

2003 Boulder County Youth Risk Behavior Survey

What Have We Learned?





About the Survey

- YRBS developed by Centers for Disease Control and Prevention (CDC)
- Reliable instrument used throughout US
- YRBS administered in BVSD in 2001
- 2003 YRBS first county-wide data on risk behaviors of our youth
- BCPH will replicate every 2 years



Boulder Valley School District

- Random sample of classes
- 1,050 BVSD students participated
- 77% response rate
- Results are generalizable to population



Preliminary Insights

- There are many positive social norms we want to reinforce and promote.
- Many risk behaviors can be prevented, reduced or postponed.
- Some risk behaviors require immediate intervention.
- There are obvious health disparities between populations that are unacceptable.

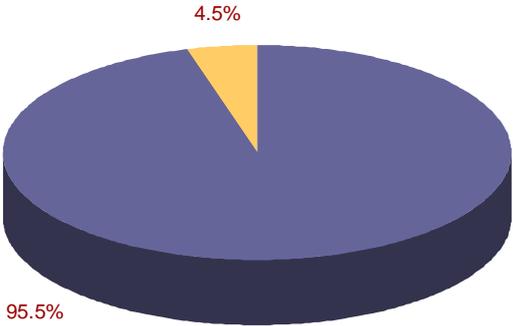


Positive Social Norms



