December 2012

Tackling Youth Substance Abuse Initiative (TYSA) Survey and Focus Group Results

Final Report

SUBMITTED TO:

Tackling Youth Substance Abuse Initiative, A Project of the Staten Island Partnership for Community Wellness



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Executive Summary

The Tackling Youth Substance Abuse Initiative (TYSA), a cross-sector coalition aimed at leveraging the power of collective impact to improve health outcomes for Staten Island's youth, is working to decrease the consumption of alcohol and prescription drugs among Staten Island youth and increase their healthy choices. Toward this goal, TYSA is collecting data on key indicators critical to its efforts.

In July 2012, Metis Associates, a New York-based research and evaluation firm, was hired by the Staten Island Partnership for Community Wellness to conduct a study to assess the attitudes and perceptions of Staten Island residents concerning alcohol and substance abuse. The study was designed to collect qualitative and quantitative data through a telephone survey and two focus groups of Staten Island adult residents that would help inform the efforts of TYSA. In order to ensure that the results from the survey were generalizable to the target population of Staten Island households, Metis used a stratified sampling plan based on zip code, race/ethnicity, and income level. A representative sample of 1,500 respondents completed the survey. The focus groups were advertised in a local Staten Island newspaper and conducted on two separate nights. A total of 29 participants attended. The majority of participants were parents of young adults in their early twenties struggling with addiction.

The main findings from the survey and focus groups are highlighted below.

Findings Regarding Youth Alcohol and Prescription Drug Use

Magnitude of the Problem

- Staten Island residents are divided in their perception that underage drinking is a problem in their neighborhood, but both survey and focus group respondents generally agree that the non-prescribed use of prescription drugs is a problem among youth in their neighborhood. These findings hold true across all Staten Island regions.
- Adults ages 18-29 and 60 and older are less likely to think that underage drinking or prescription drug use is a problem among youth in their neighborhood, compared to other age groups.
- Higher income residents are more likely to think that the non-prescribed use of prescription drugs is a problem among youth in their neighborhood, compared to residents with incomes under \$15,000.

Reasons for Use

- Focus group participants held similar beliefs about the reasons for underage drinking and youth prescription drug misuse, such as youth's natural tendencies, peer pressure and low self-esteem.
 - Many participants believed that youth decide to drink alcohol or take prescription drugs in a
 manner other than prescribed as part of the risk-taking behavior that characterizes a youth's desire
 to experiment with new things.

- Participants also thought that peer pressure and a desire to "fit in" as well as low self-esteem were factors that influence underage drinking and prescription drug misuse. A focus group participant reported, "It's also a matter of a person's own inner strength and what they want with their own life. And again whether to be a part of the in crowd (...).
- Several focus group participants noted the role of the media and social networking as a reason for
 underage drinking. The participants explained that the current generation is exposed to things in the
 media that are not age-appropriate and that many TV shows, such as the Jersey Shore, and
 commercials portray drinking as an acceptable and desirable practice. Participants also spoke about
 how social networking sites such as Facebook are a vehicle for showcasing underage drinking.
- Focus group participants discussed ease of access of prescription drugs and the perception of
 prescription drugs as safer drugs as reasons why youth take prescription drugs without a prescription
 or in a manner other than prescribed.
 - Participants said that prescription drugs are selected as the drug of choice because they are easier
 to get than street drugs. Other participants noted that prescription drugs are much easier to access
 in recent years, because of the steep increase in prescriptions.
 - Many of the participants reported that youth initially think that taking prescription drugs is safer because they see family members and other adults taking them and because they are prescribed by a doctor.

Sources

- Both survey and focus group participants believe that it is easy for youth to get alcohol or prescription drugs from their own home without their parent's permission or from someone they know (e.g., age 21 or older or friends or peers at school).
- Survey and focus group participants also think that it is easy for children to get alcohol from a liquor store with a fake ID. One focus group participant explained, "How easy is it to get a fake ID? You get a fake ID, you go into a liquor store—a liquor store that you know doesn't card—and you buy alcohol (...).
- Compared to other sources, survey respondents think that it is easy for youth to get prescription
 drugs on the streets. Most of the focus group participants noted that eventually, once they become
 addicted, youth are buying prescription drugs mainly from dealers, who, they explained, can be
 found at local stores, schoolyards, and on the street.
- Survey and focus group participants differ in their views on whether or not it is easy for youth to get
 prescription drugs from doctors. The majority of survey respondents think that it is difficult for
 youth to receive prescription drugs from doctors; however, the focus group participants reported
 that doctors are one of youth's main sources.

Views on Acceptability

• Almost all survey and focus group participants agree that underage drinking and using prescription drugs in a manner other than prescribed is not acceptable.

- Although focus group participants were adamant that underage drinking is a problem and should not
 be condoned, there was also a common perception that asking children not to drink is "unrealistic."
 Participants added that it is often difficult, especially when kids are exposed to alcohol in their own
 homes, to tell their children that it is not acceptable to drink.
- Slightly more than half of survey respondents reported that they had at least one drink in the last 30 days, but almost all do not approve of drinking five or more drinks in one sitting.
- Almost all survey respondents reported that they do not have prescription drugs, such as sedatives, tranquilizers, or stimulants, in their household, whereas, they are more likely to have prescription painkillers in their home.
- The majority of survey respondents disagree that the non-prescribed use of prescription drugs is safer than doing street drugs, such as heroin or cocaine.

Role of Adults in Helping Prevent Use

- Almost all survey respondents believe that they have at least some influence on the children in their lives regarding their decisions to drink alcohol or use prescription drugs in a manner other than prescribed, yet only half have talked to their children about the risks of alcohol or prescription drug misuse.
 - Compared to adults who are not primary caregivers, primary caregivers of children under 21 are
 more likely to have talked with the children in their household or who are close to them about the
 risks of underage drinking or prescription drug misuse.
- Survey respondents were divided about whether they wished they knew better what to say to children about the risks of underage drinking or prescription drug use.
- Less than half of survey respondents reported keeping alcohol or prescription drugs locked up in a cabinet or stored in a secure place.
- The majority of respondents believe that holding adults legally responsible for youth drinking in their homes would help prevent underage drinking.

Suggestions from Focus Group Participants for Tackling Underage Drinking and Youth Prescription Drug Use

- Focus group participants offered a number of suggestions for tackling the underage drinking and youth prescription drug use.
 - Parents need to be more informed and better trained to support their children and other youth in their community about underage drinking and prescription drug use.
 - Children and youth need to be made aware of the dangers of underage drinking and prescription drug misuse.
 - In regards to underage drinking, a policy of no tolerance should be promoted and enforced. There was strong agreement among focus group participants that police officers, schools, judges and lawyers, and the community at large are tolerating too much and that teenagers need to know that there are repercussions to their destructive behavior.

- Suggestions for addressing prescription drug misuse focused on the need for stronger interventions at the systems and policy level, such as working with politicians and government to create tighter control and monitoring laws for doctors and pharmacies, changing practices in hospitals and emergency rooms to curtail the amount of prescriptions drugs that are prescribed, and encouraging the development of longer, more effective interventions for addicts.

Treatment Services

- Survey respondents were divided in their perception of adults in their neighborhood as looking down on people who are in alcohol or prescription drug treatment programs.
- Half of the survey respondents say they know where to get help if a child or youth they know had an alcohol or prescription drug use problem.
- Respondents are more likely to advise the child or youth who needed treatment or counseling for
 alcohol or prescription drug problem to talk to their doctor/pediatrician, than to a private therapist,
 school counselor, support group, or religious official.
- Half of respondents believe that people in their neighborhood who have an alcohol or a prescription drug problem do not seek help because they think they can handle the problem without treatment.

Marijuana or Hashish Use

Almost all survey respondents believe it is not acceptable for either youth or adults to use marijuana
or hashish, but there is greater acceptance of adult use of these substances among adults who are
younger as well as adults who are not primary caregivers of children.

Introduction

Alcohol and prescriptions drug abuse is a problem across Staten Island, touching many youth and their families with frightening consequences. According to the NYC Department of Health and Mental Hygiene, Staten Island has the highest rate of underage drinking in the city, with 37% of Staten Island youth in 9th through 12th grades having consumed alcohol in the month prior to the DOHMH survey. Staten Island also has the highest proportion of youth in the city who have ever used a prescription pain reliever without a prescription. The Tackling Youth Substance Abuse Initiative (TYSA) is a cross-sector coalition aimed at leveraging the power of collective impact to improve health outcomes for Staten Island's youth. This initiative seeks to effect major improvements in youth substance abuse prevention and treatment services in Staten Island through the creation of a community-wide framework that establishes a common goal and shared vision for change to facilitate coordinated action. The specific goals of TYSA, for which 2020 targets were set, are to decrease the consumption of alcohol and prescription drugs among Staten Island youth and increase their healthy choices.

TYSA is a data-driven initiative based on the premise that setting common indicators and sharing results consistently across all participants will create both coherence and accountability. Preliminary indicators cited in TYSA's *Blueprint* were identified based on interviews with community stakeholders, review of available needs data, and best practices from national collaboratives. Thus, collecting up-to-date, accurate data on key indicators is critical to TYSA's efforts to plan, coordinate and improve prevention and treatment services for youth in Staten Island.

In July 2012, Metis Associates, a New York-based research and evaluation firm, was hired by the Staten Island Partnership for Community Wellness to conduct a study to assess the attitudes and perceptions of Staten Island residents concerning alcohol and substance abuse. This project will lay the groundwork that will enable the coalition to monitor progress and hold stakeholders accountable for results and provide critical information that will help inform the decision-making process and plan for subsequent action steps.

¹ NYC Department of Health and Mental Hygiene. "NYC Youth Risk Behavior Survey." 2009.

