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*ARKANSAS Prevention Needs  
Assessment Student Survey  
2004 Results for  
Independence County*



PROVIDED BY:  
Office of Alcohol and Drug Abuse Prevention  
Division of Behavioral Health Services  
Arkansas Department of Human Services

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# INTRODUCTION

## The 2004 Arkansas Prevention Needs Assessment Student Survey

This report summarizes findings from the Arkansas Prevention Needs Assessment Survey (APNA), a survey of 6<sup>th</sup>, 8<sup>th</sup>, 10<sup>th</sup> and 12<sup>th</sup> grade school students, conducted in the Fall of 2004. This survey was available free of charge to all Arkansas public school districts who chose to participate. The survey was designed to assess

<b>Table 1. Characteristics of Participants</b>				
<b>Student Totals</b>				
	<b>County 2004</b>		<b>State 2004</b>	
	Number	Percent	Number	Percent
<b>Total Students</b>	889	2.2	39999	100
<b># of Districts</b>	3	2.2	136	100
<b># of Schools</b>	9	2.5	366	100
<b>Grade</b>				
<b>6</b>	183	20.6	10913	27.3
<b>8</b>	243	27.3	11740	29.4
<b>10</b>	267	30.0	9739	24.3
<b>12</b>	196	22.0	7607	19.0
<b>Gender</b>				
<b>Male</b>	422	47.5	18897	47.2
<b>Female</b>	448	50.4	20223	50.6
<b>Ethnicity</b>				
<b>Hispanic</b>	68	7.2	3207	7.5
<b>Black</b>	40	4.2	6267	14.7
<b>Asian</b>	13	1.4	561	1.3
<b>American Indian</b>	27	2.8	1764	4.1
<b>White</b>	761	80.0	28584	66.9
<b>Pacific Islander</b>	4	0.4	200	0.5

adolescent substance use and related behaviors, and risk and protective factors that predict these behaviors. In this report, the results are presented for each grade along with the overall results for the State. Table 1 contains characteristics of the students who completed the survey.

This is the third year that the APNA Survey was administered. Because trends over time are very important to prevention planning, readers are encouraged to review the results from the last two year's (2002 & 2003) surveys. By comparing the results of the three surveys, changes in ATOD use, rates of antisocial behavior, and levels risk and protective factors can be determined for a specific grade. It is important to note that the results in this report are for students who were not sampled in the even grades (6, 8, 10, and 12) during the 2003 survey.

Those students are now in grades 7, 9, 11, and out of school. Together, the results of the 2002, 2003 and 2004 APNA surveys provide a complete picture of ATOD use, antisocial behavior, risk, and protection for students in Arkansas.

## The Risk and Protective Factor Model of Prevention

Risk and protective factor-focused prevention is based on a simple premise: To prevent a problem from happening, we need to identify the factors that increase the risk of that problem developing and then find ways to reduce the risks. Just as medical researchers have found risk factors for heart attacks such as diets high in fats, lack of exercise, and smoking, a team of researchers, the Social Development Research Group (SDRG), at the University of Washington have defined a set of risk factors for drug abuse. The research team also found that some children exposed to multiple risk factors manage to avoid behavior problems later even though they were exposed to the same risks as children who exhibited behavior problems. Based on research, they identified protective factors and processes that work together to buffer children from the effects of high risk exposure and lead to the development of healthy behaviors.

Risk factors include characteristics of school, community, and family environments, as well as characteristics of students and their peer groups that are known to predict increased likelihood of drug use, delinquency, and violent behaviors among youth (Hawkins, Catalano & Miller, 1992; Hawkins, Arthur & Catalano, 1995; Brewer, Hawkins, Catalano & Neckerman, 1995).

## TOOLS FOR ASSESSMENT AND PLANNING

Protective factors exert a positive influence or buffer against the negative influence of risk, thus reducing the likelihood that adolescents will engage in problem behaviors. Protective factors identified through research reviewed by the Social Development Research Group include social bonding to family, school, community and peers; and healthy beliefs and clear standards for behavior.

Research on risk and protective factors has important implications for prevention efforts. The premise of this approach is that in order to promote positive youth development and prevent problem behaviors, it is necessary to address those factors that predict the problem. By measuring risk and protective factors in a population, specific risk factors that are elevated and widespread can be identified and targeted by preventive interventions that also promote related protective factors. For example, if academic failure is identified as an elevated risk factor in a community, then mentoring and tutoring interventions can be provided that will improve academic performance, and also increase opportunities and rewards for classroom participation.

Risk- and protective factor-focused drug abuse prevention is based on the work of J. David Hawkins, Ph.D., Richard F. Catalano, Ph.D.; and a team of researchers at the University of Washington in Seattle. Beginning in the early 1980's the group researched adolescent problem behaviors and identified risk factors for adolescent drug abuse and delinquency. The chart at the right shows the links between the 16 risk factors and the five problem behaviors. The check marks have been placed in the chart to indicate where at least two well designed, published research studies have shown a link between the risk factor and the problem behavior.

YOUTH AT RISK	PROBLEM BEHAVIORS				
	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence
<b>Community</b>					
Availability of Drugs and Firearms	✓				✓
Community Laws and Norms Favorable Toward Drug Use	✓				
Transitions and Mobility	✓	✓		✓	
Low Neighborhood Attachment and Community Disorganization	✓	✓			✓
Extreme Economic and Social Deprivation	✓	✓	✓	✓	✓
<b>Family</b>					
Family History of High Risk Behavior	✓	✓	✓	✓	
Family Management Problems	✓	✓	✓	✓	✓
Family Conflict	✓	✓	✓	✓	✓
Favorable Parental Attitudes and Involvement in the Problem Behavior	✓	✓			✓
<b>School</b>					
Early and Persistent Antisocial Behavior	✓	✓	✓	✓	✓
Academic Failure in Elementary School	✓	✓	✓	✓	✓
Lack of Commitment to School	✓	✓	✓	✓	
<b>Individual/Peer</b>					
Alienation and Rebelliousness	✓	✓		✓	
Friends Who Engage in a Problem Behavior	✓	✓	✓	✓	✓
Favorable Attitudes Toward the Problem Behavior	✓	✓	✓	✓	
Early Initiation of the Problem Behavior	✓	✓	✓	✓	✓

## SCHOOL IMPROVEMENT USING SURVEY DATA

Data from the Arkansas Prevention Needs Assessment Survey can be used to help school and community planners assess current conditions and prioritize areas of greatest need.

Each risk and protective factor can be linked to specific types of interventions that have been shown to be effective in either reducing the risk(s) and enhancing the protection(s). The steps outlined below will help your school and community make key decisions regarding allocation of resources, how and when to address specific needs, and which strategies are most effective and known to produce results.

### What are the numbers telling you?

Review the charts and data tables presented in this report. Using the table below, note your findings as you discuss the following questions.

- Which 3 to 5 risk factors appear to be higher than you would want?
- Which 3 to 5 protective factors appear to be lower than you would want?
- Which levels of 30 day drug use are increasing and/or unacceptably high?
  - Which substances are your students using the most?
  - At which grades do you see unacceptable usage levels?
- Which levels of antisocial behaviors are increasing and/or unacceptably high?
  - Which behaviors are your students exhibiting the most?
  - At which grades do you see unacceptable behavior levels?

### How to decide if a rate is “unacceptable.”

- Look across the charts to determine which items stand out as either much higher or much lower than the others?
- Compare your data to statewide data and national data. Differences of 5% between the local and other data are probably significant.
- Determine the standards and values held in your area. For example: Is it acceptable in your community for 75% of high school students to drink alcohol regularly even when the statewide percentage is 90?

### Use these data for planning:

- Substance use and antisocial behavior data - raise awareness about the problems and promote dialogue.
- Risk and protective factor data - identify exactly where the community needs to take action.
- Promising approaches – talk with resources listed on the last page of this report for ideas about programs that have been proven effective in addressing the risk factors that are high in your area, and in improving the protective factors that are low.

Measure	Unacceptable Rate #1	Unacceptable Rate #2	Unacceptable Rate #3	Unacceptable Rate #4
30 day drug use				
Antisocial behaviors				
Risk factors				
Protective factors				

## SCHOOL IMPROVEMENT USING SURVEY DATA

### How do I decide which intervention(s) to employ?

- Strategies should be selected based on the risk factors that are high in your community and the protective factors which are low.
- Strategies should be age appropriate and employed prior to the onset of the problem behavior.
- Strategies chosen should address more than a single risk and protective factor.
- No single strategy offers the solution.

### How do I know whether or not the intervention was effective?

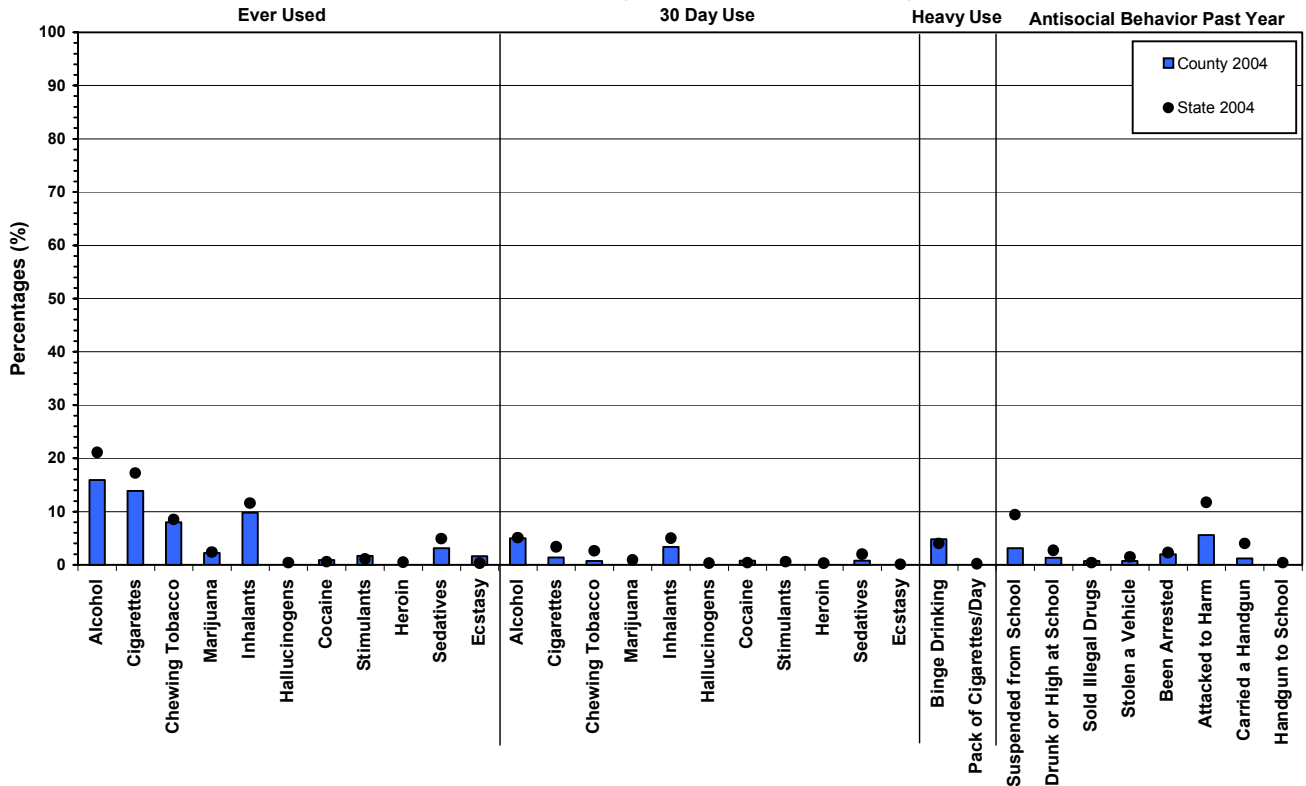
- Participation in the annual administration of the survey provides trend data necessary for determining the effectiveness of the implemented intervention(s) and also provides data for determining any new efforts that are needed.

## HOW TO READ THE CHARTS

1. Student responses for risk and protective factors, substance use and antisocial behavior questions are displayed by grade on the following pages.
2. The factors are grouped into 4 domains: community, family, peer-individual, and school.
3. The bars represent the percent of students in the grade who reported elevated risk or protection, substance use or antisocial behaviors or school safety concerns.
4. Scanning across these charts, you can easily determine which factors are most (or least) prevalent, thus identifying which are the most important for your community to address.
5. Bars will be completed by a small dot. The dot shows the comparison from the state and provides additional information for you in determining the relative importance of each risk or protective factor.
6. A dashed line on each risk and protective factor chart represents the percentage of youth at risk or with protection for the seven state sample upon which the cut-points were developed. The seven states included in the norm group were Colorado, Illinois, Kansas, Maine, Oregon, Utah and Washington. This gives you a comparison to a national sample.
7. Brief definitions of the risk and protective factors can be found following the graphs.
8. Actual percentages are provided in the data tables following the charts.

