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ABSTRACT

The survey discussed in this report was sent to a national probability sample of 700 public school districts seeking information on their substance abuse prevention activities. Resulting data, listed in tables, provide information on: (1) percent of districts with a written substance abuse policy; (2) actions taken or considered in response to substance abuse infractions; (3) number and percent of districts requiring substance abuse education at each instructional level; (4) percent of districts offering substance abuse education in different areas of the curriculum, by instructional level; (5) percent of districts offering activities within substance abuse programs; (6) percent of districts rating various activities within their substance abuse programs as the three most effective; (7) total and mean number of staff per 10,000 students with full or part time responsibilities concerning substance abuse education; (8) percent of districts receiving technical assistance regarding substance abuse from various sources; (9) percent of districts receiving technical assistance regarding substance abuse and desiring more assistance; (10) percent of districts indicating whether student substance abuse has increased or decreased over the past 2 years; and (11) selected standard errors by district characteristics. A copy of the survey questionnaire is appended. (JD)

BULLETIN OERI

U.S. Department of Education • Office of Educational Research and Improvement

Center for Education Statistics

Contact: Helen Ashwick
(202) 357-6761

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District Efforts in Substance Abuse Education

Most local school districts take an active role in substance abuse education.[1] Roughly three-fourths have a written policy on substance abuse, and this appears related to both districts' willingness to take action in response to substance abuse infractions and districts' requirements concerning substance abuse education. Three-fifths of all districts require substance abuse education for at least some instructional levels. Districts perform a wide range of activities directed towards lessening student substance abuse. Of these, the three that district officials consider most effective are: improving student self-esteem, teaching the causes and effects of substance abuse, and developing student skills to resist peer pressure. One action seldom taken by districts, however, is drug testing--only 4 percent have drug testing programs.

Almost half (47 percent) of district officials believe drug abuse in their districts has decreased in the last 2 years, compared with 11 percent who perceive an increase and 42 percent who perceive no change. For alcohol abuse, 16 percent perceive a decrease, 29 percent perceive an increase, and 56 percent perceive no change.

These are some of the findings of a spring 1987 survey performed under contract with Westat, Inc., for the Center for Education Statistics (CES), U.S. Department of Education, through its Fast Response Survey System (FRSS).[2] The survey was requested by the Department's Planning and Evaluation Service within the Office of Planning, Budget and Evaluation (OPBE). It is one component of an OPBE assessment of current State and local substance abuse prevention activities prepared for Congress. A separate Office of Educational

[1] Substance abuse refers to alcohol abuse, drug abuse, or both. The definition of "abuse" was not stated in the questionnaire, and may show some variation among respondents.

[2] CES's Fast Response Survey System is a special service that, upon request, quickly obtains nationally representative, policy-relevant data from small surveys to meet the needs of U.S. Department of Education policy officials.

CS 88-433

Research and Improvement (OERI) report, "State Efforts in Substance Abuse Education," discusses a corresponding survey of the 50 States and Washington, D.C.

District Policies

An estimated 73 percent of school districts have a written policy concerning substance abuse (table 1). An additional 17 percent are either planning or considering a written policy, leaving only 10 percent with no declared intention to establish a written policy. Written policies are more common in large districts with 10,000 or more students enrolled (88 percent) than in small districts with less than 2,500 students (68 percent), and in urban districts (87 percent) than in rural districts (68 percent).[3] Still, a majority of small districts and rural districts have a written policy.

Districts also were asked which of seven actions they might take in handling student substance abuse infractions. Essentially, they are willing to take the full range of potential actions; six of the seven actions are listed by at least 75 percent of the districts (table 2). The actions most often listed are notification of parents (99 percent), suspension (95 percent), counseling (95 percent), and notification of police (92 percent). In addition, 83 percent of districts indicate that they might refer students for clinical assessment, 75 percent might expel students, and 49 percent might send students to alternative schools.

A district's willingness to take action appears related to the existence of a written substance abuse policy. Figure 1 displays the percentages of districts that might take each action depending on whether a written policy already exists, is being planned or considered, or is neither planned nor considered. There is a consistent pattern that the percentage that might take an action is higher among districts that have a policy than among those that are neither planning nor considering a policy, while the percentage that might take action among districts planning or considering a written policy is always between these two figures.[4]

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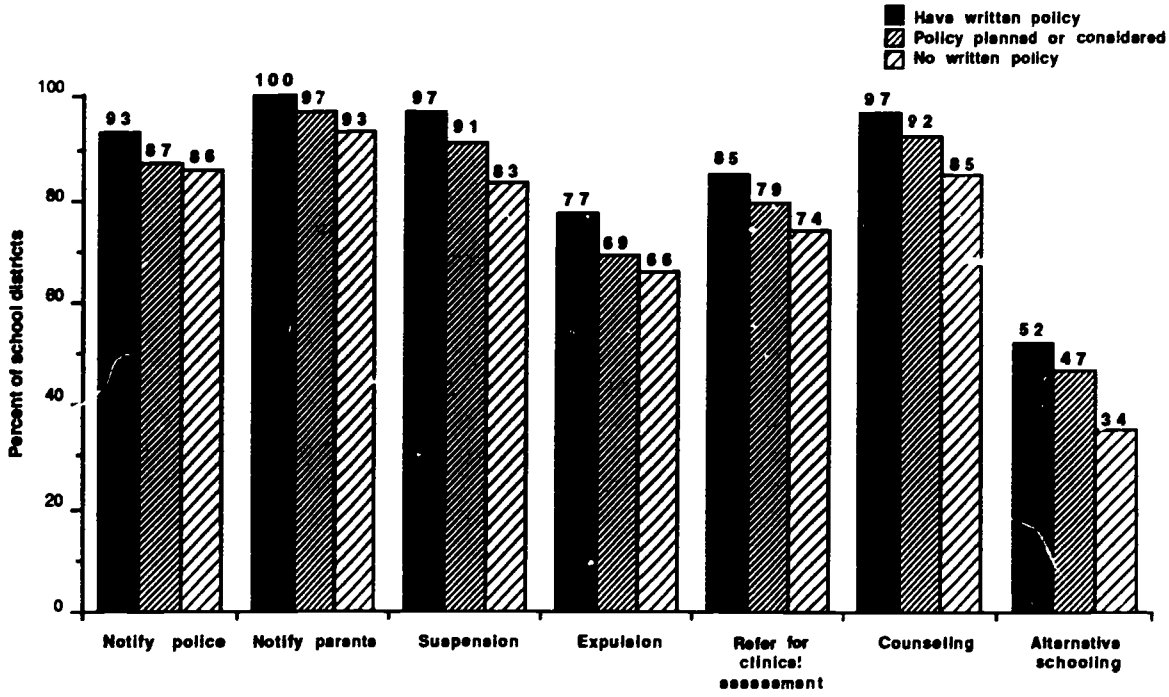
[3] Urban districts tend also to be large, so it is difficult to separate the effects of metropolitan status as compared with size. There are good reasons for both factors to be important independently, since urban districts may face a wider availability of drugs for their students, and large districts would typically have more resources to devote to substance abuse education.

