



NEW JERSEY STUDENT HEALTH SURVEY | 2005



NEW JERSEY DEPARTMENT OF EDUCATION | Division of Student Services | Office of Program Support Services

Reports on the survey can be downloaded at
www.nj.gov/njded/students/yrbs/index.html

More information about the CDC survey and tools for comparing results
from various locations can be found at
www.cdc.gov/nccdphp/dash/yrbs

Special requests for data should be directed to
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Division of Student Services
Office of Program Support Services
P. O. Box 500
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<http://www.state.nj.us/education>

PTM 1505.83

2005 NEW JERSEY STUDENT HEALTH SURVEY

Background

This brochure summarizes the findings of the 2005 New Jersey Student Health Survey of high school and middle school students. The New Jersey Department of Education (NJDOE) has conducted this survey among public high school students every other year since 1993 with funding from the Centers for Disease Control and Prevention (CDC). The 2005 survey was the first conducted among seventh- and eighth-grade public school students. The findings help parents, schools and youth-serving agencies to maintain awareness of current trends among teens and provide feedback on the impact of large-scale programs to influence teen behavior. The results are made available through printed and web-based reports. This brochure and the full report can be downloaded at <http://www.nj.gov/njded/data/>. More information about the CDC survey and tools for comparing results from various locations can be found at www.cdc.gov/nccdphp/dash/yrbs.

In 2005, the survey was conducted collaboratively between the NJDOE and the New Jersey Department of Health and Senior Services and administered by the Bloustein Center for Survey Research (BCSR) at Rutgers University. The instrument used for the 2005 New Jersey Student Health Survey drew questions largely from the core Youth Risk Behavior Survey (YRBS) instrument developed by CDC. The 92-item high school survey asked students to answer questions about their health-related behavior in six areas that are highly related to preventable illness and injury among young people: unintentional injuries (safety) and violence; use of tobacco; use of alcohol and drugs; sexual behaviors; dietary behaviors; and physical activity. The 52-item middle school survey was a shorter version which covered similar topics, excluding sexual behavior.

Sample and Participation

High Schools: The survey was completed by 1,495 students in 29 New Jersey public high schools in the spring of 2005. Survey procedures were designed to protect the privacy of all students by allowing for anonymous and voluntary participation. Documented parental consent was required. Overall, 83% of all sampled schools agreed to participate in the study (29 out of 35) and 73% of all sampled students supplied parental consent and completed the survey (1,495 out of 2,041), yielding an overall response rate of 61% ($83\% \times 73\% = 61\%$). The CDC has established a combined participation rate of 60% as the minimum rate required to apply weights to data collected for the YRBS. The weighted results represent all regular public school students in grades 9 through 12 in New Jersey and permit comparison of findings across points in time and different locations. The weighted demographic characteristics of the sample are included in Table 1. The only other times a weightable sample was obtained in New Jersey were in 1995 and 2001. Therefore, the 2005 results in this brochure are contrasted with the results from these prior years.

Middle Schools: For the first time, NJDOE also administered a shortened version of the survey to public seventh- and eighth-grade students also in the spring of 2005. Overall, 83% of all sampled schools agreed to participate in the study (30 out of 36) and 65% of all sampled students supplied parental consent and completed the survey (1,409 out of 2,156), yielding an overall response rate of 54% ($83\% \times 65\% = 54\%$). Since these rates did not meet the minimum threshold set by CDC, the data could not be weighted to the statewide population. However, BCSR developed its own weighting procedures for use with middle school data.

Use of Comparison Statistics

In presenting the results for the high school survey, this brochure makes comparisons among percentages of students answering the same question in 1995, 2001, and 2005 – the three years when the results of the sample could be “weighted” or generalized to the population of all public high school students in the state. Neither statistical significance nor practical significance is stated or implied in these comparisons.

Percentages cited for the population of high school students are estimates based upon the sample statistics. The statements are intended to juxtapose the percentages for the three years and characterize their relationship to one another. The presentation does not apply tests of statistical significance in order to compare the data from the three years. Due to the large sample sizes (2,799 in 1995, 2,142 in 2001, and 1,495 in 2005), small differences, such as two to three percent, could be statistically significant but, because they are small, they may lack practical significance. In a similar vein, failing to characterize a difference (e.g., an increase or decrease) because it failed to reach a level indicating statistical significance would eliminate a description intended to provide the reader with context for the data.

Since three large samples may yield statistical significance with small percentage differences, the use of the term “statistical significance” would lead some in the audience to interpret these small changes in behavior as major behavioral changes and thereby draw conclusions that may not be justified. This approach, therefore, has not been followed. With or without indicators of statistical significance, it is incumbent upon the reader to exercise judgment as to the real or practical significance of any differences cited. CDC analysis of the statistical significance of selected New Jersey and other state survey data is provided at the CDC’s web site referenced earlier.

In addition, it should be noted that while survey results from three different years are compared in this document, the survey in 2005 was the first time active parental consent was used for all students. Because active consent can eliminate students who would have otherwise participated under a passive consent process used in prior years, the survey design is not comparable. It is unclear whether the behavior of students participating under the current recruitment format differs from those who would have participated under the prior consent guidelines.

