chances to be part of class discussions or activities.

Higher mean scores on the *School Opportunities for Prosocial Involvement* factor indicate that the group has a greater chance for being protected from using drugs and participating in antisocial behaviors because there are school opportunities for prosocial involvement. The overall mean was 0.65. There were no real differences by gender, grade, or race/ethnicity on this factor score.

School Rewards for Prosocial Involvement

- My teacher notices when I am doing a good job and lets me know about it.
- I feel safe at my school.
- The school lets my parents know when I have done something well.
- My teachers praise me when I work hard in school.

Higher mean scores on the *School Rewards for Prosocial Involvement* factor indicate that the group has a greater chance for being protected from using drugs and participating in antisocial behaviors because there are school rewards for prosocial involvement. The overall mean was 0.59. The mean for 7th grade students was slightly higher than the mean for 8th grade students (0.60 vs. 0.57, respectively). Similarly, there was no notable difference between the male student and female student means (0.59 and 0.58, respectively). Similarly, there were no considerable differences among means for racial/ethnic groups, as all groups scores ranged between 0.57 and 0.60.

Table 56: ***School Domain Protective Factor Demographics – School Opportunities for Prosocial Involvement and School Rewards for Prosocial Involvement***

		School Opportunities for Prosocial Involvement		***School Rewards for Prosocial Involvement***	
		n	**Mean**	**n**	**Mean**
NJ Middle School Students		4528	0.65	4522	0.59
Grade					
	7th	2375	0.66	2372	0.60
	8th	2142	0.64	2139	0.57
Sex					
	Male	2023	0.66	2016	0.59
	Female	2444	0.65	2444	0.58
Race/Ethnicity					
	White	2243	0.66	2241	0.60
	African-American	423	0.65	424	0.57
	Hispanic	1215	0.64	1216	0.57
	Asian	271	0.64	270	0.59
	Other	344	0.65	341	0.59

Note: Higher scores indicate higher protection.

C. Statewide Risk and Protective Factor Averages

Table 57 presents the average score for all 20 risk factors and all five protective factors. Overall, little variation is observed between demographic subgroups.

Average of the Risk Factors: Higher mean scores indicate that the group is at greater risk for using drugs and participating in antisocial behaviors. The overall mean was 0.15. There were only slight differences between demographic subgroups. The 8th grade student mean was 0.17, which was only slightly higher than the 7th grade mean of 0.13. The mean score for males was very similar to the average for females (0.15 vs. 0.16, respectively). By race/ethnicity, the highest mean was for African-American students (0.18) and the lowest mean was for Asian students (0.12).

Average of the Protective Factors: Higher mean scores indicate that the group has a greater chance for being protected from using drugs and participating in antisocial behaviors. The overall mean was 0.53. The mean for 7th grade students was slightly higher than the mean score for 8th grade students (0.54 vs. 0.52), indicating that 7th graders were slightly more likely to be protected from using drugs and antisocial behaviors than 8th graders were. The mean score for female students was also slightly higher than the mean score for males (0.54 vs. 0.52). By race/ethnicity, Asian students had the highest mean (0.55) and the Hispanic students had the lowest mean (0.50).

Table 57: ***Average of the Risk and Protective Factors by Demographic Subgroups***

		Risk Factors		***Protective Factors***	
		n	**Mean**	**n**	**Mean**
NJ Middle School Students		4435	0.15	4531	0.53
Grade					
	7th	2325	0.13	2378	0.54
	8th	2101	0.17	2144	0.52
Sex					
	Male	1967	0.15	2022	0.52
	Female	2409	0.16	2448	0.54
Race/Ethnicity					
	White	2210	0.14	2247	0.54
	African-American	406	0.18	425	0.51
	Hispanic	1191	0.17	1215	0.50
	Asian	269	0.12	270	0.55
	Other	331	0.14	343	0.53

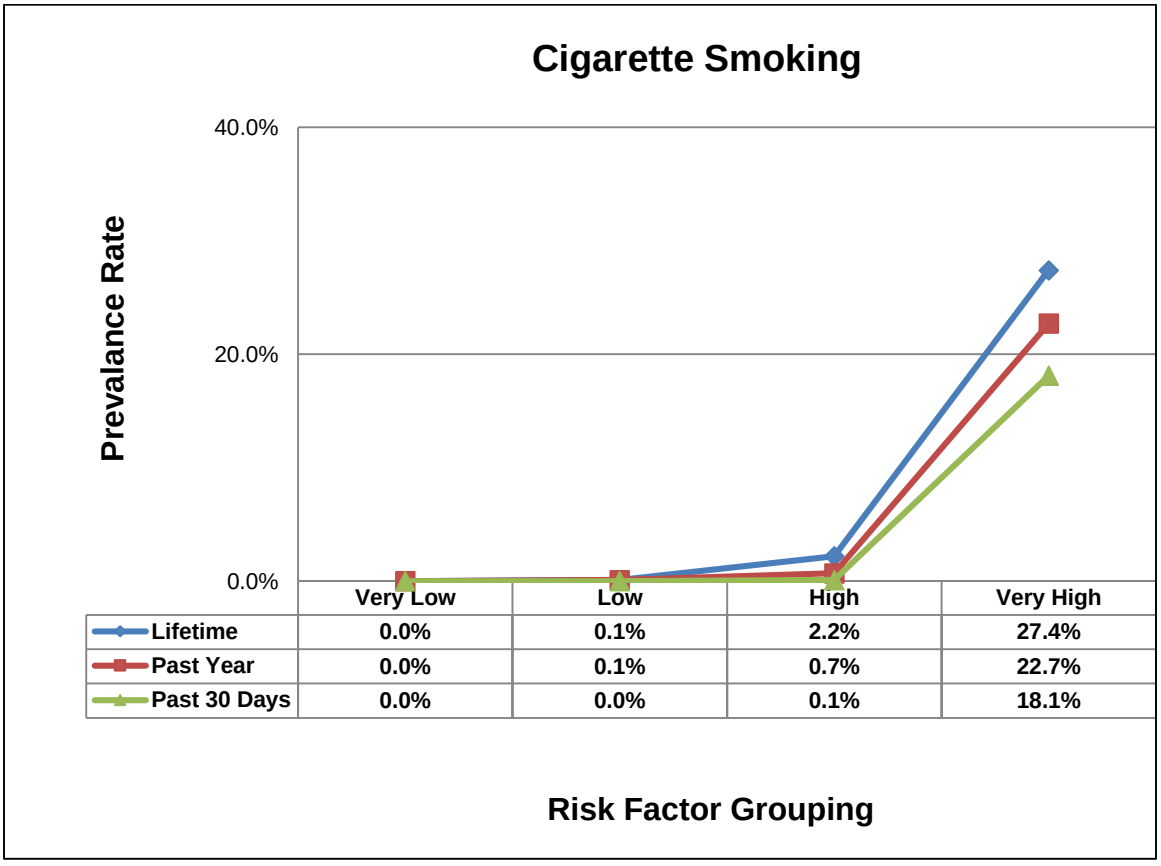
Note: Higher scores on risk factors indicate higher risk, and higher scores on protective factors indicate higher protection.

D. Impact of Average Risk Factor Score on Substance Use

In order to better interpret the risk factor mean scores, four categories were calculated – *very low*, *low*, *high*, and *very high*. These categories were based on a normal distribution of scores, such that 68% of the scores are within one standard deviation of the mean. Risk categories were determined by examining the mean and standard deviations of the average risk factor score (0.17). Each quartile division of the following graphs was created using standard deviations. The ***low*** division represents one standard deviation *below* the mean while the ***high*** division represents scores one standard deviation *above* the mean. The ***very low*** division represents scores more than one standard deviation *below* the mean. Similarly, the ***very high*** division includes scores more than one standard deviation *above* the mean.

Once risk factor categories were established, the interaction of these categories with the prevalence of tobacco, alcohol, and other drug use was analyzed. The relationships between the average risk factor score and the rate of substance use are illustrated in Figures 1-4 below. As shown, as risk scores increase, lifetime, past year, and past 30 day ATOD use increases.

