

District of Columbia

YOUTH RISK BEHAVIOR SURVEY



2017



District of Columbia
Office of the State Superintendent of Education

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Letter from the
STATE SUPERINTENDENT

The 2017 District of Columbia Youth Risk Behavior Survey (YRBS) continues to be an integral tool for government and community stakeholders who educate, protect, and support District of Columbia youth. The results from this biennial survey describe health-related risk and protective factors as reported anonymously by middle and high school students from DC public and public charter schools. Our census-level data collection methodology provides the District with a YRBS data set that is unmatched in its depth and breadth, allowing us to reveal trends in specific groups of students, highlight the groups most at risk and target those groups with appropriate programming and state-level policy development.

The 2017 YRBS Report marks ten years since DC's first YRBS data collection. The data we are releasing in this report show several health-related successes in the past decade. For example, regular consumption of soda and other sugar sweetened drinks has decreased among high school students by nearly 50 percent since 2007,

a significant improvement that demonstrates the ongoing success of policies such as the DC Healthy Schools Act of 2010. Another encouraging finding is that fewer DC students reported current involvement in a gang or crew.

Despite these optimistic trends, there were also some areas of concern. Condom use among sexually active high school students, while slightly higher than the latest national average, is down among DC high school youth⁵. Lesbian, gay, and bisexual middle school students thought seriously about, planned, and attempted to kill themselves at about three times the rate of their heterosexual peers in DC. At the high school level, nearly a third of all Hispanic females seriously thought about killing themselves, and almost a quarter of them made a plan to do so.

We can do better for our youth, and these data are a valuable tool for helping us direct our time, funding, and efforts. OSSE will continue working with our sister agencies and community partners to ensure students are reaching their maximum potential and living healthy lives. We hope that all schools and health care providers see the significance of this survey, the results of which provide rich opportunities for implementing so many programs at all levels.

A special thanks to our schools and students who were part of this process. We strongly encourage all eligible middle and high schools in the District of Columbia to participate in future YRBS administrations, because the more data we are able to collect through this important survey, the more robust and insightful our analysis will be for community partners working to improve the lives of young people in the District of Columbia.

Sincerely,

Hanseul Kang
State Superintendent of Education



HOW TO UNDERSTAND THIS REPORT

This report presents data from the District of Columbia Youth Risk Behavior Survey (YRBS) for 2017 and covers the following risk behavior categories, which coincide with the categories of OSSE's [Health Education Standards](#):

- Alcohol, Tobacco and Other Drugs
- Mental and Emotional Health
- Nutrition and Physical Activity
- Disease Prevention / Sexual Health
- Violence and Safety

The report finds significant differences between and within specific groups of students in the District of Columbia youth population (e.g., sex, grade, race and ethnicity) for various health behaviors and describes behaviors that have undergone significant changes since the YRBS was previously administered in 2007, 2012 and 2015. When data are reported separately for different groups (e.g., males and females), the data shown apply only to those groups and should not be added together.

HOW TO UNDERSTAND STATISTICALLY SIGNIFICANT RESULTS

The term “significant” is used throughout the report to denote a change that is statistically significant. Statistical significance refers to differences in data that do not occur by chance, but because an actual difference exists between the groups or years being compared. All comparisons in this report were calculated using a significance level of 95 percent, indicating that there is at least a 95 percent probability that the result did not occur by chance. Significance here does not say anything about the size of the change or difference that has occurred, but rather, it indicates that the change or difference observed has a 95 percent chance of being true and less than a 5 percent chance of not being true.

HOW TO UNDERSTAND SIGNIFICANCE REPORTED IN TABLES

Tables are used throughout the report to display changes in the data between the 2007, 2012, 2015 and 2017 surveys. Trend tables in this report have a respective column for each year in addition to two trend columns, the first indicating whether there was a significant change in students' behavior between the most recent survey administrations (2015 and 2017) and the second indicating whether there is a significant change between 2007 and 2017. Unless otherwise noted, arrows are used in the significance column to denote if there is a significant linear change between the earlier and later year.

When 2007 data is not available for the longer-term trend column, only significant change between 2012 and 2017 is measured; an arrow with an asterisk indicates that there was a significant change between 2012 and 2017 only. The direction of the arrow indicates if the data show a significant increase, a significant decrease or a non-significant change. Color is used to show if the behavior has improved over time (green) or if it has worsened over time (red). The arrows used are as follows:

↔	No significant change
↑	Significant increase in a positive direction (e.g., significant increase in eating fruit)
↓	Significant decrease in a positive direction (e.g., significant decrease in riding in a vehicle with someone who drank alcohol)
↑	Significant increase in a negative direction (e.g., significant increase in marijuana use)
↓	Significant decrease in a negative direction (e.g., significant decrease in condom use)



DEMOGRAPHICS AND STUDENT CHARACTERISTICS

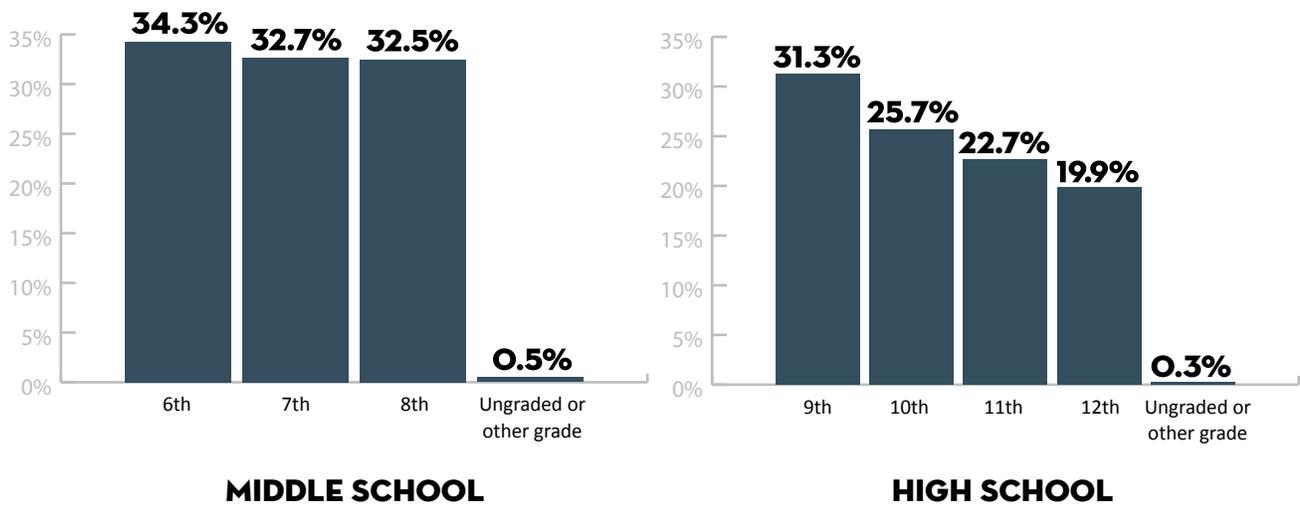
DEMOGRAPHICS AND STUDENT CHARACTERISTICS

Survey participants had the following characteristics:

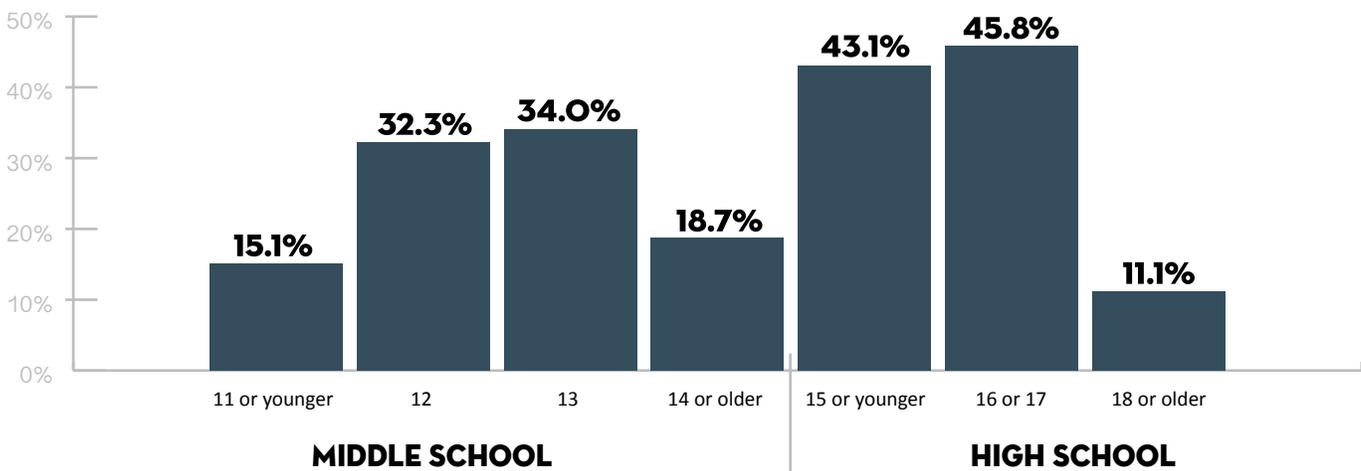
Sex

	Middle School	High School
Male	49.7%	49.7%
Female	50.3%	50.3%

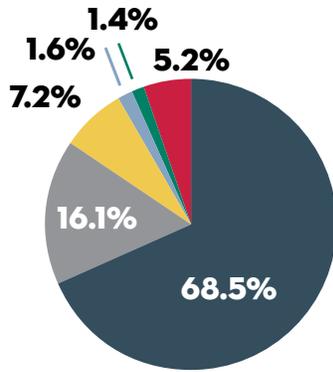
Grade



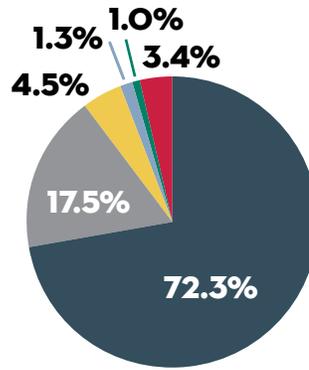
Age



Race/Ethnicity



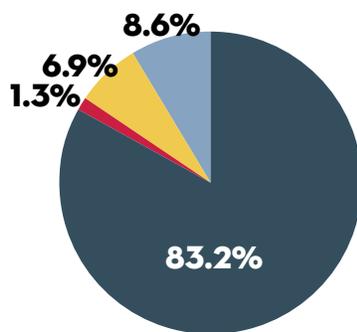
MIDDLE SCHOOL



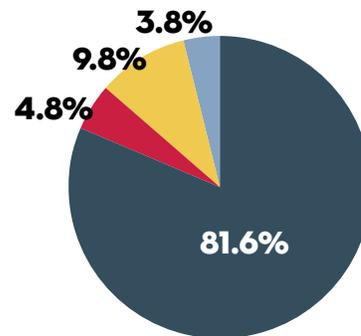
HIGH SCHOOL



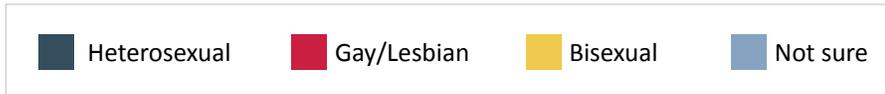
Sexual Orientation



MIDDLE SCHOOL

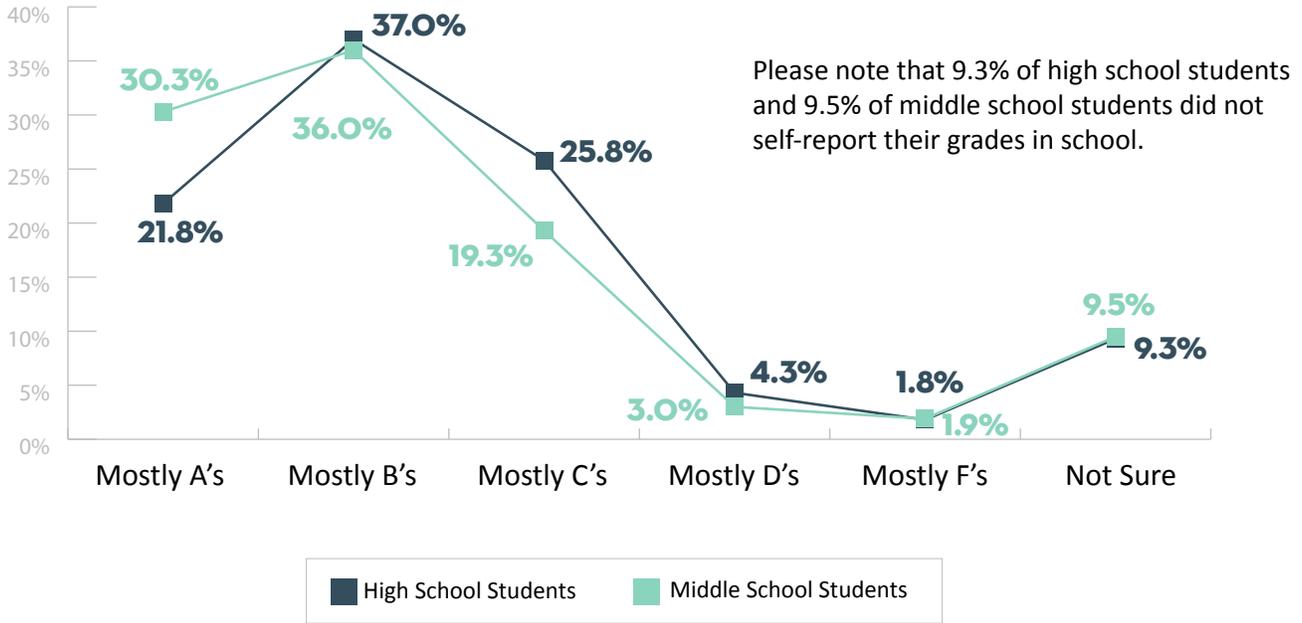


HIGH SCHOOL



DEMOGRAPHICS AND STUDENT CHARACTERISTICS (CONTINUATION)

Self-reported academic performance in school - during the previous 12 months



The Human Rights Campaign defines transgender as an umbrella term for people whose gender identity and/or expression is different from cultural expectations based on the sex they were assigned at birth.¹ Being transgender does not imply any specific sexual orientation.