Rarely or never wear seat belts

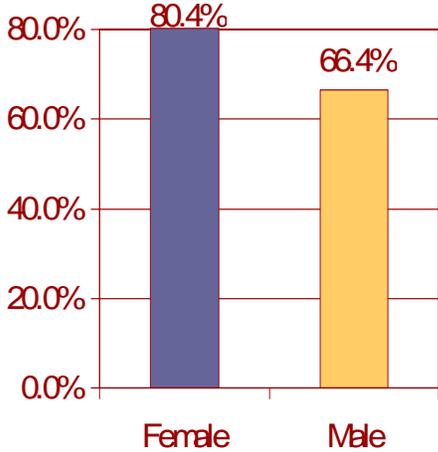
BVSD	4.5%
Colorado	9.2%
U.S.	18.2%





Watched TV 2 hours or less

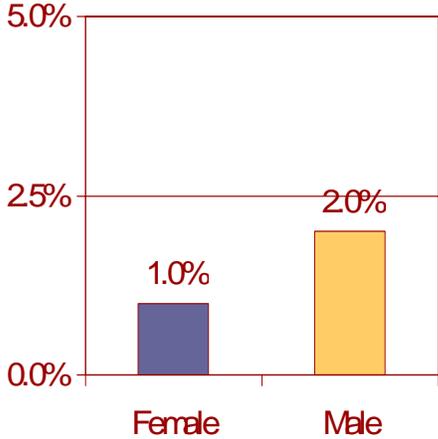
BVSD 73.3%
Colorado 67.3%
U.S. 61.8%





Felt unsafe or afraid at school

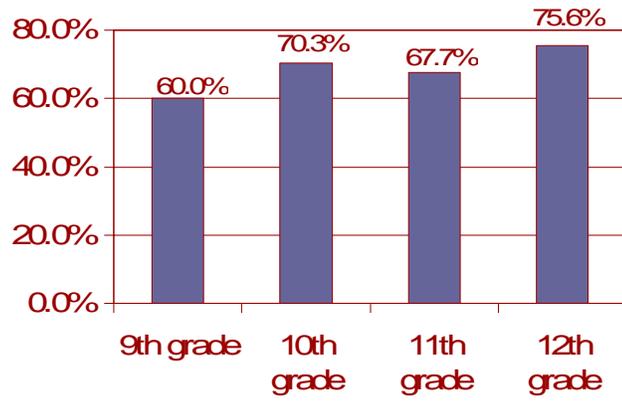
BVSD 1.5%





Can talk to adult at school

BVSD 68.0%



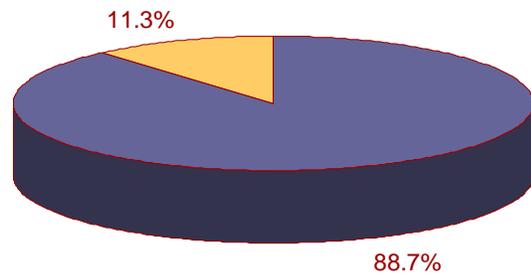


Opportunities for Preventing and Postponing Behaviors



Smoked a whole cigarette before age 13

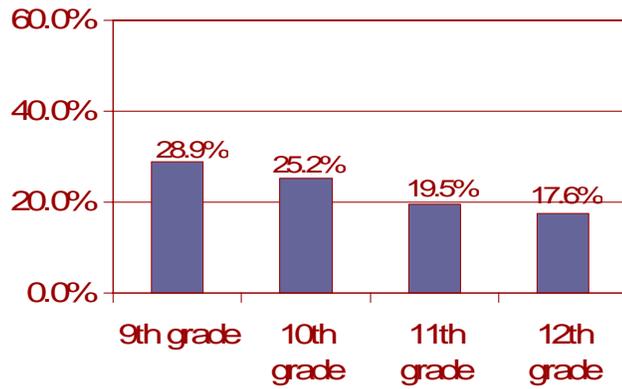
BVSD	11.3%
Colorado	25.8%
U.S.	22.1%





Drank alcohol before age 13

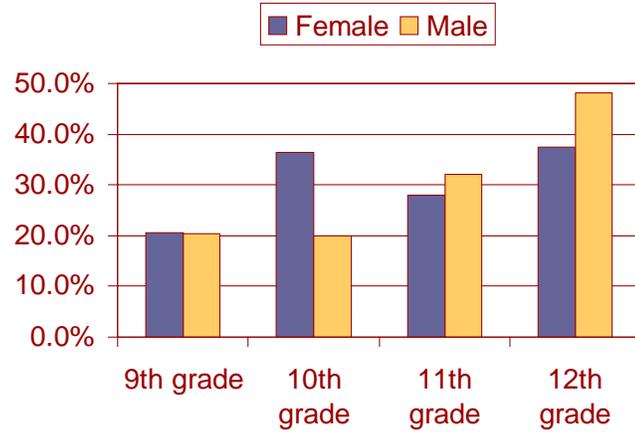
BVSD	23.2%
Colorado	29.2%
U.S.	27.8%





Binge Drinking

BVSD **29.7%**
Colorado **29.1%**
U.S. **28.3%**

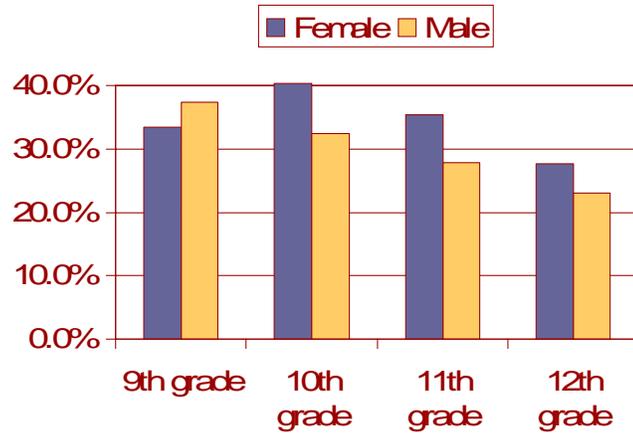




Harassed

BVSD

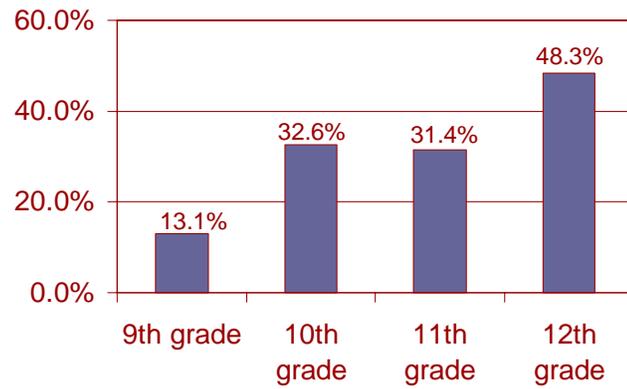