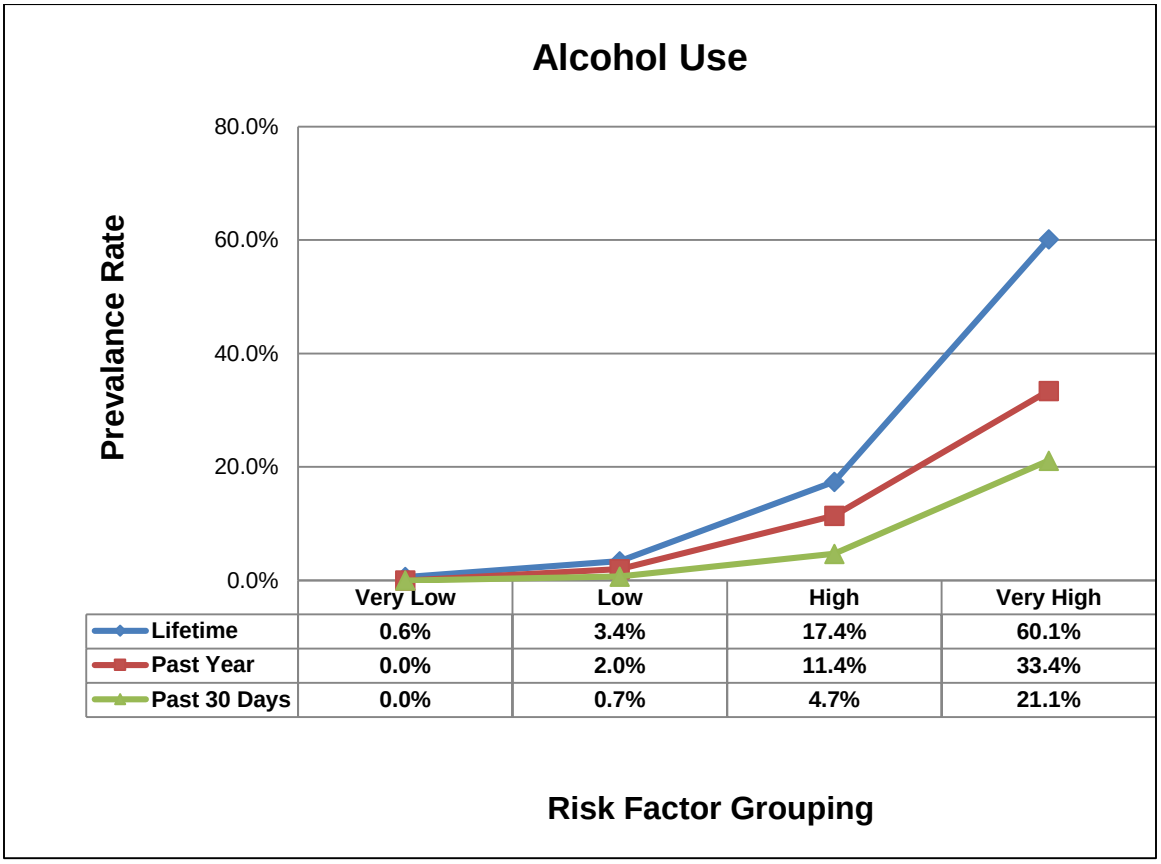
Figure 1: ***Prevalence of Cigarette Smoking by Risk Factor Groupings***



	Very Low	Low	High	Very High
Lifetime	0.0%	0.1%	2.2%	27.4%
Past Year	0.0%	0.1%	0.7%	22.7%
Past 30 Days	0.0%	0.0%	0.1%	18.1%

As shown, as risk scores increase, use of tobacco increases. Rates of lifetime cigarette smoking remain extremely low across students at *very low, low*, and *high* risk (0.0%, 0.1%, and 2.2%, respectively). However, a dramatic increase in lifetime cigarette smoking occurs between those at *high* and *very high* risk (2.2% vs. 27.4%). These patterns remain consistent for annual and past 30 day use as well.

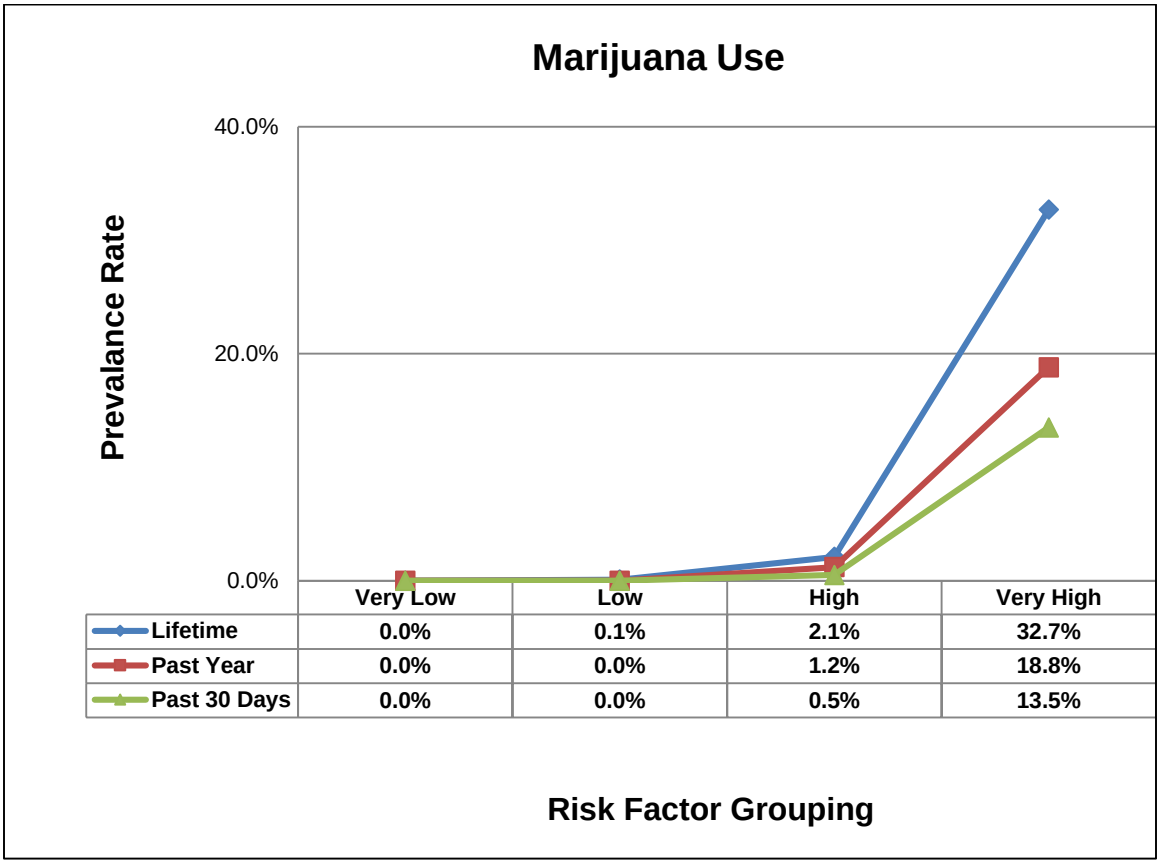
Figure 2: ***Prevalence of Alcohol Consumption by Risk Factor Groupings***



	Very Low	Low	High	Very High
Lifetime	0.6%	3.4%	17.4%	60.1%
Past Year	0.0%	2.0%	11.4%	33.4%
Past 30 Days	0.0%	0.7%	4.7%	21.1%

As shown, as risk scores increase, alcohol consumption increases. When it comes to lifetime alcohol use, there is a clear difference between those of *low* risk and those of *high* risk (3.4% vs. 17.4%, respectively). Further, 60.1% of students in the *very high* risk category had consumed alcohol in their lifetime. These patterns remain consistent for annual and past 30 day use as well.