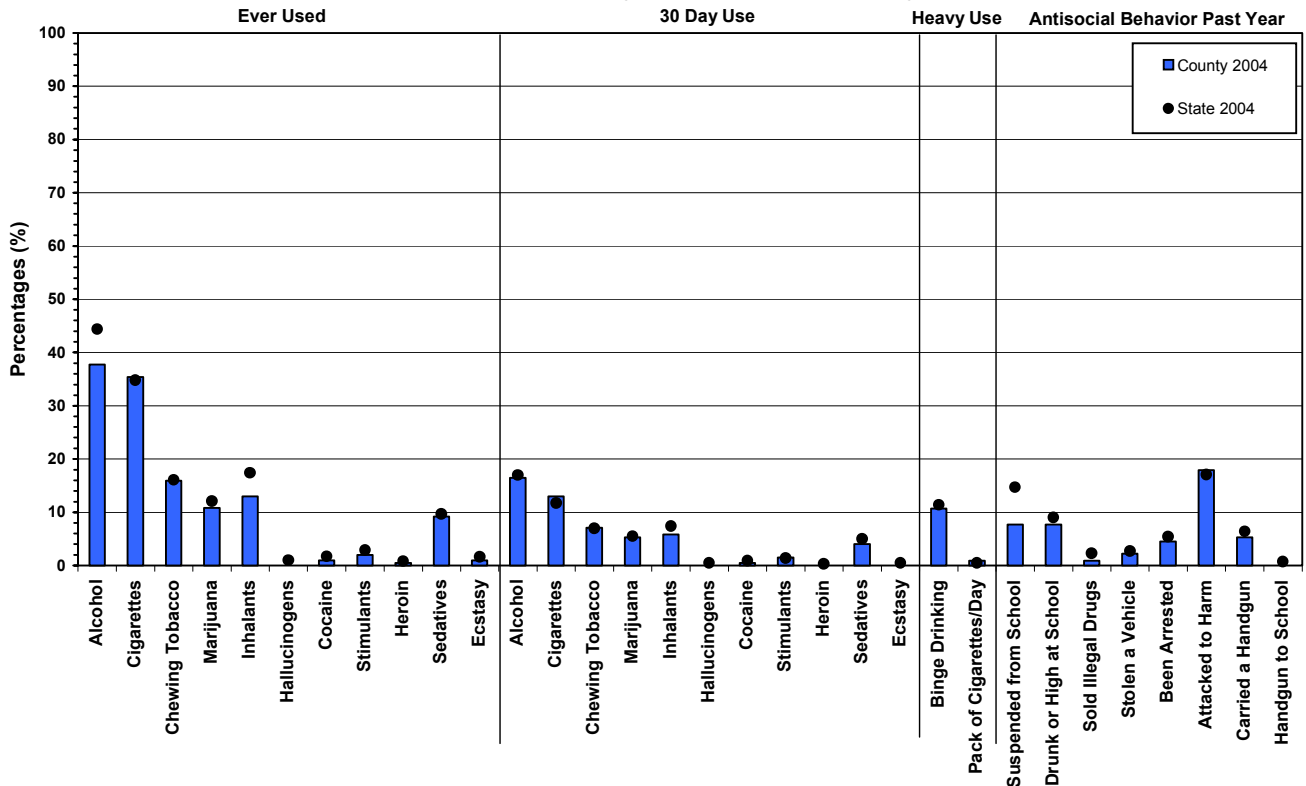
## ATOD USE AND ANTISOCIAL BEHAVIOR

### Independence County 2004 Student Survey, Grade 6



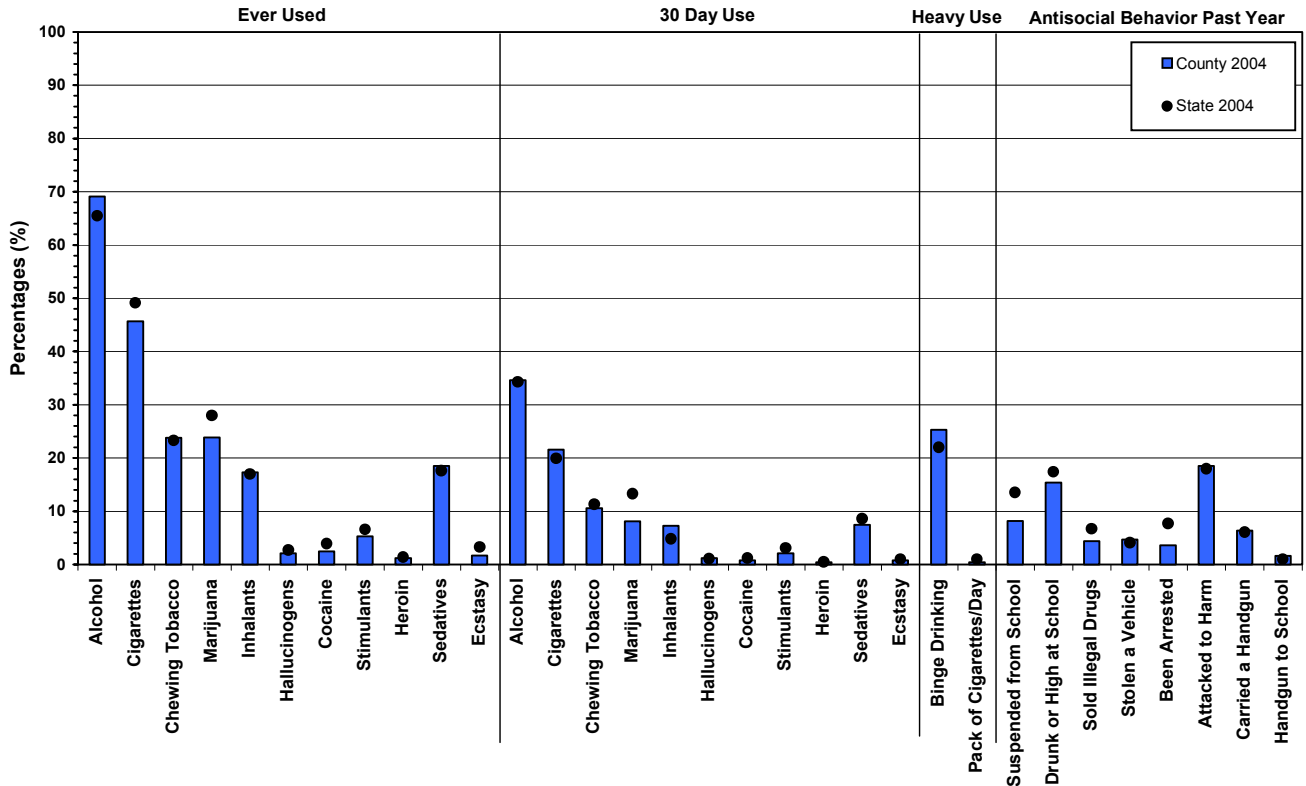
## ATOD USE AND ANTISOCIAL BEHAVIOR

### Independence County 2004 Student Survey, Grade 8



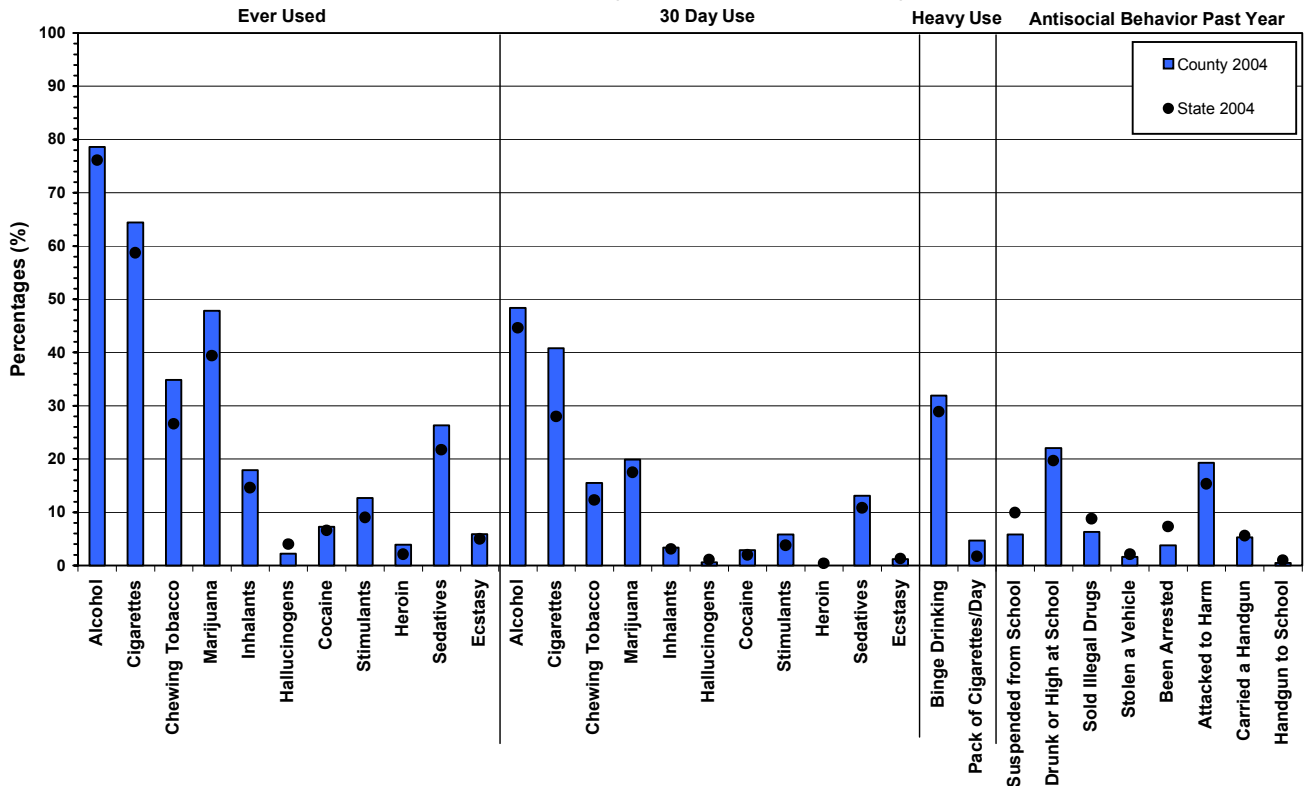
## ATOD USE AND ANTISOCIAL BEHAVIOR

### Independence County 2004 Student Survey, Grade 10



## ATOD USE AND ANTISOCIAL BEHAVIOR

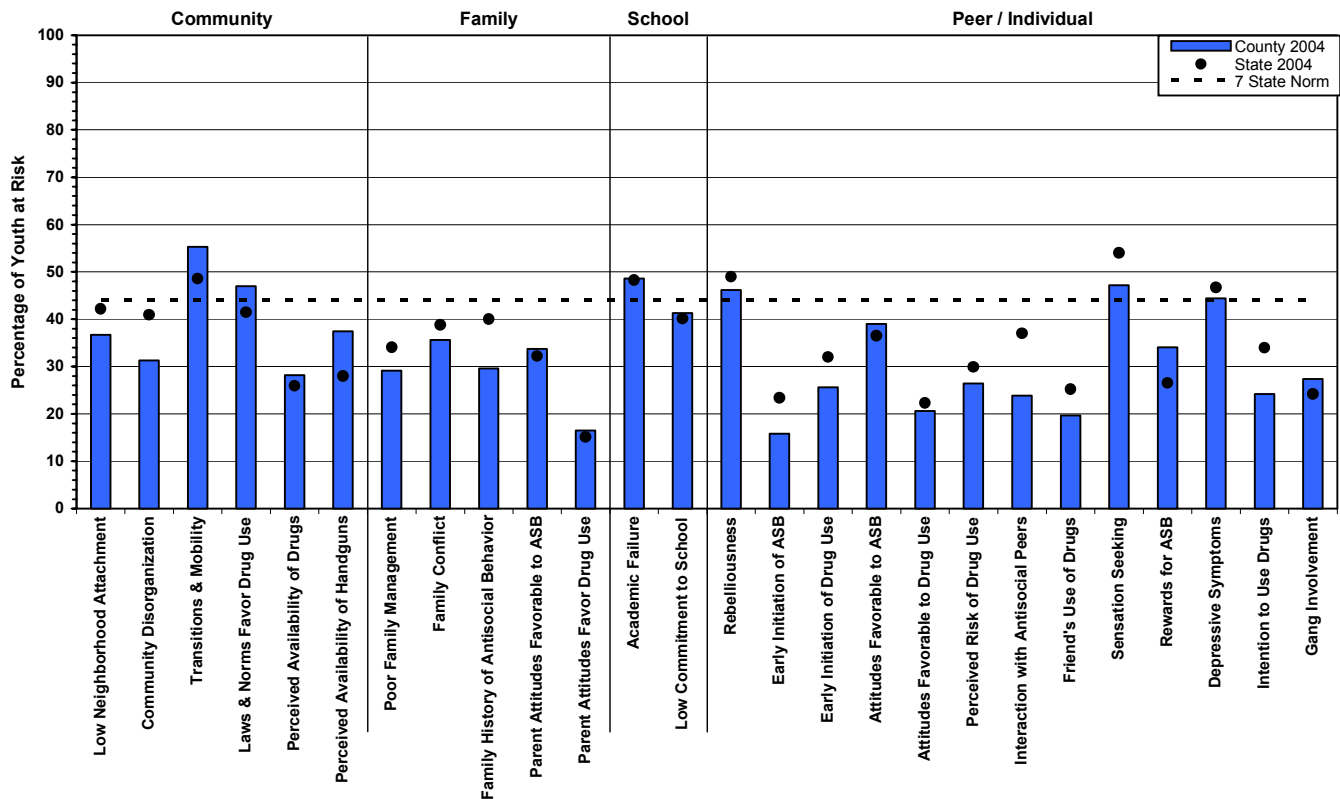
### Independence County 2004 Student Survey, Grade 12