32.5%





Ever had sexual intercourse

BVSD	30.3%
Colorado	39.1%
U.S.	46.7%



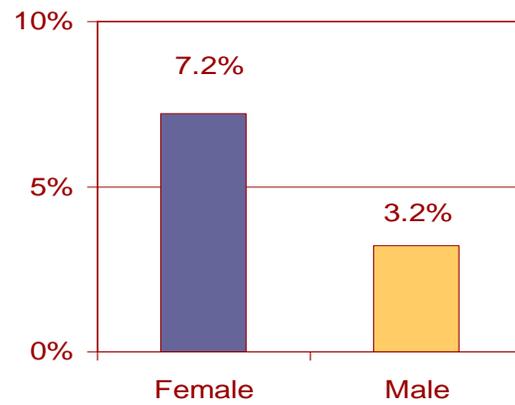


Behaviors Requiring Immediate Intervention



Ever been forced to have sexual intercourse

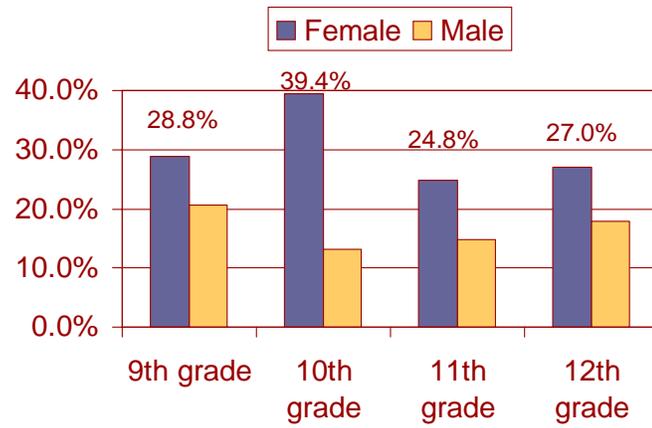
BVSD 5.2%





Felt sad or hopeless

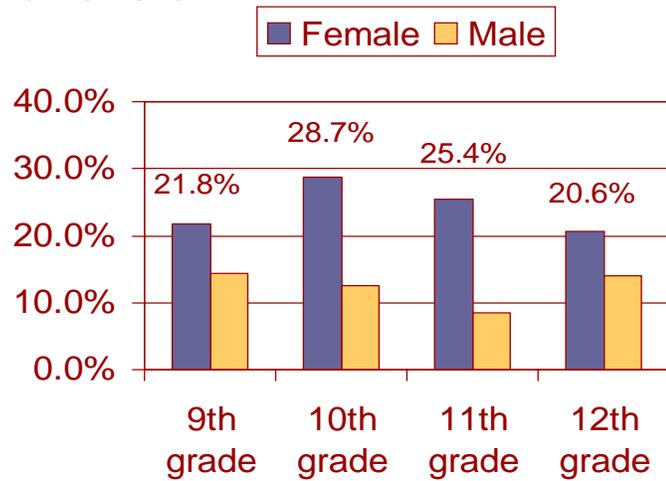
BVSD 23.3%
Colorado 30.8%
U.S. 28.6%





Seriously considered attempting suicide

BVSD 18.2%
Colorado 18.6%
U.S. 16.9%





Challenges to the community

- Disparities by race/ethnicity
- Disparities by sexual orientation

Disparities exist not because of innate characteristics but because of how others, particularly the majority population, behave toward marginalized populations.



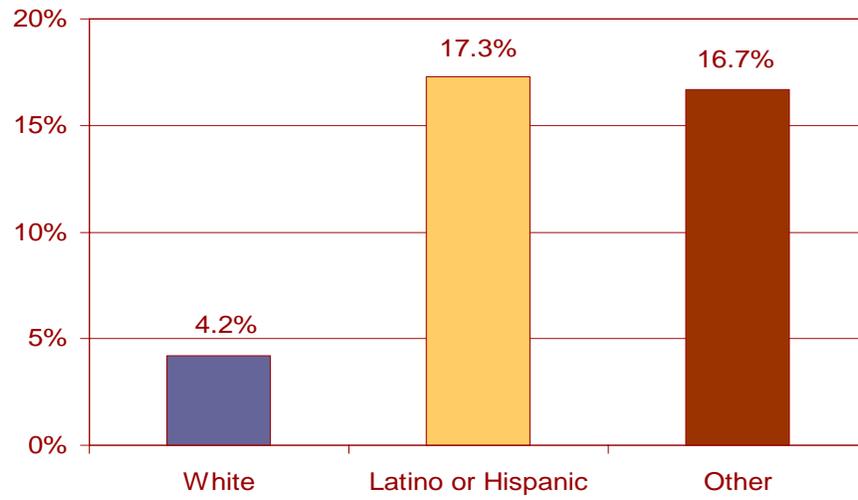
By Race/Ethnicity

- ✓ **76.1% White**
- ✓ **15.6% Hispanic or Latino**
- ✓ **8.3% Other race/ethnicity**