Methodology

The study was designed to collect qualitative and quantitative data through a survey and two focus groups of Staten Island adult residents that would help inform the efforts of TYSA. These methods are described below.

• Survey of Staten Island adult residents. At the onset of the project, a Metis research team worked closely with TYSA stakeholders, including the TYSA Steering Committee and a Data Workgroup that was created specifically to support this study, to develop a Staten Island community survey. The survey was designed to collect data on key indicators such as: residents' views (e.g., approval, disapproval) about alcohol and prescription drug use; their own awareness of substance abuse issues; and their perceptions about treatment and treatment use, among others. The survey drew from existing instruments and also included new items as needed. A copy of the survey instrument is included in Appendix A.

Metis subcontracted with America Research Inc., a well-known market research company, to administer the phone surveys.² A sample size of 1,500 Staten Island residents was targeted, representing 0.09% of Staten Island households.³ The key to a sample's representativeness is to ensure that appropriate proportions of select subpopulation and characteristics in the sample reflect the population as a whole. Therefore, in order to ensure that the results from the survey were generalizable to the target population of Staten Island households, Metis used Census data by zip code to create a stratified sampling plan based on critical demographic characteristics, which included zip code, race/ethnicity, and income level. A review of the sample targets in comparison to the respondents indicates that the respondents are representative of Staten Island households. Overall, the margin of error for the sample selected is 2.5%.⁴

Table 1 presents the number and percent of survey respondents by zip code and race.

Table I: Respondents by Zip Code and Race

Staten Island Region	Zip Code	White		Black or African American		Asian		Other		Latino/a		Total by Zip
		N	0/0	N	%	N	%	N	0/0	N	%	Code
	10301	87	70%	18	15%	2	2%	9	7%	8	6%	124
	10302	31	54%	10	18%	2	4%	5	9%	9	16%	57
North Shore	10303	28	36%	25	32%	1	1%	11	14%	12	16%	77
	10304	66	50%	24	18%	7	5%	9	7%	25	19%	131
	10305	105	75%	7	5%	4	3%	8	6%	16	11%	140

² The survey was available in English and Spanish.

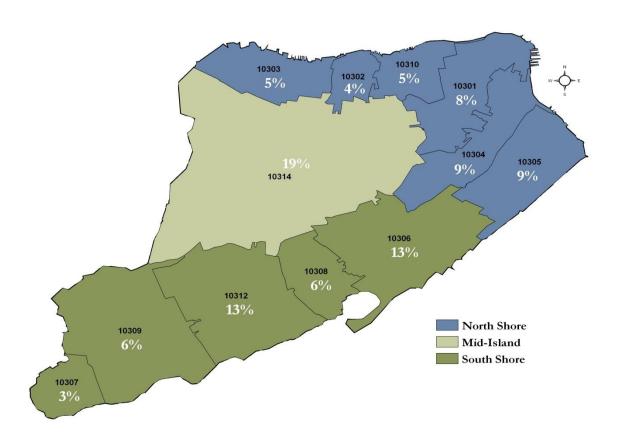
³ It is not uncommon for sample sizes from large populations to hover at or delve below 1%. The Census and American Community Survey (ACS) Public Use Microdata Sample (PUMS), which consists of data at the household unit record, is provided as a 1% population sample (and sometimes less due to decreased response rates).

⁴ The margin of error was calculated based on a 95% confidence level.

Staten Island Region	Zip Code	Wł	nite	Black or African American		Asian		Other		Latino/a		Total by Zip
	10310	45	60%	12	16%	1	1%	6	8%	11	15%	75
Mid-Island	10314	218	76%	7	2%	25	9%	8	3%	27	9%	285
South Shore	10306	167	88%	4	2%	6	3%	5	3%	8	4%	190
	10307	39	91%	0	0%	0	0%	0	0%	4	9%	43
	10308	86	93%	0	0%	2	2%	1	1%	3	3%	92
	10309	87	92%	1	1%	3	3%	2	2%	2	2%	95
	10312	173	91%	1	1%	5	3%	2	1%	10	5%	191
Total by Race		1,132	75%	109	7%	58	4%	66	4%	135	9%	1,500

Figure 1 maps the distribution of respondents by zip code. Of the 1,500 respondents who completed the survey, 19% were from the mid-island region of Staten Island, 40% were from the north shore, and 41% were from the south shore.⁵

Figure 1: Distribution of Respondents by Zip Code



⁵ Staten Island regions are based on United Hospital Fund definitions (http://www.health.ny.gov/statistics/cancer/registry/appendix/neighborhoods.htm).

• Focus Groups. In August 2012, Metis conducted two focus groups with Staten Island residents to hear their opinions about alcohol and substance abuse issues in their communities. A copy of the focus group protocol is included in Appendix A. The focus groups were advertised in the local newspaper. The first focus group was held on Tuesday, August 28 at the Total Drama Wellness Center (New Dorp) and the second focus group was held on Wednesday, August 29 at the South Shore YMCA Counseling Service (Eltingville). The focus groups were conducted by two Metis researchers in the evening and each lasted one hour and a half. The audio recordings were transcribed and a content analysis was conducted to identify key themes and recommendations and next steps.

A total of 29 people participated in both focus groups: five were men and 24 were women. The majority of participants were parents of young adults in their early twenties struggling with prescription drug addictions. A few of the participants were dealing with the loss of a close family member or friend due to substance abuse. One participant was a recovering addict who was five years sober. Additionally, about half of the participants worked in a health or a counseling-related profession. These participants included a pediatrician, a life coach, a woman who is studying to become a substance abuse counselor, and four graduate students who are pursuing their degrees in clinical mental health counseling. The majority of participants were from the Mid-Island or South Shore of Staten Island.

Findings Regarding Alcohol Use and Underage Drinking

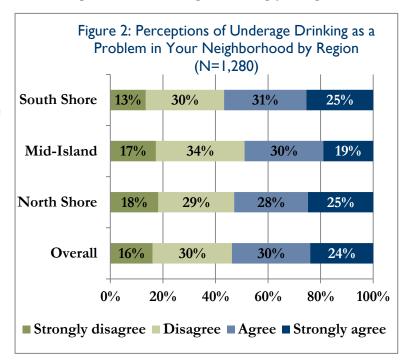
This section of the report presents the findings regarding underage drinking, including perceptions of the magnitude of the problem, reasons for underage drinking, sources of alcohol and acceptability, and roles of adults in helping prevent underage drinking. Detailed survey data for population subgroups are presented in Appendix B, Tables B1-B4.6

Magnitude of the Problem

Staten Island residents are divided in their perceptions of underage drinking as a problem in their neighborhood.

Survey respondents were asked to what extent they agree or disagree that underage drinking is a problem in their neighborhood.

- Overall, 54% of survey respondents *agree/strongly agree* that underage drinking is a problem in their neighborhood, as compared to 46% of respondents who *disagree/strongly disagree*.
- Forty-nine percent of Mid-Island residents agree/strongly agree that underage drinking is a problem in their neighborhood, followed by 53% of North Shore residents and 56% of South Shore residents.
- Less than half of 18-29 year-olds (42%) or adults 60 years old and older (42%) *agree/strongly agree* that underage drinking is a problem in their neighborhood.
- More than half (58%) of respondents who are primary caregivers of children under 21 agree/strongly agree that underage drinking is a problem in their neighborhood.



Focus group participants reported firsthand experiences with underage drinking...

- Youth drinking on their own block
- Local stores selling alcohol to youth without checking IDs
- Their own children having parties while they were away

⁶ Because of rounding, the percentages presented may not total 100%.

Reasons for Underage Drinking

In the focus groups, participants offered a number of reasons why youth drink alcohol.

- Youth's natural tendencies. Many respondents believe that underage drinking is "inevitable" and that it is unrealistic to expect that youth will wait until they are 21 to try alcohol, claiming that it is part of growing up, "a rite of passage," and a result of their natural curious and risk-taking behavior.
- Lack of healthy alternatives and adult supervision. Some respondents noted that youth, today, are "too bored," don't have access to "healthy alternatives," and are often left unsupervised for long periods of time, all of which lead them to engage in unhealthy behaviors such as drinking.
- **Self-esteem and peer pressure.** Many participants mentioned that youth are drinking because of low self-esteem and their desire to "fit in". "It's also a matter of a person's own inner strength and what they want with their own life. And again whether to be a part of the incrowd (...)."
- The role of the media and social networking.

 Several participants in each focus group noted that the current generation is exposed to things in the media that are not age-appropriate and that many TV shows, such as Jersey Shore, and commercials portray drinking as an acceptable and even desirable practice. Participants also spoke about how social networking sites such as Facebook are a vehicle for showcasing underage drinking and either fuel or deflate a young person's self-esteem.

Focus group participants agreed that underage drinking is <u>more dangerous</u> and <u>harmful</u> to the current generation than past generations, because of...