TRANSGENDER

Middle School Percentage

0.9%

High School Percentage

1.7%





ALCOHOL, TOBACCO AND OTHER DRUGS

Alcohol and drug use increases the risk of injuries, violence, HIV infection, depression, and other health problems among young people and continues to be a public health concern around the country. While alcohol and illegal drug use is down overall from ten years ago in DC, certain groups of DC youth appear to be more at risk, as seen in this section of the report. Understanding the behaviors of these groups is critical to developing effective prevention and intervention programs for DC youth. OSSE continues to work with our community partners in education, health and behavioral health to analyze the survey results and understand the perceptions, beliefs, and related factors that impact youth behavior and decision making.

ALCOHOL, TOBACCO AND OTHER DRUGS

Current (past 30-day) substance use	Middle School	High School	Middle School Average Age of First Use*	High School Average Age of First Use*
Smoked cigarettes	4.0%	8.1%	10.4 years	11.8 years
Had at least one drink of alcohol	9.0%	20.5%	10.1 years	12.9 years
Used marijuana	9.8%	33.0%	11.3 years	13.1 years
Smoked cigars	4.5%	10.5%	n/a	n/a
Used an electronic vapor product	5.8%	10.9%	n/a	n/a

*based on the age that students reported first using the drug



About one in thirteen middle school students report having had their first drink of alcohol, other than a few sips, at age 8 or younger.

Trends in high school students' current (past 30-day) substance use: 2007 to 2017	2007	2012	2015	2017	2015-2017 Trend	Long-term Trend
Smoked cigarettes*	11.0%	13.8%	8.2%	8.1%	n/a	n/a
Smoked cigars, cigarillos or little cigars	10.4%	16.5%	11.5%	10.5%	No Change ↔	No Change ↔
Used electronic vapor products**	n/a	n/a	13.4%	10.9%	Down ↓	n/a
Used marijuana	20.5%	32.2%	28.7%	33.0%	Up ↑	Up ↑
Used synthetic marijuana**	n/a	n/a	3.5%	3.5%	No Change ↔	n/a
Had at least one drink of alcohol	34.2%	31.4%	20.1%	20.5%	No Change ↔	Down ↓
Used illegal drugs	n/a	25.3%	13.3%	14.1%	No Change ↔	Down ↓

*The wording of this question was altered from "How old were you when you smoked a whole cigarette for the first time?" to "How old were you when you first tried cigarette smoking, even one or two puffs?" in 2017. Therefore, no long-term trend data are available for this question.

**Long-term trend data not available



Male and female high school students used marijuana at about the same rates, though males were more likely to be heavy users (40 or more times in the last 30 days). See Appendix B for more data regarding marijuana use.

	Trends in Alcohol Age of Initiation: 2007 to 2017	2007	2012	2015	2017	2015-2017 Trend	Long-term Trend 2007-2017
HIGH SCHOOL	Percentage of students who had their first drink of alcohol other than a few sips before age 13 years	25.4%	22.0%	18.8%	16.1%	Down ↓	Down ↓
MIDDLE SCHOOL	Percentage of students who had their first drink of alcohol other than a few sips before age 11 years	17.6%	14.2%	10.9%	14.4%	Up ↑	Down ↓

LGB youth were disproportionately represented in youth who used alcohol, tobacco, and other drugs.

Substance use among lesbian, gay and bisexual middle school youth

Substance use among lesbian, gay and bisexual high school youth

LGB youth make up **8.9%** of the District middle school population but account for...

LGB youth make up **15.1%** of the District high school population but account for...

25.0% of youth who smoked cigarettes

27.8% of youth who smoked cigarettes

21.5% of youth who smoked cigars or cigarillos

27.0% of youth who smoked cigars or cigarillos

19.5% of youth who drank alcohol

23.2% of youth who drank alcohol

20.1% of youth who used marijuana

22.0% of youth who used marijuana

14.1% of youth who used synthetic marijuana

27.0% of youth who used synthetic marijuana

12.8% of youth who ever used cocaine

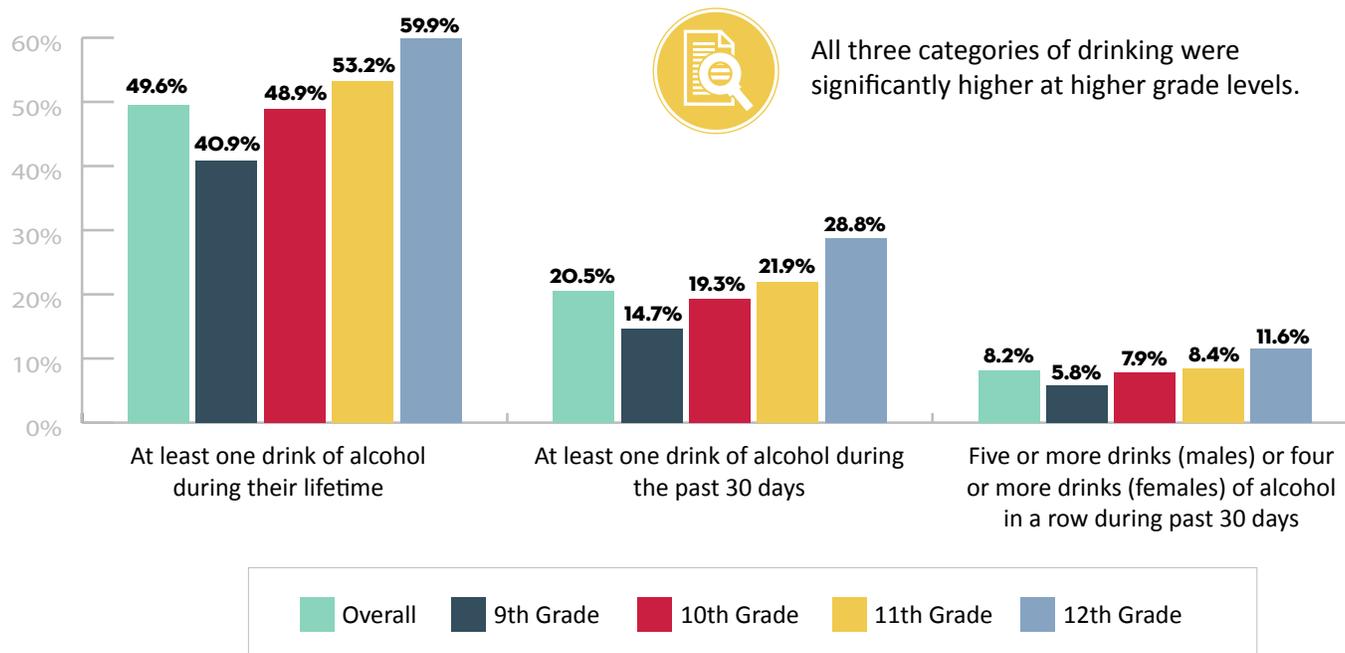
29.0% of youth who ever used cocaine



All differences between students who identify as heterosexual and students who identify as LGB are statistically significant.

ALCOHOL, TOBACCO AND OTHER DRUGS (CONTINUATION)

Alcohol use among high school students, by grade

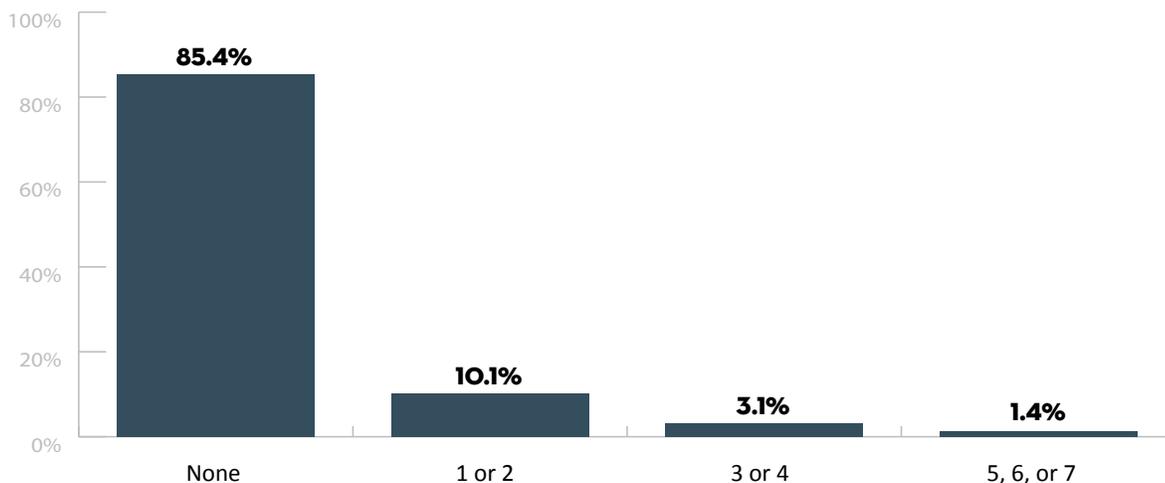


Trends in substance-related behaviors: 2007 to 2017		2007	2012	2015	2017	2015-2017 Trend	Long-term Trend
MIDDLE SCHOOL	Has ever ridden in a car or other vehicle driven by someone who had been drinking alcohol	27.8%	19.5%	18.0%	19.2%	No Change ↔	Down ↓
	Rode one or more times during the past 30 days in a car or other vehicle driven by someone who had been drinking alcohol	29.0%	25.5%	20.4%	22.1%	Up ↑	Down ↓
HIGH SCHOOL	Drove a car or other vehicle after drinking alcohol during the past 30 days	n/a	11.2%	7.8%	7.0%	No Change ↔	Down ↓
	Drank alcohol or used drugs before the most recent time they had sexual intercourse during the past three months	17.4%	20.5%	18.1%	19.2%	No Change ↔	No Change ↔



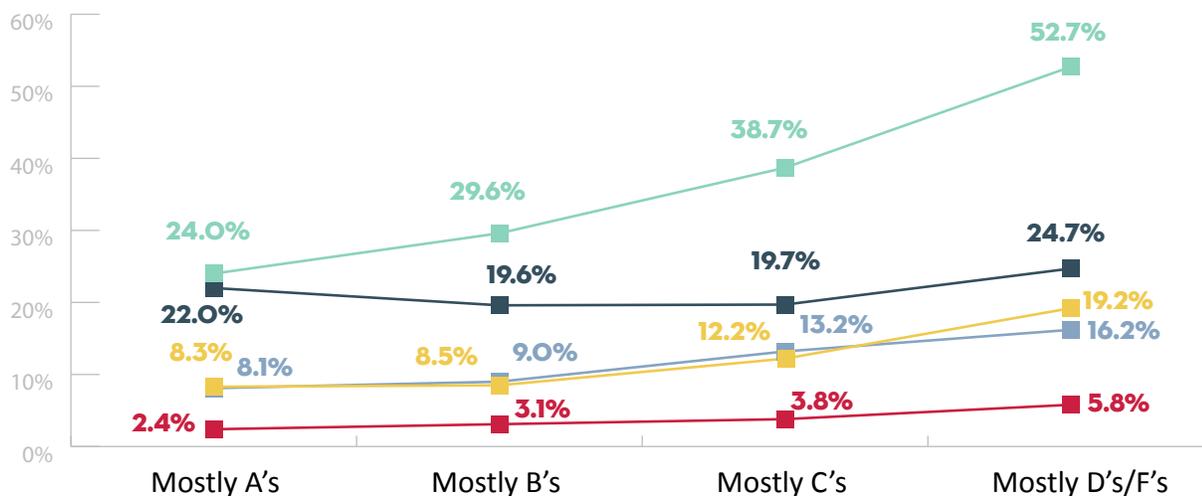
Of students who reported drinking and driving, one in five did so frequently (on 6 or more occasions in the past 30 days).

High school students by number of illicit drugs they have used three or more times (cocaine, inhalants, heroin, methamphetamines, synthetic marijuana, ecstasy, or prescription pain medicine without a doctor's prescription)



Over 15 percent of all high school students have used prescription pain medicine without a doctor's prescription or differently than how a doctor told them to use it.