By Race/Ethnicity

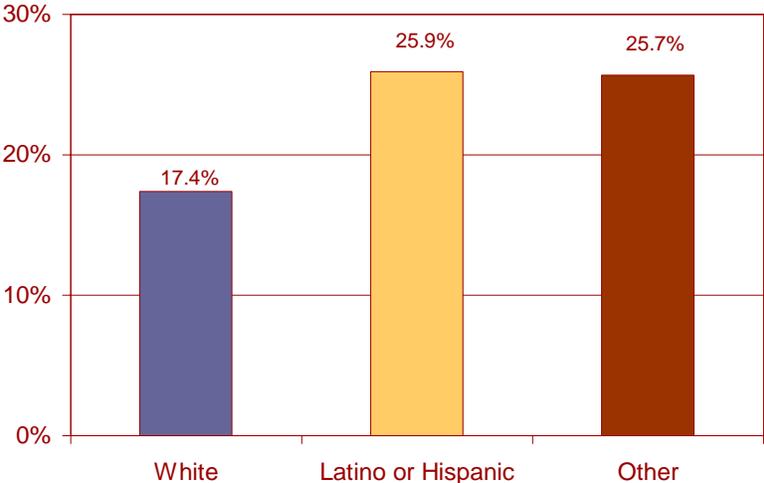
Harassed because of race or ethnic origin





By Race/Ethnicity

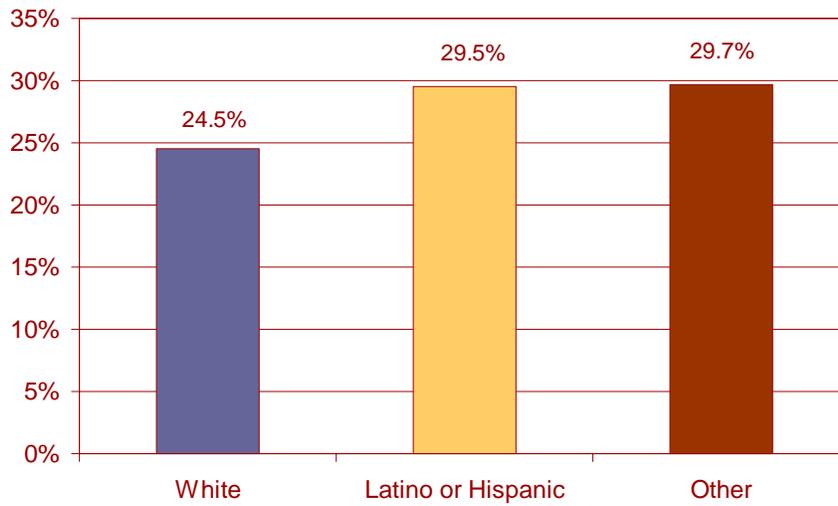
Received unwanted sexual comments or attention





