

Bullying, Suicidal Behaviors, Violence, and Safety-Risk Behaviors Among Middle School Students in West Virginia

How large is the problem?

The 2013 West Virginia Youth Risk Behavior Survey indicated that among middle school students, bullying, suicidal behaviors, violence, and safety-risk behaviors were experienced at the following rates:

Bullying

- 52% were bullied on school property in the past 12 months.
- 27% were bullied using electronic media.

Suicidal behaviors

- 20% seriously considered attempting suicide.
- 14% made a plan about how they would attempt suicide.
- 7% actually attempted suicide.

Violence

- 41% carried a weapon such as a gun, knife, or club in the past 30 days.
- 51% were in a physical fight in the past 12 months.
- 5% were in a physical fight in which they were hurt and had to be treated by a doctor or nurse.

Safety-risk behaviors

- 71% never wore a helmet when they rode a bicycle in the past 12 months.
- 10% rarely or never wore a seat belt when riding in a car.
- 23% rode in a car in the past 30 days that was driven by someone that had been drinking alcohol.

What is being done to address the problem?

Solutions focus on improving health education, increasing family and community involvement, and creating healthier school environments. The 2014 West Virginia School Health Profiles indicates that middle school participation in anti-bullying, and suicide-, violence-, and injury-prevention activities is at the following levels:

Health education

- 80% required students to take 2 or more health education courses.
- 97% require a course designed to increase student's knowledge on injury prevention, safety, and violence prevention, including bullying, fighting, and dating violence prevention.
- 82% require a course that aims to increase student's knowledge on suicide prevention.

Family and community involvement

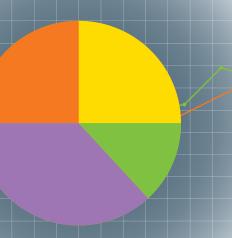
- 74% provide parents and families with health information designed to increase knowledge on prevention of student bullying and sexual harassment including electronic media.
- 35% participate in a program in which family or community members serve as role models to students or mentor students, such as the Big Brothers Big Sisters program.

School environment

- 54% have a club that gives students opportunities to learn about people different from them, such as students with disabilities, homeless youth, or people from different cultures.
- 95% have staff who received professional development on preventing, identifying, and responding to student bullying and sexual harassment that takes place in person or via electronic media.
- 98% have a designated staff member to whom students can confidentially report student bullying and sexual harassment, including by use of electronic media.
- 96% use electronic, paper, or oral communication to publicize and disseminate policies, rules, or regulations on bullying and sexual harassment, including electronic media.

For more information, contact Chad Morrison, Office of Research (chad.morrison@k12.wv.us) at 304-558-2546.





Dietary and Physical Activity Behaviors Among Middle School Students in West Virginia

How large is the problem?

The 2013 West Virginia Youth Risk Behavior Survey indicated that among middle school students, dietary and physical activity behaviors were experienced at the following rates:

Obesity

- 27% described themselves as slightly or very overweight.
- 51% were trying to lose weight.

Unhealthy dietary behaviors

- 11% skipped breakfast every day during the 7 days before the survey.
- 20% have gone without eating for 24 hours or more to lose weight or to keep from gaining weight.
- 5% have taken diet pills, powders, or liquids without a doctor's advice to lose weight.
- 6% have vomited or taken laxatives to lose weight.

Physical inactivity

- 9% did not participate in at least 60 minutes of physical activity on at least 1 day during the past week.
- 61% watched TV for at least 2 hours on an average school day.
- 60% played video or computer games or used a computer for at least 2 hours on an average school day.

What is being done to address the problem?

Solutions focus on improving nutrition education, increasing healthy food options, and creating healthier school environments. The 2014 West Virginia School Health Profiles indicate that middle school participation in improving dietary and physical activity practices is at the following levels:

Nutrition education

- 80% required students to take 2 or more health education courses.
- 96% taught in a required course the benefits of healthy eating, drinking plenty of water, eating breakfast every day, and balancing food intake and physical activity.

Healthy food options

- 15% offer 100% fruit or vegetable juice from vending machines or school stores.
- 27% conducted taste tests to determine food preferences for nutritious items.
- 58% provided information to students and families on the nutritional content of available foods.
- 77% placed fruits and vegetables near the cafeteria cashier, where they are easy to access.
- 83% prohibit advertisements for candy, fast food restaurants, or soft drinks in the school building.

School environment

- 68% have used the School Health Index to assess school policies and activities related to nutrition.
- 72% provide opportunities for students to participate in physical activity breaks in the classroom outside of physical education.
- 73% prohibit staff from excluding students from physical education or physical activity to punish them for bad behavior or failure to complete class work in another class.
- 87% permitted students to have a drinking water bottle with them in either all locations or certain locations during the school day.

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How large is the problem?

The 2013 West Virginia Youth Risk Behavior Survey indicated that among middle school students, tobacco, alcohol, and drug use were experienced at the following rates:

Tobacco use

- 25% have tried smoking cigarettes, with 1% smoking every day in the past 30 days.
- 13% tried smoking a whole cigarette before the age of 13.
- 5% smoked daily, meaning at least one cigarette every day for 30 days.
- 7% used chewing tobacco, snuff, or dip in the past 30 days. Most of these were males.

Alcohol use

- 30% had at least one drink of alcohol during their life.
- 22% had their first drink of alcohol other than a few sips before age 13.

Marijuana use

- 12% have used marijuana during their life.
- 8% tried marijuana before age 13.

Other drug use

- 3% used a form of cocaine during their life.
- 10% sniffed glue, breathed the contents of aerosol spray cans, or inhaled paints or sprays to get high during their life.
- 5% have taken a prescription drug without a doctor's prescription during their life.

What is being done to address the problem?

Solutions focus on improving tobacco, alcohol, and drug education, increasing tobacco cessation classes, and creating healthier school environments. The 2014 West Virginia School Health Profiles indicates that middle school participation in tobacco, alcohol and drug use prevention activities is at the following levels:

Tobacco, alcohol, and drug education

- 80% required students to take 2 or more health education courses.
- 99% required a course designed to increase student's knowledge about tobacco, alcohol, or drug use prevention.
- 68% taught all 18 tobacco-use prevention topics in a required class.

Tobacco cessation

- 68% provided tobacco cessation services to students and 43% provided services to faculty and staff.
- 50% had arrangements with organizations or health care professionals not on school property to provide tobacco cessation services for students.

School environment

- 100% have adopted a policy prohibiting tobacco use.
- 96% have a tobacco-use prevention policy that specifically prohibits the use of cigarettes, smokeless tobacco, cigars, and pipes.
- 64% have used the School Health Index to assess school policies and activities related to tobacco-use prevention.
- 49% provided parents and families with health information designed to increase their knowledge about tobacco-use prevention.

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