Substance use among high school students, by academic performance



- Used marijuana one or more times during the prior 30 days
- Had at least one drink of alcohol on at least one day during the prior 30 days
- Used synthetic marijuana one or more times during the prior 30 days
- Smoked cigars, cigarillos or little cigars during the prior 30 days
- Used electronic vapor products during the prior 30 days



Marijuana, cigar, and electronic vapor product use are all significantly associated with academic achievement among high schoolers.

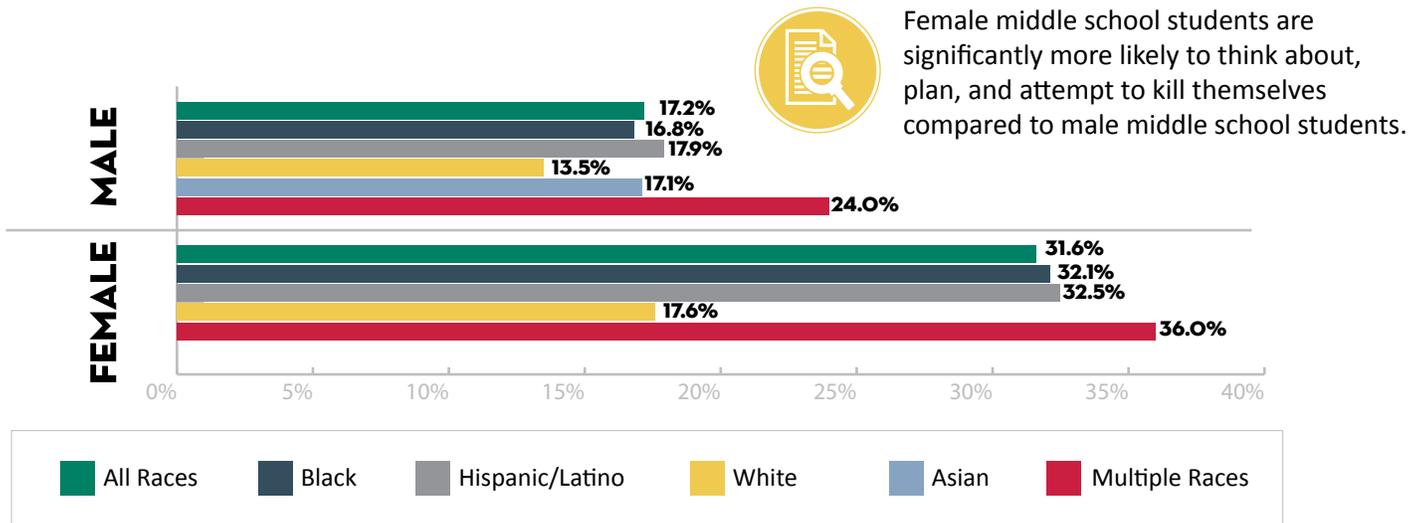


MENTAL AND EMOTIONAL HEALTH

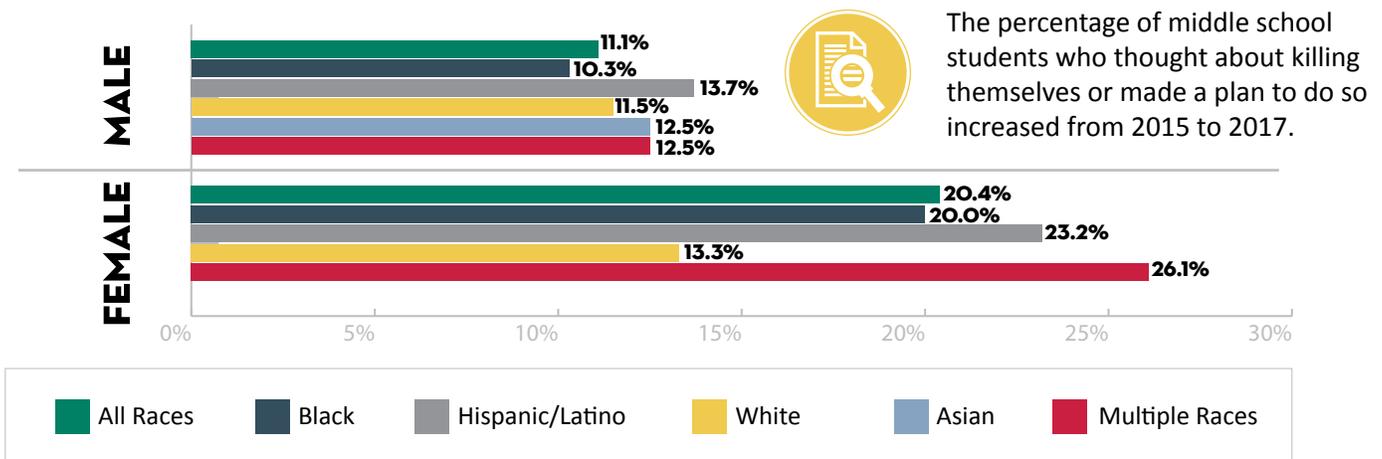
The adolescent years mark major physical, social, and psychological milestones for young people. Mental and emotional support are critically important components of youth development during this transitional period of their lives. Unfortunately, the prevalence of depression in US adolescents and young adults is on the rise, leading to a growing number of young people with untreated depression². The DC YRBS results reflect similar trends. Many DC youth experience prolonged depression that interferes with everyday activities, and many report they are not able to find the help they need. Furthermore, some are experiencing suicidal ideation and suicide attempt, particularly females of color and LGBT individuals. These results reveal that there is a great need for culturally-appropriate prevention and intervention programs that promote strong mental and emotional health among DC youth. OSSE is committed to working with our community partners to learn more about and respond to this need.

MENTAL AND EMOTIONAL HEALTH

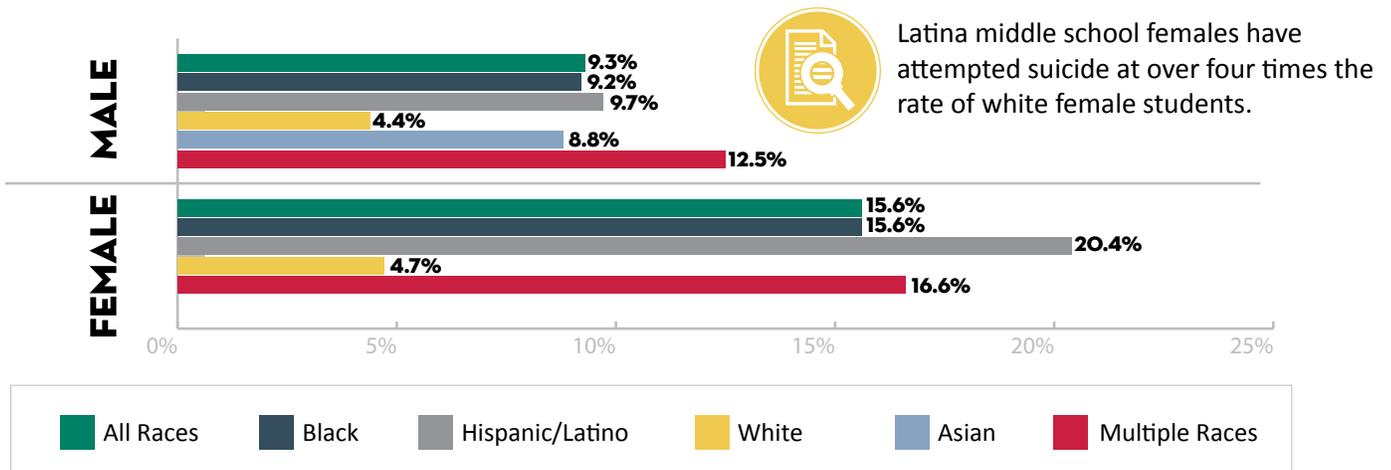
Percentage of middle school students who seriously thought about killing themselves



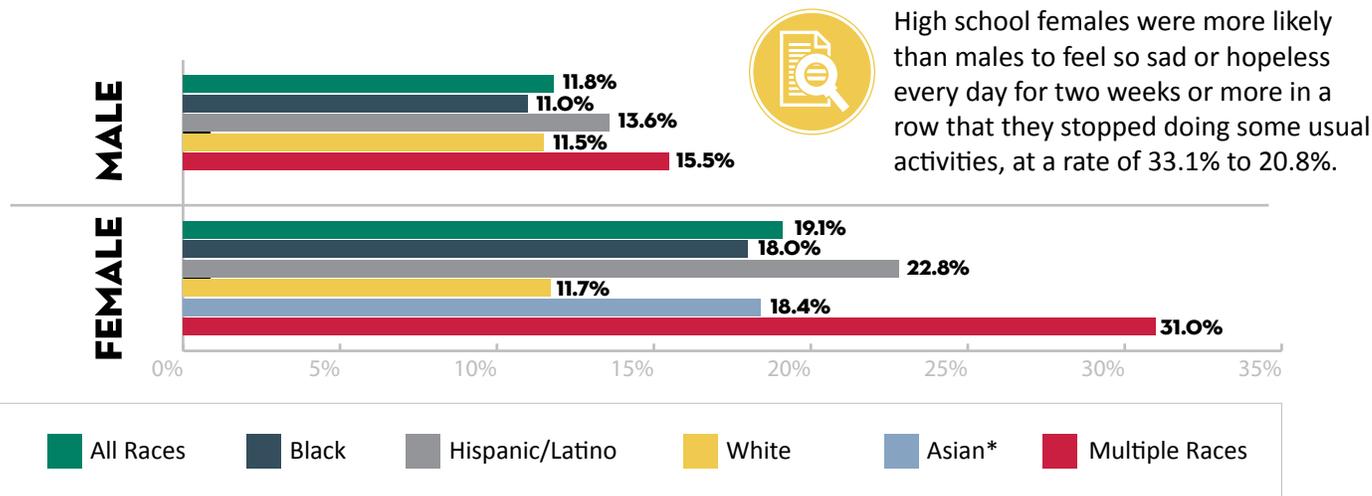
Percentage of middle school students who made a plan about how they would kill themselves



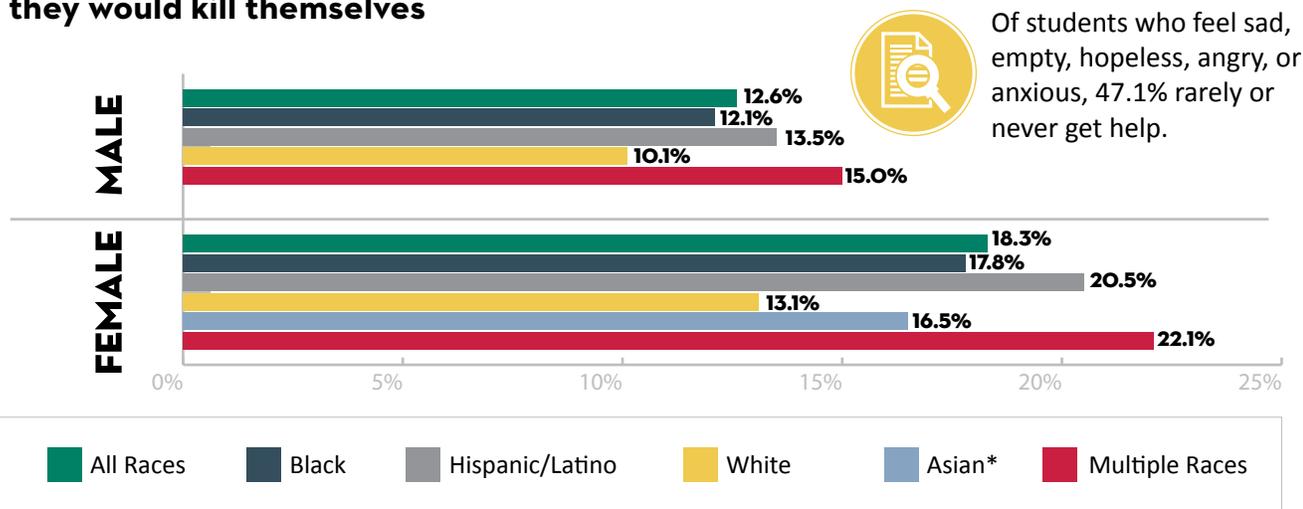
Percentage of middle school students who ever tried to kill themselves



Percentage of high school students who seriously thought about killing themselves



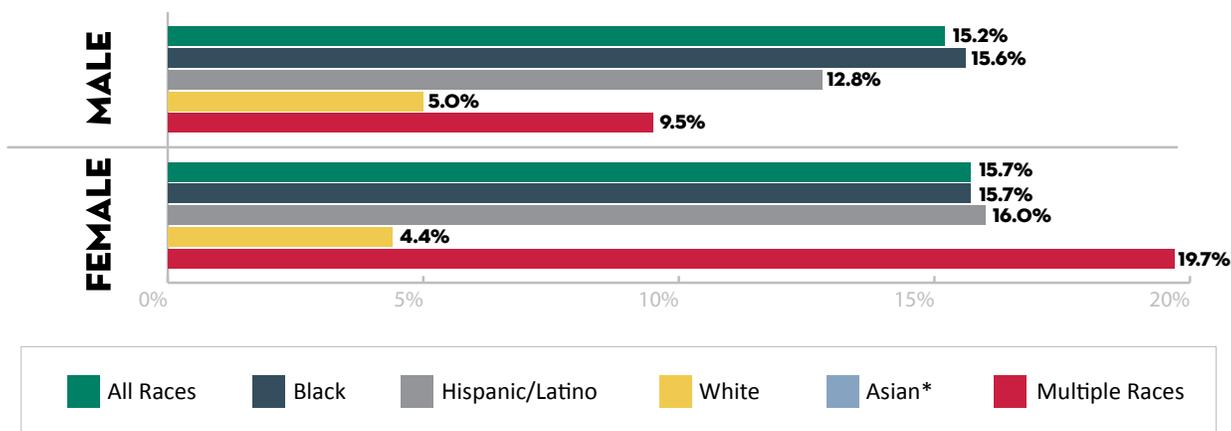
Percentage of high school students who made a plan about how they would kill themselves