Table 1: Profile of Students in the 2005 New Jersey Student Health Survey

HIGH SCHOOL (Grades 9 thru 12)			
SEX	SAMPLE (n)	SAMPLE %	WEIGHTED %
Female	774	51.8%	49.8%
Male	721	48.2%	50.2%
AGE			
14 Years Old or Younger	125	8.4%	9.4%
15 Years Old	404	27.1%	27.3%
16 Years Old	409	27.4%	26.2%
17 Years Old	341	22.9%	22.5%
18 Years Old or Older	213	14.3%	14.6%
ETHNICITY			
African American	219	14.7%	16.3%
Hispanic/Latino	206	13.8%	16.5%
White	842	56.5%	61.3%
All other races	224	15.0%	5.9%

MIDDLE SCHOOL (Grades 7 and 8)			
SEX	SAMPLE (n)	SAMPLE %	WEIGHTED %
Female	752	53.4%	50.0%
Male	655	46.6%	50.0%
AGE			
12 Years Old or Younger	292	20.7%	18.6%
13 Years Old	697	49.5%	48.7%
14 Years Old	383	27.2%	30.4%
15 Years Old or Older	36	2.6%	2.3%
ETHNICITY			
African American	284	20.3%	15.5%
Hispanic/Latino	307	22.0%	14.7%
White	660	47.2%	55.6%
All other races	147	10.5%	14.3%

HIGH SCHOOL STUDENTS (9th thru 12th Grade)

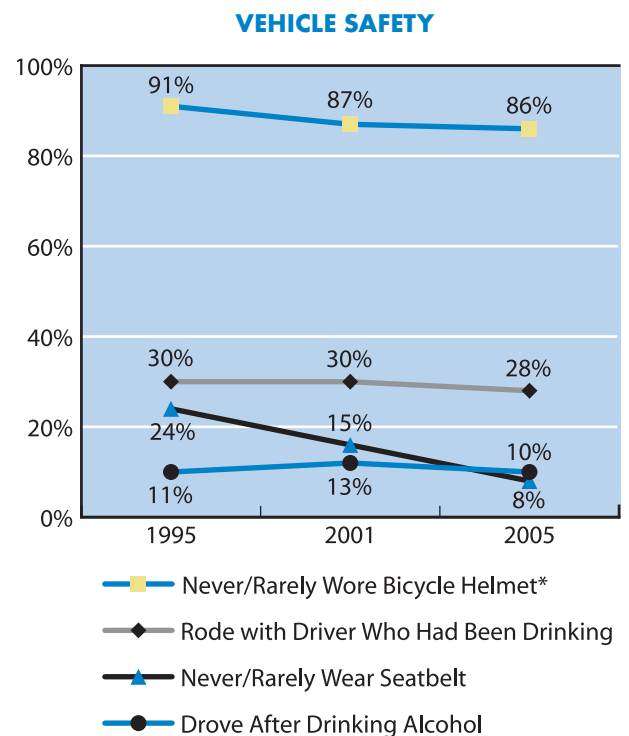
Vehicle Safety

Overall, high school students in 2005 reveal more positive behavior with regard to vehicle safety than in previous years (*Figure 1*). Rates of drinking and driving and riding with a driver who had been drinking dropped slightly in 2005 from previous levels. In 2005, 10% of students reported drinking and driving within the previous 30 days, as compared to 13% in 2001 and 11% in 1995. The percentage of students who rode with a driver who had been drinking during the previous 30 days was also slightly lower in 2005 (28%) than in previous survey years (30%).

Seat belt use among high school students increased across survey years. In 2005, fewer than one in 10 (8%) students either never or rarely wore a seat belt when riding as a passenger. This figure was nearly one-quarter of students (24%) in 1995 and 15% in 2001.

Bicycle helmet use has slightly increased across survey years. In 2005, 86% of students rarely or never used a helmet when riding a bike during the previous 12 months. Although similar to the rate in 2001, this percentage is slightly lower than that reported in 1995 (91%).

FIGURE 1



*AMONG STUDENTS WHO RODE BICYCLES DURING THE PAST 12 MONTHS.

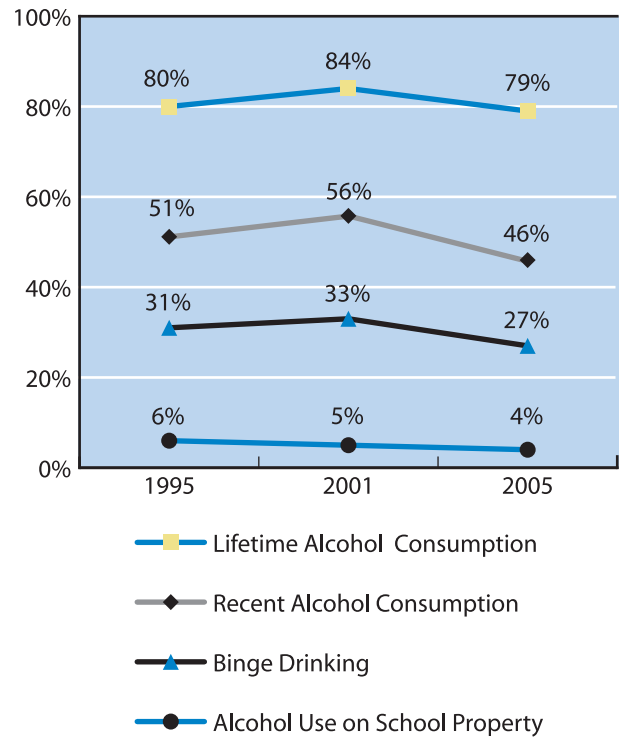
Alcohol Use

Reporting of lifetime* and recent alcohol consumption and binge drinking among New Jersey high school students all declined in 2005 from levels in past surveys (*Figure 2*). Overall, 79% of students in 2005 consumed alcohol in their lifetime compared to 84% in 2001 and 80% in 1995. Students in 2005 (46%) were less likely than those in previous years (56% in 2001; 51% in 1995) to report having one or more drinks of alcohol within the prior 30 days (recent alcohol use). Binge drinking – having five or more drinks on the same occasion – was also slightly less prevalent in 2005 than in previous years. About one in four students (27%) engaged in binge drinking in 2005 compared to 33% in 2001 and 31% in 1995. The proportion of New Jersey high school students using alcohol on school property decreased very slightly across survey years from 6% in 1995 to 4% in 2005.

*INDICATES THE REPORTED OCCURRENCE OF A BEHAVIOR AT LEAST ONCE IN A RESPONDENT'S LIFE.