[4] Because the number of districts lacking written substance abuse policies is small, the standard errors are large and the comparisons made individually are not statistically significant. To provide an overall test of the relationship between having a policy and the potential for action, the total number of actions that might be taken by each district was calculated. Districts with a written policy indicated a mean of 6.0 actions which they might take, while districts neither planning nor considering a policy indicated a mean of 5.2 potential actions. This difference is statistically significant. The mean number of potential actions for districts planning or considering a written policy (5.6) is not significantly different from the other two values.

Figure 1.--Actions that districts might take in response to student substance abuse infractions, by existence of a written policy: United States, 1986-87



Districts were also asked if each action had been taken five times or more in the 1986-87 school year (table 2). It should be noted that the frequency of these actions will depend on the extent and nature of substance abuse and the size of the district. While a district might potentially take a specific action, its small size or the low frequency of substance abuse might limit the number of actions actually taken. Thus, fewer districts have performed these actions five times or more than have indicated that they might take the actions. The most common actions are counseling (39 percent), notification of parents (38 percent), and suspension (30 percent). Less common are referrals for clinical assessment (23 percent), notification of police (20 percent), alternative schooling (10 percent), and expulsion (7 percent).

Substance Abuse Education

Three-fifths of the districts (63 percent) require substance abuse education for students at some instructional levels (elementary, junior high, and senior high schools; table 3). As in the case of having written policies, requirements concerning substance abuse education are more common in urban districts (82 percent) than in rural (57 percent), and in large districts (81 percent) than in small (58 percent). Typically, those districts that have a requirement for substance abuse education apply the requirement to all instructional levels--for each instructional level, close to 90 percent have a substance abuse education requirement. There is very little difference among districts as to which grade levels are required to have substance abuse education.

Having written policies on substance abuse and requiring substance abuse education appear to be related Thus, 73 percent of those with written policies also require substance abuse education, while only 38 percent of the remaining districts have such requirements (not shown in tables).

Substance abuse education may be offered in districts even if there is no specific district requirement for it. Thus, at the senior high level, 96 percent of districts provide substance abuse education (table 4). Most typically, substance abuse education is part of the health curriculum (85 percent at the elementary level, 87 percent at the junior high level, and 83 percent at the senior high level). The next most common teaching method is through special assemblies and events; this is used by three-fourths of districts at the junior high and senior high levels, and by 58 percent at the elementary level. Special assemblies and events are typically used by districts as a supplement to other methods of offering substance abuse education; only 1 percent of districts use them as their sole method of education (not shown in tables). At the senior high level, substance abuse education is frequently offered through driver training as well (55 percent). Separate courses on substance abuse are provided by 12 percent of districts at the elementary level, 16 percent at the junior high level, and 15 percent at senior high.

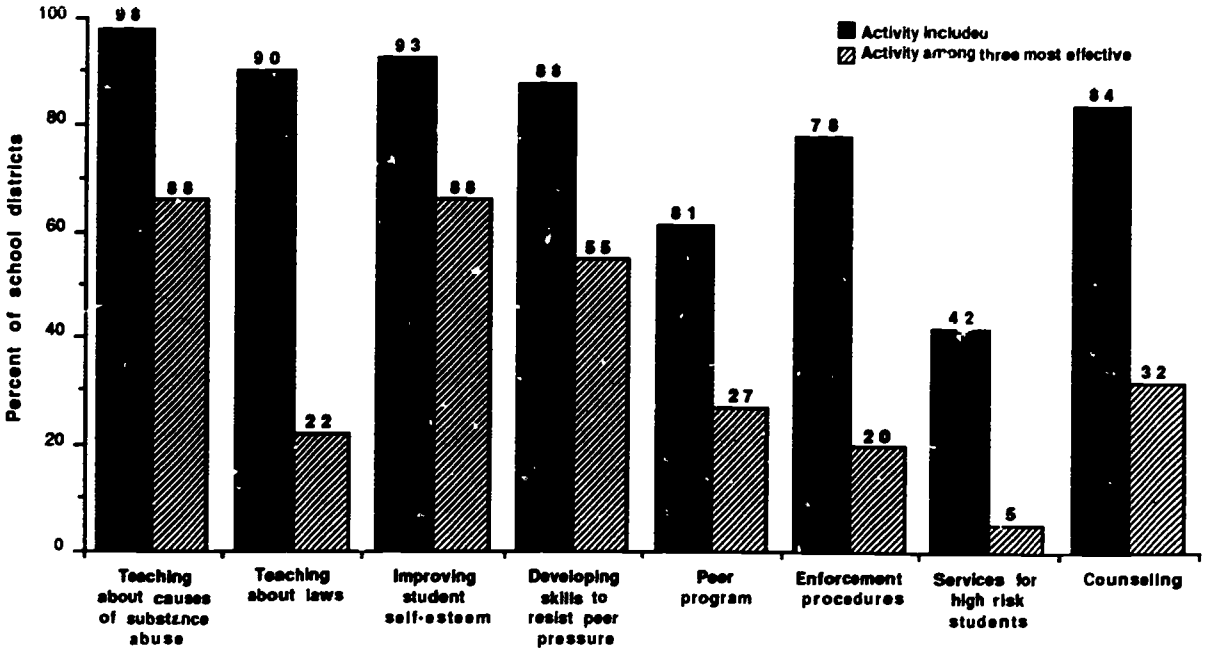
There is not great variation among districts in the method of offering substance abuse education, and even the larger variations are typically statistically insignificant. Overall, the results remain consistent across district characteristics.