Percentage of high school students who attempted suicide within the last 12 months

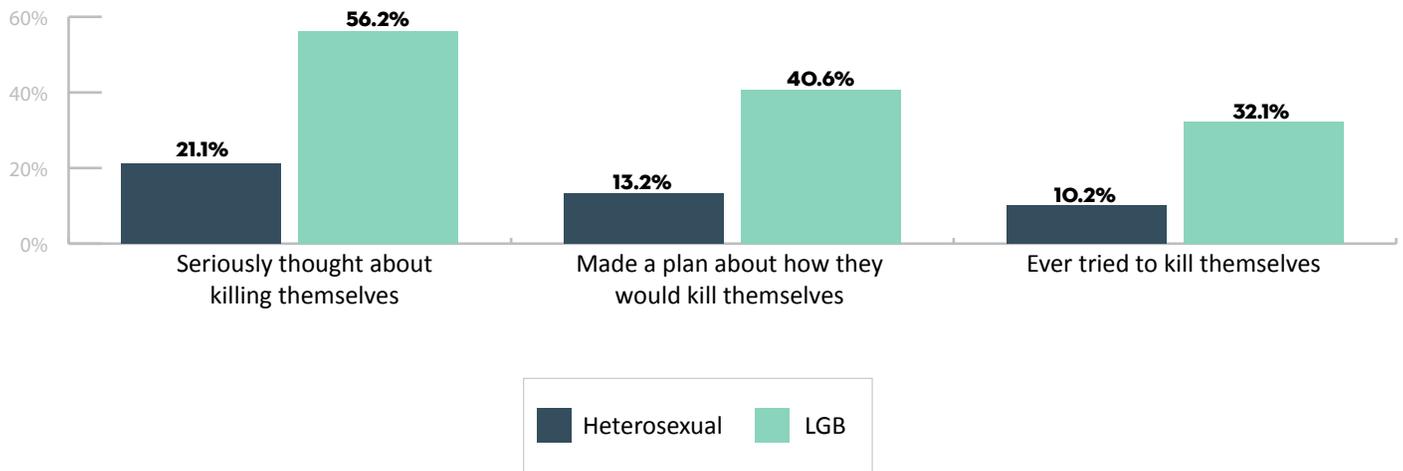


The rates of high school students who seriously considered attempting suicide and who attempted suicide increased from 2015 to 2017.



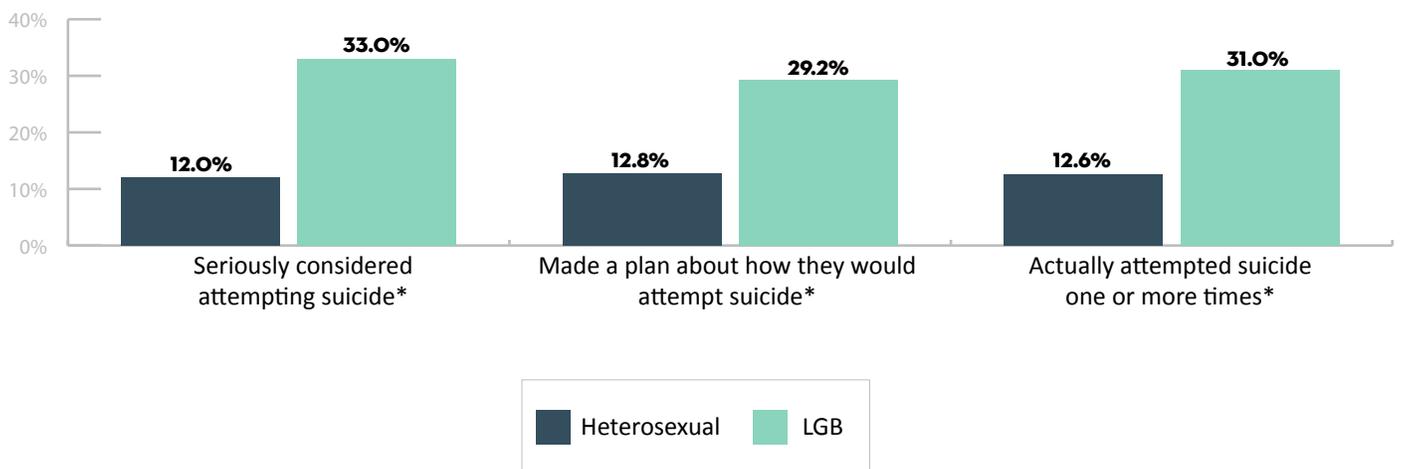
*Demographic groups with fewer than 100 students were excluded from reporting.

Middle school students' lifetime suicidal thoughts and behaviors, by sexual orientation



Lesbian, gay, and bisexual middle school students thought seriously about, planned, and attempted to kill themselves at about three times the rate of their heterosexual peers.

High school students' mood, suicidal thoughts and suicidal behaviors during the past 12 months, by sexual orientation

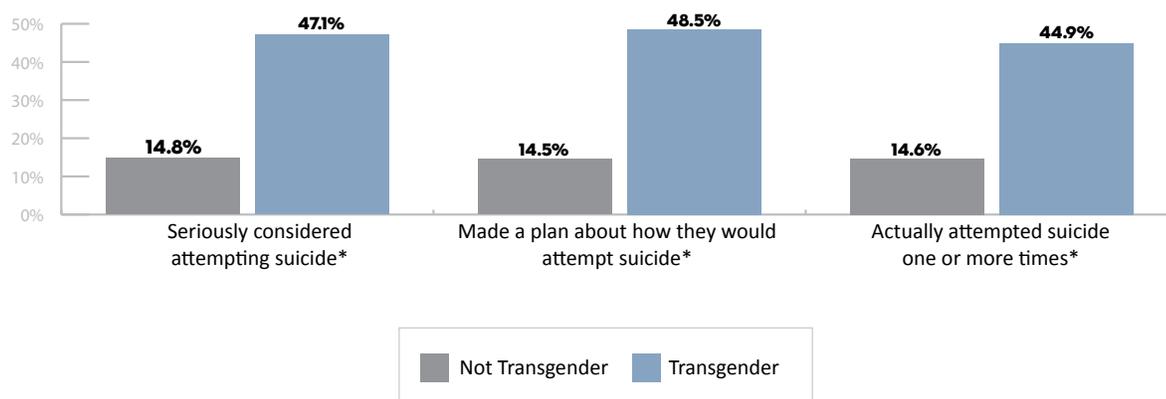


* During the previous 12 months



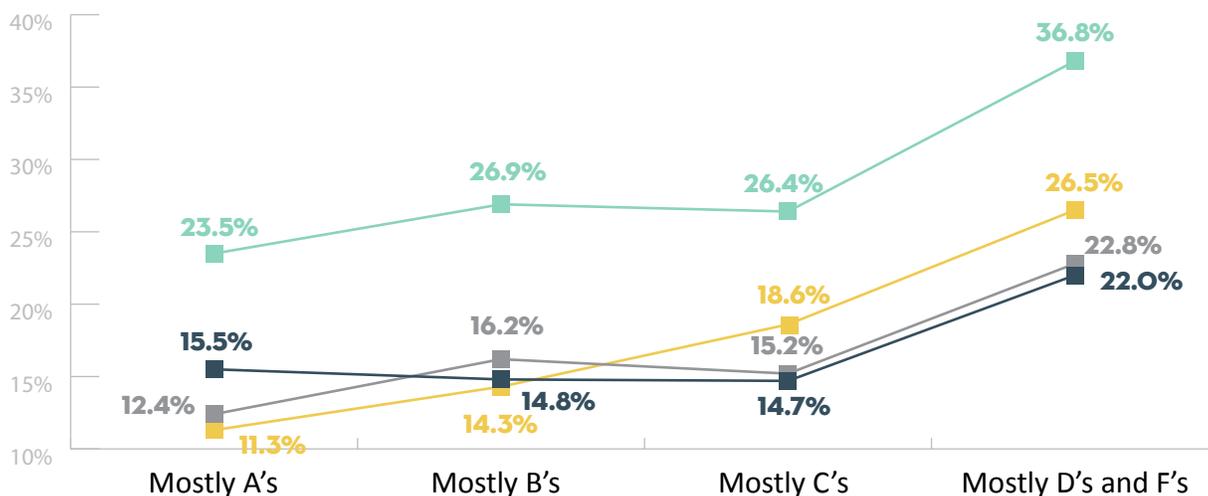
- Lesbian, gay, or bisexual high school students thought seriously about, planned, or attempted to kill themselves at more than double the rate of heterosexual students.
- One in ten lesbian, gay, or bisexual high school students has had to be treated by a doctor or nurse as a result of an attempted suicide.

High school students' suicidal thoughts and behaviors, by gender identity



*Differences between student groups are statistically significant.

Depressed mood and suicide attempts during the previous 12 months among high school students, by academic performance.



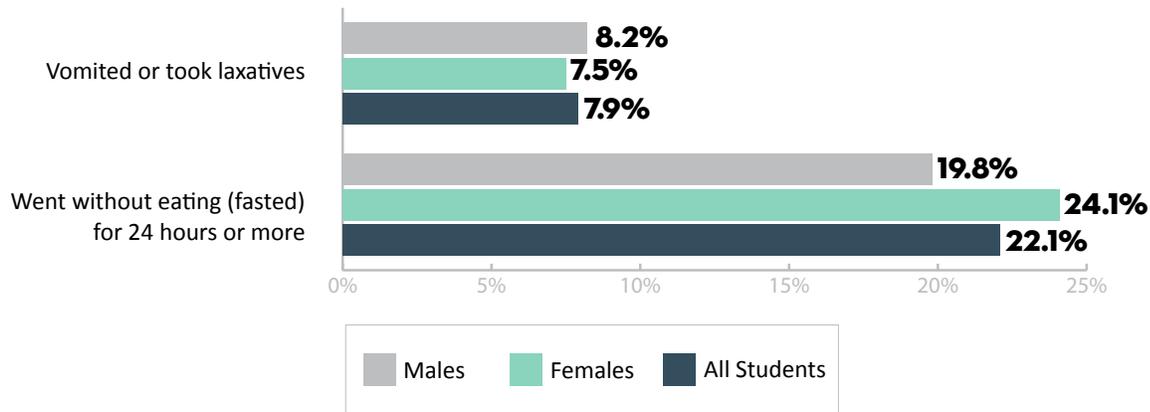
- Felt so sad or hopeless almost every day for 2 weeks or more that they stopped doing some activities
- Seriously considered attempting suicide
- Made a plan about how they would attempt suicide
- Actually attempted suicide one or more times



Mood and suicidal behaviors were associated with academic performance among high school students. More than one quarter of students receiving mostly Ds and Fs reported having attempted suicide one or more times during the previous 12 months.

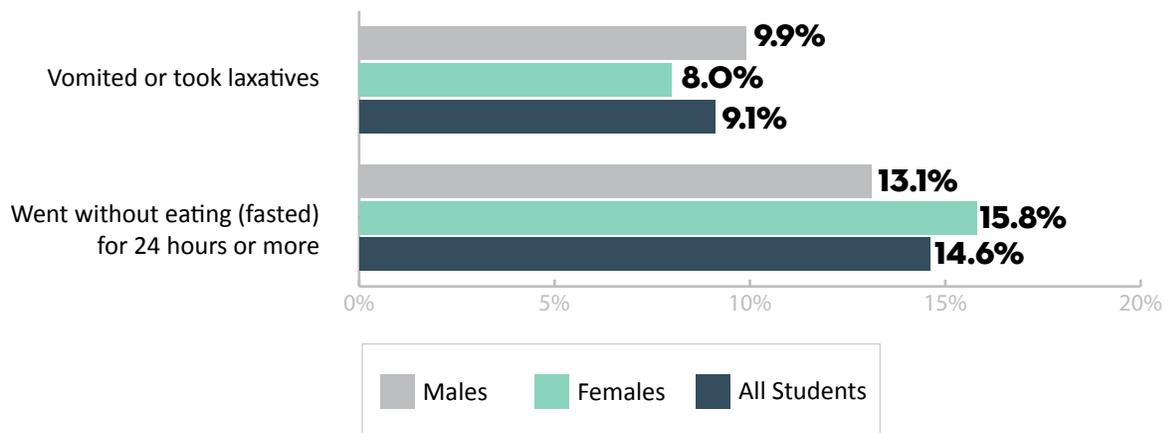
MENTAL AND EMOTIONAL HEALTH (CONTINUATION)

Middle school students' lifetime disordered eating behaviors, by sex



- Significantly more middle school females than males report having ever fasted for 24 hours or more to lose weight.
- Male and female middle school students report similar rates of vomiting or taking laxatives to lose weight.