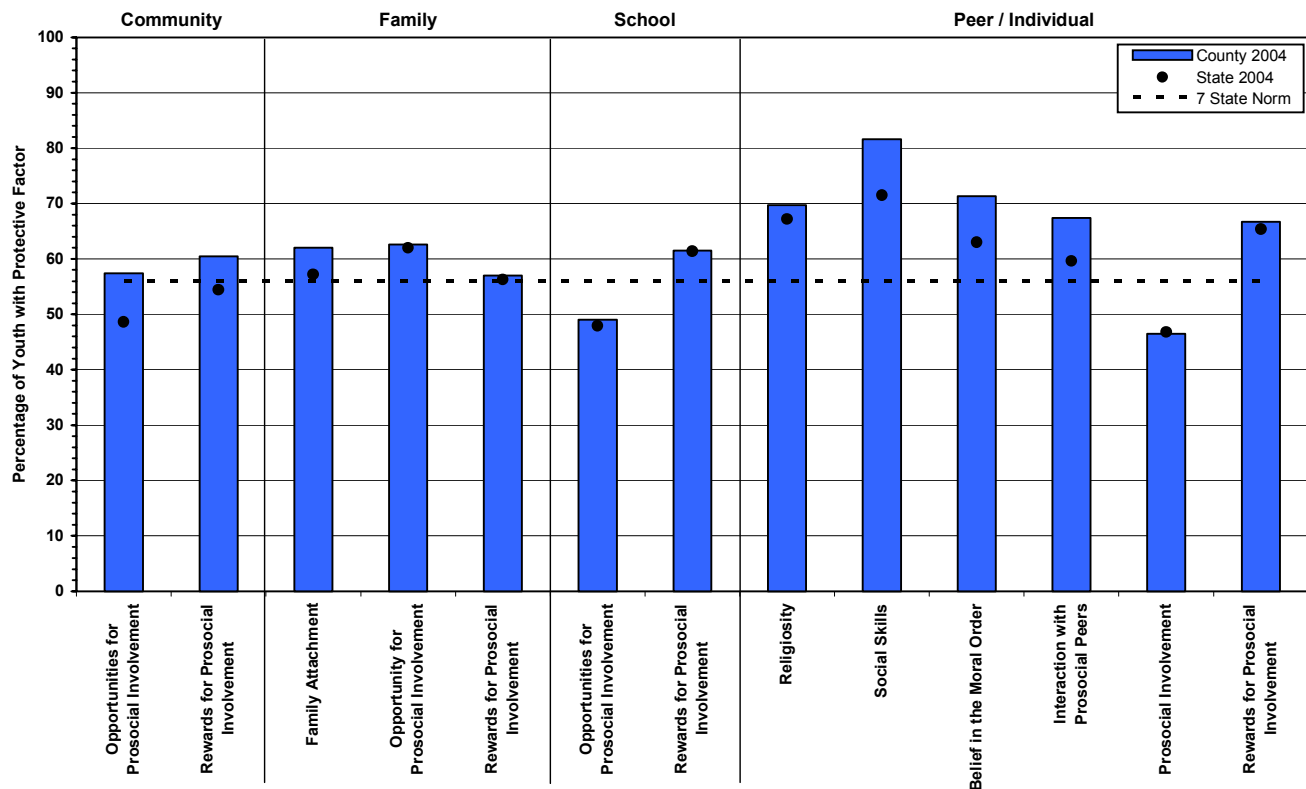
## RISK PROFILE

### Independence County 2004 Student Survey, Grade 6



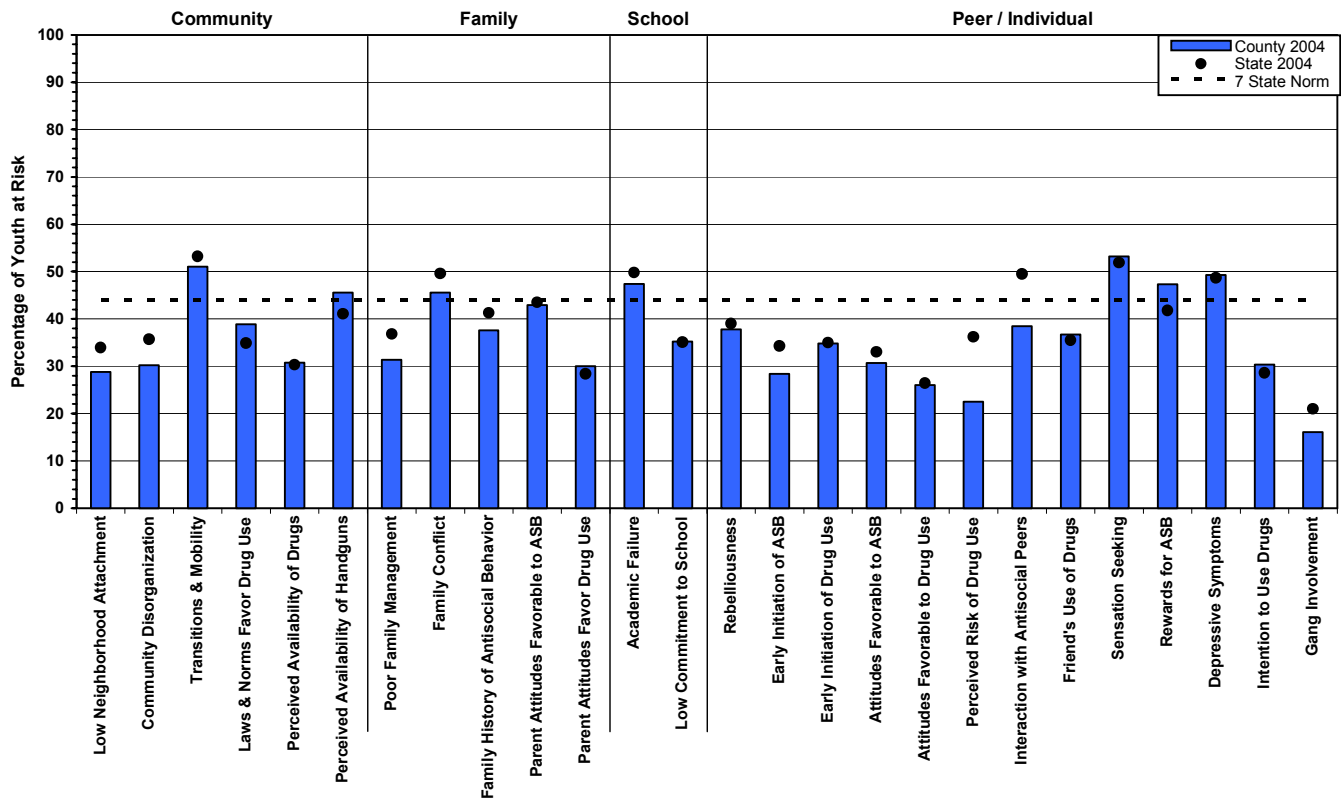
## PROTECTIVE PROFILE

### Independence County 2004 Student Survey, Grade 6



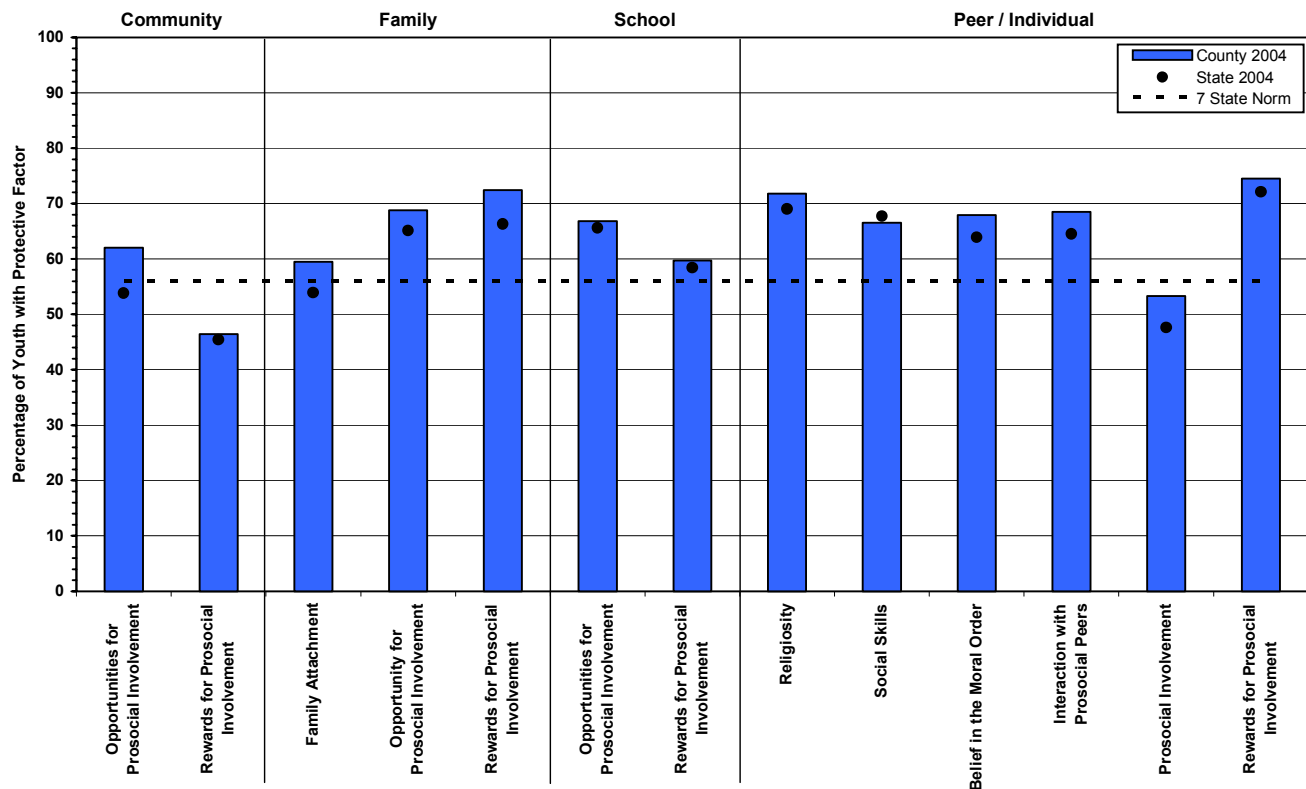
## RISK PROFILE

### Independence County 2004 Student Survey, Grade 8



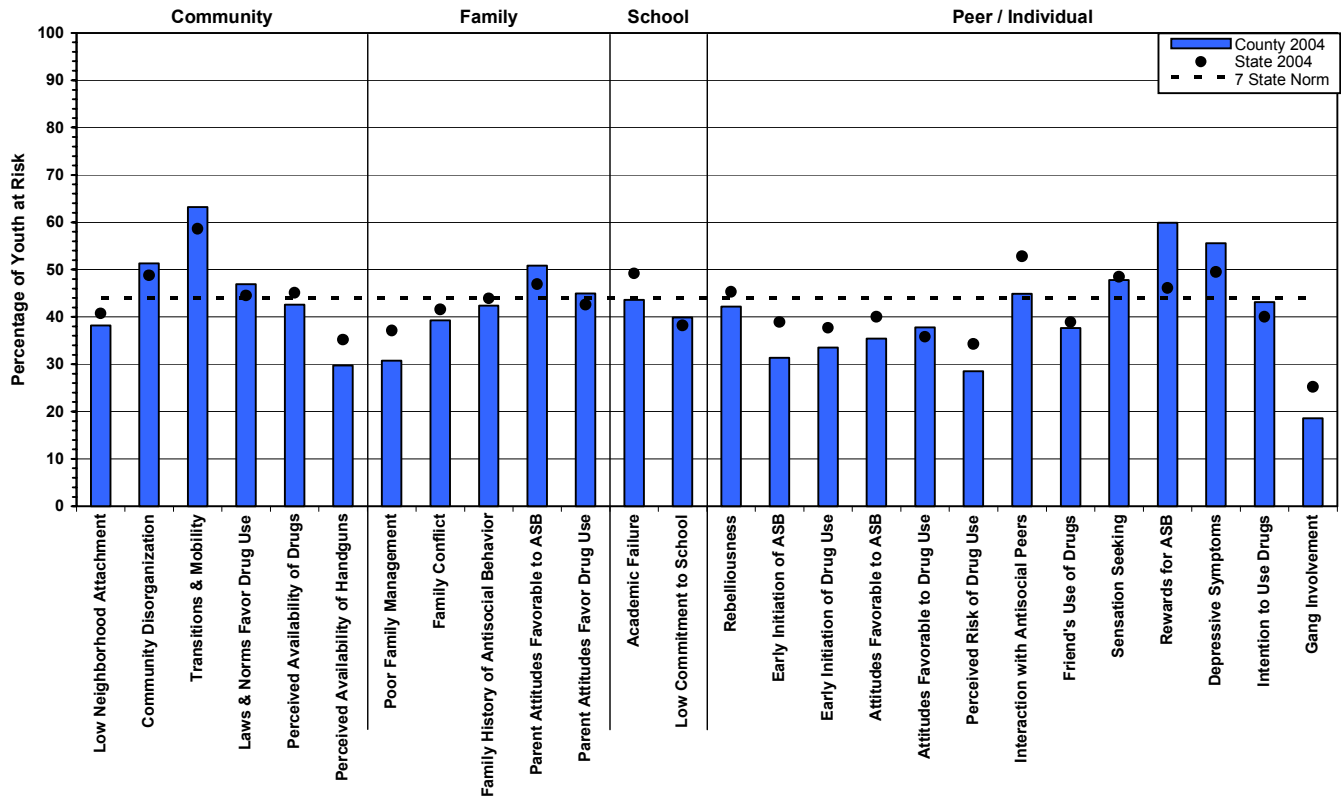
