

# Alcohol, Drug and Cigarette Use by Teens

## DEFINITION

*Alcohol, drug and cigarette use by teens* is the percentage of middle school and high school students who report having used alcohol, illegal drugs (such as marijuana, uppers, or downers) or cigarettes at least once in the 30 days prior to taking the School Accountability for Learning and Teaching (SALT) Student Survey during the 2007-2008 school year.

## SIGNIFICANCE

The use and/or abuse of substances by children and youth poses health and safety risks to them, their families, their schools and their communities.<sup>1</sup> The number of adolescents using alcohol, tobacco and illegal drugs has been declining steadily both in the U.S. and in Rhode Island for the past decade.<sup>2,3</sup>

Research shows that the key risk periods for alcohol, cigarette and other drug abuse are during major transitions in children's lives. These include the transition to middle school, which presents new academic and social situations and the transition to high school, which presents additional social and emotional challenges. There is greater availability of drugs, more peers who abuse substances, and more social activities involving drugs and alcohol at the high school level.<sup>4</sup>

The risk for becoming a substance abuser involves the relationship between

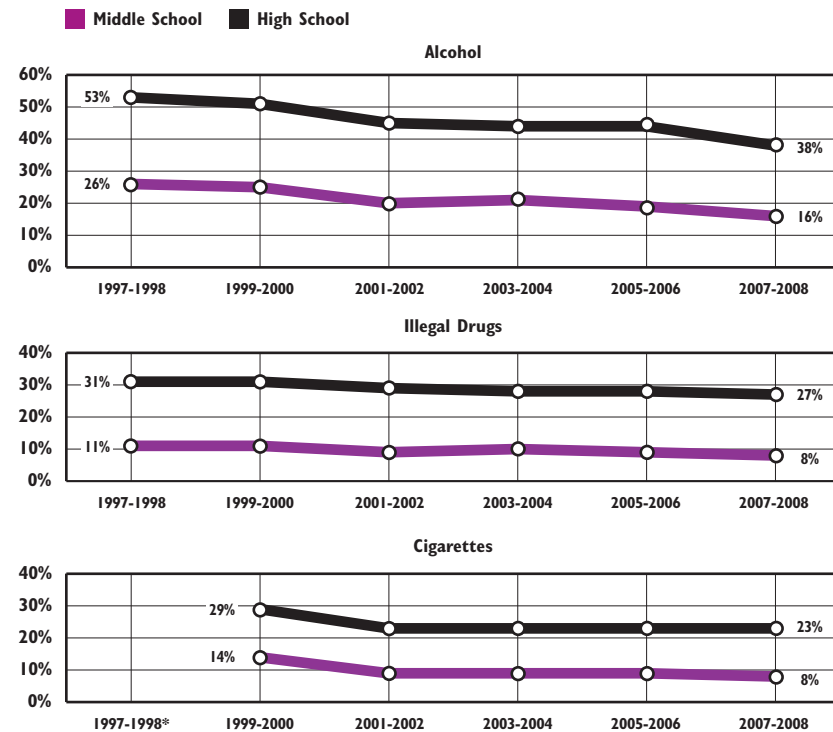
risk factors and protective factors, which vary in their effects by age, gender and race/ethnicity. Risk factors include early aggressive behavior, lack of parental supervision, peer substance abuse, academic failure and poverty. Protective factors include strong parent-child bonds, parental involvement and consistent discipline, academic competence and strong neighborhood attachments.<sup>5</sup>

Early family and school interventions can build and strengthen protective factors and address risk factors, which will help to prevent substance use among young people.<sup>6</sup> Adolescents who participate in after-school activities are less likely to use substances than those who are not involved in any school-based, community-based, faith-based or other after-school activities.<sup>7</sup>

In 2007, approximately 8% of youth ages 12-17 in the U.S. met standard diagnostic criteria indicating the need for treatment for an alcohol and/or illicit drug use problem. Few of these youth received specialty treatment (6% of those needing treatment received specialty alcohol treatment and 10% received specialty illicit drug use treatment).<sup>8</sup>

Nationally in 2006 and 2007, 26% of youth ages 12-20 reported obtaining alcohol for free from a non-relative aged 21 or over, 15% from another underage person, 6% from a parent or guardian, 9% from another relative aged 21 or older, and 4% reported taking it from their own home without permission.<sup>9</sup>

**Reported Use of Alcohol, Drugs, and Cigarettes 30 Days Prior to the Survey, Rhode Island, 1997-1998 through 2007-2008 School Years**



Source: Rhode Island SALT Survey reports, student reports of health risk practices by grade level, 1997-1998 through 2007-2008 school years. Retrieved from Information Works at [www.infoworks.ride.uri.edu](http://www.infoworks.ride.uri.edu). Data are for students who reported substance use in the past 30 days. \*Cigarette use questions were not asked in the 1997-1998 school year survey.