High school students' current (past 30-day) disordered eating, by sex



Female high school students are more likely than males to have fasted in order to lose weight.



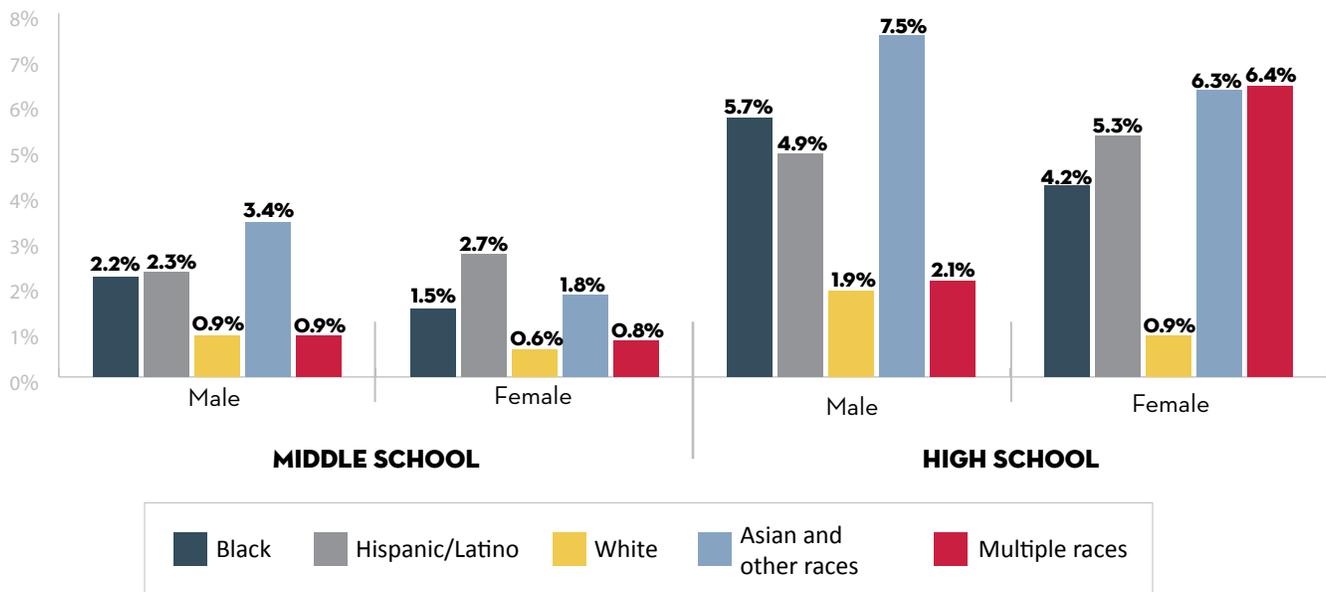


NUTRITION AND PHYSICAL ACTIVITY

Eating a healthy diet and maintaining a healthy body weight are important components of overall wellness and success for people of all ages, particularly young people. In DC, youth report a decrease in the consumption of soda and other sugary drinks over a ten year span, as well as a strong tendency to eat breakfast at least some days of the week. More concerning findings show DC youth are spending an increasing number of hours doing sedentary online activities, a habit that is strongly correlated to reported feelings of sadness and hopelessness. OSSE recognizes that efforts to promote healthy diet and weight should not only address individual behaviors, but also improve policies and build environments in our schools and communities to support health.

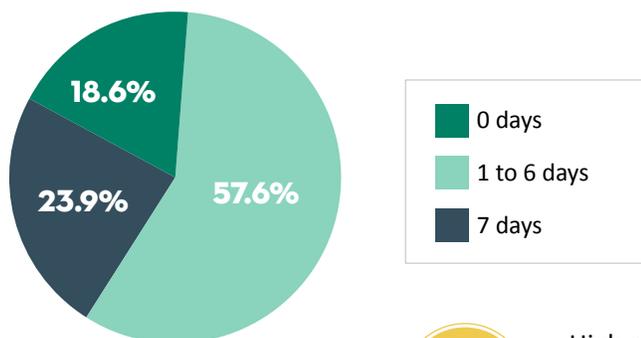
NUTRITION AND PHYSICAL ACTIVITY

Students who most of the time or always went hungry during the last 30 days, by race and sex



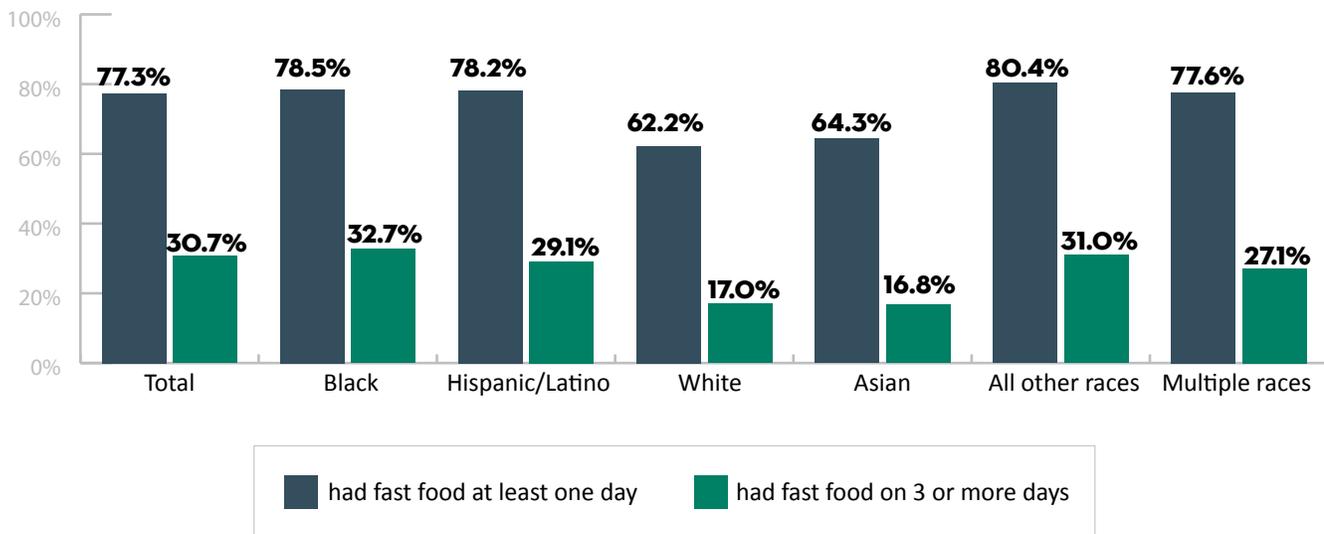
- Middle school students who reported going hungry were more likely to have lower grades, after accounting for other demographic factors.
- LGB high school students were more likely to report going hungry than their heterosexual peers, after accounting for other demographic factors. Middle school students did not have this association.

Number of days that high school students ate breakfast during the prior week



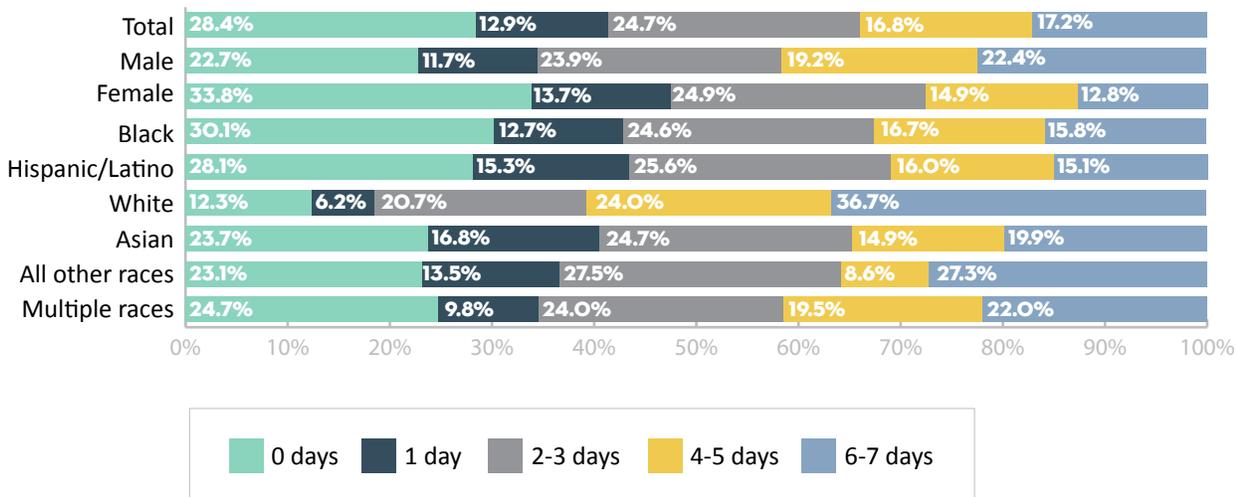
High school students who ate breakfast more frequently were less likely to be overweight, after accounting for other demographic factors.

Fast food consumption among high school students, by race and frequency



- Four percent of high school students ate fast food on seven days during the previous week.
- Students who were overweight were less likely to eat fast food on a frequent basis (3 or more times per week) after accounting for other demographic factors.

Percentage of high school students who reported physical activity for at least 60 minutes per day, by race and sex



- Female high school students are about 45 percent less likely to be active on at least four days per week than their male peers, holding other demographic variables constant.
- LGB high school students are about 30 percent less likely to be active on at least four days per week than their heterosexual peers, holding other demographic variables constant.

NUTRITION AND PHYSICAL ACTIVITY (CONTINUATION)

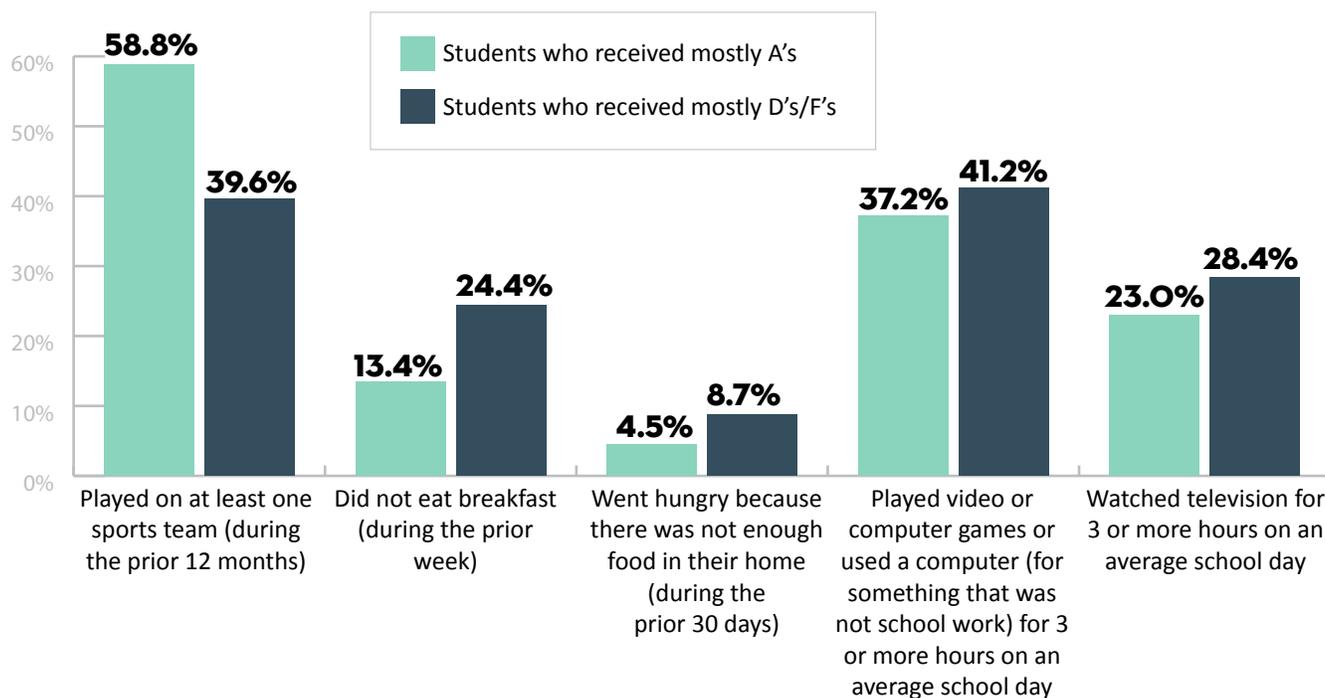
Percentage of high school students who, during the prior 12 months...	2007	2012	2015	2017	Trend 2015-2017	Long-term Trend
Played on at least one sports team (run by their school or community groups)	48.6%	54.5%	54.9%	52.4%	Down ↓	Up ↑



- High school students who participated on a sports team were two and a half times as likely to be physically active on at least four days per week, after accounting for other demographic factors.
- Over 17 percent of high school students have had at least one concussion from playing a sport or being physically active; 7.8 percent of students have had more than one concussion.



Physical activity and sedentary behaviors among high school students, by academic performance



High school students who spend 3 or more hours per day playing video games or using their computer for something that is not school work were 20 percent more likely to report feeling so sad or hopeless for two weeks or more in a row that they stopped doing some usual activities.





