History of the Division of Adolescent Health

OUR MISSION:
The mission of the Division of Adolescent Health is to improve the bio-psycho-social-emotional and environmental health of adolescents with a strong emphasis on the Greater Cleveland Community.

The Division works closely with departments at Case and other institutions in Cuyahoga County. In addition, the Division is the umbrella organization for the Adolescent Consortium, a networking organization for local youth-serving agencies.

OUR GOALS:
1. Research: The Division coordinates and conducts research activities relevant to adolescents. It collaborates with Cleveland and Cuyahoga County organizations and agencies on issues involving adolescents, such as violence and sexuality.

2. Education: The Division of Adolescent Health provides educational training at undergraduate, post-baccalaureate and post-graduate levels for professionals. In addition, the Division consults with community organizations on educational endeavors.

3. Advocacy: The Division supports the development of public policies addressing health and social issues concerning youth. Division faculty and affiliates work with other organizations to further awareness and support for adolescent programs.

4. Community Links: The Division builds bridges among community agencies that provide adolescent services through the Adolescent Consortium. The Consortium comprises more than 120 health and service providers in Cuyahoga County.

Protective Factors in Adolescent Development

There are a variety of behaviors that appear to create a supportive environment that encourages healthy adolescent development. Questions about these “protective behaviors” were asked of a subset of students in Cuyahoga County in order to explore how these behaviors relate to risk factors.

PARENTAL ATTITUDES:
Adolescents who report their parents would believe it would be “very wrong” for them to drink alcohol, smoke cigarettes, or use marijuana, are much less likely to use those substances than adolescents who feel their parents would think it was not wrong. They also are much more likely to disapprove of substance use themselves. Although parents may feel they have limited influence over their teenagers, communicating strong disapproval of substance use to children may have an impact on their tendency to use.

ORGANIZED ACTIVITIES AFTER SCHOOL:
Students reporting they were involved in organized activities at least 1 day in the past week, were much less likely to have used alcohol, inhalants, heroin and cocaine, and were more likely to wear their seatbelt and bicycle helmets. They were also more likely to say there was an adult they could talk to if they had an important issue affecting their life.

SERVICE AND VOLUNTEERISM:
Students who spent at least 1 hour a month on volunteer work, community service, or helping people outside of their homes without getting paid were much less likely to have used marijuana.

2004 Cuyahoga County Youth Risk Behavior Survey Summary

Funded by: The Cuyahoga County Board of Health
Background
The Division of Adolescent Health has been a collaborating partner with the CCBH’s Wellness Block Grant funded by the Cuyahoga County Family and Children First Council since 1995 and has been actively involved with the Youth Risk Behavior Survey since 1996. In 1999-2000, administration of the YRBS was included in the Child and Family Health Service/Maternal and Child Health (CFHS) program. The plan called for survey administration into high schools throughout Cuyahoga County. This pamphlet details some of the information collected from 2002-2004.

Survey Instrument:
The Youth Risk Behavior Survey (YRBS) is a national health behavior survey developed by the Centers for Disease Control and Prevention (CDC). The questions are designed to provide a “snapshot” of teenage students’ health risk behaviors. Questions are grouped into several broad categories, which have been identified as leading causes of morbidity and mortality:

* Personal Safety
* Violence and Weapons
* Depression and Suicide
* Tobacco
* Alcohol
* Marijuana, Cocaine and Other Drugs
* Sexual Behaviors
* Physical Activity and Nutrition

All fifty-two Cuyahoga County public high schools were given the opportunity to participate. Thirty-seven agreed. The final sample consisted of a total of 8,971 high school students.

Percentage who Engage in Health Risk Behaviors
Risk behaviors do not occur in isolation. It is important to identify which categories of risk behaviors Cuyahoga County students are most likely to experience in order to offer preventative programming and services.

<table>
<thead>
<tr>
<th>Survey Item</th>
<th>2002-4 County</th>
<th>2003 Ohio</th>
<th>2003 USA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Felt Unsafe and Avoided School in Past Month</td>
<td>8.9% ±1.6</td>
<td>4.9% ±1.4</td>
<td>5.4% ±0.8</td>
</tr>
<tr>
<td>Made a Suicide Plan in Past Year</td>
<td>10.5% ±1.1</td>
<td>14.1% ±2.3</td>
<td>16.5% ±3.5</td>
</tr>
<tr>
<td>Attempted Suicide in Past Year</td>
<td>6.4% ±1.6</td>
<td>11.9% ±1.0</td>
<td>8.5% ±1.1</td>
</tr>
<tr>
<td>Current Cigar, Cigarillo, or Little Cigar Use</td>
<td>21.1% ±2.1</td>
<td>13.6% ±2.6</td>
<td>14.8% ±1.7</td>
</tr>
<tr>
<td>Ever Had Sexual Intercourse</td>
<td>58.9% ±4.3</td>
<td>41.7% ±5.9</td>
<td>46.7% ±2.6</td>
</tr>
<tr>
<td>Intercourse with 4+ Partners in Lifetime</td>
<td>19.3% ±3.9</td>
<td>13.0% ±2.1</td>
<td>14.4% ±1.6</td>
</tr>
<tr>
<td>Birth Control Pills used Last Intercourse</td>
<td>10.7 ±2.1</td>
<td>25.9 ±6.0</td>
<td>17.0 ±2.3</td>
</tr>
<tr>
<td>Have Been or Gotten Someone Pregnant</td>
<td>8.8% ±1.9</td>
<td>4.0% ±1.3</td>
<td>4.2% ±0.8</td>
</tr>
<tr>
<td>3+ Hours of Television on a School Night</td>
<td>53.1% ±5.0</td>
<td>32.1% ±1.8</td>
<td>38.2% ±2.9</td>
</tr>
<tr>
<td>Played on a Sports Team in Past Year</td>
<td>46.4% ±3.2</td>
<td>60.8% ±3.4</td>
<td>57.6% ±2.1</td>
</tr>
<tr>
<td>BMI 85-95% At-Risk to be Overweight</td>
<td>18.2% ±1.5</td>
<td>13.1% ±2.2</td>
<td>15.4% ±1.3</td>
</tr>
</tbody>
</table>

Risk Behaviors before the Age of 13
Adolescents who engage in risk behaviors at a young age are more likely to experiment with a variety of risk behaviors and are more likely to move from experimentation to regular engagement in these behaviors.