Programs to Prevent Student Substance Abuse

Districts perform many activities in acting to prevent or control student substance abuse. One possible action recently receiving attention, drug testing, is quite rare with only 4 percent of districts having drug testing programs (not shown in tables). Yet many other activities are performed.

Districts were given a list of eight activities, and asked which were components of their substance abuse programs. Of the eight, all but one (services for high risk students) are used by a majority of districts, and three are used by 90 percent or more (figure 2; table 5). A majority (51 percent) offer seven or more of the eight components, and another 25 percent offer six of the components (not shown in tables). The three most prevalent activities are teaching about the causes and effects of substance abuse (98 percent), improving student self-esteem (93 percent), and teaching students about laws regarding substance abuse (90 percent).

Figure 2.--Activities included in school districts' substance abuse programs, and districts' choices of their three most effective: United States 1986-87



For most of these activities, there is very little variation among districts in the frequency with which a particular activity is offered. Two exceptions are the offering of peer programs and services for high risk students. The frequency of peer programs ranges from 56 percent among small districts to 83 percent among large districts, and the offering of services for high risk students ranges from 36 percent among small districts to 60 percent among large districts.

When identifying the three most effective activities (table 6), districts show widespread agreement on improving self-esteem (66 percent), teaching the causes and effects of substance abuse (66 percent), and developing student skills to resist peer pressure (55 percent). No other activity receives comparable evaluations, with the next highest rating being given to counseling (32 percent). The activities least often ranked among the three most effective are services for high risk students (5 percent), school substance abuse policy/enforcement procedures (20 percent), and teaching students about laws regarding substance abuse (22 percent). (Districts were asked to indicate the three most effective components of their current programs, not the three most effective overall. Thus, it is not possible for an activity to receive a high rating for effectiveness unless it is prevalent in districts' substance abuse programs. However, since six of these components are used by at least 75 percent of the districts, there is generally a large base of districts to provide evaluations of these activities.) Evaluations of effectiveness are based primarily on respondents' professional judgment (95 percent), although 30 percent cite the use of student surveys and 24 percent cite district records as sources of information.

In a few cases, there are substantial differences among districts in their evaluation of these components. Rural districts consider teaching the causes and effects of substance abuse (71 percent) among the most effective more frequently than do suburban districts (56 percent), and small districts list it among the top three (71 percent) more often than large districts (43 percent). Teaching about laws concerning substance abuse shows a similar pattern, receiving a higher ranking from small districts (24 percent) than from large districts (11 percent). Urban

districts give higher evaluations to services for high risk students (18 percent) than rural districts (3 percent), though this is also connected to the higher frequency of such services in urban districts. A similar pattern exists for large districts as compared with small districts. Some regional variations also exist, with the Southeast showing higher rankings of enforcement procedures than do the other regions.

District Resources for Substance Abuse Education

In terms of staffing, 91 percent of districts have no staff working full-time on substance abuse education, and 36 percent have no staff working part-time; 28 percent have neither full-time nor part-time staff (not shown in tables). Overall, districts have an average of 0.6 full-time staff per 10,000 students and 4.4 part-time staff (table 7).[5] Small districts constitute 77 percent of all districts and have 73 percent of the full-time staff and 72 percent of the part-time staff. However, since small districts enroll only 23 percent of the students, small districts have more staff per 10,000 students than large districts (2.1 full-time staff and 14.0 part-time staff per 10,000 students, compared with 0.2 full-time staff and 0.6 part-time staff in large districts).

Most districts receive technical assistance for their substance abuse programs from outside agencies. Thus, 80 percent of districts receive technical assistance from local agencies, 78 percent from the State education agency, 50 percent from the State alcohol and drug abuse agency, and 25 percent from one of the U.S. Department of Education regional centers (table 8). Overall, 95 percent receive technical assistance from at least one of these sources, and 75 percent receive assistance from more than one source.[6]

In general, districts do not differ greatly in their sources of technical assistance. However, there are a few exceptions. For example, small districts (77 percent) are less likely to receive assistance from local agencies than medium-sized districts (92 percent).

Of the eight specified types of assistance, the most commonly received are guides to resources (74 percent), parental/community involvement (62 percent), general information on common legal issues (62 percent), and effective program strategies (59 percent). In no other area does a majority of districts receive technical assistance (table 9). Districts usually receive assistance in multiple areas: 50 percent receive assistance in 5 or more areas, and 75 percent in 3 or more areas. Districts also express a desire for further assistance: a majority desire more technical assistance in all areas but school policy development and enforcement provisions and procedures, and even in these two areas, close to a majority (49 and 48 percent, respectively) desire more assistance. The three areas in which districts most desire additional assistance are effective program strategies (71 percent), guides to resources (70 percent), and parental/community involvement (70 percent).