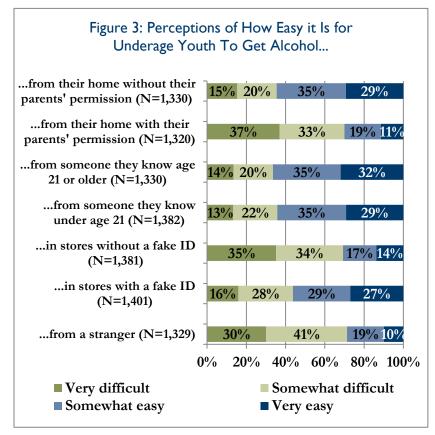
- Lack of consequences.
 - Participants indicated that, today, there is a lack of real consequences for many of the youth who engage in underage drinking. Police are likely to ignore certain behaviors and even when youth get arrested, judges and lawyers tend to be lenient in their decisions.
- Lack of control. According to some participants, in past generations, drinking was much more likely to occur during the weekend only, while during the week youth were able to attend to their responsibilities.
- Alcohol as the gateway drug. There was general agreement among participants that alcohol is a gateway to other drugs and harmful behaviors.
- Lack of morals. Other participants commented that society and youth do not have the same morals or guidance that past generations have had. For example, some youth are now proud of being arrested and "they wear it like a badge" unlike before when they would be considerably embarrassed. Another participant noted that these days "everything is driven by money and material things. There's no more, like, (...) you make a living. You live a normal, decent life. You be a good person."
- **High pressured environment.** Some of the participants reported that children self-medicate with alcohol to help relieve the pressure that is put on them starting at a young age. As one respondent explained, "We pressure them to succeed in all the sports, to succeed in school, to get into the best colleges, to get the best job. (...) They have so much pressure on them, and they start whatever it is that they start doing in order to take that edge off. They self-medicate to get rid of that anxiety."

Sources of Alcohol

Both the survey and focus group respondents think that it is easy for youth to get alcohol from peers, their homes without their parents' permission, or a liquor store that accepts fake IDs.

Survey respondents were asked, in thinking about their neighborhood, how easy do they think it is for underage youth to buy alcohol in stores or get alcohol from someone else.

- More than half of respondents believe it is *somewhat* easy/very easy for youth to get alcohol in stores with a fake ID (56%), from their home without their parent's permission (64%), from someone they know under age 21 (64%), or age 21 and or older (67%).
- The majority of respondents think it is *somewhat difficult/very difficult* for youth to get alcohol, in stores *without* a fake ID (69%), from their home *with* their parents' permission (70%), or from a stranger (71%).



Answers to the question about how difficult it is for underage youth to get alcohol **from their home** *with* **their parent's permission**, differed by respondents' race and education level.

- Seventy-two percent of White respondents, 69% of Black or African American respondents, and 69% of Latino/a respondents believe that it is *somewhat difficult/very difficult* for youth to get alcohol from their home *with* their parent's permission, followed by 56% of Asian respondents, and 48% of Other race respondents.
- Eighty percent of respondents with less than a high school degree think that it is *somewhat difficult/very difficult* for youth to get alcohol from their home *with* their parents' permission, as compared to those with more education: 72% with a high school diploma or GED, 68% with some college, 77% with a 2-year college degree, 70% with a 4-year college degree, and 61% with master's or post-graduate degree.

In the focus groups, most participants reported that youth are getting the alcohol from two main sources: their parents' or peers' homes and from liquor stores that either do not card or accept fake IDs. For example, one woman commented:

"My daughter was 13 years old, and I went away—like, you know, we're not drinkers, but we have alcohol in our house, people give you for Christmas or whatever. And looking at the bottles, they don't look right to me, but I don't [say anything]. A couple years pass, and my daughter goes, "Ma, how'd you like the water in the vodka bottle?" I say, "What?" She says, "Yeah, we drank the vodka and we put water in it. You didn't even know the difference."

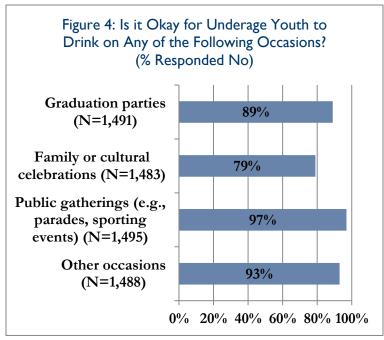
Participants in both focus groups agreed that it is very easy for youth to get alcohol in local stores on Staten Island. As one respondent explained, "How easy is it to get a fake ID? You get a fake ID, you go into a liquor store—a liquor store that you know doesn't card—and you buy alcohol. And I just think it's that easy. And the easier it is, the more of a problem."

Participants also shared that in some instances youth are drinking alcohol with their own parents' consent or involvement. For example, one respondent indicated she knows of parents who have bought kegs for their kids' graduation parties. Another noted that some parents partake in their children's parties because they want to act like friends.

Views on Acceptability

The majority of survey and focus group respondents think that underage drinking is not acceptable on any occasion; although, focus group participants expressed that it is "unrealistic" to expect children to abstain from alcohol until they are 21 years old.

Survey respondents were asked if it is okay for underage youth to drink at graduation parties, family or cultural organization, public gatherings such as fairs, music festivals, parades, or sporting events, or on any other occasions.



- Almost all respondents believe that is *not* acceptable for underage youth to drink at graduation parties (89%), other occasions (93%), or at public gatherings (97%), whereas only 79% of respondents feel this way about youth drinking at family or cultural celebrations.
- A smaller percentage of Asian respondents (59%) believe that underage drinking is *not* acceptable with family or on cultural celebrations than other respondents: 78% of White, 84% of African American, 87% of Latino/a, and 88% of Other race respondents.

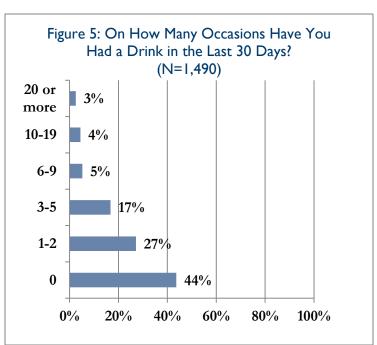
Focus groups participants were adamant that underage drinking is a problem and should be not condoned, but there was also a common perception that asking children not to drink is "unrealistic," and that their trying alcohol is "inevitable."

- One respondent commented that the message for kids should be "drink responsibly," whereas
 others in the focus group reported that they have no control over what their children do behind their
 backs.
- Furthermore, some participants agreed that it is more acceptable for youth 18 years and older to drink. One respondent, for example, explained that if youth who are 18 years old can go to war, then they should be allowed to drink a beer. Others mentioned that "21" is an arbitrary age and that when they were young the legal age for drinking was 18.
- Finally, one participant noted that drinking is also culturally acceptable in certain cultures, for example, among Italian American families, where children grow up surrounded by alcohol and are allowed to try it on special occasions and celebrations. Participants added that it is often difficult, especially when kids are exposed to alcohol in their own homes, to tell their children that it is acceptable to drink with family, but that it is not acceptable to drink with friends.

Slightly more than half of survey respondents reported that they have had at least one drink in the last 30 days, but almost all respondents reported that is not okay to drink five or more drinks in one sitting.

Survey respondents were asked to report on the number of occasions they had a drink in the last 30 days.

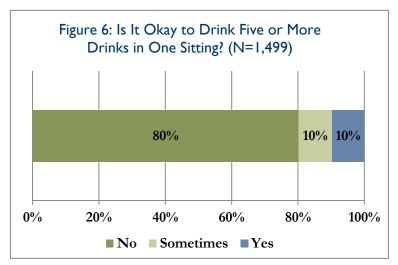
- Overall, 56% of respondents reported having had a drink on at least one occasion in the last 30 days.
- Less than half of Asian (48%) or Other race (37%) respondents reported that they had a drink in the last 30 days.
- More than half (60%) of respondents who are primary caregivers of children under 21 reported that they had a drink the last 30 days, as compared to 48% of non-primary caregiver respondents.



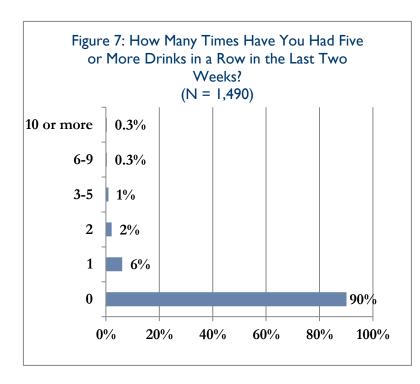
• More than two-thirds (70%) of respondents making \$100,000 or more reported that they had a drink on at least one occasion in the last 30 days, as compared to 34% of respondents making less than \$15,000, 48% of respondents making \$15,000 to less than \$50,000, and 56% of respondents making \$50,000 to less than \$100,000.

Survey respondents were also asked if it is okay to drink five or more drinks in one sitting and how many times they had five or more drinks in one sitting in the last two weeks.

- Overall, 80% of survey respondents believe it is not acceptable to drink five or more drinks in one sitting.
- Of respondents ages 18-29, 45% think it is not acceptable to drink five or more drinks in one sitting.
- Seventy-three percent of female respondents believe it is not acceptable to drink five or more drinks in one sitting, as compared to 90% of male respondents.



- Seventy-three percent of respondents with an income of \$100,000 or more believe that it is not okay to drink five or more drinks in one sitting, followed by 82% of respondents making \$50,000 to less than \$100,000, 83% of respondents making \$15,000 to less than \$50,000 and 91% of respondents making less than \$15,000.
- When asked, how many times they had five or more drinks in a row in the last two weeks, almost all (90%) respondents reported that they had had none.



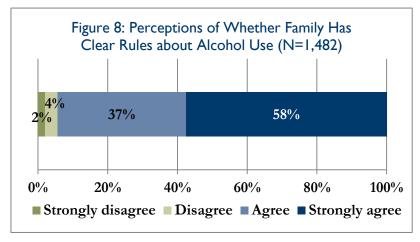
- Among 18-29 year-olds, 22% reported drinking five or more drinks in a row at least once in the last two weeks, a proportion larger than reported by other age groups.
- Fifteen percent of respondents with an income of \$100,000 or more reported drinking five or more drinks at least once in the last two weeks, as compared to 5% of respondents with an income of \$15,000 to less than \$50,000, 7% of respondents with an income of less than \$15,000, and 9% of respondents with an income of \$50,000 to less than \$100,000.