FIGURE 2

ALCOHOL USE, LIFETIME AND PAST 30 DAYS

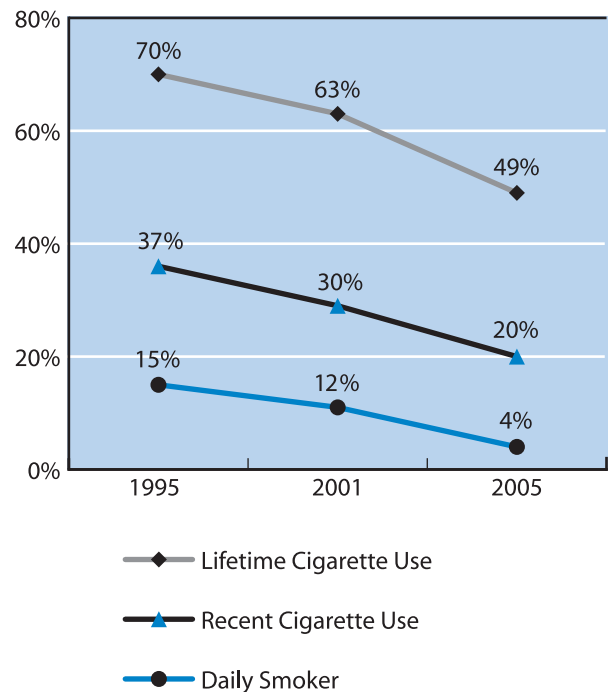


Tobacco Use

Overall, reports of lifetime, recent, and daily cigarette use among New Jersey high school students declined in 2005 from levels reported in previous years (*Figure 3*). In 2005, 49% of students had tried cigarettes, as compared to 63% in 2001 and 70% in 1995. The percentage of students who smoked at least part of a cigarette during the previous month reached a low of 20% in 2005, compared to 30% in 2001 and 37% in 1995. Students were also less likely in 2005 (4%) than in 2001 (12%) and 1995 (15%) to smoke on a daily basis. In addition, the number of students smoking six or more cigarettes per day during the previous month reached a low of 3% in 2005, down from 9% in 2001 and 13% in 1995.

FIGURE 3

CIGARETTE USE, LIFETIME AND PAST 30 DAYS



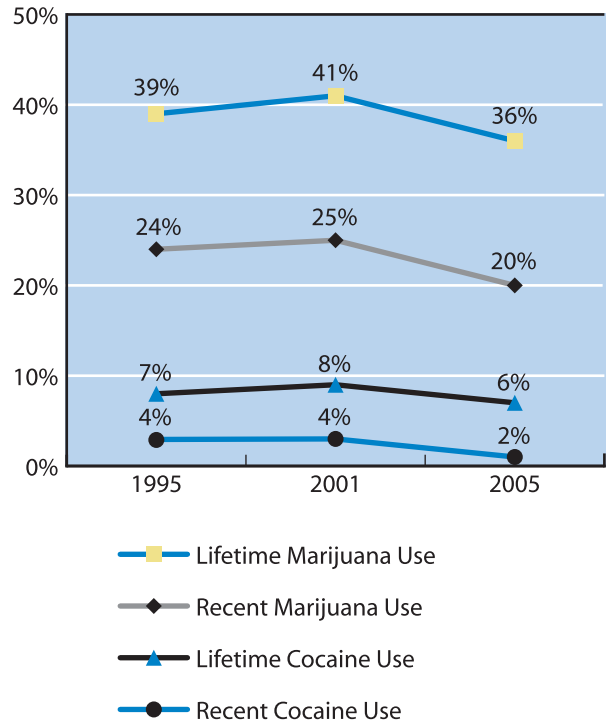
Drug Use

Marijuana and Cocaine Use

The percentage of New Jersey high school students who reported both lifetime and recent marijuana use was lower in 2005 than in previous years (*Figure 4*). In 2005, 36% of students used marijuana during their lifetime. Lifetime marijuana use among students was 41% in 2001 and 39% in 1995. About one in five students (20%) in 2005 used marijuana in the prior month (recent marijuana use), as compared to 25% in 2001 and 24% in 1995. The percentage of students reporting lifetime cocaine use was fairly consistent across survey years, with 6% of students in 2005, 8% in 2001, and 7% in 1995 having used cocaine at least once in their lifetime. Recent cocaine use also remained consistent across survey years. In 2005, 2% of students used cocaine at least once during the previous month compared to 4% in both 2001 and 1995.

FIGURE 4

MARIJUANA AND COCAINE USE, LIFETIME AND PAST 30 DAYS



Other Lifetime Drug Use

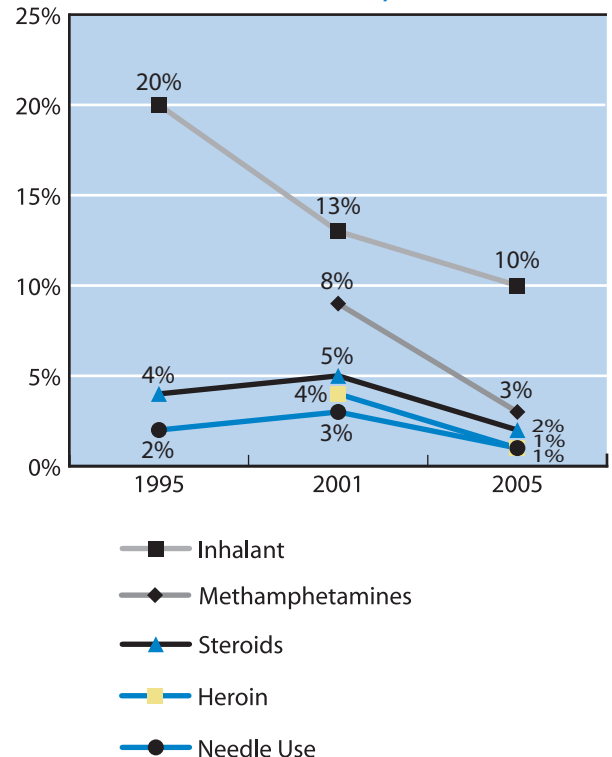
Trends in lifetime use of other illegal drugs are mainly positive (*Figure 5*). Among those drugs or behaviors where there has been improvement, the lifetime use of inhalants has decreased to 10% in 2005, from 13% in 2001 and 20% in 1995. The use of heroin dropped to 1% in 2005, from 4% in 2001, and the use of methamphetamines dropped to 3% in 2005, from 8% in 2001. The percentage of students who used steroid pills or shots without a doctor's prescription decreased slightly to 2% in 2005, from 5% in 2001 and 4% in 1995. The percentage of students who injected an illegal drug was at a low of 1% in 2005, as compared to 3% in 2001 and 2% in 1995.