DISEASE PREVENTION/SEXUAL HEALTH

Sexual risk behaviors place adolescents at risk for HIV infection, other sexually transmitted diseases (STDs), and unintended pregnancy. According to the Centers for Disease Control and Prevention (CDC), youth ages 15-24 make up just over one quarter of the sexually active population, but account for half of the 20 million new sexually transmitted diseases that occur in the United States each year³. Many young people engage in sexual risk behaviors that can result in unintended health outcomes⁴. Reducing the risk for HIV, STDs, and unintended pregnancy requires having a strong understanding of the underlying attitudes and behaviors of young people, which the YRBS provides.

DISEASE PREVENTION/SEXUAL HEALTH

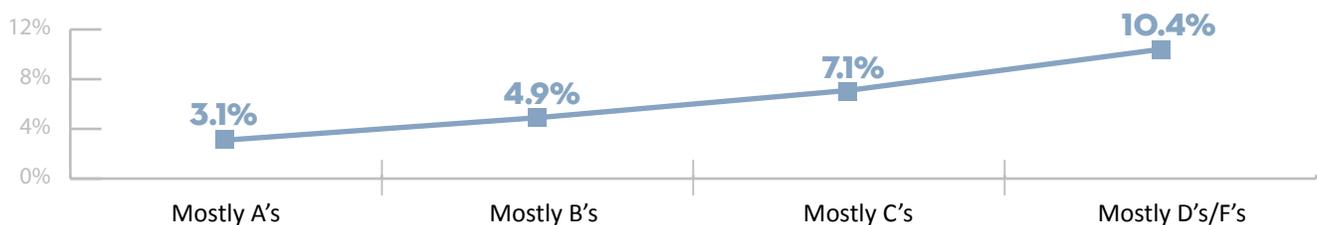
Percentage of youth who...	MIDDLE SCHOOL						HIGH SCHOOL					
	2007	2012	2015	2017	2015-2017 Trend	Long-term Trend	2007	2012	2015	2017	2015-2017 Trend	Long-term Trend
Had sexual intercourse during their life*	29.2%	18.5%	11.6%	13.7%	Up ↑	Down ↓	56.5%	53.5%	40.9%	45.6%	Up ↑	Down ↓
<i>Male youth</i>	43.1%	28.5%	19.5%	22.9%	Up ↑	Down ↓	64.1%	61.5%	50.9%	54.6%	Up ↑	Down ↓
<i>Female youth</i>	16.5%	9.3%	4.1%	5.2%	Up ↑	Down ↓	51.0%	46.7%	32.7%	37.5%	Up ↑	Down ↓
Had sexual intercourse with one or more people during the past three months*	-	-	-	-	-	-	40.6%	36.6%	28.2%	31.1%	Up ↑	Down ↓
Had sexual intercourse with four or more people (high school) or three or more people (middle school) during their life*	12.0%	8.1%	4.7%	4.9%	No Change ↔	Down ↓	20.3%	21.7%	13.8%	14.0%	No Change ↔	Down ↓
<i>Male youth</i>	21.2%	13.8%	8.5%	8.7%	No Change ↔	Down ↓	29.9%	33.0%	23.4%	23.0%	No Change ↔	Down ↓
<i>Female youth</i>	3.4%	2.8%	1.0%	1.3%	No Change ↔	Down ↓	14.3%	12.2%	5.9%	6.3%	No Change ↔	Down ↓
Has ever had oral sex	-	-	-	-	-	-	-	41.2%	33.5%	39.2%	Up ↑	Down ↓
<i>Male youth</i>	-	-	-	-	-	-	-	51.9%	42.7%	46.1%	Up ↑	Down ↓
<i>Female youth</i>	-	-	-	-	-	-	-	31.4%	24.6%	32.0%	Up ↑	No Change ↔

*Significant difference between male and female youth



39.2% of high school youth reported having oral sex with one or more people during their lifetime, an increase from 2015.

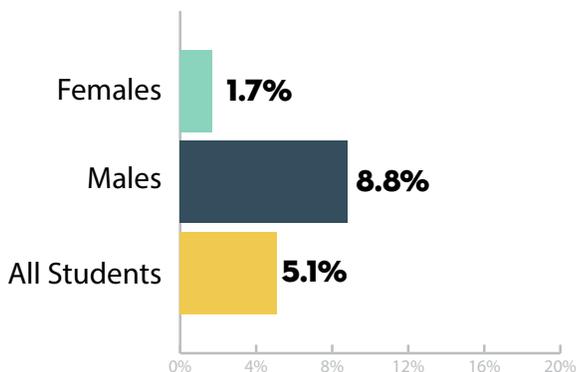
Percentage of high school students who have been pregnant or gotten someone pregnant



High school students who have received mostly Ds and Fs reported having been pregnant or gotten someone pregnant at about three times the rate of students who have received mostly As.

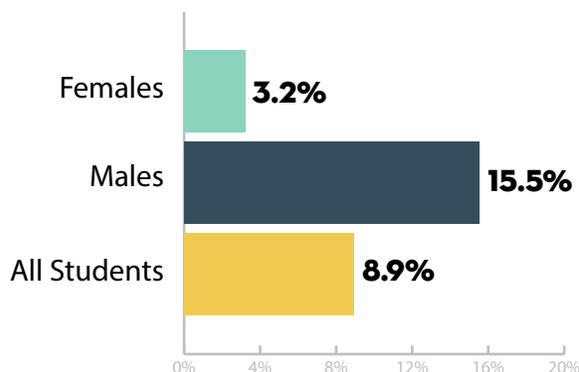
MIDDLE SCHOOL

Initiation of sexual intercourse by age 11 among middle school youth, by sex*



HIGH SCHOOL

Initiation of sexual intercourse by age 13 among high school youth, by sex*



*Significant difference between male and female youth



- Middle school students who are lesbian, gay, or bisexual are 3.2 times as likely to have had sex before the age of 11 than their heterosexual peers, after accounting for other demographic factors.
- High school students who are lesbian, gay, or bisexual are 1.9 times as likely to have had sex before the age of 13 than their heterosexual peers, after accounting for other demographic factors.

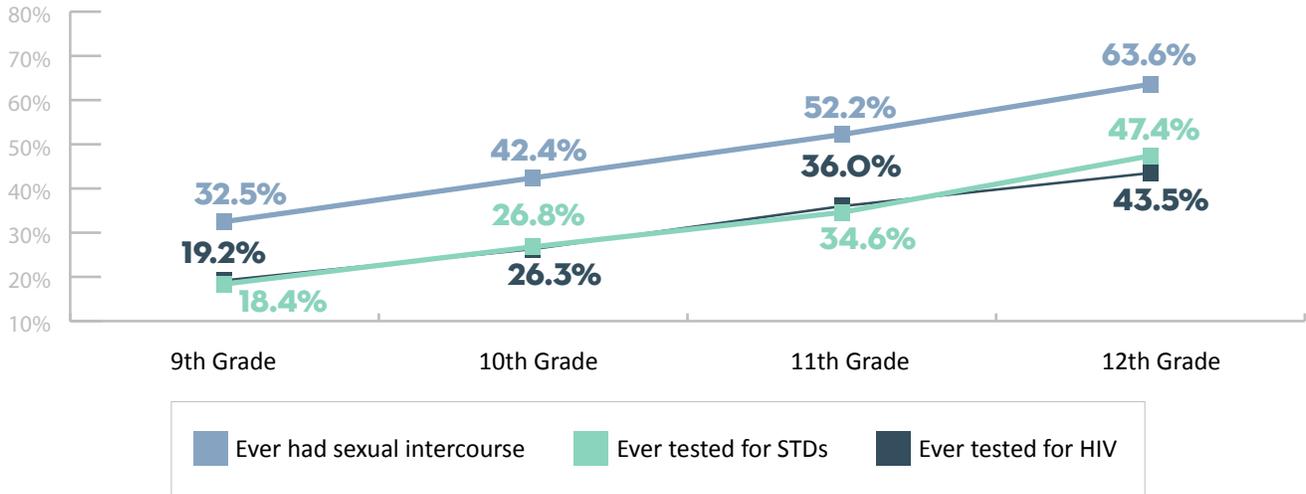
Trends in condom use during most recent sexual intercourse among middle school and high school youth*	2007	2012	2015	2017	2015-2017 Trend	Long-term Trend
Middle School	78.1%	73.0%	68.8%	67.8%	No Change ↔	Down ↓
High School	69.9%	70.1%	66.6%	61.2%	Down ↓	Down ↓

*This question was asked of high school youth who reported having sexual intercourse in the past three months and of middle school youth who reported ever having sexual intercourse.



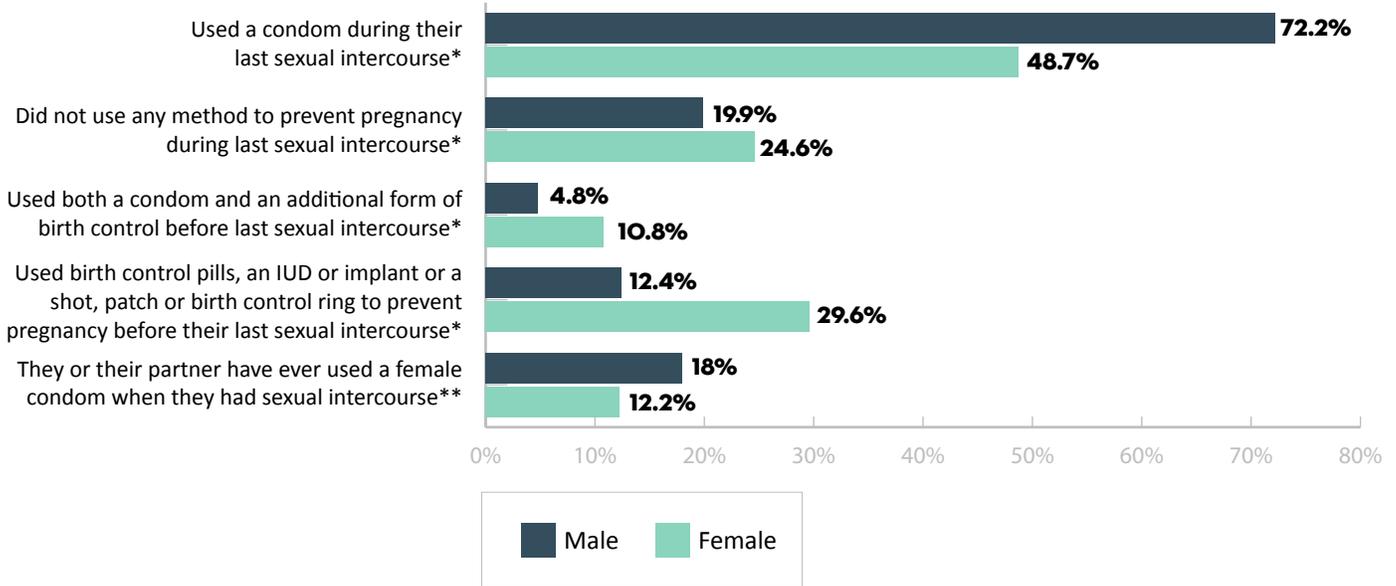
DC high school students used a condom at a higher rate than the national average in 2015 (56.9% vs. 66.6%)⁵.

Sexual activity and STD and HIV testing among high school youth, by grade



The percentage of youth who have ever been sexually active and the percentage who have been tested for STDs or HIV infection were significantly higher among youth in higher grade levels.

Birth control and condom use among high school youth, by sex



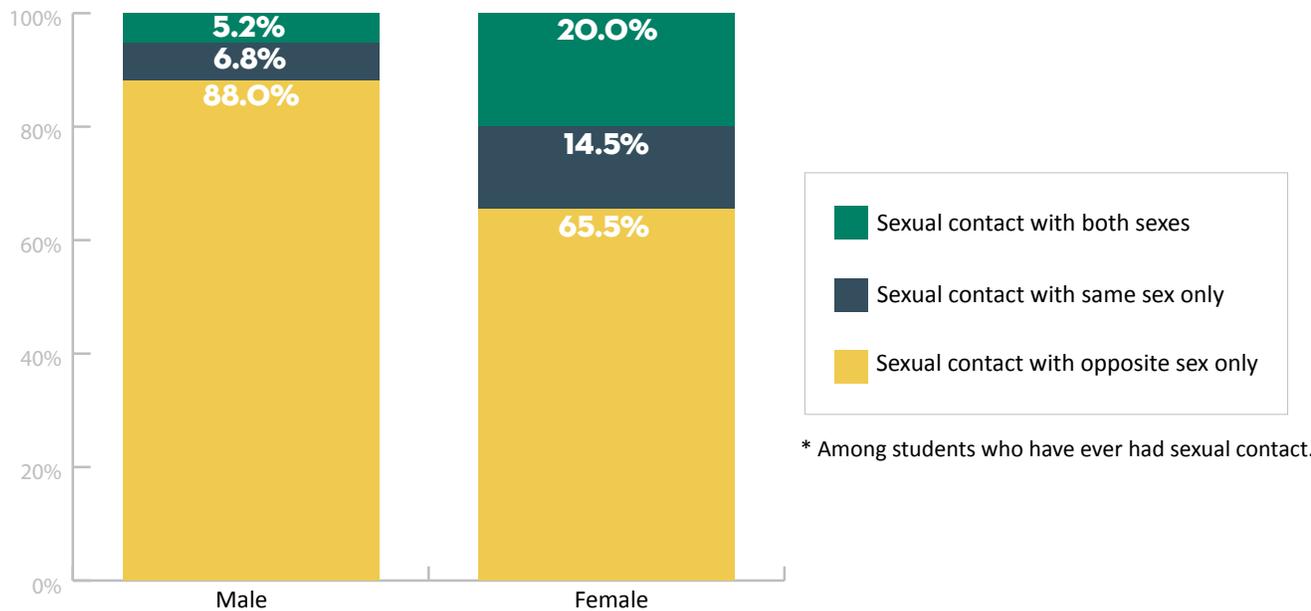
*Among students who were sexually active within the last 3 months

** Among students who have ever had sexual intercourse



High school LGB students were 45% less likely to use a condom during their last sexual intercourse than heterosexual students, after accounting for other demographic variables.