Role of Adults in Helping Prevent Underage Drinking

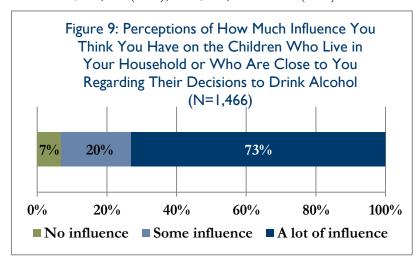
Almost all survey respondents agree that their family has clear rules about alcohol use and that they have at least some influence on the children in their lives regarding their decisions to drink alcohol, yet only half have talked to these children about the risks of underage drinking.

Survey respondents were asked a series of questions regarding their relationship with children in their household or to whom they are close, and how they help prevent underage drinking.

 When asked if their family has clear rules about alcohol use, almost all (95%) respondents agree/strongly agree.



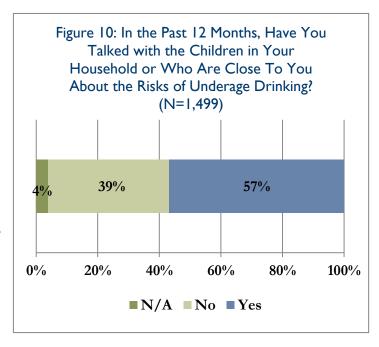
- Almost all (93%) survey respondents believe that they have *some influence/a lot of influence* on the children who live in their household or who are close to them regarding their decisions to drink alcohol or not to drink alcohol.
- Compared to all respondents, smaller percentages of respondents 60 years old and older (84%) or 18-29 years old (85%) feel that they have *some influence/a lot of influence* on children who live in their household or who are close to them regarding their decisions to drink alcohol.
- Similarly, a smaller percentage of respondents making less than \$15,000 (81%) believe that they have *some influence/a lot of influence* on children in their lives regarding their decisions to drink alcohol, as compared to respondents making \$15,000 to less than \$50,000 (90%), \$50,000 to less than \$100,000 (96%), and \$100,00 or more (97%).



- Of respondents that had a relationship with a child(ren) under the age of 21, there were some differences in how much influence they feel they had on their decisions to drink alcohol depending on the type of relationship:
- Seventy-one percent of non-relatives believe that they have *some influence/a lot of influence*, compared to 86% of grandparents, 92% of other relatives, 96% of parents or guardians, and 100% of siblings.

Survey respondents were asked, in the past 12 months, whether they have talked to the children in their household or who are close to them about the risks of underage drinking.

- Fifty-seven percent of survey respondents reported having talked with their children in their household or who are close to them about the risks of underage drinking, 39% have not talked to their children, and 4% do not have a child in their household or who is close to them (N/A).
- Two-thirds (66%) of respondents who are primary caregivers of children under 21 reported that they have talked with their children in their household or who are close to them about the risks of underage drinking, while only 42% of non-primary caregiver respondents have talked to the children in their lives.



- More than half of White (56%), Black or African American (66%), or Latino/a (71%) respondents reported having a conversation with children in their household or who are close to them about the risks of underage drinking, as compared to 41% of Other race respondents, and 45% of Asian respondents.
- Seventy percent of respondents ages 40-49 and 61% of respondents ages 50-59 reported that they have talked to the children in their lives about the risks of underage drinking, while less than half of respondent ages 18-29 (24%), 30-39 (42%), and 60 years old or older (44%) reported talking to the children in their lives.

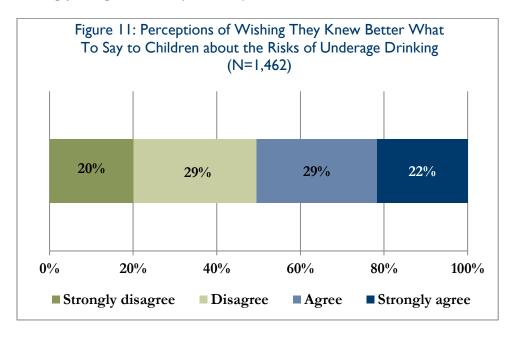
Types of conversations focus group participants had with their children...

- "Drilling the message." Some participants reported being very vocal with their children and/or threatening to take action if they don't follow the rules (e.g., removing privileges).
- **Brief conversations.** Other participants explained they had brief short conversations about "don't drink" or "if you drink, don't drive or "drink responsibly."
- **No Discussion.** A few participants explained that they do not have any conversations at all, because they believe it is "silly lip service." One respondent said, "No matter what you say, they are going to do what they want."

Survey respondents are divided about wishing they knew better what to say to children about the risks of underage drinking.

Survey respondents were asked whether or not they wish they knew better what to say to children about the risk of underage drinking.

• Overall, 51% *agree/strongly agree* that they wish they knew better what to say and 49% *disagree/strongly disagree* that they wish they knew better.



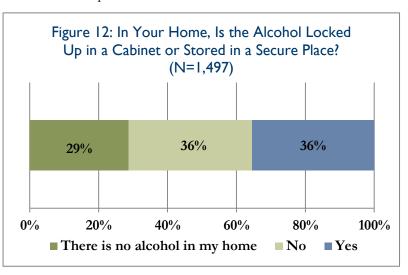
- More than half of respondents ages 50-59 (53%) or 60 years and older (61%) *agree/strongly agree* that they wish they knew better what to say to children about the risk of underage drinking, as compared to 37% of respondents ages 18-29, 46% of respondents 40-49, and 47% of respondents ages 30-39.
- Similarly, more than half of respondents making less than \$15,000 (59%) or \$15,000 or less than \$50,000 (58%) *agree/strongly agree* that they wish they knew better what to say to children in their lives about the risks of underage drinking, whereas less than half of respondents that make \$100,000 or more (43%) or \$50,000 or less than \$100,000 (49%) *agree/strongly agree*.

During the focus groups, many respondents indicated that they have spoken to their children about the risks of underage drinking. Yet, a few indicated that they were unsure of when to have the conversation with their children. One of the participants indicated having spoken to her child when the child was too young and not knowing what is the appropriate age to talk to their children about these matters.

A little more than one-third of respondents keep alcohol locked up in a cabinet or stored in a secure place.

As a means of prevention, survey respondents were also asked whether or not they keep the alcohol in their home locked up in a cabinet or stored in a secure place.

• Overall, 36% of respondents keep their alcohol locked in a cabinet or stored in a secure place; the same percentage does not secure the alcohol in their homes. Twenty-nine percent of respondents reported not having alcohol in their home.

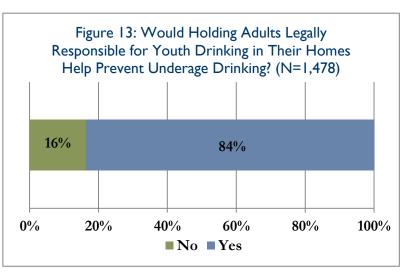


The majority of respondents believe that holding adults legally responsible for youth drinking in their homes would help prevent underage drinking.

Survey respondents were asked if holding adults legally responsible for youth drinking in their homes would help prevent underage drinking.

 Almost all (84%) of respondents believe that holding adults legally responsible for youth drinking in their homes would help prevent underage drinking.

In the focus groups, the participants were asked if they feel adults should be liable for underage drinking in their homes when they are not present. In the first focus group, there was some disagreement among the participants, with some believing that they can't be held responsible



for what their children do when they are not present. In the second focus group, there was a general agreement that adults should be held responsible, thus coming to the realization that they may need to ensure the alcohol in their homes is locked away or stored safely when adults are not present.

Suggestions for Tackling the Underage Drinking Problem

During the focus groups, participants were asked what they think could be done to address the underage drinking problem. Participants in the focus groups agreed that the solutions need to come from everywhere. As one respondent noted, "They do teach it at the schools. They do. It doesn't help. It has to be everybody (...) It has to be a village that takes care of these kids."

- Parents should become more involved and better trained to support their children. Participants seemed to agree that efforts to solve the underage drinking problem need to involve the parents. For example, in both focus groups, there was a general sense that many parents don't realize that their children have problems or they are in denial because they are embarrassed. As explained by one respondent, "Yes, [we need to involve] the parents. Because there are a lot of parents that are on the sidelines, that are in denial. Total denial. And total embarrassment. They're embarrassed. They think it's taboo. They don't want any help."
- Regaining a sense of community that places responsibility in everybody's hands.
 While discussing potential solutions during the focus group, there was an overwhelming agreement that there should be a strong call for action from within the community. Many participants noted that neighbors should be helping each other and people should not look the other way when they see inappropriate behavior.

"As parents and adults I feel we have to step up. We hear something, we have to walk down the block and find out what's going on. If something's going on, call the police."

Another respondent commented that if people had spoken up and made her aware of her son's problems she may have been able to save her son. She noted, "I wish that people would have called me and said, "(...) go find – go get your son. I just saw him, and he's on the corner, and he's wrecked. I wish people would have done that. I pray that people will now open their eyes and do that, because it takes all of us together as a community to try to save our kids."

- Children and youth need to be made more aware of all the dangers of underage drinking. Participants agreed that youth should learn about the consequences of drinking, including drunk driving accidents, the physical effects of drinking on their brain and bodies, and the perils of drinking as a gateway drug. They suggested that it might be best for youth who have gone through bad experiences to share their stories with their peers and make their voices heard. Furthermore, they suggested that the message to kids should emphasize that saying "no," being responsible and standing up to peer pressure can be "cool."
- A policy of no tolerance should be promoted and enforced. There was strong agreement that police officers, schools, judges and lawyers, and the community at large are tolerating too much and that teenagers need to know that there are repercussions to their destructive behavior. For example, judges and lawyers should be tougher in their decisions and schools should be more proactive in confronting students who are acting suspiciously or who have engaged in drinking and other illegal behaviors. In addition, the government and the police should be more proactive in closing down the stores that are known to sell alcohol to minors. There should also be tighter controls, such as additional checkpoints for drunk driving around the island.