By Race/Ethnicity

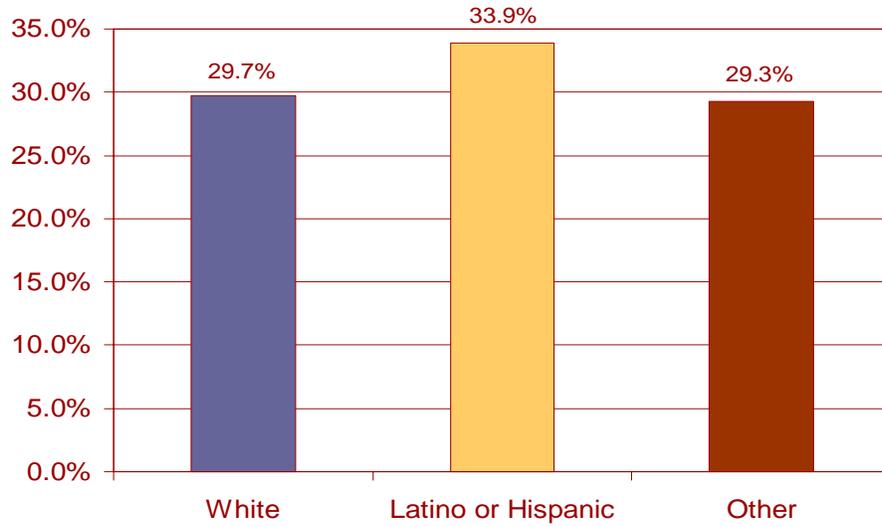
Felt sad or hopeless





By Race/Ethnicity

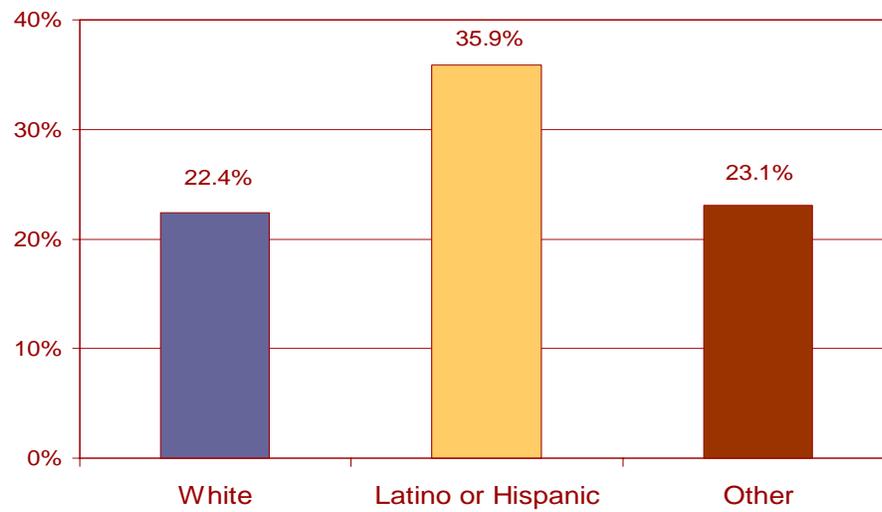
Current tobacco use





By Race/Ethnicity

Rode with a driver who'd been drinking



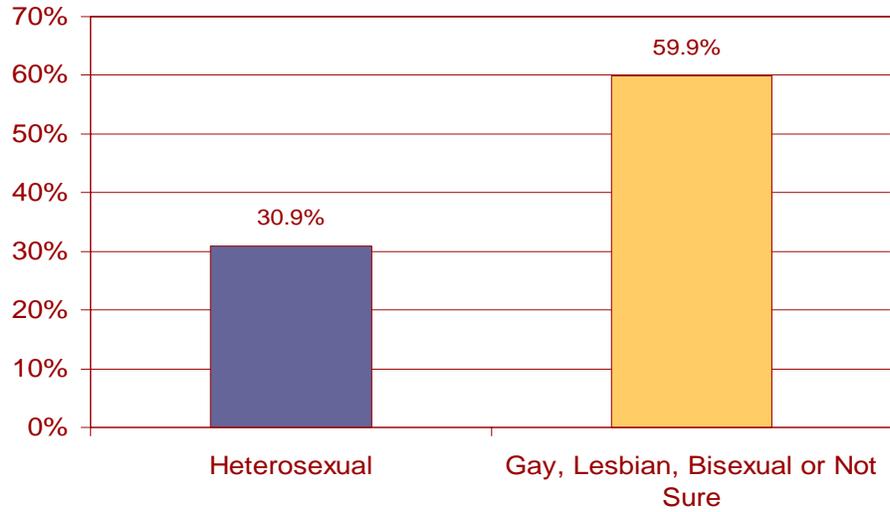


By Sexual Orientation

- ✓ **92.5% Heterosexual (straight)**
- ✓ **5.6% Gay or Lesbian, Bisexual, & Not Sure**
- ✓ **1.9% None of the Above (not included in this analysis)**



