

# Healthy People 2020: Where Do Cuyahoga County Adolescents Stand?

A progress report providing direction for this decade and beyond



## **Acknowledgements**

This report integrates the expertise, collaboration, and dedication of multiple partners. Most notable are those that provided guidance and support to maintain the integrity of the Cuyahoga County Youth Risk Behavior Survey project for the past 16 years.

#### We thank the following for their assistance in making this report possible:

Child and Family Health Services (CFHS)

Cuyahoga County Comprehensive Partnership for Tobacco Reduction (CCCPTR)

Teen Pregnancy Prevention Initiative (TPP)

STEPS to a Healthier Cleveland (STEPS)

Division of Adolescent and School Health, Centers for Disease Prevention and Control (DASH/CDC)

Cuyahoga County Board of Health

Cleveland Department of Public Health

The Prevention Research Center for Healthy Neighborhoods (PRCHN) at Case Western Reserve University is grateful for the advice, encouragement and dedication of the YRBS Advisory Committee and the Network of Community Advisors (NOCA).

Special appreciation is extended to the thirty-one Cuyahoga County school districts, their superintendents, principals, teachers, parents, and students, who agreed to participate in the survey project each year.

## **Summary and Observations:**

"Healthy People 2020: Where Do Cuyahoga County Adolescents Stand?" is intended to be a mid-decade status report of progress made locally toward achieving national health goals established for adolescents. Preventing risk behavior engagement and reducing rates of engagement are known to contribute to overall health and well-being.

For the most part, this report demonstrates that Cuyahoga County high school students' engagement in risk and health behaviors are approaching the Healthy People 2020 Goals or, in fact, have met them.

Listed below are those behaviors for which county prevalence is either far below the HP2020 goal and/or is moving in the opposite direction of the goal. These risk behaviors could be considered to be of greatest concern in Cuyahoga County. Calling attention to them may prioritize them as areas of focus for programmatic interventions and policy change.



**Reduce bullying.** Reports of having been bullied on school property during the 12 months before the survey have increased since 2009. This progression is moving in the opposite direction from the HP2020 Goal.



**Increase smoking cessation attempts among current cigarette smokers.** The prevalence of current cigarette smokers who attempted to quit smoking during the past 12 months is well below the HP2020 Goal and is decreasing.



**Reduce binge drinking.** The prevalence of binge drinking in the past 30 days remains unchanged since 2009 and is at least 5% above the HP2020 goal.



Reduce computer use for non-school purposes on school days. The prevalence of students who use computers and electronic devices for non-academic reasons for two or fewer hours daily on school days has decreased steadily since 2009. The local rate is more than 20% higher than the HP2020 goal and is moving away from the goal.



**Increase physical activity.** Approximately one-fifth of local students met federal standards for physical activity, meaning that they were physically active for at least 60 minutes each day during the past 7 days. The local rate is 9% below the HP2020 goal.



**Increase sufficient sleep.** The prevalence of county students who report obtaining sufficient sleep (8 or more hours) has decreased since 2009 and is 13% below the HP2020 goal.



Increase formal instruction on HIV/AIDS prevention. The prevalence of county high school students who received instruction about HIV/AIDS in school fell from 2011 to 2015 and is approximately 14% below the HP2020 goal.

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Methods: The Prevention Research Center for Healthy Neighborhoods (PRCHN) regularly uses a two-stage cluster sample design that mimics the sampling method of the Centers for Disease Control and Prevention (CDC) and its national Youth Risk Behavior Survey (YRBS). In 2009, 20 of the 30 Cuyahoga County randomly identified high schools participated and 4529 of the 6597 eligible students participated in the survey (46% Overall Response Rate (ORR)). Beginning in 2011, all high schools in each of the 31 public school districts were invited to participate in order to be able to weight to the 6 regions of the county as well as the county overall. In 2011, 40 of the 54 Cuyahoga County high schools participated and 12,749 of the 15,844 eligible students participated in the survey (60% ORR). In 2013, 43 of the 54 Cuyahoga County high schools and 16,855 of 22,458 eligible students participated (60% ORR). In 2015, 45 of the 58 Cuyahoga County high schools and 11,856 of the 16,912 eligible students participated in the survey (54.4% ORR).