Findings Regarding Youth Prescription Drug Use

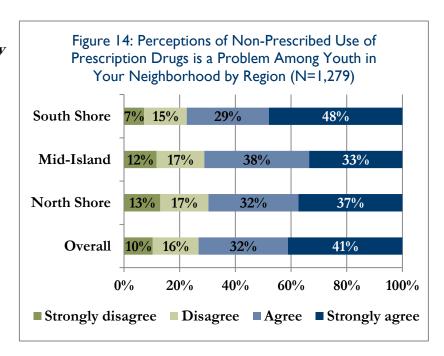
This section of the report presents the findings related to youth prescription drug use, more specifically, the non-prescribed use of prescription drugs or prescription drug misuse. The non-prescribed use of prescription drugs refers to the use of prescription drugs without a prescription or with a prescription but in a manner other than prescribed. Discussed below are perceptions on the magnitude of the problem, reasons for prescription drug use, sources of prescription drugs and acceptability, and roles of adults in helping prevent prescription drug use. Detailed survey data for population subgroups are presented in Appendix B, Tables B4-B8.⁷

Magnitude of the Problem

Both the survey and focus group respondents agree that the non-prescribed use of prescription drugs is a problem in their neighborhood.

Survey respondents were asked to what extent they agree or disagree that the non-prescribed use of prescription drugs is a problem in their neighborhood.

- Overall, 73% of survey respondents agree/strongly agree that the nonprescribed use of prescription drugs is a problem among youth in their neighborhood.
- Sixty-nine percent of North Shore, 71% of Mid-Island, and 77% of South Shore residents agree/strongly agree that the nonprescribed use of prescription drugs is a problem among youth.



• Compared to all respondents, somewhat smaller percentages of adults ages 18-29 (62%) and ages 60 years old and older (69%) **agree/strongly agree** that the non-prescribed use of prescription drugs is a problem among youth in their neighborhood.

⁷ Because of rounding, the percentages presented may not total 100%.

Respondents' answers differ by race and income:

- Seventy-five percent of White respondents *agree/strongly agree* that the non-prescribed use of prescription drugs is a problem among youth in their neighborhood, followed by 73% of Latino/a, 70% of Asian, 65% of Black or African American, and 60% of Other race respondents.
- Sixty-two percent of respondents with an income of less than \$15,000 agree/strongly agree that the non-prescribed use of prescription drugs is a problem among youth in their neighborhood, as compared to higher income respondents: 73% of respondents with an income of \$15,000 to less than \$50,000, 72% of respondents with an income of \$50,000 to less than \$100,000, and 78% of respondents with an income of \$100,000 or more.

In the focus groups, most of the participants agreed that is a widespread problem on Staten Island and beyond, describing it as an "epidemic." They also agreed that what makes prescription drug misuse such a concern is the addictive properties of many of the medications being misused, such as OxyContin, Adderall, Ritalin, and Xanax. As one participant explained, "what starts out as experimentation at parties becomes physically an addiction very quickly." Participants who had children struggle with prescription drug addictions explained how the addiction quickly progressed ("snowballed") and affected all areas of their life, leading them to steal from their parents and family members to be able to feed their addiction, and in other instances, once they had exhausted all sources of income, moving on to heroin or crack. For example, two respondents explained:

"Now you have to deal with the next step, where your kid is on the street, owing dealers \$30 a pill, and they still have to get the 10 a day, because they're addicted—that's \$300 a day that they're running up in bills. And then it snowballs into the crime. It snowballs into the burglaries, because they need money. They are so desperate to not get killed on the street by the people they owe the money to—I mean, and people are closing their eyes to all this. Nobody sees it."

"What happens is, after they've robbed everything from you—all your jewelry, and whatever—and then after they're up to—their back's against the wall because of the dealers on the street, they turn to heroin because it's \$5 a bag. And heroin is what it's all based from. It all goes back to the poppy. It's all opiates."

Focus group participants agreed that the root causes of prescription drug misuse are the tendency to...

- **Over Medicate.** Participants indicated that doctors are quick to prescribe medications to adults and children rather than using other forms of treatment. It was also mentioned that we have a tendency to self-medicate. One participant, a pediatrician, explained that when a child has a fever, parents immediately respond by giving the child medication, but yet the fever is fighting the infection and the medication is not necessarily needed.
- Overprescribe. Many participants expressed concern with the amount of drugs
 doctors will prescribe to their patients, questioning whether patients actually need the
 quantity prescribed. One participant, a breast cancer survivor, explained that the
 oncologist prescribed her 280 pills of Percocet.

Reasons for Prescription Drug Use

Focus group participants noted a number of reasons why youth are engaging in unhealthy practices around prescription drug use, including.

- Youth's natural tendencies and experimentation. Many respondents believe that youth initially decide to try prescription drugs as part of the risk-taking behavior that characterizes a youth's desire to experiment with new things, not realizing that it can quickly become a very harmful addiction. As one participant noted, "Teenagers are risk-takers, that's what they do. They think they can defy anything. They think, "Oh, I'm not going to get hit by a car, I'm not going to die." Another said, "...they see the drugs that are in their parent's cabinet or they see drugs that their friends are doing and they are bored, and they take drugs. They try it. And they don't realize that they're hooked to it."
- **Peer pressure and self-esteem.** Peer pressure and a desire to "fit in" as well as low self-esteem, were also mentioned as reasons leading to youth trying prescription pills. One respondent stated that youth think, "Oh, if I take this little pill I'll feel comfortable, I'll feel happy, I'll be able to talk to this guy or this girl."
- **Easy access.** Some participants reported that prescription drugs are selected as the drug of choice because they are easier to get than street drugs. One participant expressed that, "You're more likely to find OxyContin, codeine, anything in your house Xanax than weed." Other participants noted that prescription drugs are much easier to access in recent years because of the steep increase in prescriptions, and the fact that youth are much more aware of their existence than in the past.

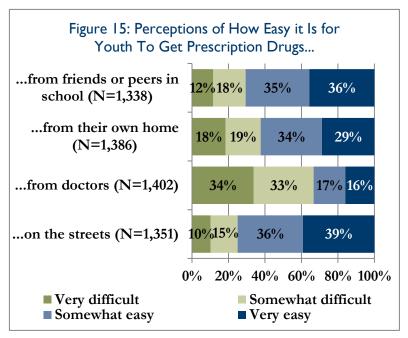
- Focus group participants also expressed concern with the influence of schools and doctors as a reason why children misuse prescription drugs...
- Over Diagnosis or
 Misdiagnosis. Participants
 reported that schools and
 doctors are often too quick to
 diagnose children and youth
 with Attention Deficit Disorder
 (ADD) and Attention Deficit
 Hyperactivity Disorder
 (ADHD), which may lead to
 overprescribing medication to
 treat these disorders.
- Medication over other forms of treatment. Others explained that doctors are quick to prescribe medications to adults and children to treat pain or other behavior or mood disorders (e.g., ADHD, depression etc.) rather than using other forms of treatment.
- Perceptions of prescription drugs as safer drugs. Many of the participants reported that initially youth think that taking prescription drugs is safer because they see family members and other adults taking them and because they are prescribed by a doctor. As explained by one participant, "Because it's prescription there is this idea that they are safer than, you know, smoking crack. You know, this is in a bottle. It has my mother's name on it." Another said, "They think that because it's a prescription, it's safe. That's how it starts. They think, when they start using it, because it's prescribed—"A doctor gave this to me, to my mother, to my uncle."

Sources of Prescription Drugs

Both the survey and focus group respondents believe that it is easy for youth to get prescription drugs from friends or peers in school, their own home, or the streets.

Survey respondents were asked, in thinking about their neighborhood, how easy it is for youth to get prescription drugs from friends or peers in schools, their own home, doctors, or on the street.

• The majority of respondents believe it is *somewhat easy/very easy* for youth to get prescription drugs from their own home (63%), from friends or peers in school (71%), or on the streets (75%), while only 33% think it is *somewhat easy/very easy* for youth to get prescription drugs from doctors.



- A greater percentage of White respondents believe that it is *somewhat easy/very easy* for youth to get prescription drugs from friends or peers in schools (73%), from doctors (35%), or from the streets (77%), compared to the percentages of Black or African American, Asian, or Latino/a respondents reporting these sources.
- Compared to the overall percentages, a greater percentage of respondents without a high school diploma think that it is *somewhat easy/very easy* for youth to get prescription drugs from a doctor (45%), whereas smaller percentages of this population think that it is *somewhat easy/very easy* to get drugs from their own home (40%), from friends or peers or peers in school (64%), or on the streets (63%).

Respondents' answers to the question about how easy it is for youth to get prescription drugs from friends or peers in school also differ by Staten Island region, age, and income level.

- Sixty-five percent of Mid-Island residents believe it is *somewhat easy/very easy* for youth to get prescription drugs from friends or peers in school, followed by 69% of North Shore residents and 74% of South Shore residents.
- Smaller percentages of respondents ages 18-29 (60%) or 60 years old and older (62%) believe that it is **somewhat easy/very easy** for youth to get prescription drugs from friends or peers in school, as compared to the proportions of other age groups.
- Of respondents with an income of \$15,000 or less, 60% think that it is **somewhat easy/very easy** for youth to get prescription drugs from friends, a proportion smaller than that of other income levels.

Respondents' answers to the questions about how easy it is for youth to get prescription drugs from their own home or on the streets also differ by subgroup.