## PROTECTIVE PROFILE

### Independence County 2004 Student Survey, Grade 8



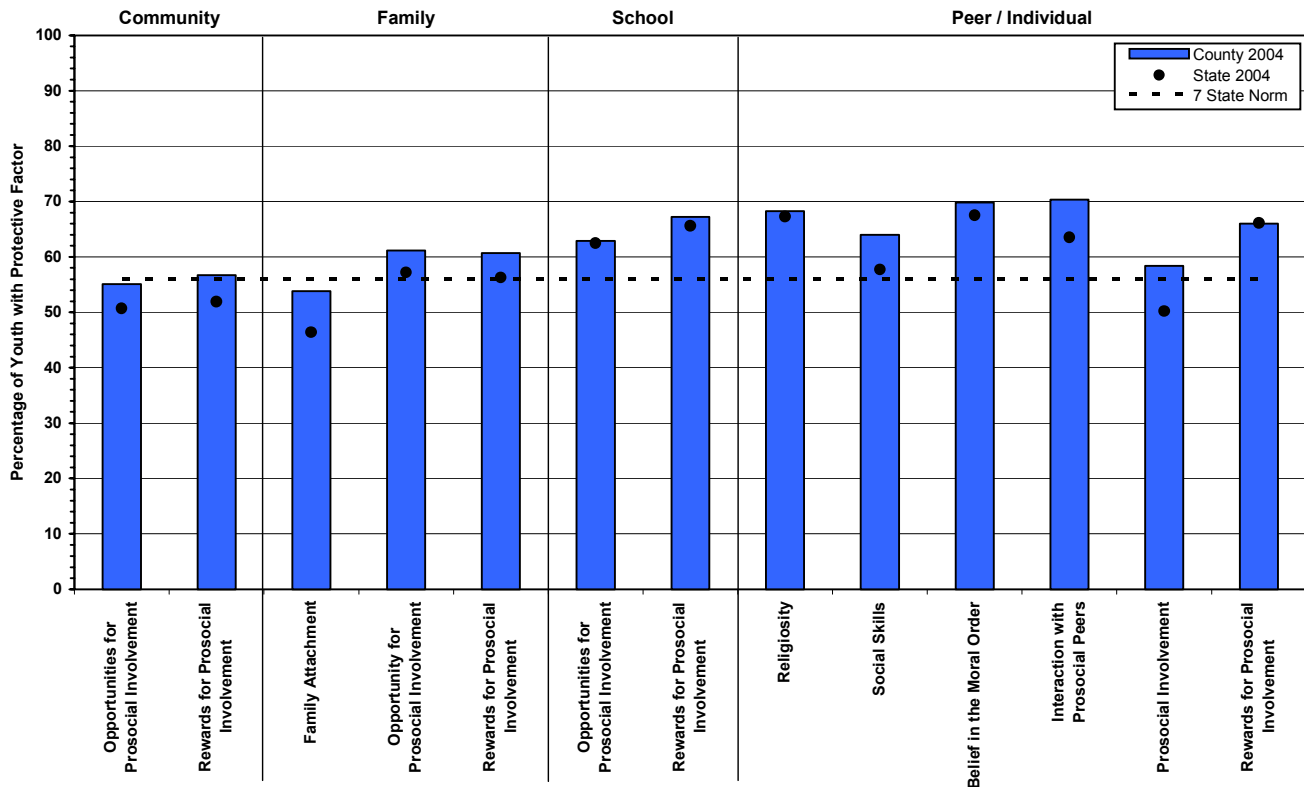
## RISK PROFILE

### Independence County 2004 Student Survey, Grade 10



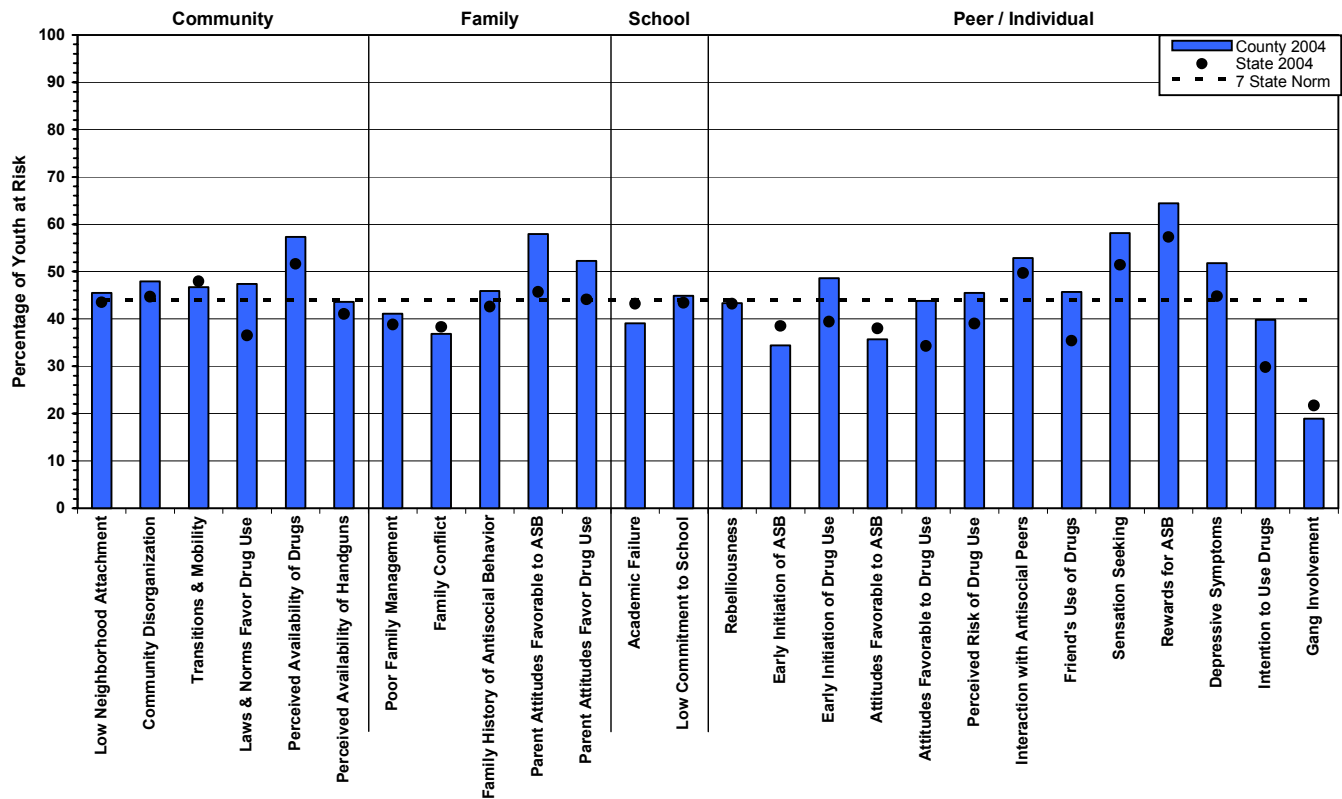
## PROTECTIVE PROFILE

### Independence County 2004 Student Survey, Grade 10



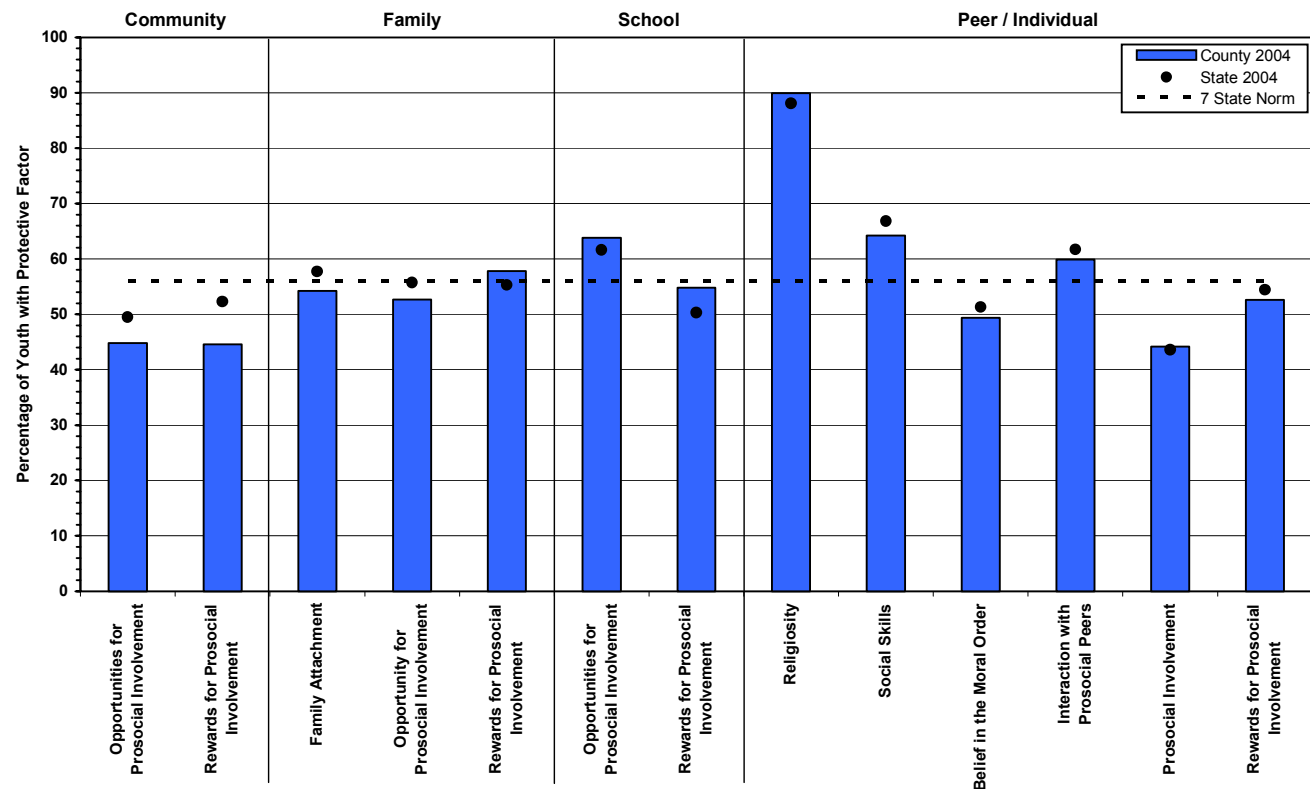
## RISK PROFILE

### Independence County 2004 Student Survey, Grade 12

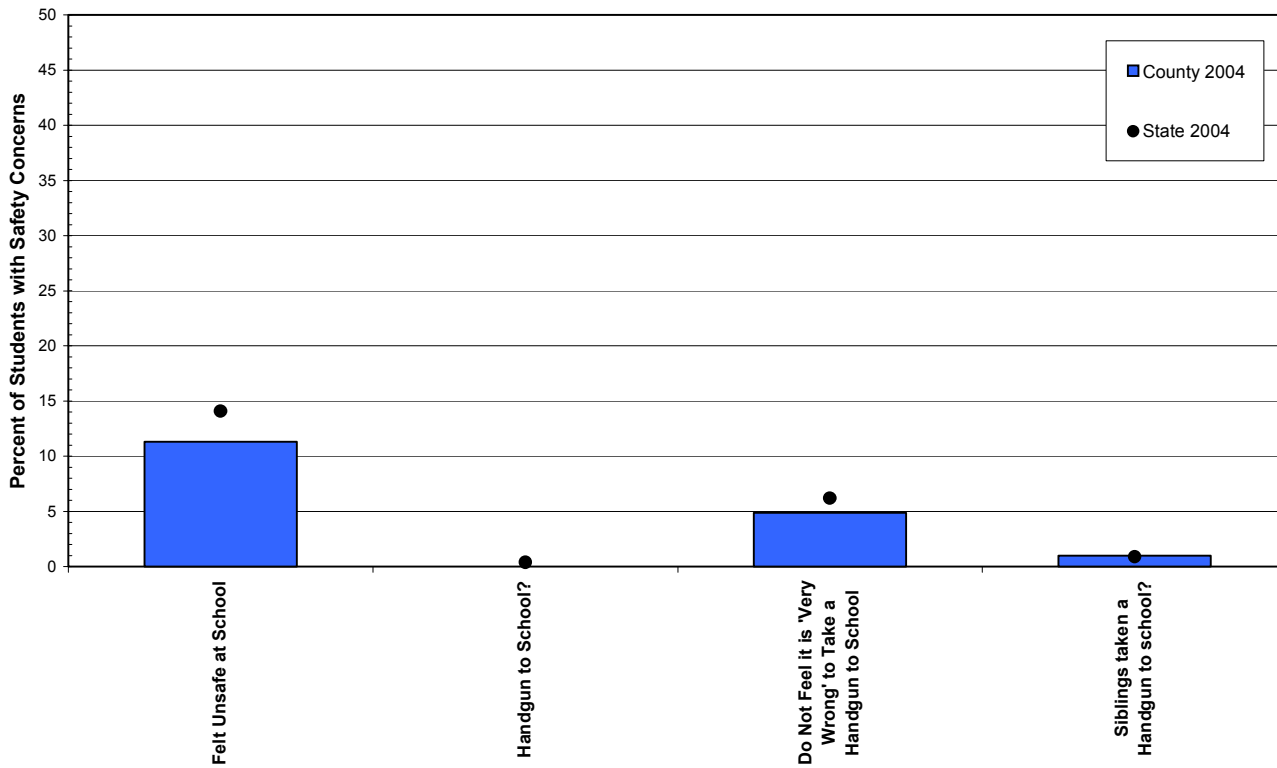


## PROTECTIVE PROFILE

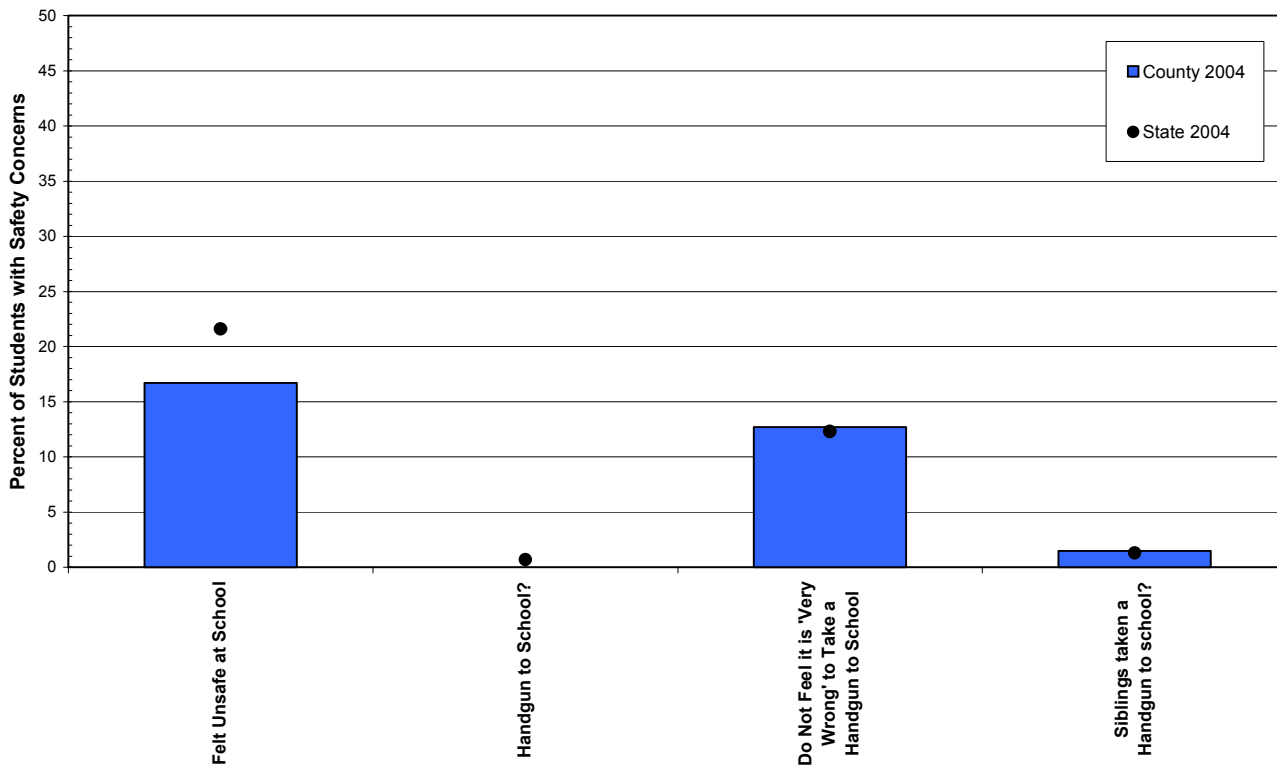