Offered, Sold or Given Drugs at School

The percentage of students who were offered, sold, or given an illegal drug on school property during the previous year increased to a high of 33% in 2005, from 29% in 2001 and 30% in 1995.

FIGURE 5

OTHER DRUG USE, LIFETIME



Perceived Risk from Alcohol, Tobacco and Drugs

In 2005, high school students were asked about their perceptions of physical harm associated with cigarette, alcohol, and marijuana use (Figure 6). They were also asked whether or not they approved of the use of alcohol and marijuana. New Jersey high school students were more likely to believe that smoking a pack of cigarettes per day was a great health risk (70%) than drinking one or two drinks per day (33%), consuming five or more drinks per weekend (34%) or smoking marijuana occasionally (28%).

Just over half of New Jersey high school students either disapproved or strongly disapproved of statements regarding alcohol and marijuana use. Students were most likely to disapprove of consuming one or two alcoholic drinks per day (64%) than consuming five or more alcoholic beverages once or twice per weekend (54%). In addition, more than half of students either disapproved or strongly disapproved (58%) of smoking marijuana occasionally.

Physical Activity

New Jersey high school students were equally likely to engage in aerobic exercise for 20 or more minutes on three or more days per week in 2005 (67%) and 2001 (66%) (Figure 7). This figure was at a high of 70% in 1995. An equal number of students engaged in mild physical activity for 30 or more minutes on three or more days per week in 2005 and 2001 (47%). The proportion of students who engaged in tone-up exercising on three or more days per week did not change much over the ten-year period (51% in 2005, 54% in 2001 and 52% in 1995).

FIGURE 7

PHYSICAL ACTIVITY IN PAST WEEK

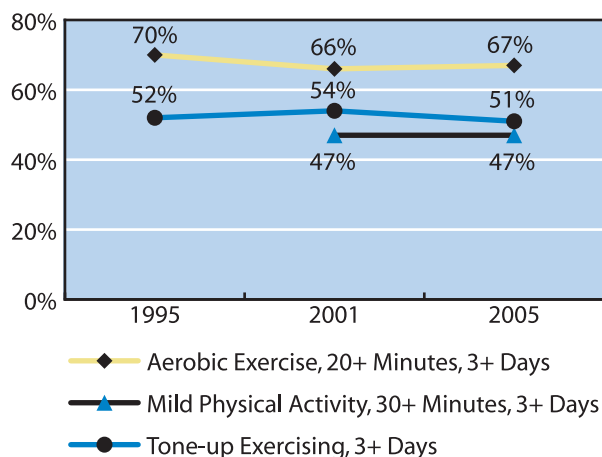
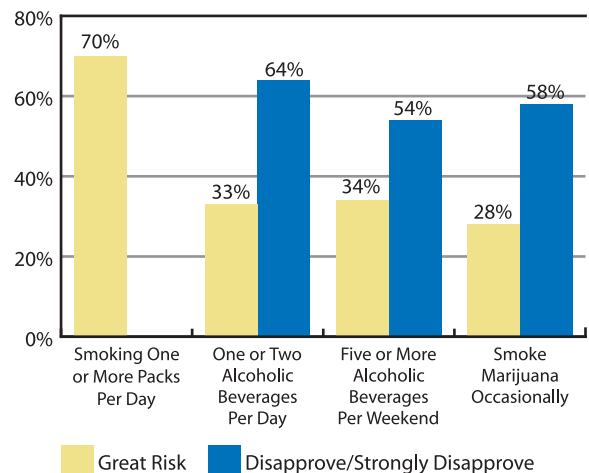


FIGURE 6

PERCEPTIONS OF CIGARETTE, ALCOHOL AND MARIJUANA USE



Physical Education and Sports Participation

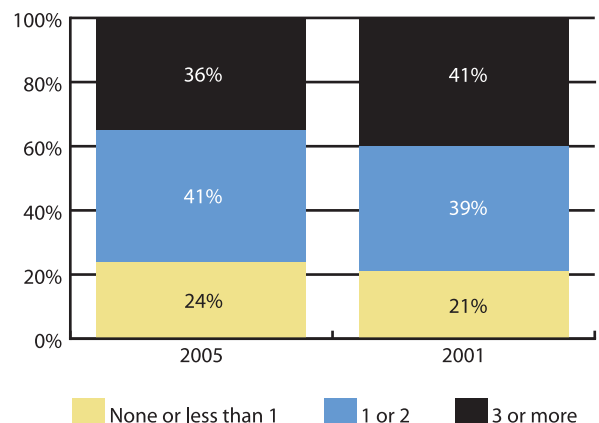
Although there was no real change in the proportion of students who took Physical Education (PE) classes at least one day a week in 2005 (91%) and 2001 (92%), they were more likely to actually exercise for more than 20 minutes in their PE classes (77% vs. 72%, respectively). More high school students played on sport teams in 2005 (62%) than in 2001 (59%).

Television Viewing

Fewer New Jersey high school students watched three or more hours of television on an average school day in 2005 (36%) than in 2001 (41%) (Figure 8). It is unclear whether the decline in the number of hours students watch TV is offset by time spent on computers or the Internet.

FIGURE 8

HOURS OF TELEVISION ON AVERAGE SCHOOL DAY



Sexual Behavior

The percentage of New Jersey high school students who had sexual intercourse in their lifetime decreased to 44% in 2005 from 47% in 2001 and 49% in 1995 (*Figure 9*). Boys (44%) and girls (44%) were equally likely to have had sexual intercourse, while the likelihood that students had sexual intercourse increased with age. Almost three-fourths of students 18 years old or older (74%) had ever had intercourse in their lifetime, as compared to 47% of 16- to 17-year olds and 28% of those 15 years old and younger.