- Seventy-four percent of respondents ages 30-39 think that it is *somewhat easy/very easy* for youth to get prescription drugs from their own home, as compared to 55% of respondents ages 60 and older, 58% of respondents ages 18-29, 59% of respondents ages 50-59, and 64% of respondents ages 40-49.
- Greater percentages of respondents with an income of \$15,000 to less than \$50,000 (74%), \$50,000 to less than \$100,000 (79%), or \$100,000 or more (74%) believe that it is *somewhat easy/very easy* for youth to get prescription drugs from on the streets, as compared to respondents making less than \$15,000 (69%).

In the focus groups, participants were asked where on Staten Island youth are getting prescription drugs. Focus group participants reported that peers in school, parents' and other people's homes, doctors, and dealers on the street are the primary sources of youth getting prescription drugs.

- Peers in schools. In both focus groups, respondents indicated knowing of or having seen students deal prescription drugs in school, often to make the money they need to feed their own addiction.
- Parents' and other people's homes. There was a general consensus among focus group participants that many of the youth initially get access to prescription drugs from their parents' medicine cabinets or the homes of their peers. As one respondent noted "When I do counseling, I find that for a lot of kids (...) it came from the parents. Supplies at the house: drinking, the drugs are in the house."
- **Doctors.** In contrast to the survey findings, focus group participants reported that doctors and pharmacies were the main source of youth getting prescription drugs. Participants noted that it is very easy for youth and dealers to get prescriptions from multiple doctors and pharmacies. For example, someone said, "There's a doctor on Nelson Avenue...gives pills out like candy. You can go in there and say I got a toothache and he'll write you a prescription."
- **Dealers on the Street.** Most of the participants reported that eventually, once they become addicted, youth are buying prescription drugs mainly from dealers. The participants explained that dealers can be found at local stores, schoolyards, and on the street. They shared several examples of places they know or where their children have gone to obtain pills, including a pizzeria where one participant's son worked. Participants also mentioned that senior citizens are becoming increasingly

Focus groups participants expressed concern with the lack of regulation of doctors, pharmacies, and pharmaceutical companies. As they noted...

- Addicts or dealers can go to multiple doctors asking for medication and then fill the prescriptions at different pharmacies without being questioned.
- The problem is compounded by the fact that prescription drugs are a very profitable business and the pharmaceutical companies have a stronghold in Washington, DC and other spheres of government.

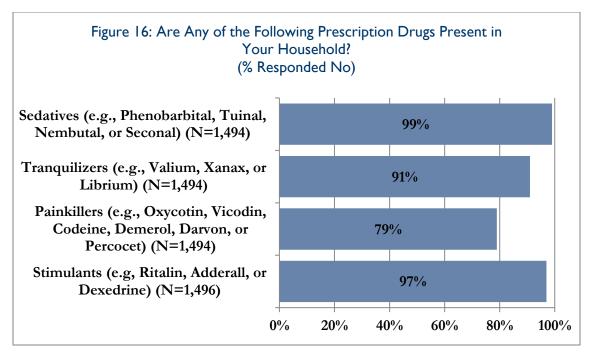
involved in this business and fake symptoms with doctors to get large amounts of pills that they can sell in the street (sometimes with the help of children and youth, as in the case of one of the respondents) to supplement their limited income.

Views on Acceptability

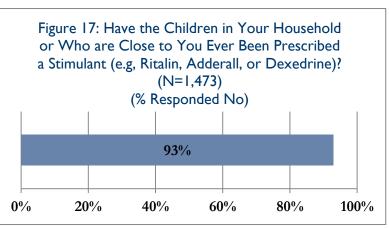
The majority of survey respondents reported that they do not have prescription sedatives, tranquilizers, painkillers, or stimulants in their household.

Survey respondents were asked a series of questions about the types of prescription drugs in their household and their views on whether it is okay to take prescription drugs without a prescription or in a manner other than prescribed.

• Almost all respondents reported that they do not have prescription tranquilizers (91%), stimulants (97%), or sedatives (99%) in their household; whereas 79% of respondents reported that they do not have prescription painkillers in their home.



• When asked if children in their household or who are close to them have ever been prescribed a stimulant, almost all (93%) respondents reported no.



The majority of survey respondents also believe that it is not okay to use prescription drugs without a prescription or in a manner other than prescribed and they do not agree that non-prescribed use of drugs is safer than doing street drugs.

 Overall, 95% of respondents believe that is not acceptable to use prescription drugs without a prescription or in a manner other than prescribed.

Respondents were asked to report the number of days in the past 12 months they used prescription drugs (e.g., sedatives, tranquilizers, painkillers, or stimulants) without a prescription or in a manner other than prescribed.

• On average, respondents reported using painkillers on 2 days, tranquilizers on 1 day, stimulants on 0.4 days, and sedatives on 0.02 days in the past 12 months.

Lastly, respondents were also asked whether they agree or disagree that non-prescribed use of prescription drugs is safer than doing street drugs, such as heroin or cocaine.

The majority (85%), of respondents disagree/strongly disagree that non-prescribed use of prescription drugs is safer than doing street drugs, such as heroin or cocaine.

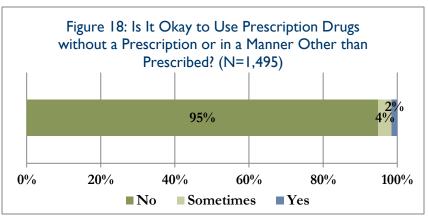
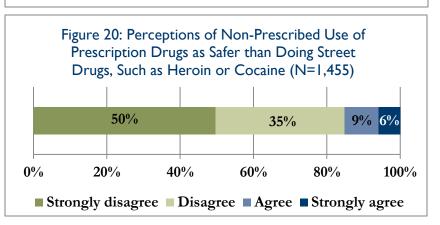


Figure 19: Average Number of Days in the Past 12 Months You Used the Following Prescription Drugs Without a Prescription or in a Manner Other than Prescribed Sedatives (e.g., Phenobarbital, Tuinal, Nembutal, or Seconal) 0.02 (N=1,453)Tranquilizers (e.g., Valium, 1 Xanax, or Librium) (N=1,451) Painkillers (e.g., Oxycotin, 2 Vicodin, Codeine, Demerol, Darvon, or Percocet) (N=1,451) Stimulants (e.g, Ritalin, Adderall, or Dexedrine) 0.4 (N=1,457)0.0 2.0 0.5 1.0 1.5

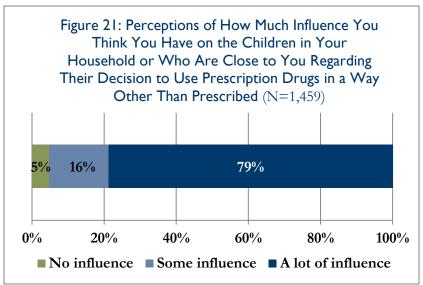


Role of Adults in Helping Prevent Prescription Drug Misuse

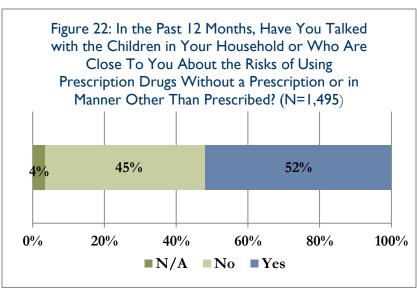
Almost all survey respondents believe that they have at least some influence on the children in their lives regarding their decisions to use prescription drugs in a way other than prescribed, yet only half have talked to their children about the risks of prescription drug misuse.

Survey respondents were asked questions regarding their relationship with children in their household or to whom they are close to, and how they help prevent prescription drug misuse.

Almost all respondents (95%) believe they have *some influence/a lot of influence* on the children in their household or who are close to them regarding their decisions to use prescription drugs in a way other than prescribed.



- When asked if they have talked to their children or youth in their household or who are close to them, during the past 12 months, about the risk of using prescription drugs without a prescription or in a manner other than prescribed, 52% responded "yes", 45% have not talked to their children, and 4% do not have a child in their household or who is close to them (N/A).
- More than half (59%) of respondents who are primary caregivers of children under 21 have talked with the children in their household or who are close to them about the risks of prescription drug misuse, while less than half (42%) of non-primary caregiver respondents have talked to the children in their lives.



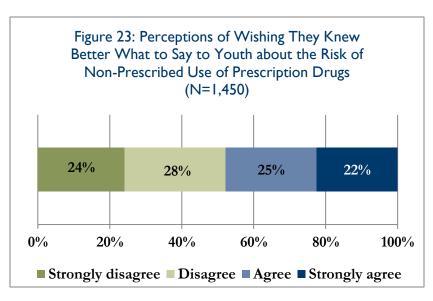
• Sixty-one percent of Latino/a respondents have talked with the children in their household or who are close to them about the risks of prescription drug misuse, as compared to 29% of Asian, 39% of Other race, 52% of White, and 57% of Black or African American respondents.

• More than half of respondents ages 40-49 (60%) or 50-59 (61%) have talked with the children in their household or who are close to them about the risks of prescription drug misuse, while less than half of respondents 18-29 years old (31%), 30-39 years old (37%), and 60 years old and older (40%) have talked to the children in their lives.

Survey respondents are divided about wishing they knew better what to say to children about the risks of non-prescribed use of prescription drugs.

Survey respondents were asked whether they agree or disagree that they knew better what to say to children about the risks of non-prescribed use of prescription drugs.

Overall, 47% agree/strongly agree that they wish they knew better what to say to children about the risks of non-prescribed use of prescription drugs and 52% disagree/strongly disagree.