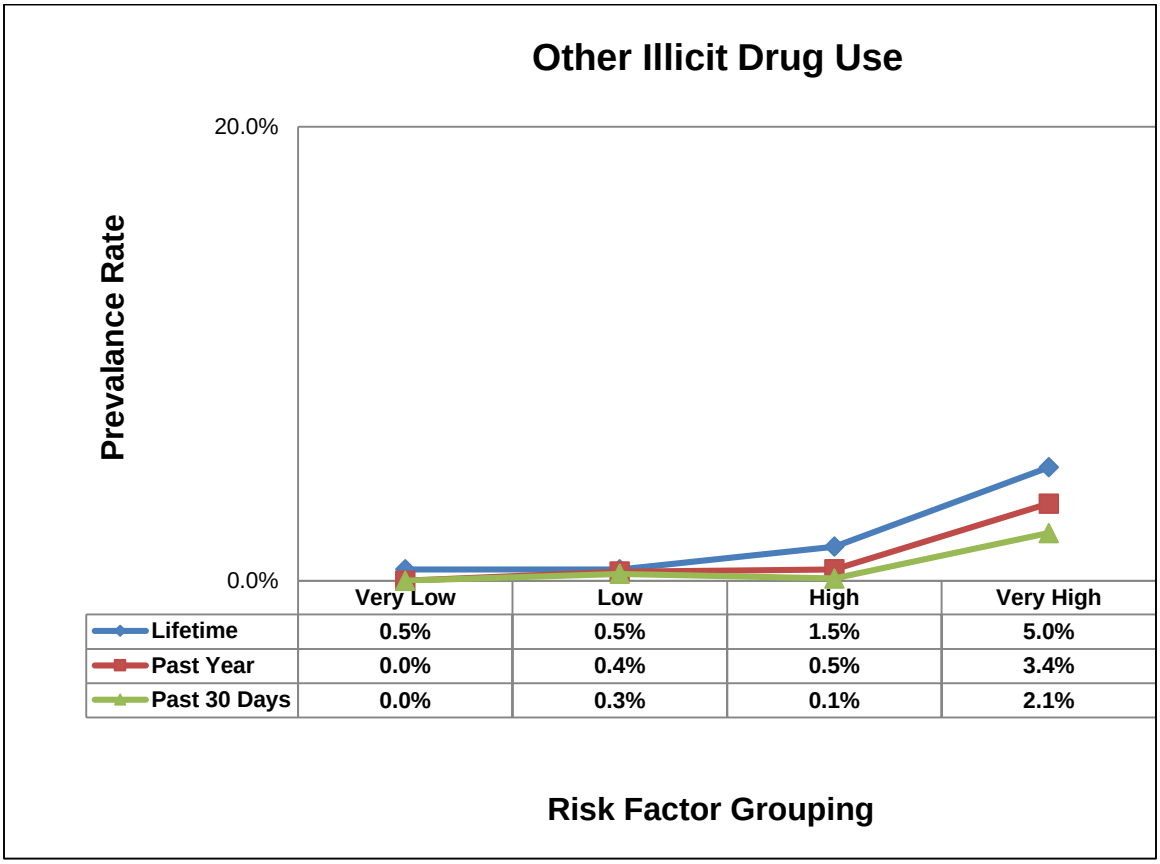
Figure 3: ***Prevalence of Marijuana Use by Risk Factor Groupings***



	Very Low	Low	High	Very High
Lifetime	0.0%	0.1%	2.1%	32.7%
Past Year	0.0%	0.0%	1.2%	18.8%
Past 30 Days	0.0%	0.0%	0.5%	13.5%

As shown, as risk scores increase, use of marijuana increases. There is a strong contrast between students at *high* risk and those of *very high* risk when it comes to lifetime (2.1% vs. 32.7%), annual (1.2% vs. 18.8%), and recent (0.5% vs. 13.5%) use of marijuana.

Figure 4: ***Prevalence of Other Illicit Drug Use by Risk Factor Groupings***



	Very Low	Low	High	Very High
Lifetime	0.5%	0.5%	1.5%	5.0%
Past Year	0.0%	0.4%	0.5%	3.4%
Past 30 Days	0.0%	0.3%	0.1%	2.1%

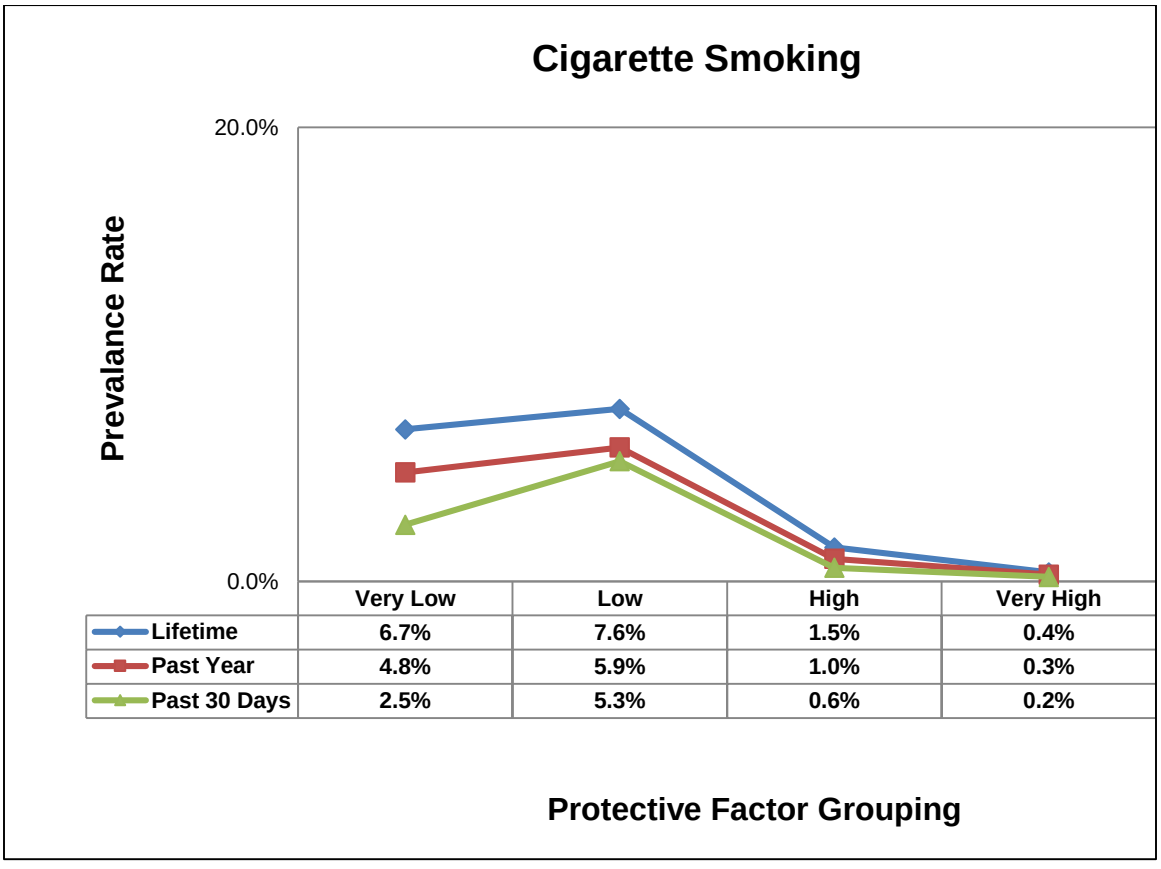
As shown, as risk scores increase, use of other illicit drugs increases. Less than 1% of students of *low* or *very low* risk had ever used other illicit drugs. It is important to note that only 1.5% of *high* risk students have used other illicit drugs in their lifetime, as compared to 5.0% of students of *very high* risk.