While the percentage of students who had intercourse during the past three months was slightly lower in 2005 (33%) than in 2001 (36%), it was nearly equal to that in 1995 (34%). Students in 2005 (7%) were less likely to report having had more than one sexual partner in the past three months than in 2001 or 1995 (12% and 10%, respectively).

Among students who have had sex at least once in their lifetime, approximately one in five (22%) used drugs or alcohol prior to their last sexual encounter. This is a decline from the rates in 2001 (27%) and 1995 (28%). Boys (25%) and those 18 and over (24%) were slightly more likely than girls (19%) and those 15 and younger (19%) to have used alcohol or drugs prior to their last sexual encounter.

Contraception and Pregnancy

The percentage of students who used condoms or other forms of birth control when they last had sex increased across survey years (*Figure 10*). Fewer students in 2005 (6%) than in 2001 (15%) and 1995 (11%) used no form of birth control when they last had sex. In 2005, three-quarters (75%) of students used a condom the last time they had sexual intercourse, up from 67% in both 2001 and 1995.

Students were asked which birth control method they or their partner used the last time they had sexual intercourse. Among students who have had sex, nearly eight in 10 either used condoms (66%) or birth control pills (13%); in 2001, only about seven in 10 used condoms (58%) or birth control pills (11%) prior to having sex. Conversely, fewer students used no forms of contraception during their last sexual encounter. Sixteen percent of students used either the uncertain withdrawal method (10%) or no method of birth control (6%) when last having sex compared to 27% who used these methods in 2001 – withdrawal (12%) or no birth control (15%).

The percentage of New Jersey high school students who became pregnant, or caused a pregnancy, decreased to 4% in 2005, from 6% in 2001 and 7% in 1995.

HIV/AIDS Education

The percentage of students who had been taught about AIDS or HIV infection in school reached a high of 96% in 2005, from 91% in 2001 and 94% in 1995.

FIGURE 9

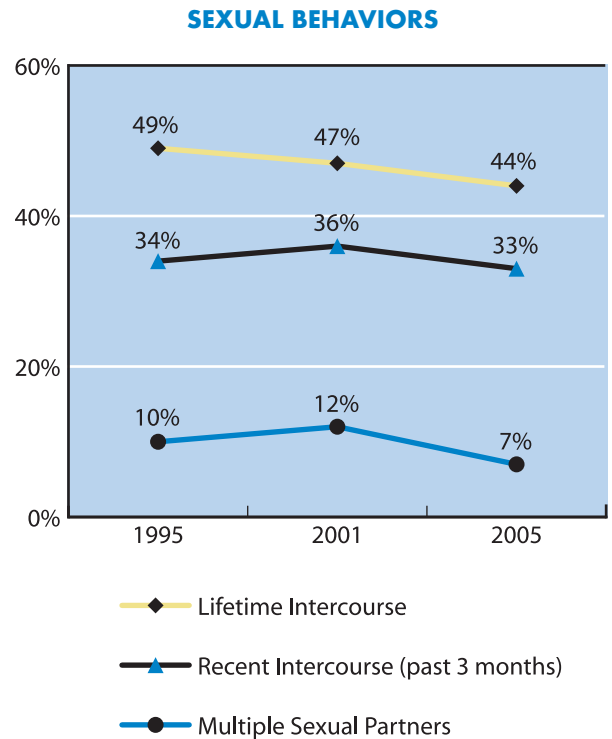
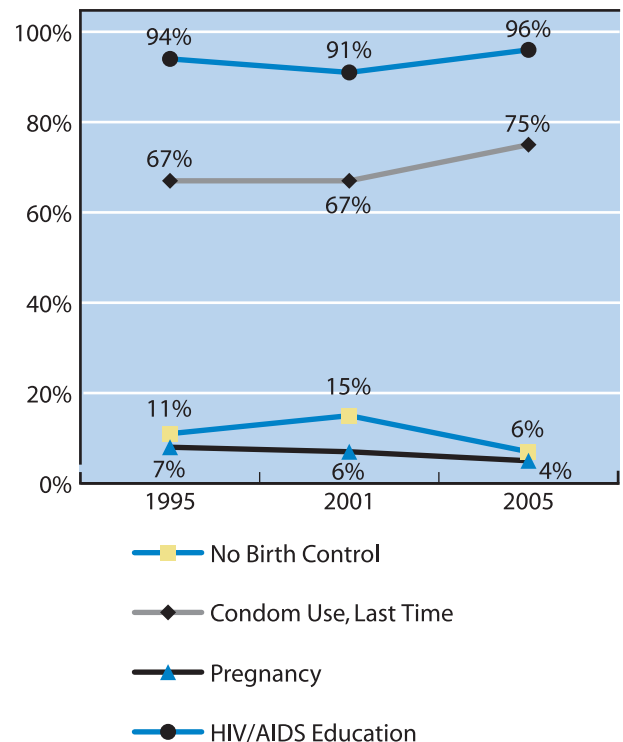


FIGURE 10

BIRTH CONTROL, PREGNANCY, AND HIV/AIDS



Physical Violence

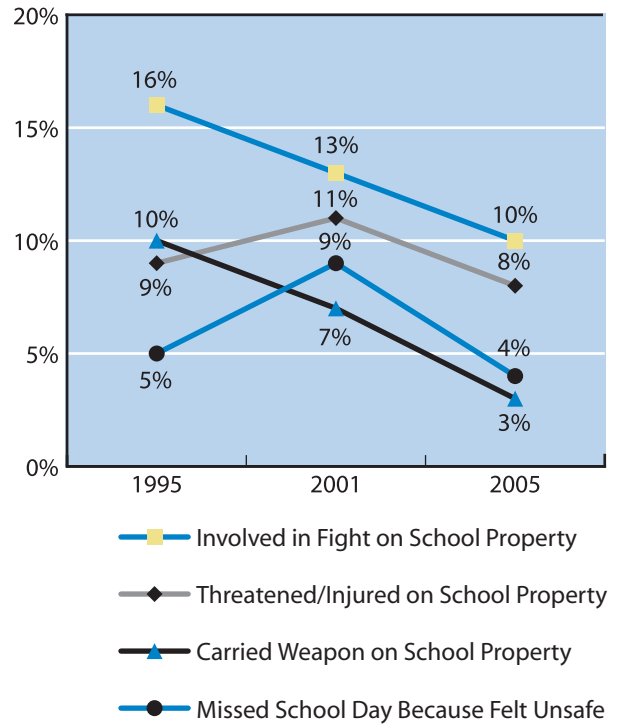
Overall, rates of violence on school property were lower in 2005 than in previous survey years (*Figure 11*). In 2005, the percentage of high school students who did not attend at least one out of the last 30 days of school because they felt unsafe going to or from school dropped to a low of 4% from 9% in 2001 and 5% in 1995. The proportion of students who were involved in fights on school property during the previous 12 months declined steadily across survey years to a low of 10% in 2005 from 13% in 2001 and 16% in 1995. In 2005, 8% of students had been threatened or injured on school grounds during the previous year, as compared to 11% in 2001 and 9% in 1995.