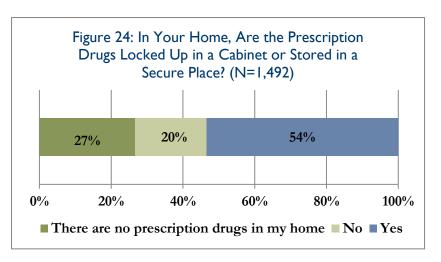


- More than half of respondents ages 60 years old and older (63%) *agree/strongly agree* that they wish they knew better what to say to children about the risks of non-prescribed use of prescription drugs, as compared to 32% of 18-29 year-olds, 45% of 30-39 year-olds, 43% of 40-49 year-olds, and 45% of 50-59 year-olds.
- At least half of respondents with an income of less than \$15,000 (53%) or \$15,000 to less than \$50,000 (54%) *agree/strongly agree* that they wish they knew better what to say to children about the risks of non-prescribed use of prescription drugs, whereas less than half of respondents making \$100,000 or more (43%) or \$50,000 to less than \$100,000 (47%) *agree/strongly agree*.

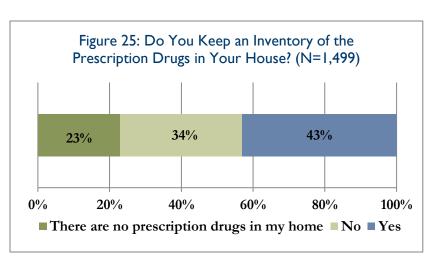
About half of respondents lock up prescription drugs in a cabinet or store them in a secure place; less than half keep an inventory of the prescription drugs in their house.

As a means of prevention, survey respondents were asked whether or not they keep prescription drugs locked up in a cabinet or stored in a secure place at home, as well as whether or not they keep an inventory of the prescription drugs in their house.

 Overall, 54% of respondents have prescription drugs locked up in a cabinet or stored in a secure place and 20% do not. Twenty-seven percent of respondents do not have prescription drugs in their home.



- Thirty-six percent of 18-29 year-olds have prescription drugs locked up in a cabinet or stored in a safe place, followed by 51% of 50-59 year-olds, 53% of 40-49 year-olds, 58% of adults 60 years old and older, and 60% of 30-39 year-olds.
- Forty-three percent of respondents keep an inventory of the prescription drugs in their house, while 34% do not; 23% reported that there are no prescription drugs in their home.



- Less than half of Latino/a (45%), White (43%), Asian (41%), or Other race (39%) respondents keep an inventory of the prescription drugs in their house, whereas half (50%) of Black or African American respondents have such an inventory.
- Less than half of respondents making \$15,000 to less than \$50,000 (43%), \$50,000 to less than \$100,000 (42%), or \$100,000 or more (40%) keep an inventory of the prescription drugs in their house, whereas slightly more than half (58%) of respondents making less than \$15,000 keep an inventory.

Suggestions for Tackling the Prescription Drug Use Problem

In the focus groups, participants were asked what they think could be done to address the prescription drug use problem. There was a general consensus that tackling the prescription drug use problem in Staten Island needs to involve all stakeholders, including parents, schools, the police, the government and the community at large, and address all facets of the problem.

- Parents need to be better informed and encouraged to take an active role.
 - Participants indicated in the focus groups that one of the reasons parents don't speak up or try to ignore the problem is the stigma associated with having a child who has become a drug addict and may be engaging in illegal or "bad" behaviors. Some respondents noted that there is a general perception that parents are to blame or they did not do enough to address their child's problem. In this sense, one respondent noted, "Well, I think that the more we talk about it, the less stigma there is. Because we see that there are people like us, professional people, people that led good lives, and their children have succumbed to the disease. It does not discriminate." Some participants reported that they did not know when to start having discussions with their children or what to say. Respondents also noted that other parents are too afraid to confront their children.
- Youth should be made more aware of the dangers of prescription drug misuse.

There was a general agreement that, at least initially, many youth feel that prescription drugs are much safer than street drugs. Participants reported that youth should be educated about the dangers of prescription drug use, including its addictive properties, the "snowballing" effects and disease progression, and the dangers of mixing drugs and overdosing. Furthermore, participants reported that schools should also play an active role in helping tackle this issue, for example, through prescription drug awareness programs and strong actions toward students who are dealing drugs on school grounds.

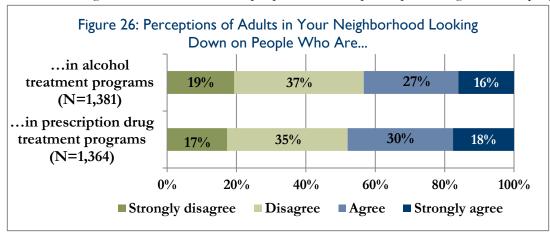
- There is a need for stronger interventions at the systems and policy level. The following were all mentioned as possible strategies to address some of the root causes of the problem:
 - Work with politicians and the government to create tighter control and monitoring laws for doctors and pharmacies, for example, through the creation of a common database across pharmacies or for doctors, which would allow for the detection of prescriptions drug abuse.
 - Publicize the arrests of doctors and closing of pharmacies that engage in scams related to prescription drugs to send a strong message that these practices will no longer be tolerated.
 - Change practices in hospitals and emergency rooms to curtail the amounts of prescription drugs
 that are prescribed. One physician, for example, explained that there is a very good program in
 South Carolina where emergency rooms are not allowed to give out any prescriptions that include
 refills.
 - Encourage the creation of additional overnight treatment programs and longer, more effective
 interventions. There was some discussion in one of the focus groups about the inadequacy of
 available substance abuse treatment services, many of which are perceived to be too costly, too
 short and/or ineffective.

Findings Regarding Substance Abuse Treatment Services

This section of the report presents the findings regarding alcohol and prescription drug use treatment services, including perceptions on whether adults in their neighborhood look down on people in alcohol or prescription drug programs, about knowing where to get help, and who they would turn to for help if a child or youth they knew needed treatment, as well as why they think people in their neighborhood do not get the help they need. Detailed survey data for population subgroups are presented in Appendix B, Tables B9-B12.8

Survey respondents were divided in their perceptions of adults in their neighborhood looking down on people who are in alcohol or prescription drug treatment programs.

 Overall, 43% of respondents agree/strongly agree that adults in their neighborhood look down on people who are in alcohol treatment programs and 48% of respondents agree/strongly agree that adults in their neighborhood look down on people who are in prescription drug treatment programs.



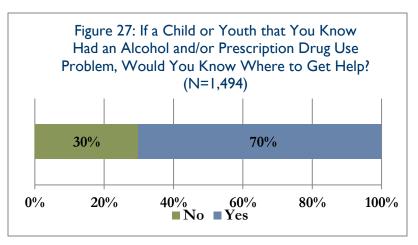
While respondents' perceptions about adults in their neighborhood looking down on people who are in alcohol treatment programs do not differ by subgroups, there are differences in their perceptions about how adults in their neighborhood view people in prescription drug treatment programs.

- More than half of Asian (55%) respondents *agree/strongly agree* that adults in their neighborhood look down on people who are in prescription drug treatment programs, as compared to less than half of White (49%), Latino/a (48%), Black or African American (43%), and Other race (32%) respondents.
- Fifty-three percent of adults ages 18-29 *agree/strongly agree* that adults in their neighborhood look down on people who are in prescription drug treatment programs, a proportion higher than older age groups.
- Compared to the overall percentage as well as other education level subgroups, a higher percentage (55%) of respondents with a master's or post-graduate degree *agree/strongly agree* that adults in their neighborhood look down on people who are in prescription treatment programs.

⁸ Because of rounding, the percentages presented may not total 100%.

The majority of the survey respondents report that they would know where to get help if a child or youth that they knew had an alcohol and/or prescription drug use problem.

- When asked if a child or youth that you know had an alcohol and/or prescription drug use problem would you know where to get help, 70% of respondents replied "yes."
- Sixty-two percent of Mid-Island, 70% of North Shore, and 74% of South Shore residents report that they know where to go to get help for a child or youth they know had an alcohol and/or prescription drug use problem.

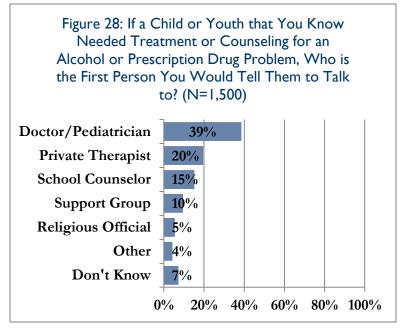


- Greater percentages of Latino/a (76%), Other race (76%), and Black or African American (77%) respondents report that they would know where to get such help, as compared to White (69%) or Asian (69%) respondents.
- Knowledge about where to go for help increased with respondents' education level. Fifty-nine percent of respondents with less than a high school education report that they would know where to get help if they knew a child or youth that had an alcohol and/or prescription drug use problem, followed by 65% with a high school diploma or GED, 66% with some college, 72% with a 2-year degree, 74% with a 4-year degree, and 76% of respondents with a master's or post-graduate degree.

Respondents were asked who is the first person they would tell a child or youth that they knew, who

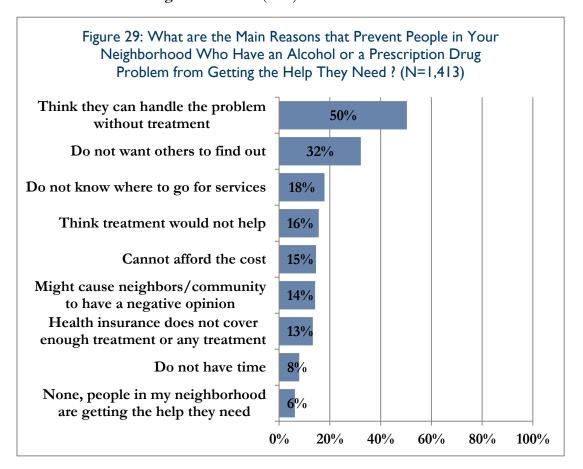
needed treatment or counseling for an alcohol or prescription drug use problem, to talk to.