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[5] In this report, "average" refers to the arithmetic mean.

[6] The amount of assistance received is even greater than indicated here, since other agencies provided assistance besides those mentioned in the survey.

Perceptions of the Substance Abuse Problem

When asked whether substance abuse in their districts had increased or decreased in the last 2 years, district officials perceive different trends for alcohol as compared with drug abuse. For alcohol abuse, 56 percent of districts perceive that the level of abuse has remained the same, 29 percent perceive an increase, and 16 percent perceive a decrease (table 10). For drug abuse, on the other hand, 42 percent believe the level has remained the same, 47 percent perceive a decrease, and 11 percent perceive an increase. Thus, for both types of abuse, a large number of district officials perceive no change, while proportionately more districts perceive an increase in alcohol use than in drug use.

It is interesting to compare the perceptions of district officials with those of State education agency officials. District officials are closer to the problem than State officials (for example, they may refer to district records on substance abuse infractions), though SEAs may sometimes have greater resources for performing surveys. In both groups, proportionately more officials perceive an increase in alcohol use than in drug use. Among districts, the proportions perceiving an increase are 29 percent for alcohol and 11 percent for drugs, while for States the respective proportions are 48 percent and 31 percent.[7] However, district officials more often perceive no change than do SEA officials. Thus, 56 percent of district officials perceive no change in alcohol use and 42 percent perceive no change in drug use, while the proportions of State officials perceiving no change are 31 percent for alcohol and 25 percent for drugs.

Some of the differences in perceived trends appear related to district characteristics. Thus, only 25 percent of small districts report an increase in alcohol use, as compared with 41 percent of medium-sized districts.

District respondents base their perceptions on changes in alcohol and drug abuse on professional judgment (93 percent), district records (33 percent), and student surveys (28 percent; not shown in tables).

Survey Methodology and Data Reliability

In May 1987, questionnaires (see attached) were mailed to a national probability sample of 700 public school districts from a universe of approximately 15,300. The survey was a mail survey with telephone followup. The questionnaires were sent to the school district superintendents, who were asked to have them completed by the person most knowledgeable about the district's substance abuse prevention activities. Data collection was completed in June with a response rate of 98 percent. The sampling frame used for the survey was the 1983-84 Common Core of Data Universe of Public School Systems.

The sample was stratified by enrollment size (less than 2,500; 2,500 - 9,999; 10,000 or more) and metropolitan status (urban, suburban, rural). The allocation of the sample to

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[7] Information on State education agencies may be found in "State Efforts in Substance Abuse Education," Center for Education Statistics, December 1987.

particular size/metropolitan status classes was made approximately in proportion to the aggregate of the square root of the average enrollment Such an allocation is efficient for estimation of proportions as well as aggregate measures. Districts within a stratum were sampled with equal probability. The survey data were weighted to reflect these sampling rates (probabilities of selection) and were adjusted for nonresponse.

Since the estimates were obtained from a sample of districts, they are subject to sampling variability. For this reason, numbers in the tables and text have been rounded. Percentages and averages have been calculated based on the actual estimates rather than the rounded values. The standard error of an estimate is a measure of the variability between the values of the estimate calculated from different samples and the value of the statistic in the population. Standard errors can be used to examine the precision obtained in a particular sample. If all possible samples were surveyed under similar conditions, intervals of 1.96 standard errors below to 1.96 standard errors above a particular statistic would include the average result of these samples in about 95 percent of the cases. For example, for the percentage of districts with a written substance abuse policy, the estimate for all districts is 73 and the standard error is 2.0. The 95 percent confidence interval for this statistic extends from 73 - (2.0 times 1.96) to 73 + (2.0 times 1.96), or from 69 to 77.

Estimates of standard errors for the estimates were computed using a balanced half-sampling technique known as balanced repeated replications. Some key statistics and their estimated standard errors are included in table 11. Standard errors for statistics not included in these tables can be obtained upon request.

Statements of comparison that are made in this report have been tested through one of two procedures. Where appropriate, a chi-square test has been used at the .01 level on unweighted estimates to test for an overall relationship between the two variables. This .01 level was chosen to compensate for the design effect of the survey and for multiple comparisons across tables. Unweighted estimates are reasonable because the design effects of the survey were typically small, on the order of 1 to 1.5. Chi-square calculations were based on the categories in the original questionnaire, except that questions offering the choices "Yes," "No," "Being planned," and "Under consideration" were recategorized so the last three categories became a single "No" category. For example, in a crosstabulation of district size with the existence of written substance abuse policies, the chi-square value was 39.948, which was above the critical value of 9.210 for two degrees of freedom at the .01 significance level.

The few remaining relationships discussed in this report (where chi-square is not appropriate) have been tested through a t-test at the .05 level. However, because of the issue of multiple comparisons, these tests should not be interpreted as guaranteeing statistical significance at the .05 level. Unless noted otherwise, only comparisons meeting at least one of these criteria have been discussed in the text of this report. An alternative approach that the reader may wish to consider is to examine comparisons using confidence intervals based on the standard errors reported in table 11. The conclusions of this type of exploratory analysis can be considered as suggestive of significant differences but not confirmatory at the nominal (95 percent) confidence level.

Some of the variables used to classify districts are correlated (such as district size and metropolitan status). The sample size in this survey limits our ability to understand the full multivariate nature of the responses by these correlated classification variables.

Survey estimates are also subject to errors of reporting and errors made in the collection of the data. These errors, called nonsampling errors, can sometimes bias the data. While general sampling theory can be used to determine how to estimate the sampling variability of a statistic, nonsampling errors are not easy to measure and usually require that an experiment be conducted as part of the data collection procedures or the use of data external to the study.