### Independence County 2004 Student Survey, Grade 12



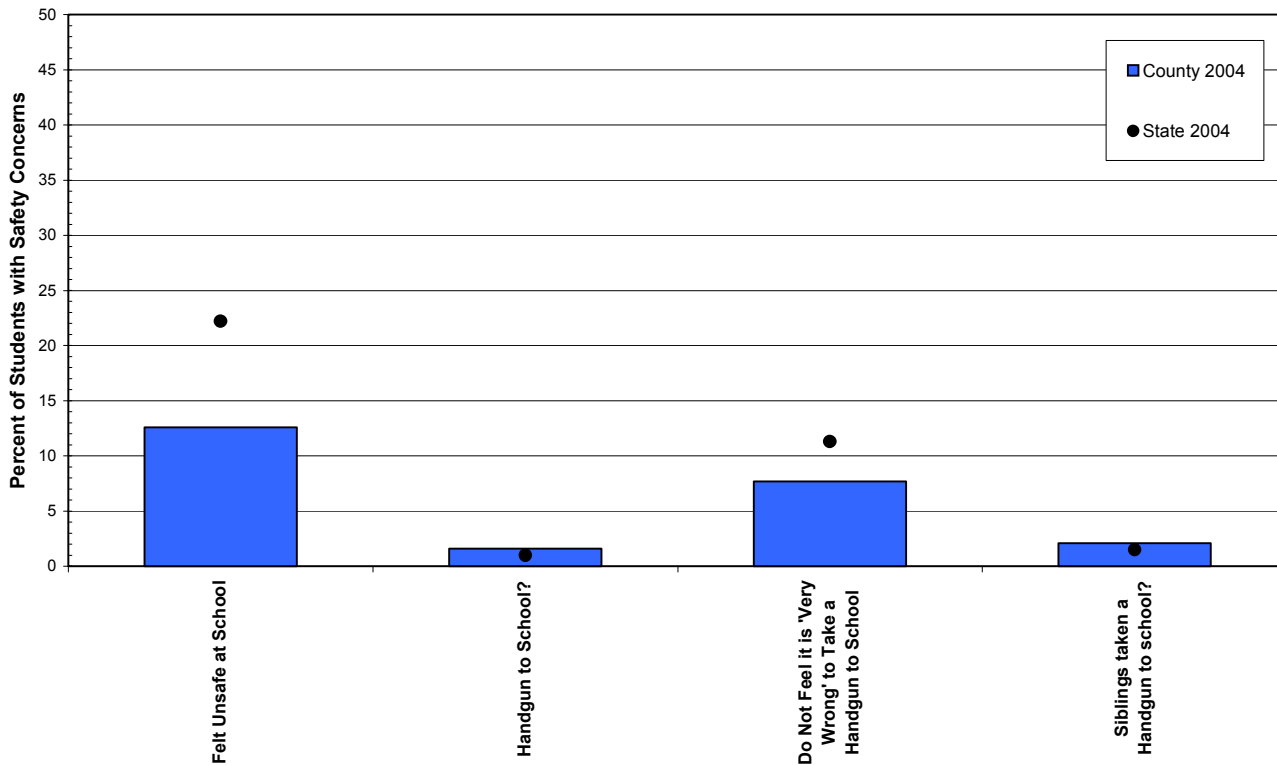
### SCHOOL SAFETY PROFILE Independence County 2004 Student Survey, Grade 6



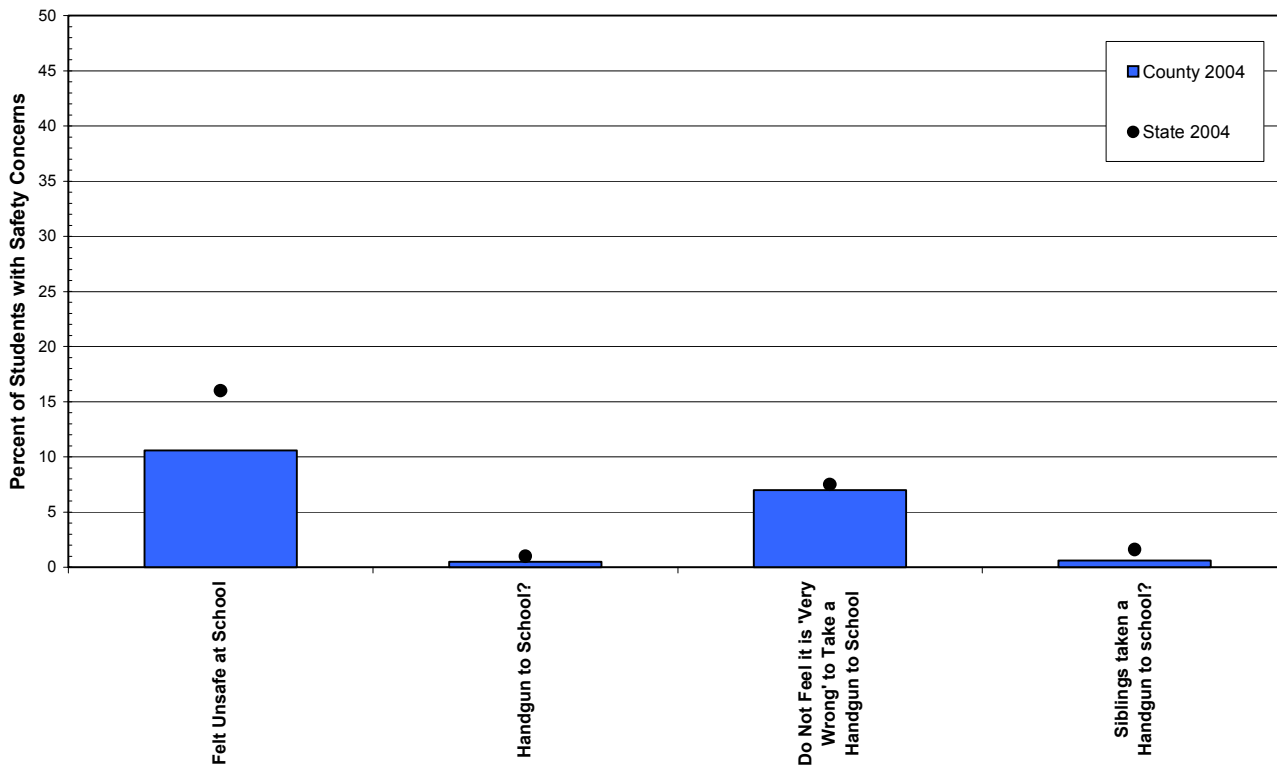
### SCHOOL SAFETY PROFILE Independence County 2004 Student Survey, Grade 8



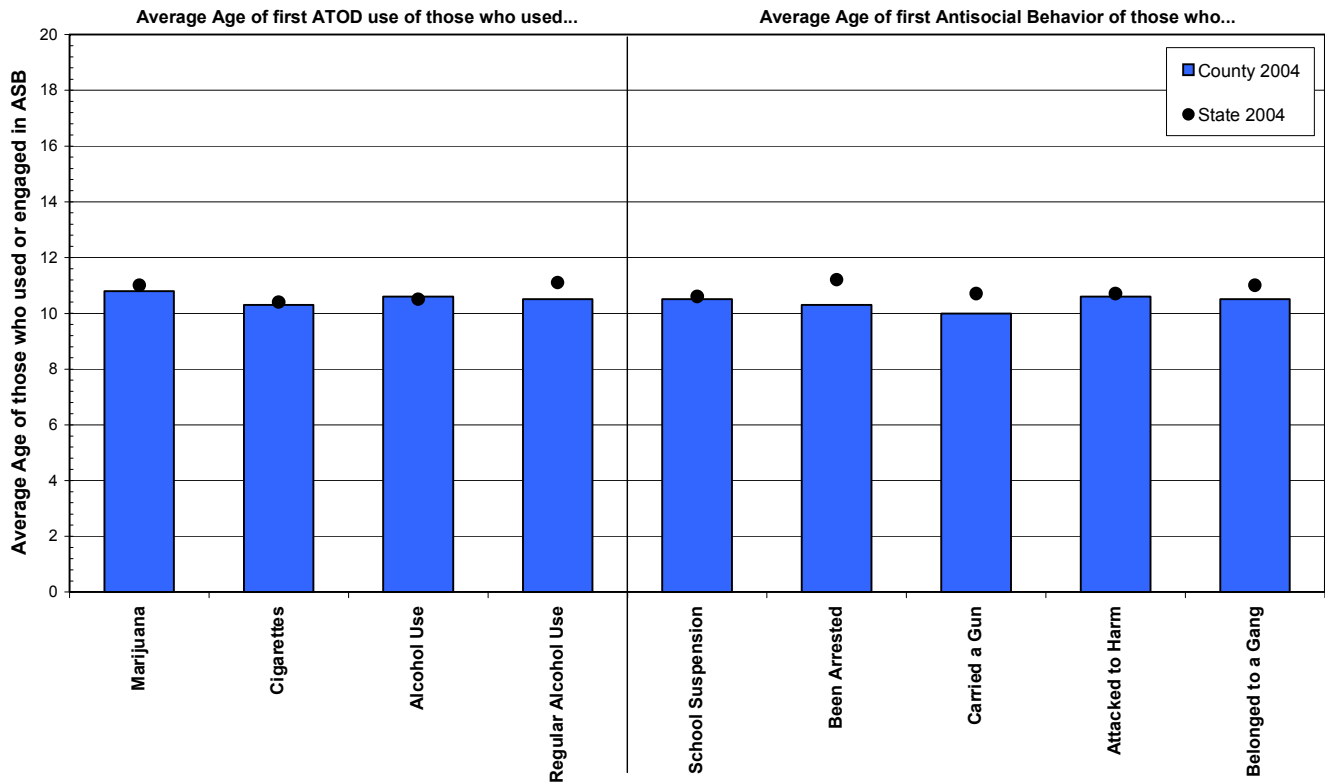
# **SCHOOL SAFETY PROFILE** **Independence County 2004 Student Survey, Grade 10**