Sexual contact among high school youth,* by sex



A higher proportion of female high school students reported having sexual contact with the same sex only or with both sexes.

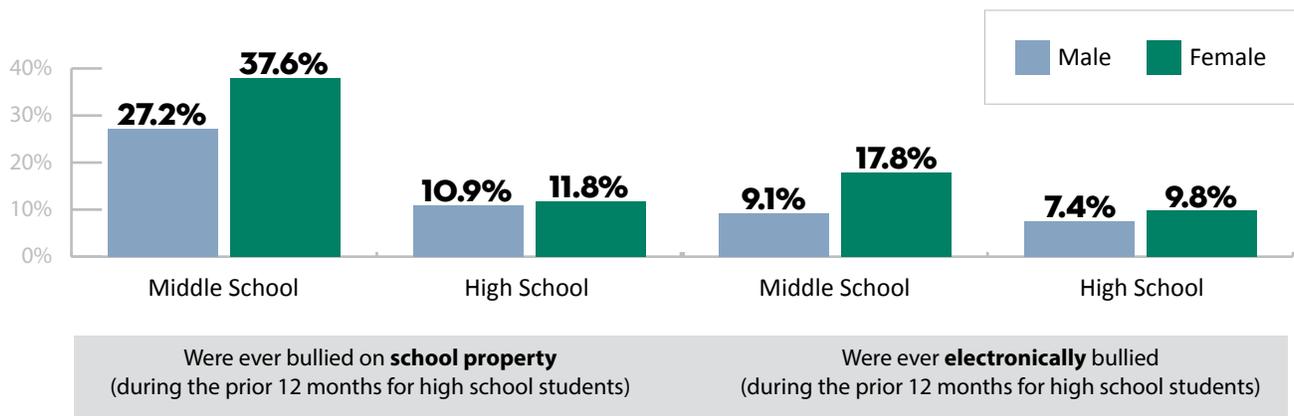


SAFETY AND VIOLENCE

Violence is one of the leading causes of death and injuries among young people between the ages of 10 and 24 in the United States⁶. Violence can take different forms, such as fighting, bullying, threats with weapons, and gang-related violence. The 2017 DC YRBS data reveal that violence or the threat of violence has significant impact on daily life for some young people and even causes some students to miss school regularly. The trend data and subgroup analyses in this report provide important insight into the correlated factors and behaviors of young people who experience violence.

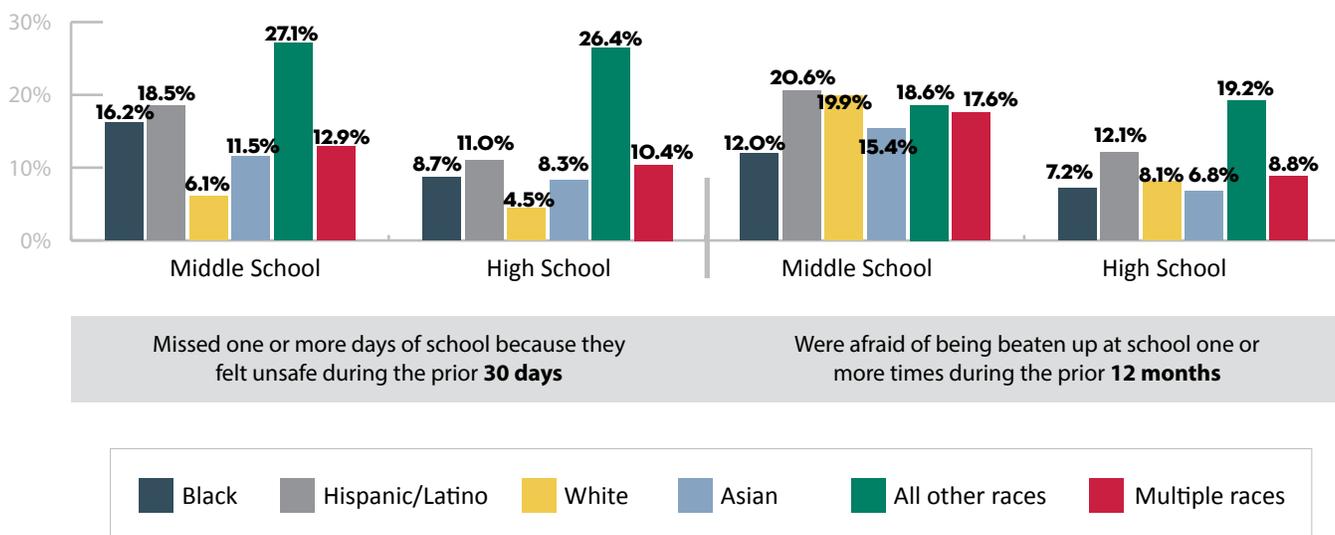
SAFETY AND VIOLENCE

Bullying among DC middle and high school students, by sex

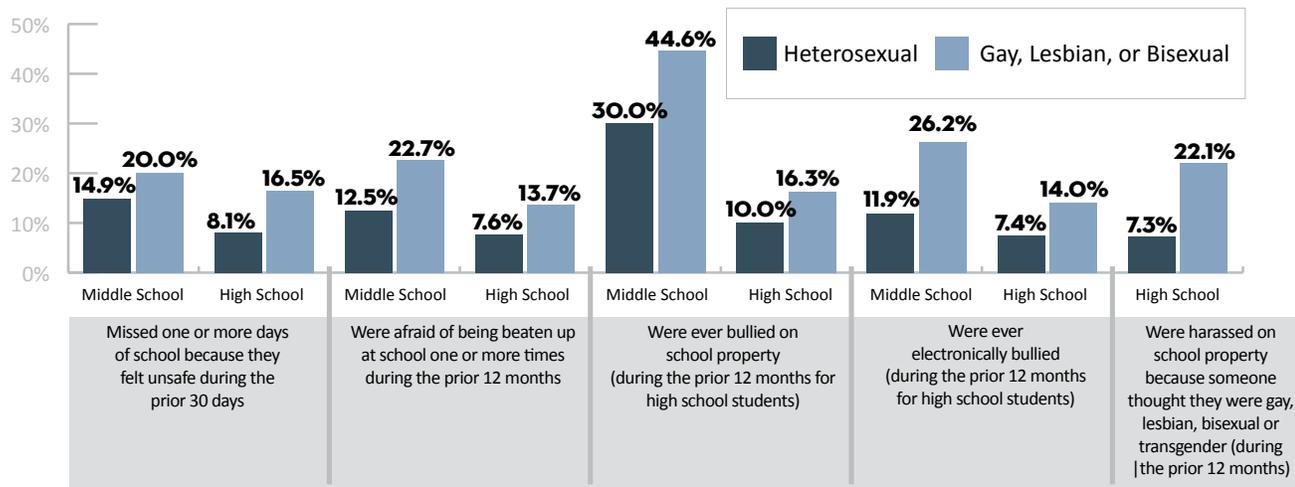


*Differences are significant between male and female students for all questions.

Feelings of safety and fear among middle and high school students, by race/ethnicity

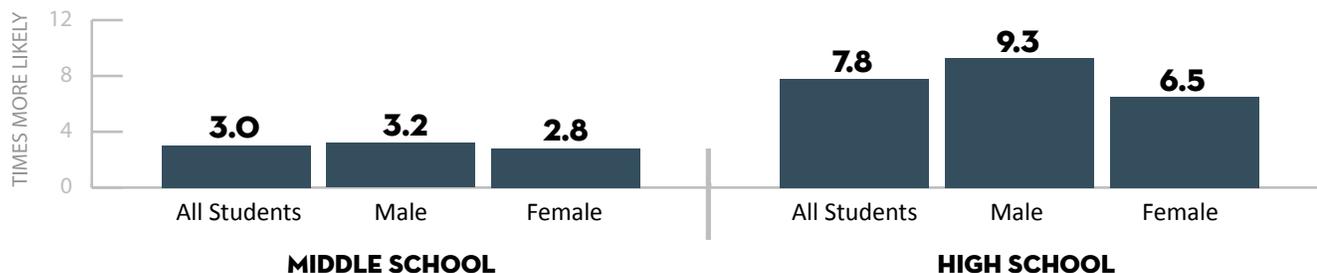


Percentage of students who...



*Differences are significant between heterosexual and LGB students for all questions in middle and high school.

Likelihood of bullying others among students who report having been bullied, by sex



*After accounting for race, grade, and sexual orientation



- Middle school students who report having ever been bullied were 3 times more likely to report having ever bullied someone else compared to students who report that they have never been bullied.
- High school students who report having been bullied during the prior 12 months were 7.8 times more likely to report having ever bullied someone else on school property during the same 12 months compared to students who did not report being bullied.

SAFETY AND VIOLENCE (CONTINUATION)

Trends in violent behaviors among middle school students: 2007 to 2017

Violence perpetration among middle school students during the prior 12 months	2007	2012	2015	2017	2015-2017 Trend	Long-term Trend
Were ever in a physical fight	76.3%	69.8%	63.7%	67.5%	Up ↑	Down ↓
Ever carried a weapon	33.8%	22.8%	23.1%	26.7%	Up ↑	Down ↓
Bullied someone else on school property during the prior 12 months	n/a	17.0%	13.9%	14.5%	No Change ↔	Down ↓



Middle school students who reported sleeping somewhere besides their parent's/guardian's home were 1.7 times as likely to carry a weapon, 1.6 times as likely to have been in a physical fight, and 1.7 times as likely to bully others, after controlling for other demographic factors.

Trends in violence victimization and violent behaviors among high school students: 2007 to 2017

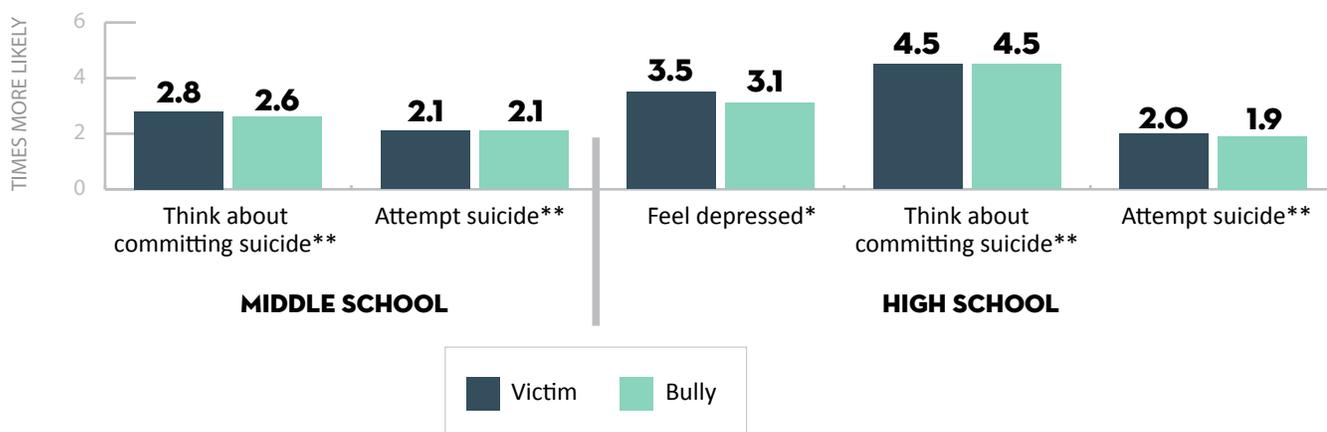
Violence victimization among high school students during the prior 12 months	2007	2012	2015	2017	2015-2017 Trend	Long-Term Trend
Were threatened or injured with a weapon on school property during the prior 12 months	11.2%	8.5%	7.6%	9.8%	Up ↑	Down ↓
Had property stolen or deliberately damaged on school property one or more times during the prior 12 months	27.9%	21.3%	17.5%	18.9%	Up ↑	Down ↓
Violence perpetration among high school students during the prior 12 months	2007	2012	2015	2017	2015-2017 Trend	Long-Term Trend
Were in a physical fight on school property one or more times during the prior 12 months	18.8%	15.3%	13.8%	15.5%	Up ↑	Down ↓
Were in a physical fight one or more times during the prior 12 months	44.1%	37.6%	32.4%	31.0%	No Change ↔	Down ↓
Carried a weapon one or more times during the prior 30 days	21.5%	20.0%	18.1%	18.8%	No Change ↔	Down ↓
Bullied someone else on school property during the prior 12 months	n/a	13.0%	9.0%	9.2%	No Change ↔	Down ↓



High school students who slept somewhere besides their parent's/guardian's home were 2.9 times as likely to have possessions stolen or deliberately damaged at school and 6 times as likely to be threatened with a weapon at school than students who slept in their parent's/guardian's home, after accounting for other demographic factors.