Nonsampling errors may include such things as differences in the respondents' interpretation of the meaning of the questions, differences related to the particular time the survey was conducted, or errors in data preparation. During the design of the survey and survey pretest, an effort was made to check for consistency of interpretation of questions and to eliminate ambiguous items. The questionnaire was pretested with respondents like those who completed the survey, and the questionnaire and instructions were extensively reviewed by CES, the Committee for Evaluation and Information Systems (CEIS) of the Council of Chief State School Officers, and several other persons concerned with Federal and State policies on substance abuse. Manual and machine editing of the questionnaires was conducted to check the data for accuracy and consistency, and extensive data retrieval was performed on missing or inconsistent items. The survey had a very high response rate (98 percent). Thus, it appears unlikely that nonsampling errors severely biased the data from this survey.

Data are presented for all districts and by the following district characteristics: district enrollment, metropolitan status, and region. Metropolitan status is defined as follows: urban districts are those in central cities within an MSA (Metropolitan Statistical Area); suburban districts are those within an MSA, but outside a central city; rural districts are all other districts outside an MSA. Region classifications are those used by the Bureau of Economic Analysis of the U.S. Department of Commerce, the National Assessment of Educational Progress, and the National Education Association. The Northeast includes districts in CT, DE, DC, ME, MD, MA, NH, NJ, NY, PA, RI, and VT. The Central region includes districts in IL, IN, IA, KS, MI, MN, MO, NE, ND, OH, SD, and WI. The Southeast includes districts in AL, AR, FL, GA, KY, LA, MS, NC, SC, TN, VA, and WV. The West includes districts in AK, AZ, CA, CO, HI, ID, MT, NV, NM, OK, OR, TX, UT, WA, and WY.

The survey was performed under contract with Westat, Inc., using the Fast Response Survey System (FRSS). Westat's Project Director was Elizabeth Farris, and the Survey Manager was Bradford Chaney. Helen Ashwick was the CES Project Officer, and Ralph Lee was the CES Survey Manager. The OPBE data requester, who participated in the design and analyses, was Elizabeth Farquhar. FRSS was established by CES to collect quickly, and with minimum burden on respondents, small quantities of data needed for education planning and policy.

For More Information

For information about this survey or the Fast Response Survey System, contact Helen Ashwi.к, Office of Educational Research and Improvement, Center for Education Statistics, 555 New Jersey Avenue, NW., Washington, D.C. 20208, telephone (202) 357-6761. For information about OERI programs and activities, contact Information Services at (800) 424-1616 or, in the metropolitan Washington area, 626-9854.

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Table 1.--Percent of districts with a written substance abuse policy, by district characteristics: United States, 1986-87

District characteristic	Number of districts	Districts (in percent)			
		With a policy	Without a policy		
			Planning policy	Considering policy	Neither planning nor considering
Total.....	15,300	73	9	8	10
Metropolitan status					
Urban.....	300	87	7	6	0
Suburban.....	5,100	81	4	7	8
Rural.....	9,900	68	12	9	11
Size					
Less than 2,500.....	11,800	68	10	9	12
2,500-9,999.....	2,900	89	5	4	3
10,000 or more.....	600	88	9	2	1
Region					
Northeast.....	3,000	82	6	11	1
Central.....	6,000	69	12	7	12
Southeast.....	1,700	86	7	3	3
West.....	4,600	66	9	8	16

Note.--Numbers of districts have been rounded to the nearest hundred, but percentages are based on actual estimates, not rounded values. Details may not add to total, and percentages may not add to 100 because of rounding.

Table 2.--Number and percent of districts that might take various actions in response to substance abuse infractions, and number and percent that have taken these actions five times or more in the last year: United States, 1986-87

	Might take action		Taken five times or more	
	Number	Percent	Number	Percent
Notification of police.....	14,000	92	3,100	20
Notification of parents.....	15,100	99	5,900	38
Suspension.....	14,400	95	4,600	30
Expulsion.....	11,300	75	1,100	7
Refer for clinical assessment.	12,700	83	3,500	23
Counseling.....	14,500	95	6,000	39
Alternative schooling.....	7,600	49	1,500	10
Other.....	1,500	10	600	4

Note.--Numbers of districts have been rounded to the nearest hundred, but percentages are based on actual estimates, not rounded values.

Table 3.--Number and percent of districts requiring substance abuse education and the percent requiring substance abuse education at each instructional level, by district characteristics: United States, 1986-87

District characteristic	Have requirement		Instructional level with requirement (percent of districts*)		
	Number	Percent	Elementary	Junior high	Senior high
Total.....	9,600	63	86	94	90
Metropolitan status					
Urban.....	300	82	94	98	100
Suburban.....	3,800	75	85	91	89
Rural.....	5,500	57	87	96	90
Size					
Less than 2,500.....	6,700	58	86	95	88
2,500-9,999.....	2,400	83	86	93	93
10,000 or more.....	500	81	94	96	88
Region					
Northeast.....	2,600	86	93	98	94
Central.....	3,400	58	80	93	90
Southeast.....	900	57	88	96	93
West...	2,700	58	87	92	85

*Percentages are based on districts with a substance abuse education requirement.

Note.--Numbers of districts have been rounded to the nearest hundred, but percentages are based on actual estimates, not rounded values. Details may not add to total because of rounding.