While an overall response rate of 60% is generally needed to appropriately weight the data, there were a sufficient number of students in each of the ring, race, gender, and grade level sub-groups to apply weights and post-stratification adjustments. Nonetheless, the stability of the data should be considered, given the lower-than-required overall response rates. Results should be interpreted with caution. Analyses were conducted using SAS/SPSS statistical software survey procedures to account for the sampling design.

Trends in behavioral prevalence rates from the Cuyahoga County YRBS offer an opportunity to describe the current situation, focus resources, and determine need and program planning. In order to identify differences in prevalence estimates between administrative years of the YRBS, 95% confidence intervals are reported. Additional trend analysis would be beneficial to make future projections of the rates of reported behaviors and the pattern of change over time.

## Partners & Funding

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## Healthy People 2020 Where Do Cuyahoga County Adolescents Stand?

In Cuyahoga County, 13.6% of the population is comprised of adolescents (ages 10-19), a proportion that is similar to the U.S.<sup>1</sup>

The health and well-being of our adolescents is of great concern. In keeping with the HP2020 Adolescent Health goals and objectives, countless nonprofit organizations, community coalitions, initiatives, resources, and trainings exist to "improve the healthy development, health, safety, and well-being of adolescents" in Cuyahoga County.<sup>2</sup>

One tool for assessing the overall health of adolescents is the Cuyahoga County Youth Risk Behavior Survey (CC-YRBS). The CC-YRBS was modeled after the Centers for Disease Control and Prevention (CDC), Division of Adolescent and School Health (DASH), Youth Risk Behavior Surveillance System (YRBSS). The YRBSS was developed in 1990 to monitor priority health risk behaviors that contribute markedly to the leading causes of death, disability, and social problems among youth in the United States.



Among other purposes, the YRBSS was designed to monitor progress toward achieving the Healthy People objectives.3

Our countywide YRBS has been supported primarily through Child and Family Health Services (CFHS) administered by the Cuyahoga County Board of Health, supplemented by STEPS to a Healthier Cleveland, Cuyahoga County Comprehensive Partnership for Tobacco Reduction (CCCPTR), and a variety of adolescent-focused coalitions and foundation-supported initiatives, for more than 15 years. This collaboration has ensured that the unique demographic, cultural, and social backgrounds of adolescents in Cuyahoga County are represented.

This brief tracks the progress of Cuyahoga County public high school adolescents from a 2009 baseline to the halfway point in the current decade, assessing their overall health. In addition, this check-in provides direction for the remaining years of the decade and beyond.

Most of the HP2020 goals noted rely on results from specific YRBSS items to track progress. However, several other surveillance tools were also used: The Monitoring the Future Study\*1, the National Survey on Drug Use and Health\*2, the National Survey of Family Growth\*3, the National Health and Nutrition Examination Survey\*4 and the National Health Interview Survey\*5. In addition to HP2020 goals measured by the YRBS, we included goals measured by other tools for which further YRBS analysis could replicate the analysis used in the alternative survey tool.

This report includes several means to understand and interpret the data. The report is organized into risk categories identified by the CDC. Each category of risk includes a table containing prevalence estimates with confidence intervals for the HP2020 goals. We also created visual representations of prevalence over time with respect to each HP2020 goal. Finally, a brief narrative synthesizing the findings are offered as follows:



Success: HP 2020 Goal has been met and prevalence is maintained or has exceeded the goal.



**Caution:** HP2020 Goal has been met, however, the prevalence is moving away from the goal or HP2020 Goal has not been met but the prevalence is moving toward the goal.



Priority of Concern: Prevalence is moving away from HP2020 goal.