E. Impact of Average Protective Factor Score on Substance Use

In order to better interpret the protective factor mean scores, four categories were calculated – *very low*, *low*, *high*, and *very high*. These categories were based on a normal distribution of scores, such that 68% of the scores are within one standard deviation of the mean. Protective categories were determined by examining the mean and standard deviations of the average protective factor scores (0.52), as shown in Table 54. Each quartile division of the following graphs was created using standard deviations. The ***low*** division represents one standard deviation *below* the mean while the ***high*** division represents scores one standard deviation *above* the mean. The ***very low*** division represents scores more than one standard deviation *below* the mean. Similarly, the ***very high*** division includes scores more than one standard deviation *above* the mean.

The relationship between average protective factor score and substance use is illustrated in Figures 5-8 below. It is important to note that these are inverse relationships. In summary, as the protective factor scores increase, lifetime, past year, and past 30 day ATOD use decrease.

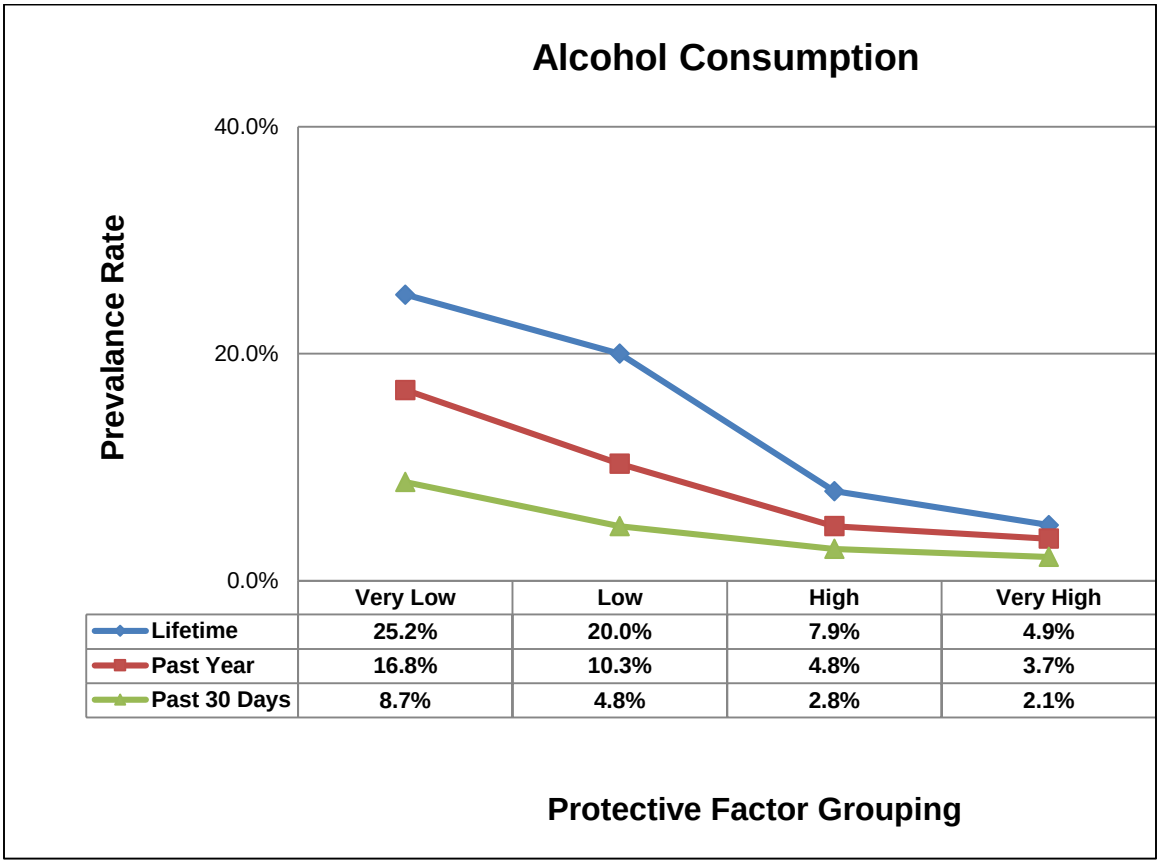
Figure 5: ***Prevalence of Cigarette Smoking by Protective Factor Groupings***



	Very Low	Low	High	Very High
Lifetime	6.7%	7.6%	1.5%	0.4%
Past Year	4.8%	5.9%	1.0%	0.3%
Past 30 Days	2.5%	5.3%	0.6%	0.2%

As shown above, as protective scores increase, use of tobacco decreases. It is important to note that by only increasing protective scores by one standard deviation (*low* to *high*) the percentage of those who have experimented with tobacco in their lifetime decreases drastically (7.6% to 1.5%).

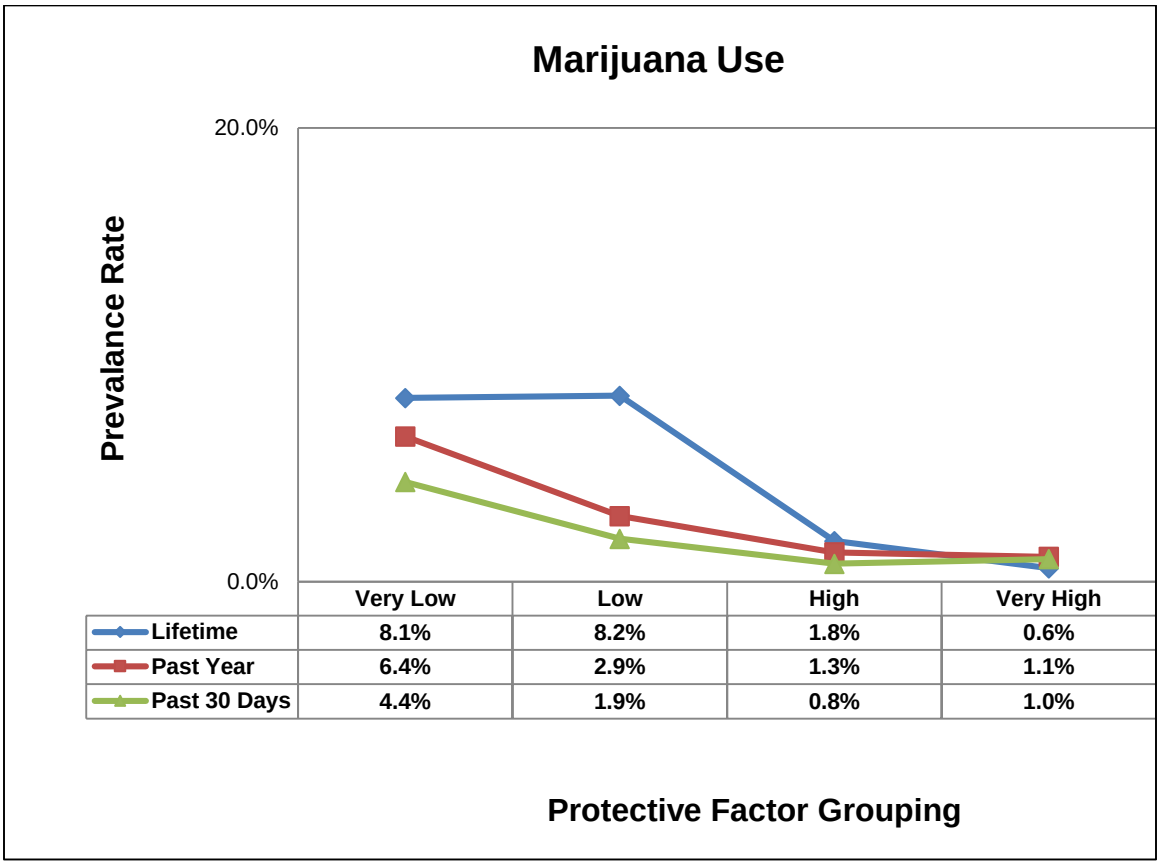
Figure 6: ***Prevalence of Alcohol Consumption by Protective Factor Groupings***



	Very Low	Low	High	Very High
Lifetime	25.2%	20.0%	7.9%	4.9%
Past Year	16.8%	10.3%	4.8%	3.7%
Past 30 Days	8.7%	4.8%	2.8%	2.1%

As shown above, as protective scores increase, alcohol consumption decreases. Despite *very high* protective scores, 4.9% of students still consumed alcohol in their lifetime. This may indicate that adolescents are likely to experiment with alcohol even with an arsenal of protective factors. However, a much larger proportion of students with *very low* protective scores have consumed alcohol in their lifetime (25.2%).