Table 4.--Percent of districts offering substance abuse education in different areas of the curriculum, by instructional level and district characteristics: United States, 1986-87

Instructional level and district characteristic	Percent of districts[1]					
	Not offering substance abuse education	Offering substance abuse education[2]				
		In health curriculum	In driver training	As a separate course	Through special assemblies or events	Through other means[3]
Elementary (total).....	5	85	-	12	58	18
Metropolitan status						
Urban..... ..	4	84	-	10	69	23
Suburban..... .	4	83	-	13	55	20
Rural..	5	84	-	12	58	17
Size						
Less than 2,500.....	5	85	-	12	56	18
2,500-9,999.....	4	83	-	13	63	21
10,000 or more... ...	2	88	-	22	66	19
Region						
Northeast..... .	5	82	-	11	65	20
Central.....	6	85	-	10	54	16
Southeast.....	1	91	-	12	62	24
West.....	5	83	-	16	56	19
Junior high (total).....	4	87	9	16	72	21
Metropolitan status						
Urban...	1	90	2	16	78	29
Suburban	3	84	8	14	73	22
Rural...	4	87	10	16	71	20
Size						
Less than 2,500.	4	86	10	15	72	21
2,500-9,999.....	1	88	6	15	73	22
10,000 or more.....	2	83	4	21	66	27
Region						
Northeast.....	6	85	6	17	80	23
Central..... ..	2	91	11	13	47	18
Southeast..... ...	*	94	17	8	77	24
West....	6	79	6	21	71	23
Senior high (total).	4	83	55	15	77	26
Metropolitan status						
Urban..	0	90	51	11	80	28
Suburban..... . ..	5	82	52	15	76	26
Rural.....	3	83	56	15	78	26
Size						
Less than 2,500. .	4	82	57	15	77	27
2,500-9,999.....	1	86	50	14	80	24
10,000 or more.....	1	89	48	20	72	31
Region						
Northeast	2	84	57	16	87	33
Central.....	2	85	62	15	74	20
Southeast.....	*	91	48	8	81	29
West.....	8	77	46	18	73	29

* Less than 1 percent.

\- Not applicable.

[1]Percentages are based on 15,300 districts.

[2]Percentages add to more than 100 because districts could offer substance abuse education through more than one method.

[3]Examples include science and biology classes, other classes, counseling, and peer groups.

Table 5.--Percent of districts offering various activities within their substance abuse programs, by district characteristics: United States, 1986-87

District characteristic	Activity within substance abuse program								
	Teaching causes and effects of abuse	Teaching laws	Improving student self-esteem	Skills to resist peer pressure	Peer programs	School substance abuse policy/ enforcement procedures	Services for high risk students	Counseling	Other
Total.....	98	90	93	88	61	78	42	84	9
Metropolitan status									
Urban.....	100	90	94	96	74	86	59	89	14
Suburban.....	99	88	96	91	65	80	48	80	12
Rural.....	98	91	91	86	59	77	38	86	7
Size									
Less than 2,500..	98	89	93	87	56	77	36	82	7
2,500-9,999.....	99	93	95	94	77	85	60	91	15
10,000 or more...	99	93	91	89	83	85	60	89	17
Region									
Northeast....	100	93	97	90	72	88	58	81	10
Central.....	98	93	92	88	59	75	35	84	8
Southeast....	98	93	91	89	67	83	48	92	8
West.....	97	84	93	86	54	75	38	84	10

Note.--Percentages are based on 15,300 districts.

Table 6.--Percent of districts rating various activities within their substance abuse programs as the three most effective, by district characteristics: United States, 1986-87

District characteristic	Activity within substance abuse program							
	Teaching on causes and effects of abuse	Teaching on laws	Improving student self-esteem	Skills to resist peer pressure	Peer programs	School substance abuse policy/ enforcement procedures	Services for high risk students	Counseling
Total.....	66	22	66	55	27	20	5	32
Metropolitan status								
Urban.....	56	9	73	63	32	21	18	27
Suburban.....	56	19	72	58	27	24	8	29
Rural.....	71	24	63	54	26	17	3	34
Size								
Less than 2,500.....	71	24	65	53	25	19	3	32
2,500-9,999.....	50	14	73	61	31	22	11	34
10,000 or more.....	43	11	66	63	39	24	13	31
Region								
Northeast.....	68	16	68	59	30	22	7	24
Central.....	65	22	67	50	31	16	4	34
Southeast.....	65	28	52	44	18	35	8	44
West.....	65	21	70	56	23	16	5	31

Note.--Percentages are based on 15,300 districts.

Table 7.--Total and mean number of staff per 10,000 students with full-time or part-time responsibility concerning substance abuse education, by district characteristics: United States, 1986-87

District characteristic	Staff per 10,000 students			
	Full-time		Part-time	
	Total[1]	Mean[2]	Total[1]	Mean[2]
Total.....	2,500	0.6	17,100	4.4
Metropolitan status				
Urban.....	200	0.2	400	0.5
Suburban.....	1,300	0.7	5,400	3.1
Rural.....	1,000	0.8	11,300	9.3
Size				
Less than 2,500.....	1,800	2.1	12,400	14.0
2,500-9,999.....	400	0.3	3,700	2.8
10,000 or more.....	300	0.2	1,000	0.6
Region				
Northeast.....	600	0.7	2,600	3.2
Central.....	1,000	1.0	6,100	6.0
Southeast.....	400	0.4	2,300	2.4
West.....	500	0.4	6,200	5.6

[1]Numbers have been rounded to the nearest hundred. Details may not add to totals because of rounding.

[2]Means were calculated by summing total numbers of staff and students in each category and then computing the ratio.