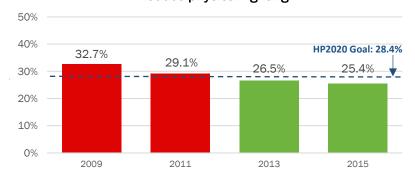
We believe that this report is an important contribution to realizing the HP 2020 vision that the United States has to become "a society in which all people live long, healthy lives." 4

#### INJURY AND VIOLENCE PREVENTION

Injury and Violence Prevention	2009	2011	2013	2015	HP2020	Change Since 2009
Reduce physical fighting among adolescents	32.7% (29.7-35.7)	29.1% (27.8-30.4)	26.5% (25.4-27.6)	25.4% (23.8-27.0)	28.4%	MET Decreasing
Reduce bullying among adolescents	16.0% (14.4-17.6)	18.1% (17.1-19.1)	19.4% (18.3-20.4)	18.9% (17.8-20.2)	17.9%	NOT MET Increasing
Reduce weapon carrying on school property	2.9% (2.2-3.7)	NA	3.9% (3.4-4.3)	NA	4.6%	MET No significant change

Goals are HP2020 IVP-34, 3 5, and 36

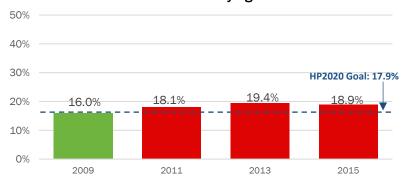
#### Reduce physical fighting





Fewer high school students reported that they were in a physical fight in every survey year since 2009. In fact, at the halfway point in this decade, Cuyahoga County high school students have met and exceeded the goal to reduce physical fighting.

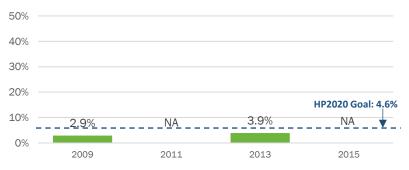
#### Reduce bullying





Reports of bullying on school property have increased from 2009 to 2011. However, in 2015 the range of the confidence interval includes the 17.9% goal. The direction of county prevalence away from the HP2020 goal flags this as a priority in Cuyahoga County.

## Reduce weapon carrying on school property





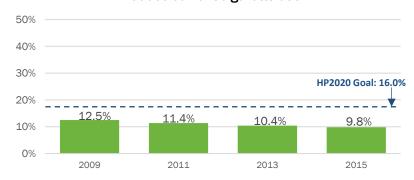
Weapon carrying on school property is measured every 4 years. While county high school students have met the HP2020 goal for this behavior, the prevalence appears to be increasing over time.

#### **TOBACCO USE**

Tobacco Use	2009	2011	2013	2015	HP2020	Change Since 2009
Reduce the proportion of adolescents who use cigarettes (past 30 days)	12.5% (10.7-14.3)	11.4% (10.5-12.3)	10.4% (9.4-11.4)	9.8% (8.8-10.8)	16.0%	MET Decreasing
Reduce the proportion of adolescents who use cigars (past 30 days)	19.4% (17.2-21.5)	16.9% (15.6-18.2)	15.1% (14.1-16.2)	15.0% (13.7-16.5)	8.0%	Not Met Decreasing
Increase smoking cessation attempts by adolescent smokers	45.2% (41.2-49.1)	NA	NA	32.6% (29.4-36.0)	64.0%	Not Met Decreasing

Goals are HP2020 TU-2.2, 2.4, and TU

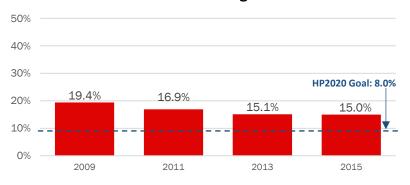
#### Reduce current cigarette use



## 4

Fewer high school students reported current cigarette use in every survey year since 2009. In fact, at the onset of this decade, Cuyahoga County students had met and exceeded the goal to reduce cigarette use.

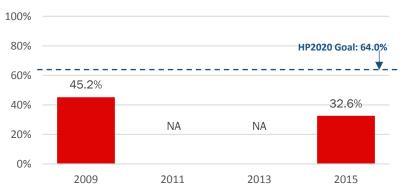
#### Reduce current cigar use





Fewer high school students reported current cigar use in every survey year since 2009. While still nearly twice as high as the HP2020 goal rate, the downward trajectory of change is positive.