The proportion of students who carried a weapon on school property during the previous month declined steadily to a low of 3% in 2005, down from 7% in 2001 and 10% in 1995.

The percentage of high school students involved in a physical fight, whether on or off of school property, during the previous year dropped in 2005 from levels in previous years. In 2005, three in 10 students (31%) had been in a fight during the previous year, as compared to more than one-third of students in 2001 (35%) and 1995 (36%). Similar proportions of students required medical attention from injuries sustained from fighting in 2005 (4%), 2001 (6%), and 1995 (5%).

FIGURE 11

WEAPONS AND VIOLENCE ON SCHOOL PROPERTY



Weapons

The percentage of New Jersey high school students who had carried a weapon during the past 30 days decreased steadily across survey years (*Figure 12*). In 2005, 10% of students reported that they had carried a weapon, down from 13% in 2001 and 18% in 1995. The proportion of students who carried a gun during the previous month declined to 2% in 2005 from 5% in both 2001 and 1995.

Weight and Body Image

Students' self-reported height and weight was used to calculate a body mass index (BMI). BMI is calculated as weight in kilograms divided by height in meters squared. A child's BMI that is greater than the 95th percentile of the index population for gender and age is considered "overweight," while a child in the 85th to 95th percentile is considered "at risk" for being overweight. All others who are at the 85th percentile or below are considered "normal." Overall, slightly more New Jersey high school students were classified as having a body mass index outside the normal range in 2005 (27%) than in 2001 (25%). Males (15%) were more likely than females (8%) to be classified as overweight. (*Figure 13*)

FIGURE 12

WEAPON AND GUN POSSESSION, PAST 30 DAYS

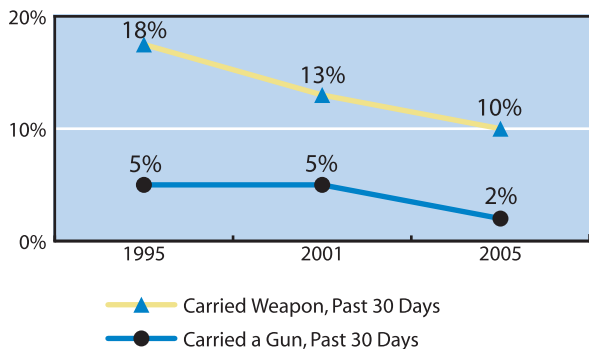
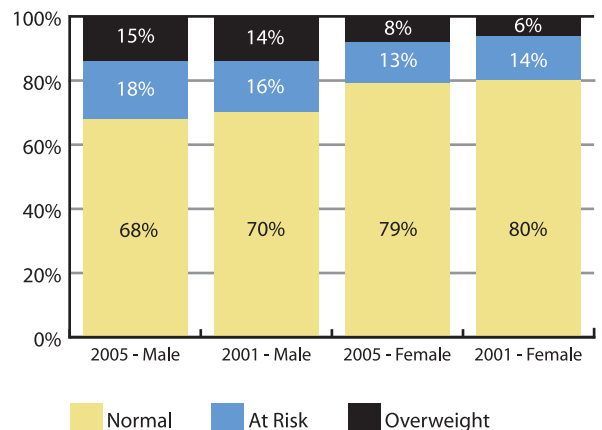


FIGURE 13

BODY MASS INDEX



Perceived Weight and Methods of Weight Control

New Jersey high school students were slightly more likely to describe themselves as slightly or very overweight in 2005 (31%) than in 2001 (29%). Students were equally likely to be trying to lose weight in 2005 and 2001 (46%). This figure was slightly lower in 1995 (43%). The percentage of students that were either dieting to lose weight or using diet pills, powders, and liquids that were not prescribed by a doctor decreased in 2005 from levels in 2001. In 2005, 40% of students were dieting, as compared to 45% in 2001. The number of students taking diet pills dropped notably to 5% in 2005, from 11% in 2001.

Asthma and Dental Care

In 2005, high school students were asked if they had ever been diagnosed with asthma. About one in five (20%) had been diagnosed with asthma by a doctor or nurse.

Regarding dental care, about three-fourths of students (76%) had been to the dentist for a checkup within the past 12 months.

Middle School Students (7th and 8th Grade)

Alcohol, Cigarette, and Drug Use

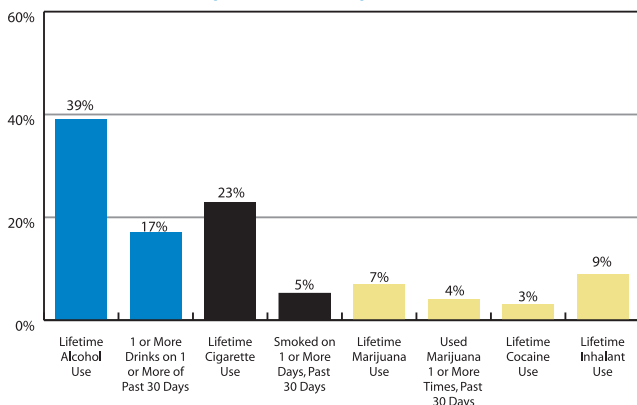
Close to four in 10 New Jersey middle school students (39%) have had a drink of alcohol in their lifetime and 17% had one or more drinks on one or more of the past 30 days (*Figure 15*).