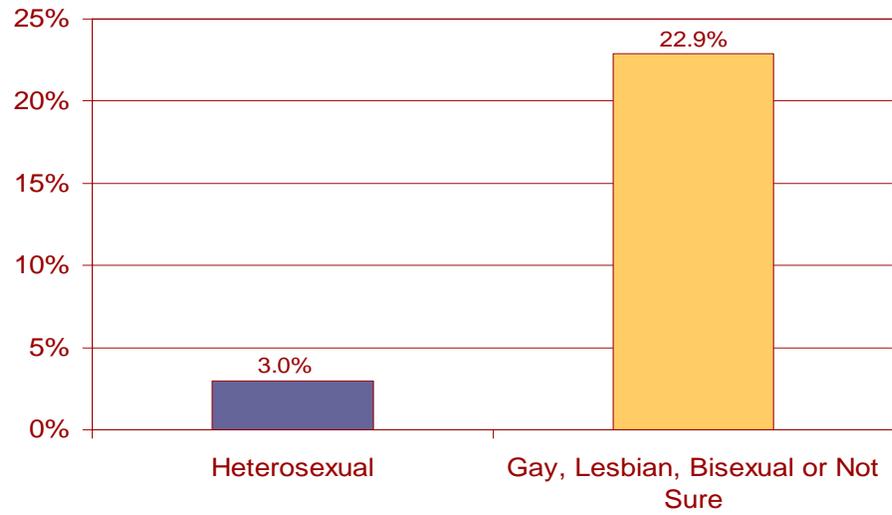
By Sexual Orientation Harassed





By Sexual Orientation

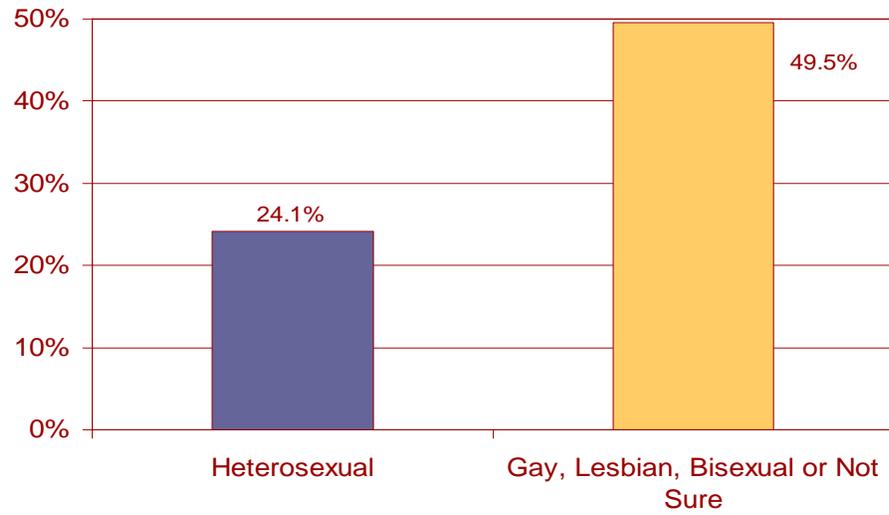
Felt too unsafe to go to school





By Sexual Orientation

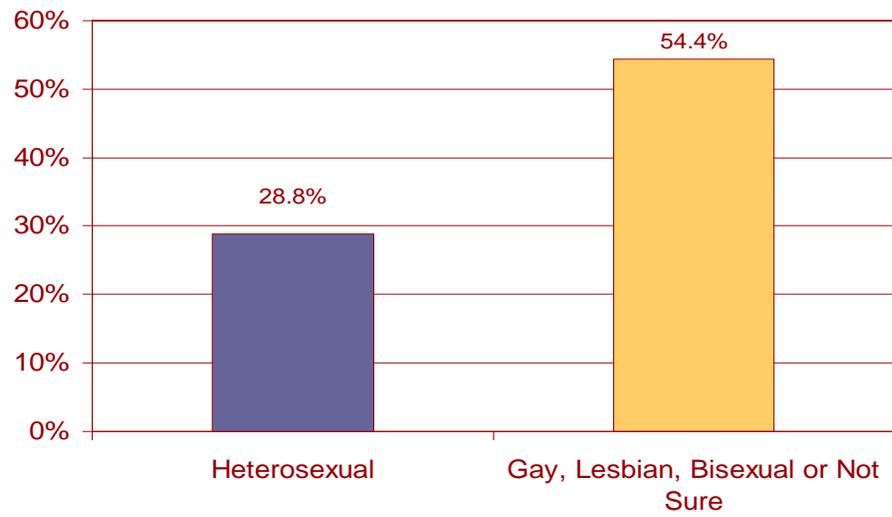
Felt sad or hopeless





By Sexual Orientation

Current tobacco use





By Sexual Orientation

Binge Drinking





What have we learned?

- **We can do better**
- **We need community solutions**
- **We must be strategic**
- **We must engage all sectors**



Our Goal

To mobilize our communities so that risk behaviors among our youth are reduced to their lowest attainable levels



An Aspiration for Boulder City Council

Provide leadership for a strategic planning process that engages youth, parents, educators, faith communities, and business leaders in creating a comprehensive youth development plan...



Focused on:

- Reinforcing and promoting positive social norms
- Preventing, reducing, or postponing risk behaviors when possible
- Providing immediate intervention when necessary
- Achieving health equity by addressing unacceptable health disparities between populations