#### Increase smoking cessation attempts





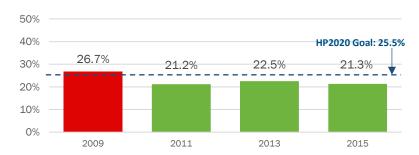
While fewer students reported current cigarette use in every survey year since 2009, fewer current cigarette smokers reported trying to quit smoking. In fact, prevalence of this behavior has moved away from the HP2020 goal.

#### SUBSTANCE ABUSE

Substance Abuse	2009	2011	2013	2015	HP2020	Change Since 2009
Reduce the proportion of adolescents who report that they rode, during the previous 30 days, with a driver who had been drinking alcohol	26.7% (25.2-28.2)	21.2% (20.1-22.3)	22.5% (21.4-23.6)	21.3% (20.1-22.5)	25.5%	MET Decreasing
Increase the proportion of high school seniors never using alcoholic beverages *1	22.6% (19.6-25.8)	28.4% (25.5-31.6)	26.6% (23.9-29.4)	28.0% (24.7-31.5)	30.5%	Not Met Increasing
Reduce the proportion of persons engaging in binge drinking during the past month—adolescents 12 to 17 years *2	14.3% (12.8-16.0)	13.9% (12.9-15.0)	14.8% (13.6-16.0)	13.8% (12.3-15.3)	8.6%	Not Met No significant change

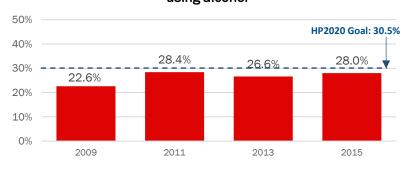
Goals are HP2020 SA-1, 2.3, and 14.4.

## Reduce riding with a driver who had been drinking alcohol



The proportion of high school students who rode with a driver who had been drinking alcohol fell from 2009 to 2011 and has remained stable. Cuyahoga County students have met the goal to reduce the proportion of adolescents who rode, during the previous 30 days, with a driver who had been drinking.

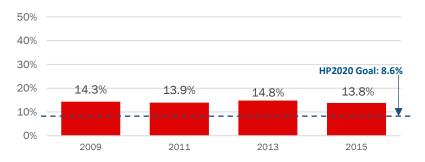
## Increase proportion of 12th grade students never using alcohol





Since 2009, the proportion of high school seniors who have never had a drink of alcohol has increased. In fact, in 2011 and 2015, the range of the confidence intervals include the 30.5% goal. While the HP2020 goal has not been met, the direction of change is positive.

#### Reduce binge drinking





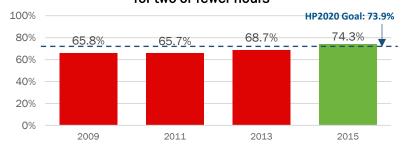
Each survey year, approximately 14% of high school students report that they have had five or more drinks of alcohol in a row on one or more days in the past month. The discrepancy between the HP2020 goal and local prevalence flags this as a clear priority in Cuyahoga County.

#### PHYSICAL ACTIVITY

Physical Activity	2009	2011	2013	2015	HP2020	Change Since 2009
Increase the proportion of adolescents in grades 9 through 12 who view television, videos, or play video games for no more than 2 hours a day	65.8% (62.4-69.1)	65.7% (64.4-67.0)	68.7% (67.4-70.0)	74.3% (72.8-75.7)	73.9%	MET Increasing
Increase the proportion of adolescents in grades 9 through 12 who use a computer or play computer games outside of school (for non-school work) for no more than 2 hours a day	76.8% (74.7-78.9)	72.8% (71.7-73.9)	62.1% (60.7-63.5)	59.9% (58.0-61.9)	82.6%	Not Met Decreasing
Increase the proportion of adolescents who meet current Federal physical activity guidelines for aerobic physical activity	22.1% (20.6-23.8)	21.3% (20.2-22.3)	23.8% (22.8-24.9)	22.7% (21.5-24.0)	31.6%	Not Met No significant change

Goals are HP2020 PA-8.2.3, 8.3.3 and 4.1.