Table 8.--Percent of districts receiving technical assistance regarding substance abuse from various sources, by district characteristics: "nited States, 1986-87

District characteristic	Source of technical assistance				
	State education agency	State alcohol and drug abuse agency	U.S. Dept. of Education regional center	Local agencies	At least one of these sources
Total.....	78	50	25	80	95
Metropolitan status					
Urban.....	80	62	27	93	100
Suburban.....	77	49	26	86	96
Rural.....	78	50	24	77	94
Size					
Less than 2,500.....	78	48	25	77	94
2,500-9,999.....	79	56	27	92	99
10,000 or more.....	69	53	23	89	99
Region					
Northeast.....	82	64	28	86	98
Central.....	77	48	16	79	94
Southeast.....	88	45	33	85	99
West.....	72	43	31	77	94

Table 9.--Percent of districts receiving technical assistance regarding substance abuse and desiring more technical assistance, by area of assistance: United States, 1986-87

Areas of technical assistance	Percent receiving assistance	Percent desiring more assistance
School policy development	45	49
Enforcement provisions and procedures	47	48
General information on common legal issues	62	61
Advice on specific legal programs	47	54
Guides to resources (curricula, referral groups, etc.)	74	70
Effective program strategies	59	71
Program evaluation	34	65
Parental/community involvement	62	70

Table 10.--Percent of districts indicating whether student substance abuse has increased or decreased over the past 2 years, by district characteristics: United States, 1986-87

District characteristic	Alcohol			Drugs		
	Decreased	Remained the same	Increased	Decreased	Remained the same	Increased
Total.....	16	56	29	47	42	11
Metropolitan status						
Urban.....	16	49	35	30	39	31
Suburban.....	14	59	28	47	46	8
Rural.....	16	55	29	47	41	12
Size						
Less than 2,500.....	16	59	25	46	44	9
2,500-9,999.....	13	46	41	49	35	16
10,000 or more.....	16	43	41	43	36	20
Region						
Northeast.....	16	52	32	51	43	6
Central.....	14	57	29	46	44	9
Southeast.....	16	50	34	50	39	11
West.....	17	59	24	44	40	16

Note.--Percentages may not add to 100 because of rounding.

Table 11.--Selected standard errors, by district characteristics: United States, 1986-87

District characteristic	Percent with written policy		Percent which might use alternative schooling		Percent which require substance abuse education		Percent requiring substance abuse education at elementary level*		Percent teaching skills to resist peer pressure	
	Estimate	Standard error	Estimate	Standard error	Estimate	Standard error	Estimate	Standard error	Estimate	Standard error
Total.....	72.7	2.0	49.5	2.3	63.3	1.9	86.5	1.8	88.3	1.9
Metropolitan status										
Urban.....	86.7	5.3	72.7	7.4	81.8	6.1	94.3	5.2	95.9	2.8
Suburban.....	80.8	2.2	56.2	4.6	75.1	3.3	84.7	2.8	90.7	2.0
Rural.....	68.1	3.0	45.2	3.0	56.6	2.8	87.3	2.4	86.8	2.6
Size										
Less than 2,500...	68.1	2.6	45.2	2.8	57.6	2.6	86.0	2.5	86.9	2.5
2,500-9,999.....	88.5	2.1	62.2	2.5	83.0	2.2	86.2	2.0	93.8	1.4
10,000 or more....	88.4	3.3	71.7	4.2	80.9	4.3	94.0	2.8	89.0	3.5
Region										
Northeast.....	81.9	3.2	61.3	5.1	86.3	3.6	93.0	2.6	89.8	3.4
Central.....	69.4	4.1	46.0	4.3	57.5	2.8	80.5	3.4	89.1	2.4
Southeast.....	86.1	4.3	49.3	5.8	56.4	5.4	88.9	3.6	88.[illegible]	4.3
West.....	66.1	4.0	46.3	3.7	58.2	3.9	86.9	3.6	86.3	3.2

*Percentages are based on districts which require substance abuse education.

Table 11.--Selected standard errors, by district characteristics: United States, 1986-87 (continued)

District characteristic	Percent rating teaching on causes and effects of substance abuse among three most effective program components		Mean part-time staff per 10,000 students		Percent receiving technical assistance from regional center		Percent stating alcohol abuse has increased		Percent stating drug abuse has increased	
	Estimate	Standard error	Estimate	Standard error	Estimate	Standard error	Estimate	Standard error	Estimate	Standard error
Total.....	65.7	1.9	4.39	.29	25.1	2.2	28.7	1.9	10.8	1.6
Metropolitan status										
Urban.....	55.7	7.7	.45	.07	27.2	7.0	34.8	8.7	36.1	8.3
Suburban.....	56.4	3.3	3.05	.21	26.4	3.6	27.6	2.6	7.7	1.6
Rural.....	70.8	2.4	9.32	.85	24.3	2.8	29.0	2.7	11.8	2.2
Size										
Less than 2,500...	70.7	2.4	14.04	1.24	24.8	2.9	24.9	2.4	9.1	1.8
2,500-9,999.....	49.9	3.0	2.77	.14	26.7	2.5	41.2	2.5	15.9	2.4
10,000 or more....	43.3	4.6	.62	.05	23.1	4.5	41.3	4.8	20.3	4.1
Region										
Northeast.....	67.7	4.1	3.16	.37	28.4	5.3	31.8	4.9	5.9	2.2
Central.....	65.1	2.9	6.00	.62	16.4	2.7	29.2	3.3	9.4	2.7
Southeast.....	66.9	4.1	2.36	.36	34.2	3.8	34.2	5.9	10.8	2.9
West.....	64.8	4.0	5.56	.62	30.7	5.2	23.7	3.4	16.1	2.9

FAST RESPONSE
SURVEY SYSTEM (FRSS)

CENTER FOR EDUCATION STATISTICS
U.S. DEPARTMENT OF EDUCATION
WASHINGTON, D.C. 20208-1628

Form Approved
OMB No 1850-0603
App. Exp. 12/87

DISTRICT SURVEY ON SUBSTANCE ABUSE EDUCATION

This report is authorized by law (20 U.S.C. 1221e-1). While you are not required to respond, your cooperation is needed to make the results of this survey comprehensive, accurate, and timely.