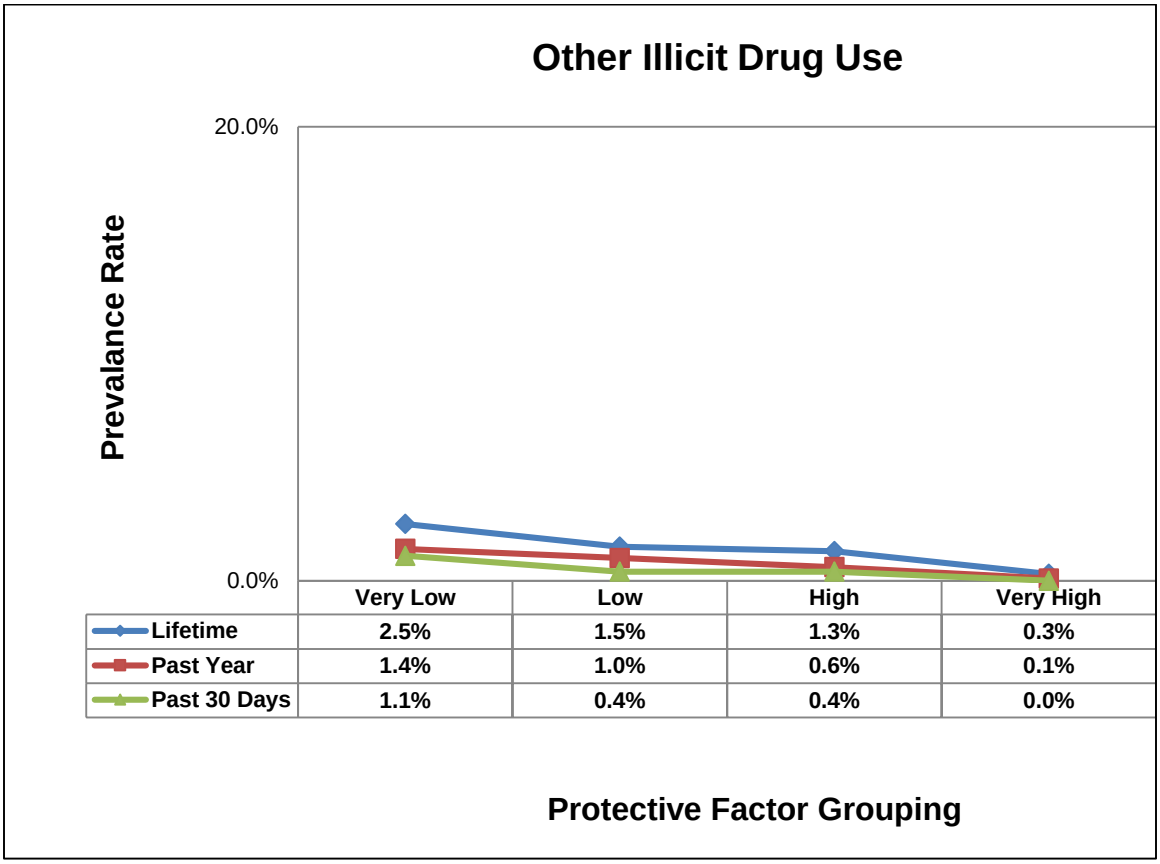
Figure 7: ***Prevalence of Marijuana Use by Protective Factor Groupings***



	Very Low	Low	High	Very High
Lifetime	8.1%	8.2%	1.8%	0.6%
Past Year	6.4%	2.9%	1.3%	1.1%
Past 30 Days	4.4%	1.9%	0.8%	1.0%

As shown, as protective scores increase, use of marijuana decreases. Notably, only 0.6% of students with *very high* protective scores have used marijuana in their lifetime, as compared to 8.1% of students with *very low* protective scores. The greatest change occurs between students with *low* and *high* protective scores (8.2% vs. 1.8%).

Figure 8: ***Prevalence of Other Illicit Drug Use by Protective Factor Groupings***



	Very Low	Low	High	Very High
Lifetime	2.5%	1.5%	1.3%	0.3%
Past Year	1.4%	1.0%	0.6%	0.1%
Past 30 Days	1.1%	0.4%	0.4%	0.0%

Overall, differences between protective factors are marginal though it is clear to see that as protective scores increase, use of other illicit drugs decreases. The greatest change occurs between students with *very low* and *low* protective scores (2.5% vs. 1.5%).

APPENDIX A: Prevalence Summaries Disaggregated by County

Table A1: ***Prevalence Summaries of Selected Substance Use by New Jersey Middle School Students, by County***

2015-16		Atlantic*	#Bergen*	#Burlington*	Camden*	Cape May	Cumberland*	Essex	Gloucester	Hudson*	Hunterdon*	#Mercer*	Middlesex	Monmouth	#Morris*	Ocean	Passaic	Salem	Somerset	Sussex*	Union	Warren	Statewide
		%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%
Alcohol	**Lifetime**	20.4	5.8	14.9	20.9	13.0	19.0	13.6	17.8	14.5	6.2	53.9	11.4	10.7	9.2	9.5	16.0	16.8	12.8	7.2	15.3	10.2	**14.3**
	Annual	14.7	3.3	12.3	12.3	7.2	15.4	9.3	13.8	10.4	4.9	7.0	7.7	5.0	7.2	5.7	10.8	12.1	7.2	3.3	9.6	6.8	**8.4**
	Past 30 Days	2.9	2.0	5.0	4.0	3.5	9.0	5.5	9.9	5.4	3.1	3.7	5.4	2.2	5.1	3.3	5.0	9.9	3.8	2.1	4.0	1.8	**4.4**
Alcohol Binge	**Lifetime**	5.3	1.3	4.2	2.9	3.0	6.2	4.0	6.9	5.8	2.7	3.1	2.3	1.6	2.1	2.0	4.1	6.4	2.2	1.5	4.3	2.5	**3.2**
	Annual	5.3	1.3	2.1	2.2	2.7	4.5	2.7	5.8	4.3	1.4	3.0	1.7	1.3	2.0	1.7	3.0	5.8	1.8	1.4	3.2	3.1	**2.6**
Marijuana	**Lifetime**	6.7	1.3	3.8	4.4	2.8	5.4	6.0	4.6	5.1	1.1	49.2	1.7	1.7	0.0	2.1	3.5	6.7	1.3	3.2	4.7	2.1	**4.8**
	Annual	4.4	0.3	4.2	4.4	2.2	4.1	5.1	4.8	4.6	1.1	7.2	1.8	1.1	0.0	1.1	1.9	5.8	1.3	4.4	3.0	0.7	**2.6**
	Past 30 Days	0.9	0.0	2.4	2.4	1.1	4.1	3.3	4.6	3.5	1.1	7.2	1.5	0.4	0.0	0.9	1.6	4.9	0.9	3.1	2.1	0.0	**1.8**
Cigarettes	**Lifetime**	4.4	1.0	6.5	3.7	3.0	2.5	4.2	3.7	4.3	0.3	49.4	1.3	0.7	1.0	2.9	2.4	6.3	0.8	4.4	2.8	0.7	**4.2**
	Annual	3.4	1.0	4.8	1.9	1.9	1.7	1.9	3.0	2.8	0.3	47.6	0.4	0.4	1.0	1.2	1.2	3.7	0.3	2.1	1.7	0.7	**3.2**
	Past 30 Days	0.6	0.3	1.2	1.7	0.8	0.7	1.2	2.3	0.6	0.3	47.6	0.4	0.4	1.0	0.5	0.3	2.0	0.2	1.0	1.2	0.0	**2.4**
E-Cigarettes/Vape	**Lifetime**	13.5	3.4	10.4	11.3	6.2	9.1	9.9	17.7	12.2	3.5	52.1	8.8	5.7	2.8	6.1	17.4	12.9	6.8	7.5	12.5	4.6	**10.5**
	Annual	12.7	3.4	7.9	8.2	4.8	7.8	8.9	15.8	9.5	2.5	49.1	7.6	5.0	3.7	3.5	13.7	11.6	3.8	8.6	8.4	4.5	**8.8**
	Past 30 Days	5.9	1.0	5.1	2.3	3.2	6.3	4.5	12.3	5.1	1.3	45.5	5.9	3.0	2.0	0.9	8.9	4.6	1.0	5.3	4.1	0.5	**5.5**
Prescription Drugs w/o Prescription	**Lifetime**	4.1	3.2	4.0	4.1	1.6	3.7	3.0	1.6	4.0	0.7	3.5	3.3	3.1	3.0	1.2	3.1	4.4	4.0	0.3	5.1	0.0	**3.2**
	Annual	3.3	1.9	1.1	2.3	0.8	3.0	2.8	1.3	3.3	0.6	3.6	1.8	2.3	1.7	0.6	3.3	2.6	2.1	0.0	3.1	0.7	**2.2**
	Past 30 Days	0.9	0.6	1.1	2.0	0.5	1.2	1.2	1.1	1.9	0.6	2.6	1.2	1.6	1.7	0.3	1.6	2.3	0.2	0.0	2.2	0.0	**1.3**
Inhalants	**Lifetime**	2.3	0.0	0.0	2.1	1.1	2.6	0.7	2.9	2.2	1.1	4.1	1.7	1.4	1.0	0.3	1.1	1.7	0.4	0.0	3.2	0.0	**1.4**
	Annual	0.0	0.0	0.0	1.3	0.5	0.7	0.5	2.0	0.9	0.6	1.3	0.7	0.8	1.0	0.3	1.1	1.4	0.4	0.0	1.7	0.0	**0.7**
	Past 30 Days	0.0	0.0	0.0	0.6	0.3	0.0	0.2	1.5	0.9	0.3	1.3	0.7	0.3	1.0	0.3	0.0	0.9	0.2	0.0	1.0	0.0	**0.5**
Cough Medicine	**Annual**	1.6	0.0	0.0	1.4	0.3	3.8	1.5	1.3	2.9	0.0	0.8	1.1	0.0	0.0	0.9	1.7	2.0	1.5	0.4	4.3	0.0	**1.2**
Range of Valid Student Responses to Question Item**		147 - 152	104 - 108	87 - 93	181 - 186	314 - 325	95 - 98	353 - 363	336 - 350	209 - 218	191 - 195	51 - 57	240 - 247	321 - 330	96 - 103	323 - 331	296 - 302	185 - 191	232 - 242	189 - 194	299 - 306	165 - 169	