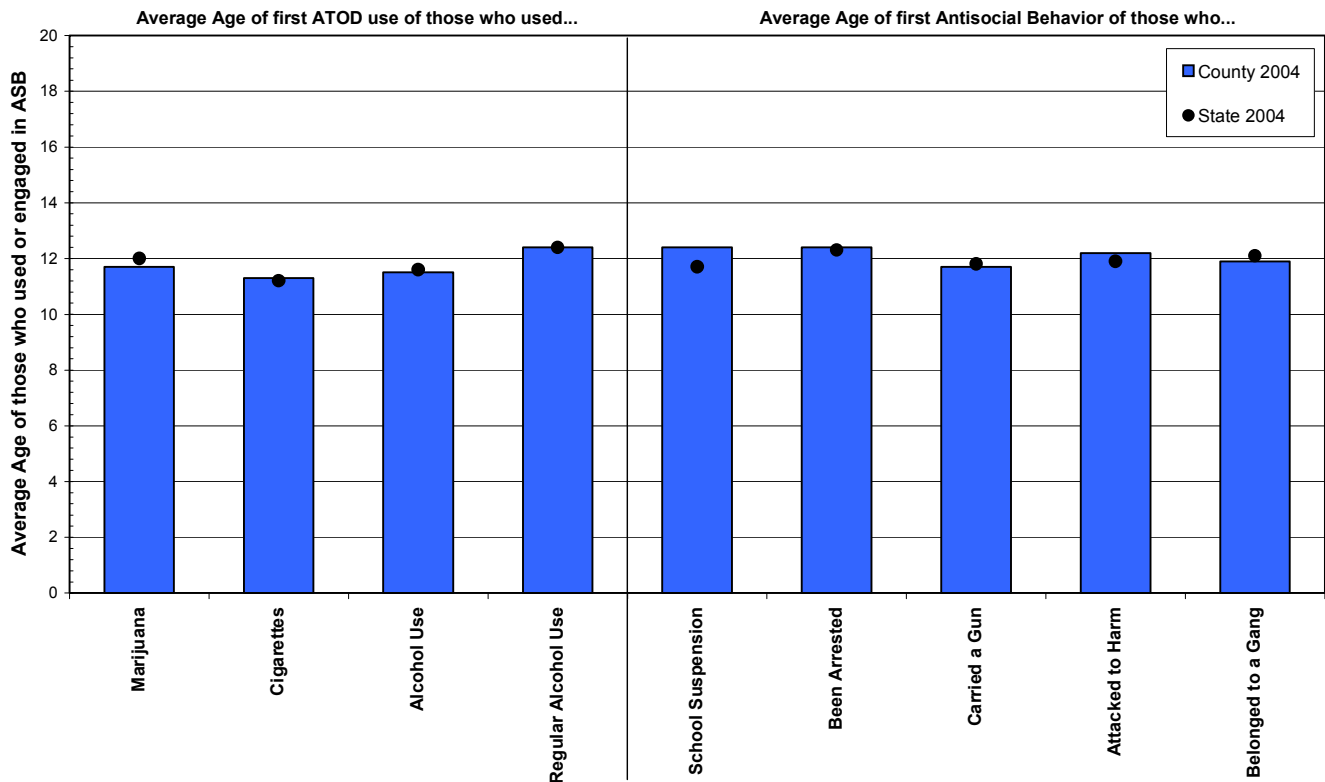
# **SCHOOL SAFETY PROFILE** **Independence County 2004 Student Survey, Grade 12**



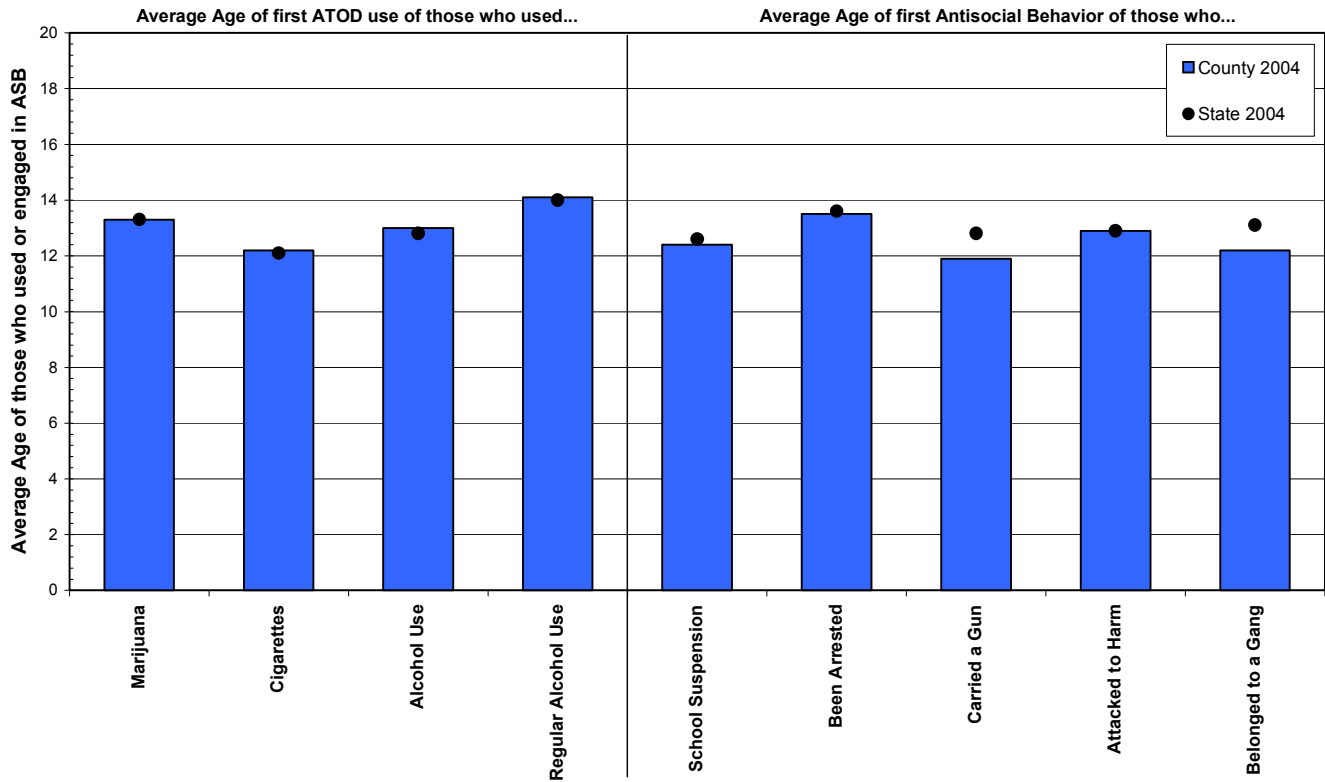
### NO CHILD LEFT BEHIND PROFILE Independence County 2004 Student Survey, Grade 6



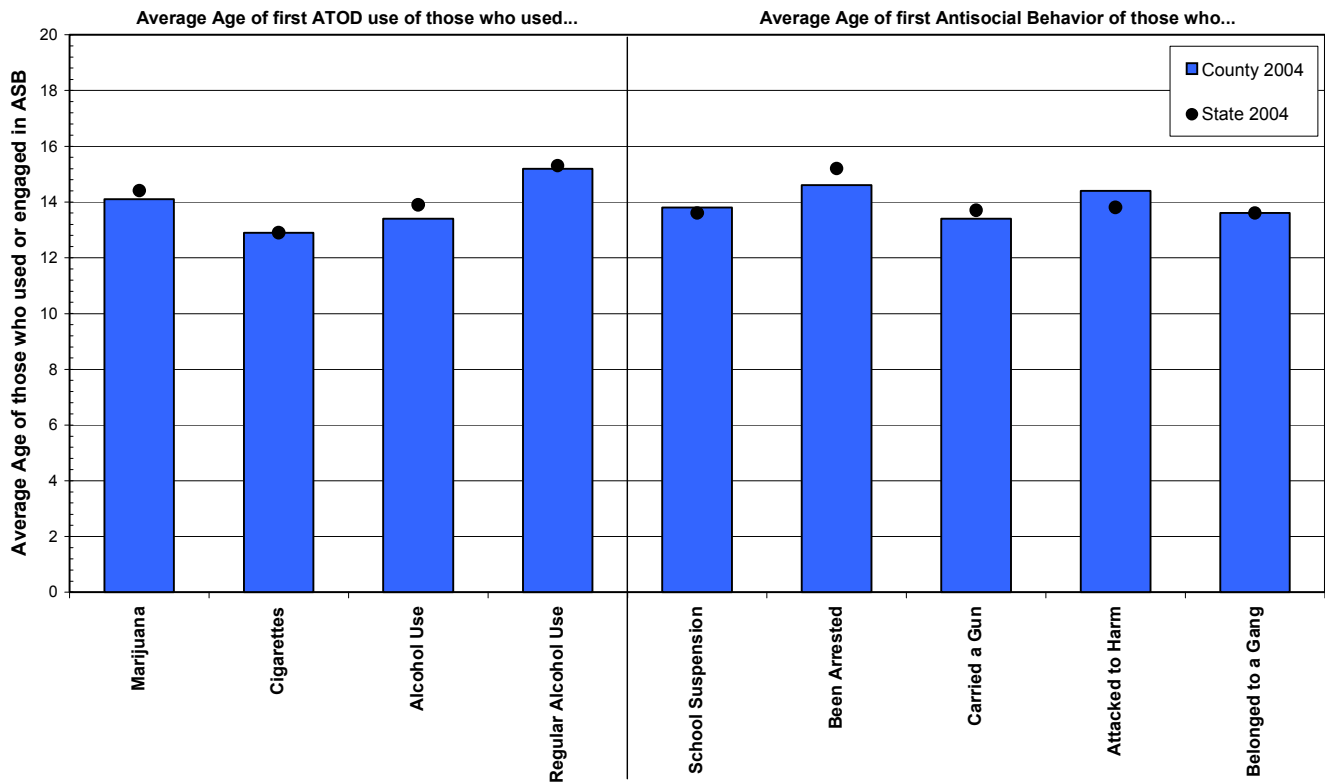
### NO CHILD LEFT BEHIND PROFILE Independence County 2004 Student Survey, Grade 8



### NO CHILD LEFT BEHIND PROFILE Independence County 2004 Student Survey, Grade 10



### NO CHILD LEFT BEHIND PROFILE Independence County 2004 Student Survey, Grade 12





**Table 2. Risk and Protective Factor Scale Definitions**

<b><i>Community Domain Risk Factors</i></b>	
<b><i>Community and Personal Transitions &amp; Mobility</i></b>	Neighborhoods with high rates of residential mobility have been shown to have higher rates of juvenile crime and drug selling, while children who experience frequent residential moves and stressful life transitions have been shown to have higher risk for school failure, delinquency, and drug use.
<b><i>Community Disorganization</i></b>	Research has shown that neighborhoods with high population density, lack of natural surveillance of public places, physical deterioration, and high rates of adult crime also have higher rates of juvenile crime and drug selling.
<b><i>Low Neighborhood Attachment</i></b>	A low level of bonding to the neighborhood is related to higher levels of juvenile crime and drug selling.
<b><i>Laws and Norms Favorable Toward Drug Use</i></b>	Research has shown that legal restrictions on alcohol and tobacco use, such as raising the legal drinking age, restricting smoking in public places, and increased taxation have been followed by decreases in consumption. Moreover, national surveys of high school seniors have shown that shifts in normative attitudes toward drug use have preceded changes in prevalence of use.
<b><i>Perceived Availability of Drugs and Handguns</i></b>	The availability of cigarettes, alcohol, marijuana, and other illegal drugs has been related to the use of these substances by adolescents. The availability of handguns is also related to a higher risk of crime and substance use by adolescents.
<b><i>Community Domain Protective Factors</i></b>	
<b><i>Opportunities for Positive Involvement</i></b>	When opportunities are available in a community for positive participation, children are less likely to engage in substance use and other problem behaviors.
<b><i>Rewards for Positive Involvement</i></b>	Rewards for positive participation in activities helps children bond to the community, thus lowering their risk for substance use.
<b><i>Family Domain Risk Factors</i></b>	
<b><i>Family History of Antisocial Behavior</i></b>	When children are raised in a family with a history of problem behaviors (e.g., violence or ATOD use), the children are more likely to engage in these behaviors.
<b><i>Family Conflict</i></b>	Children raised in families high in conflict, whether or not the child is directly involved in the conflict, appear at risk for both delinquency and drug use.
<b><i>Parental Attitudes Favorable Toward Antisocial Behavior &amp; Drugs</i></b>	In families where parents use illegal drugs, are heavy users of alcohol, or are tolerant of children's use, children are more likely to become drug abusers during adolescence. The risk is further increased if parents involve children in their own drug (or alcohol) using behavior, for example, asking the child to light the parent's cigarette or get the parent a beer from the refrigerator.
<b><i>Poor Family Management</i></b>	Parents' use of inconsistent and/or unusually harsh or severe punishment with their children places them at higher risk for substance use and other problem behaviors. Also, parents' failure to provide clear expectations and to monitor their children's behavior makes it more likely that they will engage in drug abuse whether or not there are family drug problems
<b><i>Family Domain Protective Factors</i></b>	
<b><i>Family Attachment</i></b>	Young people who feel that they are a valued part of their family are less likely to engage in substance use and other problem behaviors.
<b><i>Opportunities for Positive Involvement</i></b>	Young people who are exposed to more opportunities to participate meaningfully in the responsibilities and activities of the family are less likely to engage in drug use and other problem behaviors.
<b><i>Rewards for Positive Involvement</i></b>	When parents, siblings, and other family members praise, encourage, and attend to things done well by their child, children are less likely to engage in substance use and problem behaviors.
<b><i>School Domain Risk Factors</i></b>	
<b><i>Academic Failure</i></b>	Beginning in the late elementary grades (grades 4-6) academic failure increases the risk of both drug abuse and delinquency. It appears that the experience of failure itself, for whatever reasons, increases the risk of problem behaviors.
<b><i>Low Commitment to School</i></b>	Surveys of high school seniors have shown that the use of hallucinogens, cocaine, heroin, stimulants, and sedatives or non-medically prescribed tranquilizers is significantly lower among students who expect to attend college than among those who do not. Factors such as liking school, spending time on homework, and perceiving the coursework as relevant are also negatively related to drug use.