I. Substance abuse refers to alcohol, drugs, or both.

II. Substance abuse education refers to learning activities and related policies to prevent or reduce substance abuse by youth. It does not include clinical treatment or rehabilitation

NOTE: You will be receiving funds through the Drug Free Schools and Communities Act of 1986. Do not include new programs that you have adopted because of these funds.

1. Does your district have a written substance abuse policy? ¦__¦ Yes; ¦__¦ No; ¦__¦ Being planned; ¦__¦ Under consideration

Does your district have a student drug testing program? ¦__¦ Yes; ¦__¦ No; ¦__¦ Being planned; ¦__¦ Under consideration

3. Please indicate which of the following actions your district might take in handling substance abuse infractions and whether each has been taken five times or more in the 1986-87 school year as a result of substance abuse infractions.

Action	District might take: Yes	District might take: No	Taken 5 times or more in 1986-87: Yes	Taken 5 times or more in 1986-87: No
a. Notification of police	¦__¦	¦__¦	¦__¦	¦__¦
b. Notification of parents	¦__¦	¦__¦	¦__¦	¦__¦
c. Suspension	¦__¦	¦__¦	¦__¦	¦__¦
d. Expulsion	¦__¦	¦__¦	¦__¦	¦__¦
e. Refer for clinical assessment	¦__¦	¦__¦	¦__¦	¦__¦
f. Counseling	¦__¦	¦__¦	¦__¦	¦__¦
g. Alternative schooling	¦__¦	¦__¦	¦__¦	¦__¦
h. Other (Specify)_____	¦__¦	¦__¦	¦__¦	¦__¦

4a. Is substance abuse education required in your district? ¦__¦ Yes; ¦__¦ No; ¦__¦ Being planned; ¦__¦ Under consideration.

b. If YES, at which types of schools is substance abuse education required? (Check all that apply.)

¦__¦ Elementary; ¦__¦ Junior high; ¦__¦ Senior high.

5. How do schools in your district offer substance abuse education in 1986-87? (Check all that apply)

Type of school	Not taught	Within health curriculum	Within other courses	Separate course	Special assemblies or events	Other (Specify)
Elementary	¦__¦	¦__¦	¦__¦	¦__¦	¦__¦	_____
Junior high	¦__¦	¦__¦	¦__¦	¦__¦	¦__¦	_____
Senior high	¦__¦	¦__¦	¦__¦	¦__¦	¦__¦	_____

6. Has your district conducted evaluation studies of the substance abuse education activities offered by your schools?

¦__¦ Yes; ¦__¦ No; ¦__¦ Being planned; ¦__¦ Under consideration

7a. Check the components that are currently part of your substance abuse program/activities. Then check the three components that are the most effective in lessening the extent of student substance abuse.

Program components	Part of program	Most effective
a. Teaching students about causes and effects of substance abuse	¦__¦	¦__¦
b. Teaching students about laws regarding substance abuse	¦__¦	¦__¦
c. Improving student self-esteem	¦__¦	¦__¦
d. Student skills to resist peer pressure	¦__¦	¦__¦
e. Peer programs (e.g., peer counseling, SADD)	¦__¦	¦__¦
f. School substance abuse policy/ enforcement procedures	¦__¦	¦__¦
g. Services for high risk students	¦__¦	¦__¦
h. Counseling	¦__¦	¦__¦
i. Other (Specify) _____	¦__¦	¦__¦

b. On what do you base this judgment concerning effectiveness? (Check all that apply.) ¦__¦ District records; ¦__¦ Formal evaluations; ¦__¦ Student surveys; ¦__¦ Professional judgment; ¦__¦ Other (Specify) _____

8. For the 1986-87 school year, write the number of professional staff in your district's central office which have full-time or part-time responsibilities for substance abuse education.

_____ Full-time on substance abuse education; _____ Part-time.

9a. From which of the following agencies has your district received technical assistance regarding substance abuse? (Check all that apply.)

¦__¦ State Education Agency; ¦__¦ State Alcohol and Drug Abuse Agency; ¦__¦ U S. Department of Education regional center, ¦__¦ Local agencies.

b. In column 1, check whether you have received technical assistance in each of the following areas. In column 2, check whether you would like to receive more technical assistance in these areas.

Areas of technical assistance (substance abuse only)	1. Received technical assistance: Yes	1. Received technical assistance: No	2. Would like more technical assistance: Yes	2. Would like more technical assistance: No
a. School policy development	¦__¦	¦__¦	¦__¦	¦__¦
b. Enforcement provisions and procedures	¦__¦	¦__¦	¦__¦	¦__¦
c. General information on common legal issues	¦__¦	¦__¦	¦__¦	¦__¦
d. Advice on specific legal problems	¦__¦	¦__¦	¦__¦	¦__¦
e. Guides to resources (curriculum, referral groups)	¦__¦	¦__¦	¦__¦	¦__¦
f. Effective program strategies	¦__¦	¦__¦	¦__¦	¦__¦
g. Program evaluation	¦__¦	¦__¦	¦__¦	¦__¦
h. Parental/community involvement	¦__¦	¦__¦	¦__¦	¦__¦

10a. Has student substance abuse in your district (whether at school or at other locations) decreased, remained the same, or increased in the last two years? (Please state your own opinion if you have not collected information)

Alcohol: ¦__¦ Decreased; ¦__¦ Remained the same; ¦__¦ Increased.

Drugs: ¦__¦ Decreased; ¦__¦ Remained the same; ¦__¦ Increased.

b. On what do you base this judgment? (Check all that apply.) ¦__¦ District records; ¦__¦ Formal evaluations; ¦__¦ Student surveys; ¦__¦ Professional judgment; ¦__¦ Other (Specify) _____.

Person completing form _____ Title _____

School District _____ State _____ Telephone ( ) _____