Risk Factors Associated with Bullying Aggression and Victimization

Middle and high school students who bully others and who are bullied were more likely to...



*Questions around depression for high school students ask if students have in the prior 12 months “felt so sad or hopeless almost every day for a two weeks or more in a row that you stopped doing some usual activities.”

**Questions around suicidality for middle school students ask if students have in their lifetime “ever seriously thought about killing” or “ever tried to kill” themselves; questions for high school students ask if students have in the prior 12 months “ever seriously considered attempting suicide” or “actually attempted suicide.”

Percentage of students who...

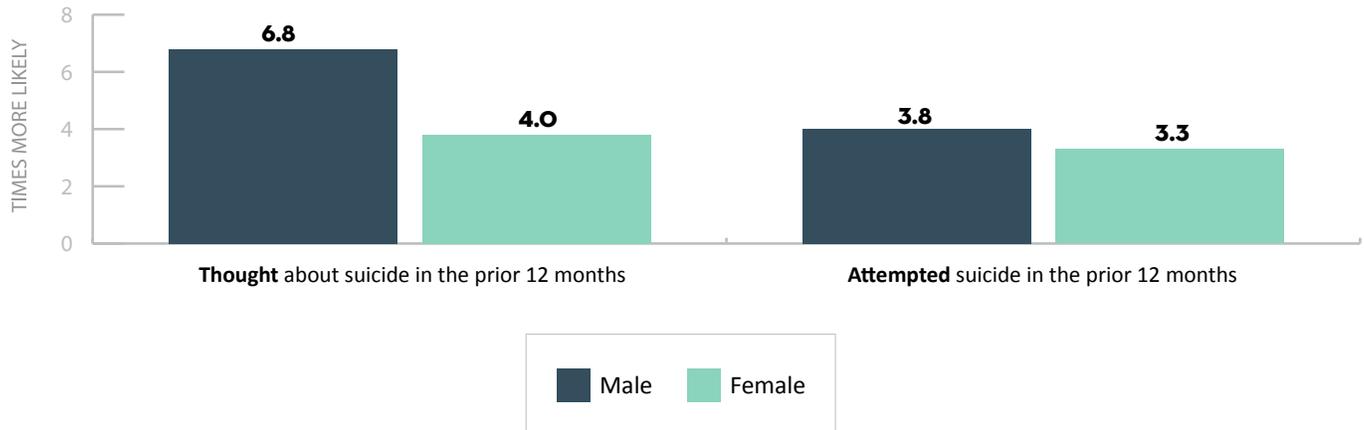
Were a member of a gang or crew (during the prior 12 months)	2012	2015	2017	2015-2017 Trend	Long-term Trend
Middle School	15.8%	17.0%	13.1%	Down↓	Down↓
Male	18.7%	18.7%	14.5%	Down↓	Down↓
Female	12.8%	15.2%	11.5%	Down↓	No Change ↔
High School	16.5%	17.3%	14.7%	Down↓	Down↓
Male	21.6%	21.3%	18.6%	Down↓	Down↓
Female	11.5%	13.3%	10.7%	Down↓	No Change ↔



Membership in gangs and crews is down since 2012 for both high school and middle school males.

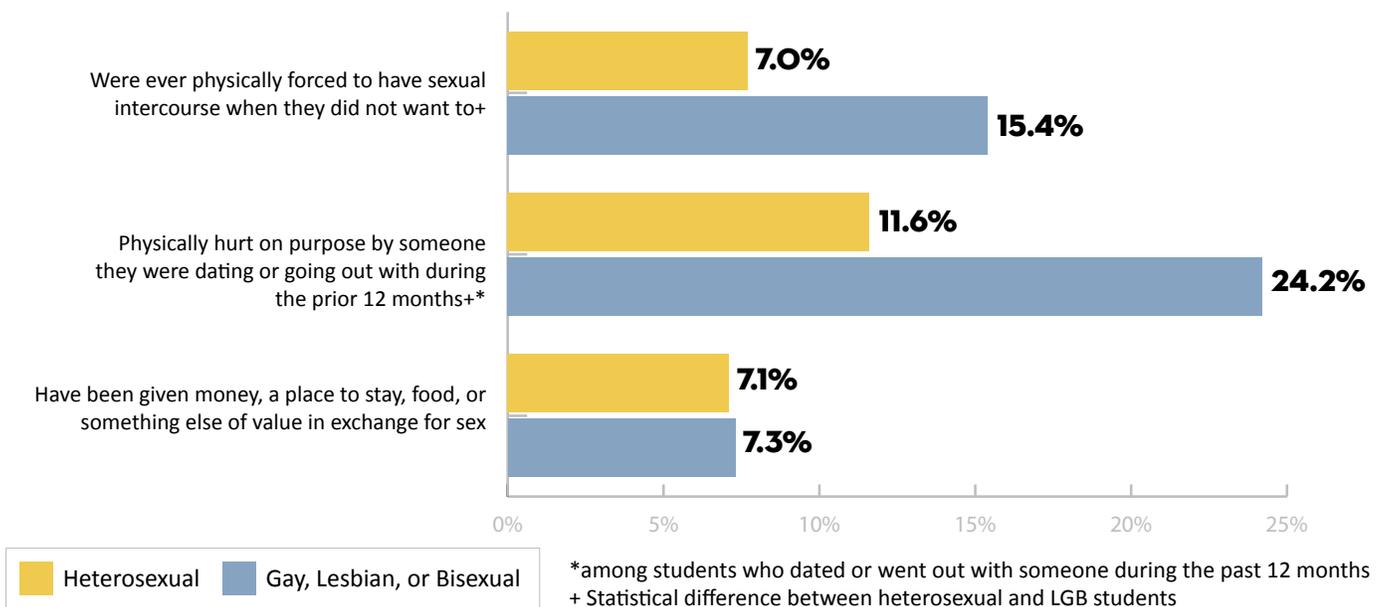
SAFETY AND VIOLENCE (CONTINUATION)

High school students who have been raped are more likely to have...



- High school students who have been raped are 4.9 times as likely to think about committing suicide and 3.5 times as likely to attempt suicide compared to high school students who do not report having been raped.
- Among the 8.4 percent of high school students who reported being raped, over 34 percent reported at least one suicide attempt during the prior 12 months.

Violent experiences among high school students, by sexual orientation



- LGB high school students were more than two times more likely to report being forced to have sexual intercourse (raped), and physically hurt by the person they were dating compared to heterosexual youth, after accounting for other demographic variables.
- Transgender youth were 2.9 times as likely to experience dating violence and 3.6 times as likely to have been raped than non-transgender youth, after accounting for other demographic variables.



Never or rarely wore a helmet when riding a bicycle or using rollerblades or a skateboard during the prior 12 months	2012	2015	2017	2015-2017 Trend	Long-term Trend
Middle School	71.1%	67.4%	70.7%	Up ↑	No Change ↔
High School	84.0%	83.6%	82.7%	No Change ↔	No Change ↔



Youth Risk Behavior Survey Methodology

The District of Columbia Office of the State Superintendent of Education (OSSE) conducts the DC Youth Risk Behavior Survey (YRBS). The YRBS is part of the national Youth Risk Behavior Surveillance System (YRBSS) led by the Centers for Disease Control and Prevention (CDC). As such, the DC YRBS follows protocols developed by the CDC, and the DC middle and high school questionnaires are adapted from the CDC-developed core instruments. The following information describes the sampling, recruitment and field data collection methods used for the 2017 DC YRBS.

Sampling Method

The first sampling stage included a census of all District of Columbia public schools (DCPS) and public charter middle and high schools, serving grades six through eight and nine through twelve. In the second sampling stage, a census of students was taken using classes during second period. All students in these classes were eligible to participate in the survey.

Local YRBS surveys, such as the DC YRBS, that have (1) a scientifically selected sample, (2) appropriate documentation and (3) an overall response rate of greater than 60 percent are able to be weighted by the CDC to adjust for student nonresponse and the distribution of students by grade, sex and race/ethnicity. These three criteria ensure that data from the 2017 DC YRBS surveys can be considered representative of DC students in grades six through eight and nine through twelve. Surveys that do not meet these criteria are not weighted by the CDC and are representative only of the students who participate in the survey.

School and Student Participation

Of the 37 high schools eligible to participate in the 2017 DC YRBS, 34 schools took part in the survey, for a 92 percent school response rate. The survey was completed by 8,578 students for a student response rate of 67 percent. The overall high school response rate was 61 percent.

Of the 67 middle schools eligible to participate in the 2017 DC YRBS, 57 schools took part in the survey, for an 85 percent school response rate. The survey was completed by 8,799 students for a student response rate of 81 percent. The overall middle school response rate was 69 percent.

Obtaining Agreements to Participate and Managing Survey Logistics

Gaining approval to conduct the 2017 DC YRBS from local education agencies (LEAs) and each school required a well-coordinated effort between OSSE and the contractor, ICF International.

Beginning in the fall of 2016, OSSE provided LEA leaders with information about the survey through various communication methods (i.e., memoranda, newsletters, e-mails and telephone calls). These communiqués included information on the purposes of the survey, content of the survey, uses of the DC YRBS data, the survey collection window, parental permission and the requirements of the LEA and school for participating in the survey.

LEA Approval Process

Each LEA was provided with a form to be completed and returned to OSSE signifying their agreement to participate and designating a primary point of contact at the LEA. After the form was received, OSSE notified ICF and each school was assigned an ICF school liaison. OSSE and ICF school liaisons worked with each LEA or each school directly to (1) identify a point of contact for the school to coordinate the survey logistics, (2) determine a date for the survey that was convenient and minimized disruptions to normal school day activities, and (3) obtain a list of second period classes for the data collection. ICF school liaisons worked closely with school points of contact to quickly finalize the survey arrangements in preparation for the field data collection.

DC YRBS Data Collection

The data collection included the training of survey administrators, classroom-level data collection and processing of the data collected.

Training the Field Data Collection Staff

The survey administrators participated in a two-day training that was modeled after the highly successful national YRBS training. The training develops technical skills of the survey administrator, while engendering a strong commitment to the concept of the project and the project team. Over the course of the training, the survey administrators first observe demonstrations by the training team on the procedures for data collection. The survey administrators then acquire these skills through practice, demonstrating them to one another and refining each other's performance through constructive feedback.

By the end of the training, the survey administrators acquire the requisite skills; are capable of professionally representing OSSE and ICF; are bonded to the project, the training team and each other; and are better equipped to perform effectively in the field.

Classroom-level Data Collection

The 2017 DC YRBS was conducted by the trained survey administrators at eligible schools between February and June 2017. Prior to the scheduled survey administration date, field staff delivered a packet containing the following information to each school point of contact: finalized survey arrangement details, parent exemption letters and instructions for teachers to read when distributing the letters. Approximately two to three days prior to the scheduled administration date, field staff communicated with the school point of contact to confirm that all teachers had sent the letters home with students and were tracking the return of any signed letters exempting a student from participating in the survey. On the day of the survey, field staff provided all the materials necessary to conduct the 2017 DC YRBS, and after the survey, staff reviewed survey materials to ensure all classes were accounted for and student response rates had been documented accurately. Students who were absent or unable to participate in the original survey administration were offered a make-up session. Field staff revisited schools to survey classes that may have missed the original survey session due to a field trip or other unforeseen circumstance.

Processing the Data Collected

On a weekly basis, the survey administrators returned all collected 2017 DC YRBS data to the ICF project office for processing. Processing of the data included ensuring that all school- and classroom-level data were received, and reviewing individual surveys for excessive stray marks or damage.

At the conclusion of data processing, ICF packaged and transmitted all survey forms to CDC's YRBS technical assistance (TA) contractor for scanning. After scanning was completed, a data file was created and sent to the CDC to be edited. The CDC edited the data for logical consistency and overall data quality and returned the edited file to the YRBS TA contractor for weighting.

APPENDIX B

For additional information on student subgroup responses, please see the following:

<https://osse.dc.gov/page/2017-dc-yrbs-data-files>

Responses based on age, grade, race/ethnicity, and gender:

[2017 DC Middle School Summary Tables](#)

[2017 DC High School Summary Tables](#)

Responses based on academic achievement:

[2017 DC Middle School Academic Achievement](#)

[2017 DC High School Academic Achievement](#)

Responses based on sexual identity:

[2017 DC Middle School Sexual Identity](#)

[2017 DC High School Sexual Identity](#)

Responses based on sexual contacts (high school only):

[2017 DC High School Sexual Contacts](#)

Detailed Trend information:

[2017 DC Middle School Trend Report](#)

[2017 DC High School Trend Report](#)

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4. CDC. (2016). Sexual Risk Behaviors: HIV, STD, & Teen Pregnancy Prevention. Retrieved October 24, 2016 from <http://bit.ly/2mL1H50> Page 35
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