<b>Table 2. Risk and Protective Factor Scale Definitions (Continued)</b>	
<b><i>School Domain Protective Factors</i></b>	
<b><i>Opportunities for Positive Involvement</i></b>	When young people are given more opportunities to participate meaningfully in important activities at school, they are less likely to engage in drug use and other problem behaviors.
<b><i>Rewards for Positive Involvement</i></b>	When young people are recognized and rewarded for their contributions at school, they are less likely to be involved in substance use and other problem behaviors
<b><i>Peer-Individual Risk Factors</i></b>	
<b><i>Early Initiation of Antisocial Behavior and Drug Use</i></b>	Early onset of drug use predicts misuse of drugs. The earlier the onset of any drug use, the greater the involvement in other drug use and the greater frequency of use. Onset of drug use prior to the age of 15 is a consistent predictor of drug abuse, and a later age of onset of drug use has been shown to predict lower drug involvement and a greater probability of discontinuation of use.
<b><i>Attitudes Favorable Toward Antisocial Behavior and Drug Use</i></b>	During the elementary school years, most children express anti-drug, anti-crime, and pro-social attitudes and have difficulty imagining why people use drugs or engage in antisocial behaviors. However, in middle school, as more youth are exposed to others who use drugs and engage in antisocial behavior, their attitudes often shift toward greater acceptance of these behaviors. Youth who express positive attitudes toward drug use and antisocial behavior are more likely to engage in a variety of problem behaviors, including drug use.
<b><i>Friends' Use of Drugs</i></b>	Young people who associate with peers who engage in alcohol or substance abuse are much more likely to engage in the same behavior. Peer drug use has consistently been found to be among the strongest predictors of substance use among youth. Even when young people come from well-managed families and do not experience other risk factors, spending time with friends who use drugs greatly increases the risk of that problem developing.
<b><i>Interaction with Antisocial Peers</i></b>	Young people who associate with peers who engage in problem behaviors are at higher risk for engaging in antisocial behavior themselves.
<b><i>Perceived Risk of Drug Use</i></b>	Young people who do not perceive drug use to be risky are far more likely to engage in drug use.
<b><i>Rewards for Antisocial Behavior</i></b>	Young people who receive rewards for their antisocial behavior are at higher risk for engaging further in antisocial behavior and substance use.
<b><i>Rebelliousness</i></b>	Young people who do not feel part of society, are not bound by rules, don't believe in trying to be successful or responsible, or who take an active rebellious stance toward society, are at higher risk of abusing drugs. In addition, high tolerance for deviance, a strong need for independence and normlessness have all been linked with drug use.
<b><i>Sensation Seeking</i></b>	Young people who seek out opportunities for dangerous, risky behavior in general are at higher risk for participating in drug use and other problem behaviors.
<b><i>Intention to Use ATODs</i></b>	Many prevention programs focus on reducing the intention of participants to use ATODs later in life. Reduction of intention to use ATODs often follows successful prevention interventions.
<b><i>Depressive Symptoms</i></b>	Young people who are depressed are overrepresented in the criminal justice system and are more likely to use drugs. Survey research and other studies have shown a link between depression and other youth problem behaviors.
<b><i>Gang Involvement</i></b>	Youth who belong to gangs are more at risk for antisocial behavior and drug use.
<b><i>Peer-Individual Protective Factors</i></b>	
<b><i>Religiosity</i></b>	Young people who regularly attend religious services are less likely to engage in problem behaviors.
<b><i>Social Skills</i></b>	Young people who are socially competent and engage in positive interpersonal relations with their peers are less likely to use drugs and engage in other problem behaviors.
<b><i>Belief in the Moral Order</i></b>	Young people who have a belief in what is "right" or "wrong" are less likely to use drugs.
<b><i>Opportunities for Prosocial Involvement</i></b>	Participation in positive school and community activities helps provide protection for youth.
<b><i>Rewards for Prosocial Involvement</i></b>	Young people who are rewarded for working hard in school and volunteering in the community are less likely to engage in problem behavior.
<b><i>Interaction with Prosocial Peers</i></b>	Young people who associate with peers who engage in prosocial behavior are more protected from engaging in antisocial behavior and substance use.

**Table 3. Number of Students Who Completed the Survey**

	Grade 6		Grade 8		Grade 10		Grade 12	
	County 2004	State 2004	County 2004	State 2004	County 2004	State 2004	County 2004	State 2004
Year Survey Completed								
Number of Youth	183	10913	243	11740	267	9739	196	7607

**Table 4. Percentage of Students Who Used ATODs During Their Lifetime**

	Grade 6		Grade 8		Grade 10		Grade 12	
	County 2004	State 2004	County 2004	State 2004	County 2004	State 2004	County 2004	State 2004
<b>Drug Used</b>								
Alcohol	15.9	21.1	37.7	44.4	69.1	65.5	78.6	76.1
Cigarettes	13.9	17.2	35.4	34.8	45.7	49.1	64.4	58.7
Chewing Tobacco	8.0	8.5	15.9	16.1	23.8	23.3	34.9	26.6
Marijuana	2.2	2.4	10.8	12.1	23.9	28.0	47.8	39.4
Inhalants	9.8	11.6	13.0	17.4	17.3	17.0	17.9	14.6
Hallucinogens	0.0	0.4	0.0	1.0	2.1	2.7	2.2	4.0
Cocaine	0.9	0.6	1.0	1.7	2.5	3.9	7.3	6.6
Stimulants	1.7	1.1	2.0	2.9	5.3	6.6	12.7	9.0
Heroin	0.0	0.5	0.5	0.8	1.2	1.4	3.9	2.1
Sedatives	3.1	4.9	9.2	9.7	18.5	17.6	26.3	21.7
Ecstasy	1.6	0.3	1.0	1.6	1.7	3.3	5.9	5.0
Any Drug	20.0	21.4	26.9	33.9	40.0	46.2	59.4	52.2

**Table 5. Percentage of Students Who Used ATODs During the Past 30 Days**

	Grade 6		Grade 8		Grade 10		Grade 12	
	County 2004	State 2004	County 2004	State 2004	County 2004	State 2004	County 2004	State 2004
<b>Drug Used</b>								
Alcohol	5.0	5.1	16.5	17.0	34.6	34.3	48.4	44.6
Cigarettes	1.4	3.4	13.0	11.7	21.6	19.9	40.8	28.0
Chewing Tobacco	0.7	2.6	7.1	7.0	10.6	11.3	15.5	12.3
Marijuana	0.0	0.9	5.3	5.5	8.1	13.3	19.9	17.5
Inhalants	3.4	5.0	5.8	7.4	7.3	4.8	3.4	3.1
Hallucinogens	0.0	0.3	0.0	0.5	1.2	1.1	0.6	1.1
Cocaine	0.8	0.4	0.5	0.9	0.8	1.2	2.9	2.0
Stimulants	0.0	0.6	1.5	1.4	2.1	3.1	5.8	3.8
Heroin	0.0	0.3	0.0	0.3	0.4	0.5	0.0	0.4
Sedatives	0.8	2.0	4.0	5.0	7.5	8.6	13.1	10.8
Ecstasy	0.0	0.1	0.0	0.5	0.8	1.0	1.2	1.3
Any Drug	6.1	10.5	15.5	18.4	19.0	25.1	32.5	28.1

**Table 6. Percentage of Students With Heavy Use of Alcohol and Cigarettes**

	Grade 6		Grade 8		Grade 10		Grade 12	
	County 2004	State 2004	County 2004	State 2004	County 2004	State 2004	County 2004	State 2004
<b>Drug Used</b>								
Binge Drinking	4.8	4.0	10.7	11.4	25.3	22.0	31.9	28.9
Pack of Cigarettes/Day	0.0	0.2	0.9	0.5	0.4	1.0	4.7	1.7

**Table 7. Percentage of Students With Antisocial Behavior in the Past Year**

	Grade 6		Grade 8		Grade 10		Grade 12	
	County 2004	State 2004	County 2004	State 2004	County 2004	State 2004	County 2004	State 2004
<b>Behavior</b>								
Suspended from School	3.1	9.4	7.7	14.7	8.2	13.5	5.8	9.9
Drunk or High at School	1.3	2.7	7.7	9.0	15.4	17.4	22.1	19.7
Sold Illegal Drugs	0.7	0.4	0.9	2.3	4.4	6.7	6.3	8.8
Stolen a Vehicle	0.7	1.5	2.2	2.7	4.7	4.1	1.6	2.1
Been Arrested	2.0	2.3	4.5	5.4	3.6	7.7	3.8	7.3
Attacked to Harm	5.6	11.7	17.9	17.1	18.5	18.0	19.3	15.3
Carried a Handgun	1.2	4.0	5.3	6.4	6.4	6.1	5.3	5.6
Handgun to School	0.0	0.4	0.0	0.7	1.6	1.0	0.5	1.0

**Table 8. Percentage of Students Reporting Protection**

Protective Factor	Grade 6		Grade 8		Grade 10		Grade 12	
	County 2004	State 2004	County 2004	State 2004	County 2004	State 2004	County 2004	State 2004
<b>Community Domain</b>								
Opportunities for Prosocial Involvement	57.4	48.6	62.0	53.8	55.1	50.7	44.8	49.5
Rewards for Prosocial Involvement	60.5	54.4	46.4	45.4	56.7	51.9	44.6	52.3
<b>Family Domain</b>								
Family Attachment	62.0	57.2	59.5	53.9	53.8	46.4	54.2	57.7
Opportunity for Prosocial Involvement	62.6	62.0	68.8	65.1	61.2	57.2	52.7	55.7
Rewards for Prosocial Involvement	57.0	56.3	72.4	66.3	60.7	56.3	57.8	55.3
<b>School Domain</b>								
Opportunities for Prosocial Involvement	49.0	47.9	66.8	65.6	62.9	62.5	63.8	61.6
Rewards for Prosocial Involvement	61.5	61.4	59.7	58.4	67.2	65.6	54.8	50.3
<b>Peer-Individual Domain</b>								
Religiosity	69.7	67.2	71.8	69.0	68.3	67.3	89.9	88.1
Social Skills	81.6	71.5	66.5	67.7	64.0	57.7	64.2	66.8
Belief in the Moral Order	71.3	63.0	67.9	63.9	69.8	67.5	49.4	51.3
Interaction with Prosocial Peers	67.4	59.6	68.5	64.5	70.3	63.5	59.9	61.7
Prosocial Involvement	46.5	46.8	53.3	47.6	58.4	50.2	44.2	43.6
Rewards for Prosocial Involvement	66.7	65.4	74.5	72.1	66.0	66.1	52.6	54.4