* County response rate is below the state mean.
** The range of valid student responses specified includes all 18 items listed in Tables A1 and A2.
# Because response rates were so low in Mercer, Burlington, Morris and Bergen Counties (below 15%), their results should be interpreted with extreme caution.

Table A2: ***Prevalence Summaries of Selected Substance Use by New Jersey Middle School Students, by County***

2015-16		Atlantic*	#Bergen*	#Burlington*	Camden*	Cape May	Cumberland*	Essex	Gloucester	Hudson*	Hunterdon*	#Mercer*	Middlesex	Monmouth	#Morris*	Ocean	Passaic	Salem	Somerset	Sussex*	Union	Warren	Statewide
		%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%
Sedatives	**Lifetime**	1.1	0.0	0.0	0.4	0.5	0.7	0.2	0.0	0.6	0.6	1.2	1.9	0.2	0.0	0.6	0.0	2.3	1.7	0.0	1.3	0.0	**0.6**
	Annual	1.0	0.0	0.0	0.4	0.3	0.0	0.0	0.0	0.6	0.0	0.0	0.3	0.2	0.0	0.3	0.0	0.9	1.7	0.0	1.1	0.0	**0.3**
Steroids	**Lifetime**	0.0	0.0	0.0	0.3	1.9	0.0	0.3	1.0	1.3	1.1	0.0	0.0	0.9	0.0	0.0	0.5	0.0	0.0	0.0	0.0	0.0	**0.3**
	Annual	0.0	0.0	0.0	0.1	0.3	0.0	0.0	0.0	0.8	0.0	0.0	0.0	0.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	**0.1**
Hallucinogens	**Lifetime**	0.0	0.0	1.2	0.2	0.3	0.0	0.0	0.0	1.1	0.3	0.0	0.4	0.0	0.0	0.0	0.0	0.9	0.0	0.0	0.2	0.0	**0.2**
	Annual	0.0	0.0	0.0	0.2	0.0	0.0	0.0	0.0	0.6	0.0	0.0	0.4	0.0	0.0	0.0	0.0	0.6	0.0	0.0	0.2	0.0	**0.1**
Amphetamines	**Lifetime**	0.0	0.0	0.0	0.2	0.3	0.0	0.0	0.0	1.5	0.0	0.0	0.7	0.0	0.0	0.0	0.0	0.6	0.0	0.3	0.7	0.0	**0.2**
	Annual	0.0	0.0	0.0	0.2	0.0	0.0	0.0	0.0	1.1	0.0	0.0	0.7	0.0	0.0	0.0	0.0	0.3	0.0	0.3	0.5	0.0	**0.2**
Cocaine	**Lifetime**	0.0	0.0	0.0	0.0	0.0	0.5	0.2	0.3	0.6	0.0	0.0	0.4	0.0	0.0	0.0	0.0	0.6	1.1	0.2	0.2	0.7	**0.2**
	Annual	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.3	0.0	0.0	0.4	0.0	0.0	0.0	0.0	0.0	1.1	0.0	0.0	0.0	**0.1**
	Past 30 Days	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.4	0.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	**0.0**
Methamphetamines	**Lifetime**	0.0	0.0	1.2	0.0	0.3	0.0	0.0	0.0	0.6	0.0	0.0	0.0	0.0	0.0	0.3	0.0	0.0	0.0	0.0	0.0	0.0	**0.1**
	Annual	0.0	0.0	1.2	0.0	0.0	0.0	0.0	0.0	0.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	**0.1**
Ecstasy	**Lifetime**	0.0	0.0	0.0	0.1	0.3	0.0	0.0	0.0	0.9	0.0	0.0	0.4	0.0	0.0	0.0	0.0	0.6	0.0	0.0	0.5	0.0	**0.1**
	Annual	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.9	0.0	0.0	0.4	0.0	0.0	0.0	0.0	0.6	0.0	0.0	0.5	0.0	**0.1**
Heroin	**Lifetime**	0.0	0.0	0.0	0.0	0.3	0.0	0.0	0.0	0.9	0.0	0.0	0.0	0.0	0.0	0.3	0.0	0.9	0.0	0.0	0.0	0.0	**0.1**
	Annual	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	**0.1**
OxyContin	**Lifetime**	0.0	0.0	0.0	0.0	1.1	0.0	0.4	0.4	0.7	0.0	0.0	0.0	0.2	0.0	0.3	0.0	0.3	0.0	0.2	0.4	0.0	**0.2**
	Annual	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.4	0.6	0.0	0.0	0.0	0.0	0.0	0.3	0.0	0.3	0.0	0.0	0.4	0.0	**0.1**
Club Drugs	**Lifetime**	0.0	0.0	0.0	0.0	0.0	0.0	0.2	0.0	0.3	0.0	0.0	0.3	0.0	0.0	0.0	0.0	0.6	0.0	0.0	0.2	0.0	**0.1**
	Annual	0.0	0.0	0.0	0.0	0.0	0.0	0.2	0.0	0.0	0.0	0.0	0.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.2	0.0	**0.1**
Any Other Illicit Drugs	**Lifetime**	1.1	0.0	1.2	0.6	2.4	1.2	1.0	1.7	4.6	1.8	1.2	2.6	1.1	0.0	1.2	0.5	2.9	2.8	0.4	2.1	0.7	**1.4**
	Annual	1.0	0.0	1.2	0.5	0.5	0.0	0.2	0.4	3.2	0.0	0.0	1.0	0.9	0.0	0.6	0.0	1.7	2.8	0.3	1.7	0.0	**0.8**
Range of Valid Student Responses to Question Item**		149 - 152	107 - 108	92 - 93	183 - 186	318 - 325	96 - 98	355 - 363	337 - 350	213 - 218	193 - 195	54 - 57	243 - 247	324 - 330	98 - 103	326 - 331	297 - 302	186 - 191	238 - 242	189 - 194	302 - 306	165 - 169	

* County response rate is below the state mean.
** The range of valid student responses specified includes all 18 items listed in Tables A1 and A2.
# Because response rates were so low in Mercer, Burlington, Morris and Bergen Counties (below 15%), their results should be interpreted with extreme caution.