## Increase proportion of students watching television for two or fewer hours





The proportion of high school students who watch television 2 or fewer hours on school days has increased since 2011 so that Cuyahoga County students have met the HP2020 goal.

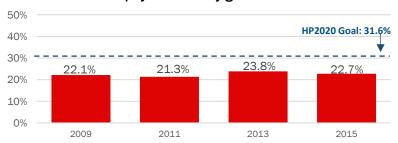
## Increase proportion of students using computers for non-school purposes for two or fewer hours





The proportion of high school students who use computers for non-school purposes 2 or fewer hours on school days has decreased since 2009. In fact, prevalence of this behavior has moved away from the HP2020 goal flagging this as a clear priority in Cuyahoga County.

## Increase proportion of students meeting Federal physical activity guidelines



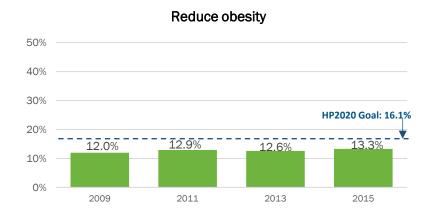


Since 2009, the proportion of high school students who met federal physical activity guidelines (physically active at least 60 minutes/day every day during past 7 days) has not changed significantly and remains lower than the HP2020 goal.

#### **NUTRITION AND WEIGHT STATUS**

Nutrition and Weight Status	2009	2011	2013	2015	HP2020	Change Since 2009
Reduce the proportion of adolescents aged 12 to 19 years who are considered obese*4	12.0% (10.9-13.1)	12.9% (12.0-13.8)	12.6% (11.7-13.5)	13.3% (12.3-14.3)	16.1%	MET No significant change

Goals are HP2020 NWS-10.3.





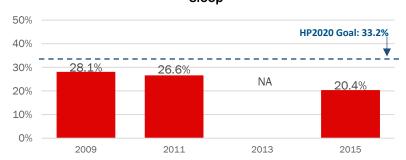
Since 2009, the proportion of high school students who reported heights and weights consistent with obesity has remained stable. While self-reporting of county students indicate that the HP2020 goal has been met, this result should be interpreted with caution. BMI results may be low because of under-reporting and missing data. Nationally, progress toward the goal is obtained through clinical measurements of height and weight.

## **SLEEP HEALTH**

Sleep Health	2009	2011	2013	2015	HP2020	Change Since 2009
Increase the proportion of students in grades 9 through 12 who get sufficient sleep	28.1% (26.3-29.8)	26.6% (25.4-27.8)	NA	20.4% (19.1-21.7)	33.2%	Not Met Decreasing

Goals are HP2020 SH-3.

## Increase proportion of students who get sufficient sleep





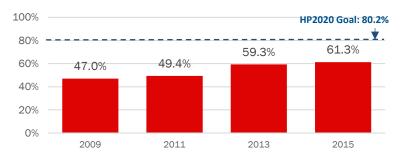
Fewer county high school students report obtaining sufficient sleep (8 hours) in every survey year since 2009. In fact, prevalence of this behavior has moved away from the HP2020 goal, flagging this as a clear priority in Cuyahoga County.

#### **FAMILY PLANNING**

Family Planning	2009	2011	2013	2015	HP2020	Change Since 2009
Increase the proportion of female adolescents aged 15 to 17 years who have never had sexual intercourse*3	47.0% (43.2-50.9)	59.4% (57.2-61.6)	59.3% (57.0-61.6)	61.3% (58.7-63.9)	80.2%	Not met Increasing
Increase the proportion of male adolescents aged 15 to 17 years who have never had sexual intercourse*3	42.2% (37.1-47.3)	53.0% (50.5-55.5)	54.6% (52.0-57.1)	58.0% (55.4-60.7)	79.2%	Not met Increasing
Increase the proportion of sexually active females aged 15 to 19 years who used a condom at last intercourse*3	56.0% (51.7-60.3)	60.0% (57.1-62.8)	59.6% (56.7-62.5)	53.2% (49.7-56.7)	55.6%	Not met Decreasing

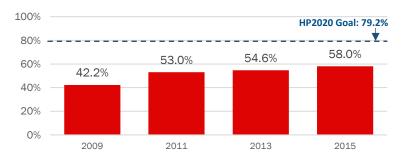
Goals are HP2020 FP-9.1, 9.2, and 10.3.