While more than one in five New Jersey middle school students (23%) have ever tried cigarette smoking, substantially fewer (5%) reported smoking on one or more of the past 30 days.

Less than one in 10 New Jersey middle school students had ever tried marijuana (7%) and only 4% used the substance one or more times during the previous month. Students were three times more likely to report lifetime inhalant use (9%) than lifetime cocaine use (3%).

FIGURE 15

ALCOHOL, CIGARETTE, AND DRUG USE

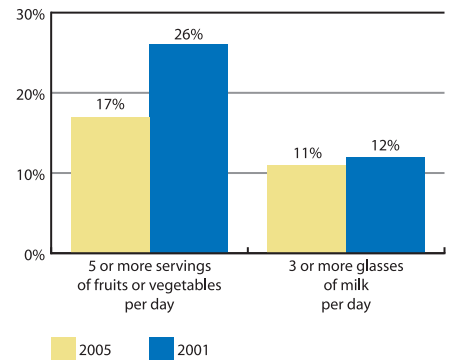


Dietary Behaviors

The percentage of New Jersey high school students who ate at least five or more servings of fruits and vegetables per day during the previous seven days fell to 17% in 2005, down from 26% in 2001 (*Figure 14*). Milk consumption was consistent across survey years, with 11% in 2005 and 12% in 2001 having consumed milk at three or more glasses of milk per day during the past week.

FIGURE 14

DIETARY BEHAVIOR IN THE PAST WEEK



Weapons, Personal Safety, and Attempted Suicide

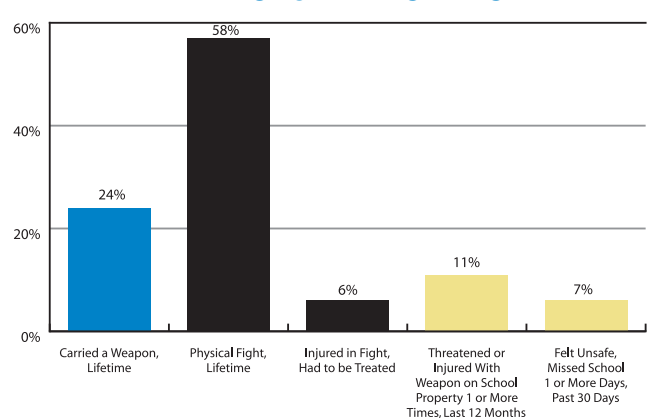
Weapons and Physical Fighting

Close to one in four New Jersey middle school students (24%) carried a weapon at least once in their lifetime (*Figure 16*). While the majority of students (58%) have been in a physical fight at least once, less than one in 10 (6%) have been in a fight in which they received injuries requiring medical treatment.

More than one in 10 New Jersey middle school students (11%) had been threatened or injured with a weapon on school property one or more times during the past 12 months. Slightly fewer (7%) missed one or more days of school during the past 30 days because they felt unsafe either at school or on the way to or from school.

FIGURE 16

WEAPONS AND FIGHTING



Personal Safety and Attempted Suicide

More than a quarter of New Jersey middle school students (27%) have ridden in a car with a driver who had been drinking (Figure 17). Students were much more likely to report regular seat belt use than to report regular helmet use for biking/skateboarding. While only one in 10 students never or rarely wear a seat belt (12%), at least seven in 10 students never or rarely wore a helmet when bicycling (70%) or skateboarding/rollerblading (72%).

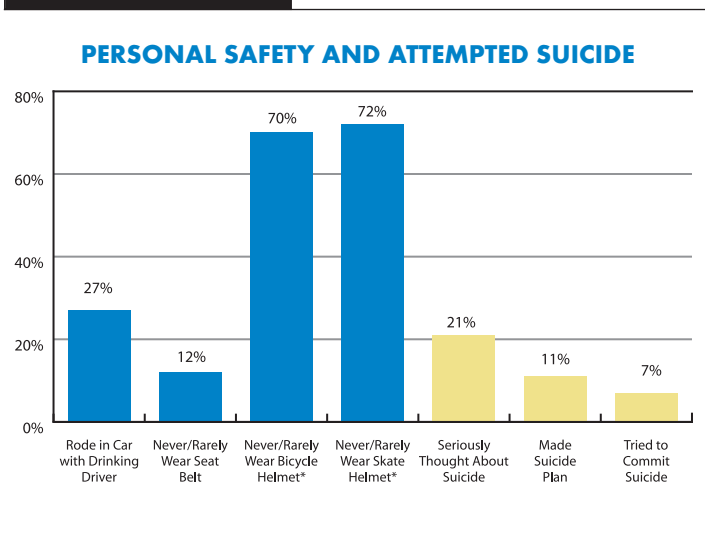
About one in five students (21%) had seriously thought about suicide. Fewer students had made a suicide plan (11%) and even fewer had actually tried to commit suicide (7%).

Weight and Weight Control

About three in 10 middle school students were classified as either overweight (12%) or at risk of being overweight (17%) based on their calculated Body Mass Index (BMI) (Figure 18). Only slightly more boys (14%) than girls (9%) were classified as overweight, while the percentages at risk for being overweight were nearly identical.