Table A3: ***Prevalence Summaries of Selected Delinquent Behaviors by New Jersey Middle School Students, by County***

2015-16	Atlantic*	#Bergen*	#Burlington*	Camden*	Cape May	Cumberland*	Essex	Gloucester	Hudson*	Hunterdon*	#Mercer*	Middlesex	Monmouth	#Morris*	Ocean	Passaic	Salem	Somerset	Sussex*	Union	Warren	Statewide
	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%
Getting Suspended	5.6	5.1	6.5	8.9	3.5	18.2	7.8	6.2	4.8	1.3	24.3	10.4	5.0	0.0	2.7	6.6	15.1	3.4	9.9	12.5	2.6	7.2
Attacking Someone with Intent to Harm	8.0	6.9	3.1	7.4	3.5	7.3	7.8	5.1	6.7	2.6	44.5	5.5	5.2	2.7	3.4	4.6	10.3	2.3	10.5	6.3	2.6	7.0
Being Drunk or High at School	1.2	0.7	1.9	2.2	1.6	8.4	2.1	1.3	4.1	1.1	9.0	1.4	0.3	0.0	0.9	1.0	2.6	0.3	1.7	3.0	0.0	1.8
In a Gang, With or Without a Name	1.3	0.0	1.9	6.1	1.6	2.5	3.2	4.9	4.5	1.7	1.9	1.6	1.6	0.0	1.6	1.7	2.7	0.5	1.4	4.1	0.9	2.2
Being Arrested	0.0	0.0	0.6	3.4	0.8	1.9	2.7	1.6	2.3	0.3	9.6	1.4	1.2	0.0	0.0	0.7	2.0	1.2	2.6	1.3	0.0	1.5
Carrying a Handgun	3.6	0.0	1.4	3.2	1.9	6.9	1.8	2.4	2.2	1.3	7.9	1.4	2.2	2.9	0.9	1.3	3.1	2.7	4.3	3.3	1.2	2.3
Selling Drugs	0.6	0.0	0.6	2.3	0.0	0.5	1.9	1.3	1.7	0.3	1.1	0.8	0.3	0.0	0.0	0.4	0.6	0.0	1.0	1.7	0.0	0.8
Attempting to Steal a Vehicle	0.0	0.0	0.6	1.5	0.3	0.0	0.6	0.5	1.1	0.3	7.9	1.7	0.3	0.0	0.0	0.0	0.9	0.0	1.8	0.6	0.0	0.8
Taking a Handgun to School	0.0	0.0	0.0	1.5	0.3	0.0	0.5	0.0	1.7	0.3	7.4	0.8	0.5	0.0	0.0	0.7	0.0	0.0	1.6	0.7	0.0	0.7
Range of Valid Student Responses to Question Item	144 - 151	106 - 108	91 - 93	179 - 186	318 - 325	96 - 98	348 - 363	337 - 350	210 - 218	190 - 195	51 - 57	243 - 247	324 - 330	95 - 103	317 - 330	289 - 302	185 - 191	232 - 241	182 - 194	297 - 307	157 - 169	

* County response rate is below the state mean.

Because response rates were so low in Mercer, Burlington, Morris and Bergen Counties (below 15%), their results should be interpreted with extreme caution.

APPENDIX B: Risk and Protective Factor Averages

Table B1: ***County-wide Risk and Protective Factor Averages by Domain***

	2015-16	Atlantic*	#Bergen*	#Burlington*	Camden*	Cape May	Cumberland*	Essex	Gloucester	Hudson*	Hunterdon*	#Mercer*	Middlesex	Monmouth	#Morris*	Ocean	Passaic	Salem	Somerset	Sussex*	Union	Warren	Statewide
Risk Factors	Community Domain	0.21	0.18	0.26	0.23	0.20	0.26	0.25	0.21	0.20	0.19	0.43	0.20	0.18	0.19	0.19	0.23	0.26	0.20	0.23	0.24	0.18	**0.22**
	Family Domain	0.10	0.10	0.12	0.11	0.10	0.10	0.10	0.12	0.08	0.11	0.22	0.10	0.10	0.10	0.10	0.10	0.11	0.10	0.10	0.11	0.09	**0.11**
	School Domain	0.30	0.31	0.35	0.33	0.31	0.36	0.32	0.35	0.31	0.29	0.35	0.32	0.31	0.31	0.31	0.33	0.35	0.31	0.36	0.33	0.29	**0.32**
	Peer-Individual Domain	0.09	0.07	0.09	0.09	0.07	0.12	0.10	0.09	0.09	0.06	0.24	0.07	0.07	0.06	0.06	0.09	0.10	0.08	0.07	0.11	0.06	**0.09**
	Average Risk Factor Score	**0.15**	**0.13**	**0.17**	**0.16**	**0.14**	**0.18**	**0.16**	**0.16**	**0.15**	**0.13**	**0.31**	**0.14**	**0.13**	**0.13**	**0.13**	**0.16**	**0.18**	**0.14**	**0.15**	**0.17**	**0.12**	**0.15**
Protective Factors	School Domain	0.58	0.64	0.59	0.63	0.64	0.62	0.62	0.60	0.64	0.63	0.64	0.59	0.64	0.62	0.66	0.60	0.58	0.61	0.60	0.61	0.63	**0.62**
	Peer-Individual Domain	0.43	0.48	0.45	0.49	0.51	0.48	0.45	0.46	0.48	0.52	0.33	0.48	0.49	0.47	0.52	0.44	0.47	0.47	0.45	0.45	0.52	**0.47**
	Average Protective Factor Score	**0.49**	**0.55**	**0.51**	**0.55**	**0.56**	**0.54**	**0.51**	**0.52**	**0.55**	**0.56**	**0.45**	**0.52**	**0.55**	**0.54**	**0.58**	**0.50**	**0.51**	**0.52**	**0.51**	**0.51**	**0.56**	**0.53**

* County response rate is below the state mean.

Because response rates were so low in Mercer, Burlington, Morris and Bergen Counties (below 15%), their results should be interpreted with extreme caution.