## Increase proportion of females (15-17 yrs) who have never had sexual intercourse



Since 2009, the proportion of female students (ages 15-17) who reported never having had sex, has increased. While county students have not met the HP2020 goal, the increasing prevalence is moving in the right direction.

## Increase proportion of males (15-17 yrs) who have never had sexual intercourse





Since 2009, the proportion of male students (ages 15-17) who reported never having had sex has increased. While county students have not met the HP2020 goal, the increasing prevalence is moving in the right direction.

## Increase proportion of sexually active females (15-19 yrs) who used a condom at last sexual intercourse



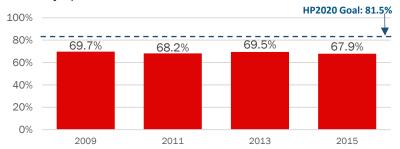


The proportion of sexually active female high school students whose partner used a condom the last time they had sex has decreased significantly since 2011.

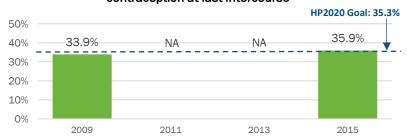
Family Planning (p. 2)	2009	2011	2013	2015	HP2020	Change Since 2009
Increase the proportion of sexually active males aged 15 to 19 years who used a condom at last intercourse*3	69.7% (66.0-73.2)	68.2% (65.6-70.6)	69.5% (67.1-71.8)	67.9% (63.7-71.9)	81.5%	Not Met No significant change
Increase the proportion of sexually active females aged 15 to 19 years who used a condom and hormonal or intrauterine contraception at last intercourse*3	33.9% (26.7-42.0)	NA	NA	35.9% (29.8-42.5)	20.1%	MET No significant change
Increase the proportion of sexually active males aged 15 to 19 years who used a condom and whose partner used hormonal or intrauterine contraception at last intercourse*3	40.7% (27.1-55.9)	NA	NA	37.5% (28.9-47.1)	35.3%	MET No significant change

Goals are HP2020 FP-10.4, 11.3, and 11.4.

## Increase proportion of sexually active males (15-19 yrs) who used a condom at last sexual intercourse



# Increase proportion of sexually active females (15-19 yrs) who used a condom and hormonal or intrauterine contraception at last intercourse



## Increase proportion of sexually active males (15-19 yrs) who used a condom and hormonal or intrauterine contraception at last intercourse





The proportion of sexually active male high school students who used a condom the last time they had sex has not changed significantly since 2009. While there's not been progress toward the HP2020 goal, the declines in use reported by females have not been replicated among county males.



The proportion of sexually active male high school students who used a condom and their partner used either hormonal or intrauterine contraception the last time they had sex has remained stable since 2009. Male Cuyahoga County students have met and exceeded the HP2020 goal.

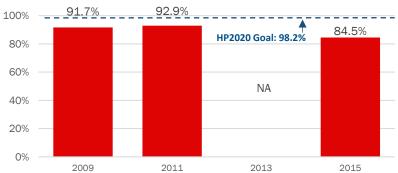


The proportion of sexually active female high school students who used both a condom and hormonal or intrauterine contraception the last time they had sex has remained stable since 2009. Female Cuyahoga County students have met the HP2020 goal.

Family Planning (p. 3)	2009	2011	2013	2015	HP2020	Change Since 2009
Increase the proportion of female adolescents who received formal instruction on HIV/AIDS prevention before they were 18 years old*3	91.7% (90.2-93.1)	92.9% (91.8-93.8)	NA	84.5% (83.0-85.9)	98.2%	Not Met Decreasing
Increase the proportion of male adolescents who received formal instruction on HIV/AIDS prevention before they were 18 years old*3	87.8% (85.4-89.8)	92.1% (91.1-93.0)	NA	83.3% (81.5-84.9)	96.7%	Not Met Decreasing

Goals are HP2020 FP 12.5 and 12.6.