◆ Over the past decade, there has been a decline in reported use of alcohol and illegal drugs among Rhode Island middle school and high school students. After an initial drop, the reported rates of cigarette use have remained steady. In the 2007-2008 school year, as was the case in previous years, students in school districts in the core cities report lower use of alcohol, tobacco and cigarettes than do students in the remainder of the state.<sup>10</sup>

◆ In Rhode Island, there are 35 municipal Substance Abuse Prevention Task Forces (representing all 39 cities and towns) that promote comprehensive substance abuse prevention programs; conduct local needs assessments; and plan, implement and evaluate interventions.<sup>11</sup>

# Alcohol, Drug and Cigarette Use by Teens

Table 23.

**Student Reports of Alcohol, Drug and Cigarette Use  
by Student Grade Level, Rhode Island, 2007-2008**

SCHOOL DISTRICT	ALCOHOL USE		DRUG USE		CIGARETTE USE	
	MIDDLE SCHOOL	HIGH SCHOOL	MIDDLE SCHOOL	HIGH SCHOOL	MIDDLE SCHOOL	HIGH SCHOOL
Barrington	6%	23%	4%	19%	4%	16%
Bristol-Warren	14%	39%	5%	31%	6%	26%
Burrillville	26%	42%	14%	29%	17%	26%
Central Falls	20%	29%	10%	14%	8%	9%
Charlho	13%	43%	8%	33%	9%	28%
Coventry	11%	41%	4%	30%	5%	26%
Cranston	15%	34%	7%	23%	6%	20%
Cumberland	14%	42%	8%	31%	8%	26%
East Greenwich	16%	39%	12%	23%	13%	18%
East Providence	20%	40%	9%	33%	10%	28%
Exeter-West Greenwich	14%	36%	8%	23%	7%	17%
Foster-Glocester	20%	45%	14%	33%	13%	31%
Jamestown	7%	NA	3%	NA	3%	NA
Johnston	17%	42%	7%	25%	9%	23%
Lincoln	9%	48%	4%	39%	4%	31%
Little Compton	7%	NA	3%	NA	3%	NA
Middletown	7%	44%	4%	33%	3%	30%
Narragansett	8%	36%	5%	25%	5%	16%
New Shoreham	NA	65%	NA	50%	NA	28%
Newport	16%	40%	10%	33%	9%	25%
North Kingstown	10%	43%	6%	33%	5%	24%
North Providence	14%	41%	5%	27%	5%	21%
North Smithfield	17%	37%	11%	23%	13%	21%
Pawtucket	22%	32%	12%	21%	10%	15%
Portsmouth	19%	40%	11%	27%	9%	22%
Providence	20%	33%	10%	23%	10%	19%
Scituate	14%	43%	7%	27%	8%	23%
Smithfield	12%	41%	6%	33%	5%	27%
South Kingstown	11%	39%	7%	25%	7%	19%
Tiverton	17%	47%	9%	37%	10%	31%
Warwick	18%	45%	9%	33%	9%	31%
West Warwick	15%	40%	6%	32%	9%	29%
Westerly	18%	46%	10%	30%	8%	26%
Woonsocket	21%	35%	9%	20%	9%	18%
Core Cities	20%	34%	10%	23%	9%	19%
Remainder of State	14%	40%	7%	29%	7%	25%
Rhode Island	16%	38%	8%	27%	8%	23%

NA = Community has no middle school or no high school

Data are for students reporting use in the 30 days prior to the date the SALT Survey was administered.

## Sources of Data for Table/Methodology

Brand, S. & Seitsinger, A. M. (2009). *Rhode Island student reports of health risk practices by grade level: 2007-2008 school year*. Data collected by the Center on School Improvement and Educational Policy at the University of Rhode Island for the Rhode Island Department of Elementary and Secondary Education.

Retrieved from Information Works at [www.infoworks.ride.uri.edu](http://www.infoworks.ride.uri.edu). Data are for students who reported substance use in the 30 days prior to the date the survey was administered.

Rhode Island state totals include the following charter schools (Compass School, CVS Highlander Charter School, Paul Cuffee Charter School, Blackstone Academy Charter School, and BEACON Charter School) and the following state-operated schools (William M. Davies Jr. Career-Technical High School and Metropolitan Regional Career & Technical Center), as well as the Urban Collaborative (UCAP). These schools are not included in the core city and remainder of state calculations.

The School Accountability for Learning and Teaching (SALT) Student Survey is administered during one 60-minute class period each school year. All students in grades 4-12 in Rhode Island complete the survey, with the exception of students who have been excused by their parents and students with Individual Education Programs (IEPs) who are unable to take the survey. Grades included in middle and high school vary by district. For the Rhode Island percentage, middle school includes grades 5-8 and high school includes grades 9-12.

Core Cities are Central Falls, Newport, Pawtucket, Providence, West Warwick and Woonsocket.

## References

<sup>1,4,5,6</sup> *Preventing drug use among children and adolescents: A research-based guide for parents, educators, and community leaders, second edition*. (2003). Bethesda, MD: National Institutes of Health, National Institute on Drug Abuse.

<sup>2</sup> National Adolescent Health Information Center. (2007). *2007 fact sheet on substance use: Adolescent and young adults*. San Francisco, CA: University of California, San Francisco.

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