Table B2: ***Risk and Protective Factor Averages by Domain***

	RISK FACTORS								***PROTECTIVE FACTORS***			
	Community Domain		***Family Domain***		***School Domain***		***Peer-Individual Domain***		***School Domain***		***Peer-Individual Domain***	
	n	**Mean**	**n**	**Mean**	**n**	**Mean**	**n**	**Mean**	**n**	**Mean**	**n**	**Mean**
2015-16 NJ Middle School Students	4331	0.22	4497	0.11	4153	0.32	4270	0.09	4504	0.62	4433	0.47
Grade												
7th	2267	0.20	2356	0.09	2155	0.31	2242	0.07	2361	0.63	2325	0.48
8th	2054	0.24	2131	0.13	1989	0.34	2018	0.10	2132	0.61	2101	0.45
Sex												
Male	1927	0.21	2004	0.11	1845	0.33	1867	0.08	2010	0.62	1977	0.45
Female	2347	0.24	2432	0.11	2256	0.32	2348	0.09	2433	0.61	2397	0.48
Race/Ethnicity												
White	2161	0.20	2232	0.11	2103	0.32	2131	0.08	2232	0.63	2203	0.48
African-American	389	0.26	417	0.11	363	0.36	383	0.12	422	0.61	414	0.44
Hispanic	1167	0.25	1214	0.12	1089	0.34	1143	0.10	1209	0.61	1190	0.43
Asian	263	0.19	268	0.09	260	0.28	259	0.05	270	0.62	262	0.51
Other	325	0.22	336	0.09	314	0.31	326	0.08	341	0.62	336	0.48

Table B3: ***Individual Risk Factor Averages by County***

	2015-16	Atlantic*	#Bergen*	#Burlington*	Camden*	Cape May	Cumberland*	Essex	Gloucester	Hudson*	Hunterdon*	#Mercer*	Middlesex	Monmouth	#Morris*	Ocean	Passaic	Salem	Somerset	Sussex*	Union	Warren	Statewide
Community	Laws and Norms Favorable to Drug Use	0.32	0.26	0.32	0.30	0.29	0.33	0.29	0.31	0.24	0.29	0.44	0.28	0.28	0.29	0.27	0.30	0.34	0.28	0.32	0.32	0.26	**0.29**
	Community Transitions and Mobility	0.26	0.22	0.32	0.28	0.26	0.24	0.30	0.24	0.25	0.27	0.42	0.22	0.21	0.26	0.25	0.26	0.23	0.23	0.22	0.27	0.24	**0.26**
	Low Neighborhood Attachment	0.26	0.23	0.32	0.25	0.24	0.27	0.33	0.24	0.27	0.20	0.46	0.27	0.21	0.21	0.23	0.29	0.31	0.22	0.31	0.27	0.18	**0.27**
	Perceived Availability of Drugs	0.22	0.17	0.23	0.24	0.18	0.22	0.21	0.22	0.17	0.20	0.45	0.17	0.18	0.19	0.18	0.22	0.25	0.21	0.21	0.23	0.13	**0.21**
	Community Disorganization	0.15	0.18	0.24	0.19	0.14	0.33	0.26	0.15	0.24	0.08	0.44	0.19	0.14	0.09	0.14	0.23	0.26	0.13	0.21	0.23	0.14	**0.20**
	Perceived Availability of Handguns	0.07	0.03	0.13	0.12	0.12	0.17	0.10	0.11	0.07	0.12	0.38	0.12	0.07	0.11	0.09	0.11	0.19	0.10	0.13	0.10	0.11	**0.11**
Family	Poor Family Management	0.18	0.17	0.20	0.21	0.17	0.16	0.17	0.19	0.16	0.18	0.34	0.16	0.15	0.16	0.16	0.17	0.17	0.17	0.17	0.19	0.16	**0.18**
	Parental Attitudes Favorable Toward Antisocial Behavior	0.10	0.11	0.11	0.09	0.08	0.10	0.11	0.11	0.07	0.09	0.14	0.10	0.11	0.11	0.09	0.10	0.10	0.08	0.09	0.11	0.08	**0.10**
	Parental Attitudes Favorable Toward Drug Use	0.03	0.02	0.05	0.03	0.03	0.04	0.03	0.06	0.02	0.05	0.17	0.03	0.03	0.03	0.04	0.04	0.05	0.05	0.04	0.04	0.02	**0.04**
School	Low Commitment to School	0.35	0.37	0.40	0.39	0.37	0.38	0.35	0.41	0.31	0.36	0.36	0.37	0.38	0.40	0.35	0.37	0.40	0.38	0.40	0.37	0.35	**0.37**
	Academic Failure	0.27	0.27	0.32	0.27	0.26	0.35	0.29	0.29	0.31	0.22	0.51	0.26	0.25	0.22	0.28	0.30	0.31	0.25	0.33	0.29	0.24	**0.28**
Peer-Individual	Perceived Risks of Drug Use	0.23	0.16	0.21	0.24	0.27	0.35	0.26	0.22	0.29	0.20	0.57	0.21	0.24	0.20	0.19	0.22	0.25	0.24	0.20	0.26	0.19	**0.24**
	Favorable Attitudes Toward Antisocial Behavior	0.14	0.12	0.12	0.14	0.11	0.11	0.13	0.13	0.10	0.12	0.13	0.12	0.12	0.11	0.10	0.13	0.13	0.12	0.11	0.14	0.11	**0.12**
	Peer Rewards for Antisocial Behavior	0.13	0.16	0.18	0.13	0.07	0.19	0.17	0.16	0.16	0.10	0.19	0.12	0.10	0.16	0.11	0.16	0.18	0.15	0.14	0.20	0.09	**0.15**
	Favorable Attitudes Toward Drug Use	0.07	0.06	0.05	0.07	0.07	0.08	0.07	0.08	0.08	0.06	0.29	0.07	0.05	0.05	0.06	0.08	0.09	0.09	0.06	0.08	0.06	**0.07**
	Early Initiation of Drug Use	0.06	0.02	0.06	0.06	0.04	0.06	0.05	0.05	0.05	0.01	0.26	0.03	0.03	0.02	0.03	0.04	0.06	0.03	0.03	0.05	0.03	**0.05**
	Friends' Use of Drugs	0.06	0.03	0.06	0.07	0.04	0.11	0.06	0.07	0.07	0.02	0.30	0.04	0.03	0.02	0.03	0.06	0.07	0.06	0.06	0.07	0.03	**0.06**
	Early Initiation of Antisocial Behavior	0.04	0.03	0.04	0.04	0.04	0.07	0.06	0.04	0.04	0.01	0.14	0.03	0.03	0.01	0.03	0.04	0.07	0.02	0.04	0.06	0.01	**0.04**
	Gang Involvement	0.01	0.00	0.02	0.05	0.02	0.04	0.03	0.04	0.03	0.01	0.03	0.01	0.01	0.00	0.01	0.02	0.02	0.01	0.01	0.03	0.01	**0.02**
	Interaction with Antisocial Peers	0.04	0.02	0.03	0.04	0.03	0.09	0.05	0.03	0.05	0.01	0.20	0.04	0.01	0.01	0.02	0.04	0.05	0.04	0.04	0.05	0.01	**0.04**

* County response rate is below the state mean.

Because response rates were so low in Mercer, Burlington, Morris and Bergen Counties (below 15%), their results should be interpreted with extreme caution.

Table B4: ***Individual Protective Factor Averages by County***

	2015-16	Atlantic*	#Bergen*	#Burlington*	Camden*	Cape May	Cumberland*	Essex	Gloucester	Hudson*	Hunterdon*	#Mercer*	Middlesex	Monmouth	#Morris*	Ocean	Passaic	Salem	Somerset	Sussex*	Union	Warren	Statewide
School	School Opportunities for	0.64	0.67	0.64	0.67	0.68	0.65	0.65	0.63	0.66	0.67	0.66	0.62	0.67	0.66	0.69	0.64	0.62	0.63	0.63	0.65	0.67	**0.65**
	School Rewards for Prosocial	0.52	0.62	0.55	0.60	0.60	0.59	0.59	0.57	0.62	0.59	0.61	0.56	0.60	0.59	0.63	0.56	0.54	0.58	0.57	0.57	0.59	**0.59**
Peer-Individual	Interaction with Prosocial Peers	0.61	0.66	0.61	0.63	0.66	0.62	0.61	0.62	0.63	0.70	0.52	0.67	0.66	0.66	0.69	0.60	0.61	0.63	0.58	0.60	0.69	**0.63**
	Peer Rewards for Prosocial	0.44	0.50	0.48	0.50	0.53	0.55	0.45	0.44	0.49	0.49	0.29	0.49	0.47	0.44	0.52	0.45	0.48	0.44	0.49	0.47	0.53	**0.47**
	Prosocial Involvement	0.25	0.29	0.27	0.33	0.33	0.26	0.28	0.33	0.32	0.36	0.18	0.27	0.35	0.33	0.36	0.27	0.31	0.32	0.28	0.28	0.33	**0.30**

* County response rate is below 36%.
# Because response rates were so low in Mercer, Burlington, Morris and Bergen Counties (below 15%), their results should be interpreted with extreme caution.

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