## Increase proportion of females who received formal instruction on HIV/AIDS prevention



## Increase proportion of males who received formal instruction on HIV/AIDS prevention





The proportion of Cuyahoga County female high school students who learned about HIV/AIDS by formal instruction **in school** has decreased since 2011. The item used to measure this HP2020 goal permitted formal instruction to take place at school, church, a community center or some other place. Nonetheless, prevalence of this behavior has decreased, flagging this as a clear priority in Cuyahoga County.



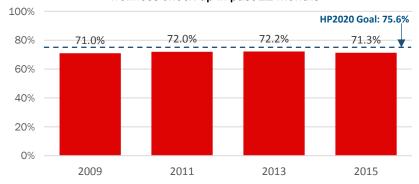
The proportion of Cuyahoga County male high school students who learned about HIV/AIDS by formal instruction **in school** has decreased since 2011. The item used to measure this HP2020 goal permitted formal instruction to take place at school, church, a community center or some other place. Nonetheless, prevalence of this behavior has decreased, flagging this as a clear priority in Cuyahoga County.

### ADOLESCENT HEALTH

Adolescent Health	2009	2011	2013	2015	HP2020	Change Since 2009
Increase the proportion of adolescents who have had a	71.0%	72.0%	72.2%	71.3%	75.6%	Not Met No significant
wellness checkup in the past 12 months*5	(68.8-73.2)	(70.8-73.2)	(71.0-73.3)	(69.8-72.8)		change
Increase the proportion of adolescents who have an adult in	86.8%*	84.8%*	80.8%	82.0%	83.2%	Not Met No significant
their lives with whom they can talk about serious problems*2	(85.3-88.3)	(83.8-85.8)	(79.9-81.7)	(80.8-83.1)	00.270	change

Goals are HP2020 AH-1, and 3.1.

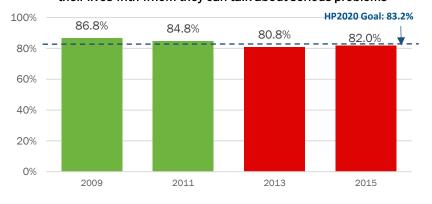
## Increase proportion of adolescents who received wellness check-up in past 12 months



## CAUTION

Since 2009, the proportion of high school students who had a wellness check-up in the past 12 months remained stable. While county students have not yet met the HP2020 goal, enhancements to health insurance suggest that this is obtainable by 2020.

## Increase proportion of adolescents who have an adult in their lives with whom they can talk about serious problems





Beginning with the 2013 survey year, the wording of this survey item changed to exclude parents from the definition of "supportive adult". While 2015 county students have not met the HP2020 goal, the increasing trend is positive.

#### References:

- 1. U.S. Census Bureau. 2008 population estimates: National characteristics, national sex, age, race and Hispanic origin. Retrieved from: http://www.census.gov/popest/data/historical/2000s/vintage\_2008/index.html.
- 2. Adolescent Health. Retrieved from https://www.healthypeople.gov/2020/topics-objectives/topic/Adolescent-Health.
- 3. Adolescent and School Health. Youth Risk Behavior Surveillance System (YRBSS) Overview. Retrieved from http://www.cdc.gov/healthyyouth/data/yrbs/overview.html.
- 4. About Healthy People. Retrieved from https://www.healthypeople.gov/2020/About-Healthy-People.

#### **Surveillance Tools:**

Most of the HP2020 goals noted rely from specific YRBSS items to track progress. The following surveillance tools were also used:

- \*1 The Monitoring the Future Study
- \*2 The National Survey on Drug Use and Health
- \*3 The National Survey of Family Growth
- \*4 The National Health and Nutrition Examination Survey
- \*5 The National Health Interview Survey

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