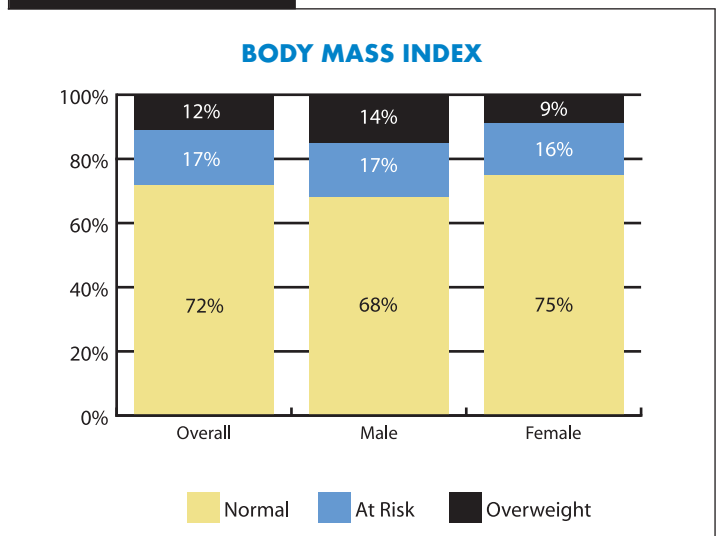
Similarly, 28% of middle school students describe themselves as being overweight. More than four in 10 students (45%) were trying to lose weight. Students were most likely to try to lose or maintain their weight through exercise (69%) or changing their eating habits (45%). Fewer students relied on more dangerous methods of weight control, such as fasting (16%), taking diet pills, powders, or liquids (4%), or vomiting or taking laxatives (4%).

FIGURE 17



* AMONG STUDENTS WHO RIDE BICYCLES/USE ROLLERBLADES OR SKATEBOARDS.

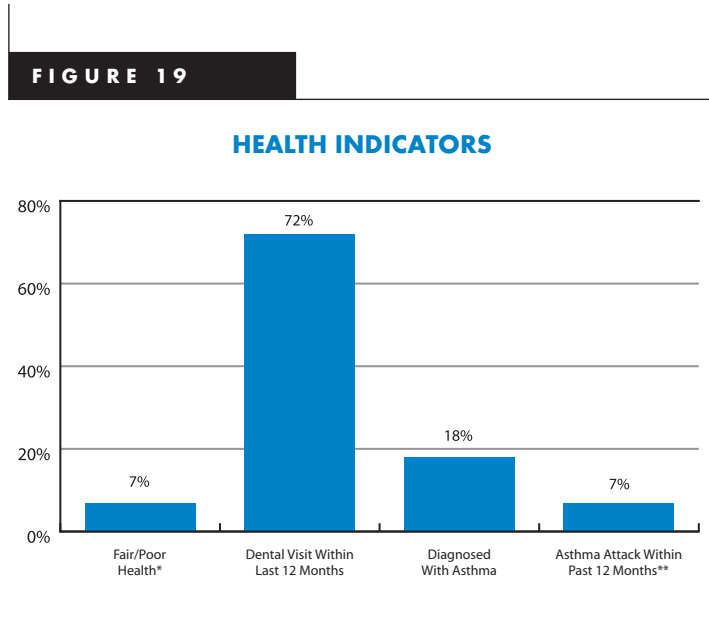
FIGURE 18



Health and Dietary Patterns

Health Indicators

Very few New Jersey middle school students described their health as either fair (6%) or poor (<1%) (**Figure 19**). Almost three-quarters of students (72%) have had a dental check-up within the past 12 months. Eighteen percent of students have been diagnosed by a doctor or nurse with asthma and 7% have had an asthma attack within the past 12 months.



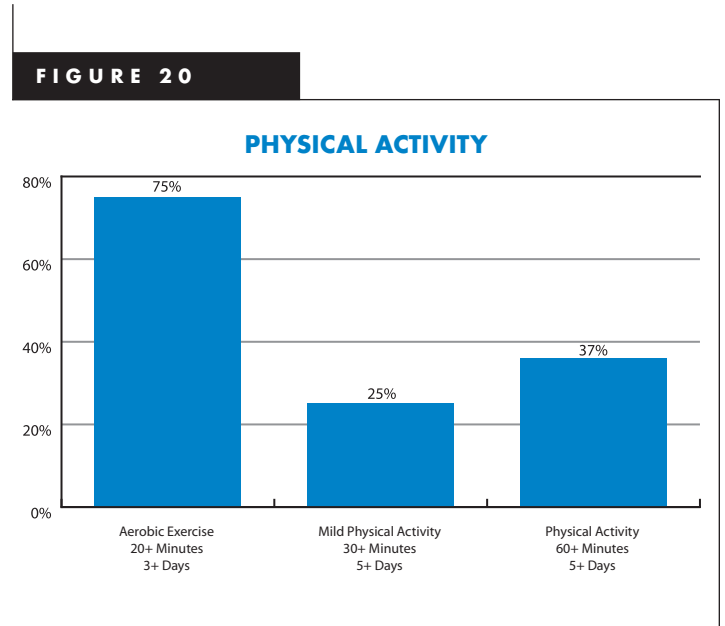
*SELF-DESCRIPTION

**AMONG STUDENTS WHO HAVE BEEN DIAGNOSED WITH ASTHMA.

Physical Activity

Three-fourths of New Jersey middle school students (75%) engaged in aerobic exercise for at least 20 minutes on three or more of the previous seven days, 25% engaged in mild physical activity for at least 30 minutes on five or more days, and 37% engaged in physical activity for at least 60 minutes on five or more of the past seven days (**Figure 20**).

During an average school week, about one-third of students (36%) attend Physical Education (PE) classes daily. Among students who took PE classes, the majority (83%) reported that they actually exercised or played sports for at least 20 minutes during an average PE class. Close to two-thirds (64%) of students reported playing on sports teams.



Study Funding

Funding for the survey was provided by the New Jersey Department of Education through a cooperative agreement with the Centers for Disease Control and Prevention #U87/CCU222666 and the U.S. Department of Education under the Safe and Drug Free Schools and Communities Act (Title IV-A) of the *No Child Left Behind Act* and by the New Jersey Department of Health and Senior Services Comprehensive Tobacco Control Program.

The Bloustein Center for Survey Research (BCSR) at the Edward J. Bloustein School of Planning and Public Policy, Rutgers, The State University of New Jersey, administered the survey, analyzed the findings

and prepared this summary brochure. The summary brochure and detailed report can be downloaded from the web site of the New Jersey Department of Education and reproduced without restriction.

Comments concerning the survey and this report may be directed to the New Jersey Department of Education through the "Contact Us" button at the bottom of every page on the NJDOE web site.