**Table 9. Percentage of Students Reporting Risk**

Risk Factor	Grade 6		Grade 8		Grade 10		Grade 12	
	County 2004	State 2004	County 2004	State 2004	County 2004	State 2004	County 2004	State 2004
<b>Community Domain</b>								
Low Neighborhood Attachment	36.7	42.2	28.8	33.9	38.2	40.7	45.5	43.5
Community Disorganization	31.3	40.9	30.2	35.7	51.3	48.8	47.9	44.7
Transitions & Mobility	55.3	48.6	51.0	53.2	63.2	58.6	46.7	47.9
Laws & Norms Favor Drug Use	47.0	41.5	38.9	34.9	46.9	44.5	47.4	36.5
Perceived Availability of Drugs	28.2	25.9	30.8	30.3	42.6	45.1	57.3	51.6
Perceived Availability of Handguns	37.5	28.0	45.6	41.1	29.7	35.2	43.6	41.0
<b>Family Domain</b>								
Poor Family Management	29.1	34.1	31.4	36.8	30.8	37.1	41.1	38.8
Family Conflict	35.6	38.8	45.6	49.6	39.3	41.6	36.8	38.3
Family History of Antisocial Behavior	29.6	40.0	37.6	41.3	42.4	43.9	45.9	42.6
Parent Attitudes Favorable to ASB	33.7	32.2	42.9	43.5	50.8	46.9	57.9	45.7
Parent Attitudes Favor Drug Use	16.5	15.1	30.0	28.4	45.0	42.6	52.3	44.1
<b>School Domain</b>								
Academic Failure	48.6	48.3	47.4	49.8	43.6	49.2	39.1	43.2
Low Commitment to School	41.3	40.1	35.2	35.1	39.9	38.2	44.9	43.4
<b>Peer-Individual Domain</b>								
Rebelliousness	46.2	49.0	37.8	39.0	42.2	45.3	43.3	43.2
Early Initiation of ASB	15.8	23.4	28.4	34.3	31.4	38.9	34.4	38.5
Early Initiation of Drug Use	25.6	32.0	34.8	35.0	33.5	37.7	48.6	39.4
Attitudes Favorable to ASB	39.0	36.5	30.7	33.0	35.4	40.0	35.7	38.0
Attitudes Favorable to Drug Use	20.6	22.3	26.0	26.4	37.8	35.8	43.8	34.3
Perceived Risk of Drug Use	26.4	29.9	22.5	36.2	28.5	34.3	45.5	39.0
Interaction with Antisocial Peers	23.9	37.0	38.5	49.5	44.9	52.8	52.9	49.7
Friend's Use of Drugs	19.7	25.2	36.7	35.5	37.7	38.9	45.7	35.4
Sensation Seeking	47.2	54.0	53.2	51.9	47.8	48.5	58.1	51.4
Rewards for ASB	34.1	26.5	47.3	41.8	59.9	46.1	64.4	57.3
Depressive Symptoms	44.4	46.7	49.3	48.7	55.6	49.5	51.8	44.8
Intention to Use Drugs	24.2	34.0	30.4	28.6	43.1	40.0	39.8	29.8
Gang Involvement	27.4	24.2	16.1	21.0	18.6	25.2	18.9	21.7

**Table 10. Percentage of Students Reporting School Safety Issues**

Question	Response	Grade 6		Grade 8		Grade 10		Grade 12	
		County 2004	State 2004	County 2004	State 2004	County 2004	State 2004	County 2004	State 2004
I feel safe at my school. (q13)	NO!	4.8	5.6	3.8	7.7	2.8	7.9	4.8	6.0
	no	6.5	8.5	12.8	14.0	9.8	14.3	5.8	10.1
	yes	35.7	34.2	46.2	47.8	58.5	54.7	55.6	55.6
	YES!	53.0	51.7	37.2	30.6	28.9	23.1	33.9	28.3
How many times in the past year have you taken a handgun to school? (q30k)	Never	100.0	99.6	100.0	99.3	98.4	99.0	99.5	99.0
	1-2 times	0.0	0.2	0.0	0.4	0.4	0.3	0.5	0.3
	3-5 times	0.0	0.0	0.0	0.1	0.4	0.2	0.0	0.2
	6-9 times	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.0
	10-19 times	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.1
	20-29 times	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	30-39 times	0.0	0.0	0.0	0.0	0.4	0.1	0.0	0.0
	40 + times	0.0	0.1	0.0	0.1	0.4	0.3	0.0	0.3
How wrong do you think it is for someone your age to take a handgun to school? (q27a)	Very Wrong	95.1	93.8	87.3	87.7	92.3	88.7	93.0	92.5
	Wrong	3.0	4.6	9.2	9.2	6.5	8.3	4.3	4.9
	A Little Bit Wrong	1.2	0.9	3.5	2.2	0.4	1.8	1.1	1.7
	Not wrong at All	0.6	0.6	0.0	0.8	0.8	1.2	1.6	1.0
Have any of your brothers or sisters ever taken a handgun to school? (q99d)	No	93.9	94.6	91.8	94.0	92.7	94.0	86.9	93.2
	Yes	1.0	0.9	1.5	1.3	2.1	1.5	0.6	1.6
	I don't have any brothers or sisters	5.1	4.5	6.7	4.6	5.1	4.5	12.6	5.2

**Table 11. Average Age of first ATOD use and Antisocial Behavior**

	Grade 6		Grade 8		Grade 10		Grade 12		Total Averages	
	County 2004	State 2004	County 2004	State 2004	County 2004	State 2004	County 2004	State 2004	County 2004	State 2004
<b>Age of first ATOD use</b>										
Marijuana	10.8	11.0	11.7	12.0	13.3	13.3	14.1	14.4	13.4	13.4
Cigarettes	10.3	10.4	11.3	11.2	12.2	12.1	12.9	12.9	12.1	11.9
Alcohol Use	10.6	10.5	11.5	11.6	13.0	12.8	13.4	13.9	12.6	12.5
Regular Alcohol Use	10.5	11.1	12.4	12.4	14.1	14.0	15.2	15.3	14.3	14.1
<b>Age of first Antisocial Behavior</b>										
School Suspension	10.5	10.6	12.4	11.7	12.4	12.6	13.8	13.6	12.5	12.2
Been Arrested	10.3	11.2	12.4	12.3	13.5	13.6	14.6	15.2	13.4	13.5
Carried a Gun	10.0	10.7	11.7	11.8	11.9	12.8	13.4	13.7	12.1	12.3
Attacked to Harm	10.6	10.7	12.2	11.9	12.9	12.9	14.4	13.8	13.0	12.4
Belonged to a Gang	10.5	11.0	11.9	12.1	12.2	13.1	13.6	13.6	12.2	12.3

## CONTACTS FOR PREVENTION

### Prevention Resource Centers

#### **Region 1 PREVENTION RESOURCE CENTER**

Operated by *Decision Point*

##### **Springdale**

JTL Shop Building  
614 East Emma Street, Suite M428  
Springdale, AR 72764

Mr. Jim Smith, PRC Coordinator  
(479) 927-2655  
Fax: (479) 927-2752  
E-MAIL: [jsmith@jtlshop.jonesnet.org](mailto:jsmith@jtlshop.jonesnet.org)  
Counties: Benton, Carroll, Madison, Washington

#### **Region 2 PREVENTION RESOURCE CENTER**

Operated by *North Arkansas Drug  
Awareness and Prevention Council*

##### **Harrison**

310 South Pine Street  
Harrison, AR 72601

Ms. Andrea Parton, PRC Coordinator  
(870) 741-9131  
Fax: (870) 741-1523  
E-MAIL: [nadap@alltel.net](mailto:nadap@alltel.net)  
Counties: Boone, Baxter, Newton, Marion,  
Searcy

#### **Region 3 PREVENTION RESOURCE CENTER**

Operated by *Health Resources of Arkansas*

##### **Searcy**

3302 East Moore Avenue  
Searcy, AR 72143

Ms. Pat Huckleby, PRC Coordinator  
(501) 268-7419  
Fax: (501) 268-5301  
E-MAIL: [patprc@cyberback.com](mailto:patprc@cyberback.com)  
Counties: Fulton, Izard, Sharp, Stone, Jackson,  
Clebune, Van Buren, White, Woodruff,  
Independence

#### **Region 4 PREVENTION RESOURCE CENTER**

Operated by *Crowley's Ridge Development  
Council*

##### **Jonesboro**

P O Box 1497  
(520 West Monroe Street)  
Jonesboro, AR 72403

Ms. Dorothy Newsom, PRC Coordinator  
(870) 933-0033  
Fax: (870) 933-0048  
E-MAIL: [dnewsom@crdcnea.com](mailto:dnewsom@crdcnea.com)  
Counties: Randolph, Clay, Lawrence, Greene,  
Craighead, Mississippi, Poinsett

#### **Region 5 PREVENTION RESOURCE CENTER**

Operated by *Harbor House, Inc.*

##### **Fort Smith**

P O Box 4207 (615 North 19th Street)  
Fort Smith, AR 72914

Ms. Cindy Stokes, PRC Coordinator  
(479) 783-1916  
Fax: (479) 783-1914  
E-MAIL: [hhiprc@aol.com](mailto:hhiprc@aol.com)  
Counties: Crawford, Franklin, Logan, Scott,  
Sebastian, Polk

#### **Region 6 PREVENTION RESOURCE CENTER**

Operated by *Community Service, Inc.*

##### **Morrilton**

P O Box 679  
(100 South Cherokee Street)  
Morrilton, AR 72110

Mr. Jim Rhodes, PRC Coordinator  
(501) 354-4589  
Fax: (501) 354-5410  
E-MAIL: [jrhodes@communityserviceinc.com](mailto:jrhodes@communityserviceinc.com)  
Counties: Johnson, Pope, Conway, Yell, Perry,  
Faulkner



**Region 7 PREVENTION RESOURCE CENTER**  
***Operated by Crowley's Ridge Development Council***

Brinkley  
P. O. Box 344  
116 N. Main  
Brinkley, AR 72021

Ms. Sylvia Halliburton-Jeffers, PRC Coordinator  
(870) 734-1554  
Fax: (870) 734-1554  
E-MAIL: [Halliburtonsyl@hotmail.com](mailto:Halliburtonsyl@hotmail.com)  
Counties: Cross, Crittenden, St. Francis,  
Phillips, Lee, Monroe

**Region 8 PREVENTION RESOURCE CENTER**  
***Operated by Family Service Agency***

**Hot Springs**  
1401 Malvern Avenue, Suite 100  
Hot Springs, AR 71901

Ms. Michelle Moore, PRC Coordinator  
(501) 318-2648  
Fax: (501) 624-5636  
E-MAIL: [mmoore@fsainc.org](mailto:mmoore@fsainc.org)  
Counties: Clark, Garland, Hot Spring,  
Montgomery, Pike

**Region 9 PREVENTION RESOURCE CENTER**  
***Operated by Family Service Agency***

**North Little Rock**  
628 West Broadway, Suite 300  
North Little Rock, AR 72114

Mr. Hayse Miller, PRC Coordinator  
(501) 372-4242 Ext. 328 & 325  
Fax: (501) 372-6565  
E-MAIL: [hmillers@fsainc.org](mailto:hmillers@fsainc.org)  
Counties: Pulaski, Saline, Lonoke, Prairie

**Region 10 PREVENTION RESOURCE CENTER**  
***Operated by Southwest Arkansas Counseling & Mental Health Center, Inc.***

**Texarkana**  
P O Box 1987 (2904 Arkansas Blvd)  
Texarkana, AR 71854

Ms. Trena Goings, PRC Coordinator  
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Counties: Howard, Sevier, Hempstead, Little  
River, Lafayette, Miller

**Region 11 PREVENTION RESOURCE CENTER**  
***Operated by South Arkansas Regional Health Center***

**El Dorado**  
710 West Grove  
El Dorado, AR 71730

Ms. Susan Rumph, PRC Coordinator  
(870) 864-2497  
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E-MAIL: [srumph@sarhc.org](mailto:srumph@sarhc.org)  
Counties: Dallas, Calhoun, Union, Columbia,  
Ouachita, Nevada

**Region 12 PREVENTION RESOURCE CENTER**  
***Operated by Community Resource Agency***

**Pine Bluff**  
P.O. Box 2740  
4218 W. 28<sup>th</sup> Street  
Pine Bluff, AR 71613

Ms. Sharron Mims, PRC Coordinator  
(870) 879-4646  
Fax: (870) 879-4250  
E-MAIL: [smims@commresource.org](mailto:smims@commresource.org)  
Counties: Grant, Jefferson, Lincoln, Arkansas,  
Cleveland

**Region 13 PREVENTION RESOURCE CENTER**  
***Operated by Phoenix Youth & Family Services***

**Crossett**  
310 N. Alabama Street  
P O Box 654  
Crossett, AR 71635

Ms. Christie Newton, PRC Coordinator  
(870) 364-1676  
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Counties: Desha, Drew, Bradley, Ashley &  
Chicot



## **STATE AND NATIONAL CONTACTS:**

**Alcohol and Drug Abuse Prevention  
Division of Behavioral Health Services  
Arkansas Department of Human Services**  
4313 West Markham – 3<sup>rd</sup> Floor Administration  
Little Rock, AR 72205  
Telephone: (501) 686-9866  
FAX: (501) 686-9035  
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**Arkansas Department of Education  
Office of Comprehensive School Health**  
2020 West 3<sup>rd</sup> Street, Suite 300  
Little Rock, AR 72205  
Telephone: (501) 683-3602  
FAX: (501) 683-3610  
The above information will connect you with our  
Safe & Drug-Free Schools Office.  
Website: <http://www.arkedu.state.ar.us/>

**Safe and Drug Free Schools and  
Communities**  
U.S. Department of Education  
[www.ed.gov/offices/OESE/SDFS](http://www.ed.gov/offices/OESE/SDFS)

**Southwest Center for the Application of  
Prevention Technology**  
[www.swcapt.org](http://www.swcapt.org)

**Southwest Prevention Center**  
[www.swpc.ou.edu](http://www.swpc.ou.edu)

**Substance Abuse and Mental Health  
Services Administration (SAMSHA)**  
[www.samhsa.gov](http://www.samhsa.gov)