• Thirty-nine percent say that they would tell them to talk to their *doctor/pediatrician* first, 20% would tell them to talk to a *private therapist*, 15% would tell them to talk to a *school counselor*, 10% would tell them to talk to a *support group* (e.g., AA, Al-Anon), and 5% would tell them to talk to a *religious official*.



Lastly, respondents were asked for the main reasons that prevent people in their neighborhood who have an alcohol or a prescription drug problem from getting the help they need.

• Fifty percent of respondents reported that the main reason is that people with these problems *think* they can handle the problem without treatment. The second most selected response was that people do not want others to find out (32%) and the third most selected response was that people do not know where to go for services (18%).



Based on their own experiences, focus groups participants reported the following shortcomings with current treatment programs ...

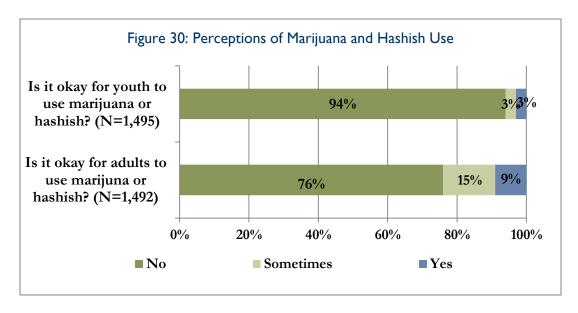
• Too costly, Too short, and Ineffective. Participants discussed that some of the treatment programs are too costly, which prevents them from sending their children to receive treatment. Participants also discussed the ineffectiveness of treatment programs. One participant explained that her son had been discharged from a rehab program after 30 days, because the insurance companies don't want to pay anymore. When he returned home he attempted suicide twice before he succeeded on the third time. But yet, the doctors continued to tell her that her son was not a danger to himself and that taking Xanax was not a problem. Participants also pointed to other shortcomings that need to be addressed. For example, one respondent mentioned that they had to give alcohol to their child on the flight to the rehab center so he could test positive for something or they would not take him.

Findings Regarding Marijuana and Hashish Use

This section of the report presents the findings regarding marijuana use, including if it is okay for youth or adults to use marijuana (grass, pot) or hashish (hash, hash oil). Detailed survey data for population subgroups are presented in Appendix B, Table B13.9

A majority of survey respondents do not approve of marijuana or hashish use by youth or adults, but a greater percentage believe this is acceptable behavior for adults.

• Ninety-four percent of respondents think that is not okay for youth to use marijuana or hashish, but 24% reported that it is okay for adults to use these substances.



- Compared to older respondents, a greater percentage of 18-29 year-olds thinks that it is okay for youth (11%) and adults (36%) to use marijuana or hashish.
- While primary caregivers of children under 21 and non-caregivers share a similar view that it is not okay for youth to use these substances (95% and 92%, respectively), they differ in their views about use by adults. Seventy-nine percent of respondents who are primary caregivers of children under 21 think that it is not okay for adults to use marijuana or hashish, compared to 69% of respondents who are not primary caregivers.

⁹ Because of rounding, the percentages presented may not total 100%.

Appendix A: Instruments

Appendix A includes the following instruments:

- Community Attitudes Survey Instrument
- Focus Group Consent Form
- Focus Group Protocol

Tackling Youth Substance Abuse (TYSA) Initiative Community Attitudes Survey

Introduction: Metis Associates, a research company based in New York City, is conducting a study commissioned by the Staten Island Partnership for Community Wellness. As part of this study, Metis has contracted with America Research Inc. to conduct a survey on community attitudes and opinions about substance use and in particular alcohol and prescription drug use in Staten Island. Your answers are very important and will be used to improve youth substance abuse prevention and treatment services in Staten Island, so please be honest. Participation in the survey is voluntary. Your answers are confidential and your name or personal information will never be disclosed. You do not need to answer any questions you do not want to answer.

<u>Scr</u>	reening Process:				
ı.	How old are you (in years)? [IF LESS THAN 18, END S	SURVEY]			
	Which one of the following describes you best? [CHECK O American Indian or Alaska Native ☐ Asian ☐ Black or African Ame White ☐ Multiracial ☐ Other		ive Hawaiiar	or Pacific Isl	lander
3.	Are you Hispanic or Latino/a? ☐ Yes ☐ No				
4.	What was your total household income last year, before to ☐ Less than \$15,000 ☐ \$15,000 to less than \$50,000 ☐ \$50,000 to		100,000 □\$	100,000 or m	ore
5.	Is there a person under the age of 21 living in the same ho ☐ Yes [SKIP TO Q7] ☐ No [CONTINUE WITH Q6]	usehold as	you?		
Pei	rsonal and Household Information				
6.	(If NO to Q5) Do you have a relationship (family or non-fa of 21, even if they do not live in the same household as you			c hildren und SKIP TO Q10	
7.	Is this child or at least one of these children a. Under 10 years old?				
8.	What is your relationship to this child or children? [CHECH ☐ Parent ☐ Guardian ☐ Grandparent ☐ Brother or sister ☐ Oth			ve	
9.	Are you the primary caregiver of this child or children?	☐ Yes ☐ N	lo		
10.	What is your gender? ☐ Female ☐ Male ☐ Other				
□ l Ass	What is the highest level of education you have completed less than high school degree High school diploma or GED So ociates 4-year college degree such as a BS or BA Masters or per next few questions are about alcohol use and underage drink	ome college post-graduate		llege degree s	such as
	To what extent do you agree or disagree with the	Strongly			Strongly
	following statements?	agree	Agree	Disagree	disagree
a.	My family has clear rules about alcohol use.	Ū	ū		
b.	Underage drinking is a problem in my neighborhood.				
c.	I wish I knew better what to say to children and youth about the				

12.	To what extent do you agree or disagree with the	Strongly			Strongly
	following statements?	agree	Agree	Disagree	disagree
	risks of underage drinking.		8		6
	0 0			I .	<u> </u>
13.	Thinking about your neighborhood, how easy do you	Very	Somewhat	Somewha	t Very
	think it is for underage youth	easy	easy	difficult	difficult
a.	to buy alcohol in stores with a fake ID?				
b.	to buy alcohol in stores without a fake ID?				
c.	to get alcohol from someone they know under age 21?				
d.	to get alcohol from someone they know age 21 or older?				
e.	to get alcohol from their home with their parents' permission?				
f.	to get alcohol from their home without their parents'				
	permission?				
g.	to get alcohol from a stranger?				
a. b. c. d.	Graduation parties Family or cultural celebrations Public gatherings such as fairs, music festivals, parades or sporting of Other occasions not mentioned above Do you think it is okay for you to drink five or more drinks bottle of beer, a wine cooler, a shot or glass of liquor or a	events			
	Is the alcohol in your home locked up in a cabinet or store Yes No There is no alcohol in my home During the past 12 months, have you talked with the child close to you about the risks of underage drinking? Yes household or who are close to me	ren or you	th in your l		
18.	How much influence do you think you have on the children close to you regarding their decisions to drink or not drink □ No influence □ Some influence □ A lot of influence		in your hou	ısehold or v	vho are
19.	Would holding adults legally responsible for youth drinking drinking? ☐ Yes ☐ No	g in their l	nomes help	prevent un	derage
20.	How often do you have a family meal with the children or you? ☐ Less than once a month ☐ I to 3 times a month ☐ Once ☐ 5 or more times a week ☐ I do not have any children or youth	a week 🗖	2 to 4 times	a week	
21.	On how many occasions have you had alcoholic beverages a glass of wine, a bottle of beer, a wine cooler, a shot of gla 0 1-2 3-5 6-9 10-19 20-39 40 or more				(A drink is
22.	Think back over the last two weeks, how many times have None Once Twice 3-5 times 6-9 times 10 or mo		ive or more	e drinks in a	row?

The next few questions are related to prescription drug use. Questions that ask about the "non-prescribed use of prescription drugs" refer to the use of prescription drugs without a prescription or with a prescription but in a manner other than prescribed.

23.	To what extent do you agree or disagree with the		Strongly	,		Strongly
	following statements?		agree	Agree	Disagree	disagree
a.	The non-prescribed use of prescription drugs is a problem among youth in my neighborhood.		Ŏ			
b.	Taking prescription drugs without a prescription or in a man other than prescribed is safer than doing street drugs, such a heroin or cocaine.		П			
c.	I wish I knew better what to say to youth about the risks of prescribed use of prescription drugs.	non-				
						_
24.	Thinking about your neighborhood, how easy do			Somewhat	Somewhat	Very
	you think it is for youth	Very	easy easy	easy	difficult	difficult
a.	to get prescription drugs from friends or peers in school?					
b.	to get prescription drugs from their own home?					
c.	to get prescription drugs from doctors?					
d.	to get prescription drugs on the street?					
26.	Do you think it would be okay for you to use prescrip other than prescribed? Yes Sometimes No Have the children in your household or who are close stimulants such as Ritalin, Adderall, or Dexedrine? Are any of the following prescription drugs present in a. Prescription stimulants such as Ritalin, Adderall, or Dexe b. Prescription painkillers such as OxyContin, Vicodin, Cocc. Prescription tranquilizers such as Valium, Xanax, or Libr	e to your your edrine deine, ium	ou ever r housel Demerol	been prescr □ Yes □ No nold? , Darvon, or F	i bed prescri o Percocet	ption J Yes
28.	 d. Prescription sedatives such as phenobarbital, Tuinal, Ner Are the prescription drugs in your home locked up in Yes No There are no prescription drugs in the prescription drugs in	a ca	binet or			I Yes □ No ?
29.	Do you keep an inventory of the prescription drugs in ☐ Yes ☐ No ☐ There are no prescription drugs in					
	On how many days in the past 12 months did you use prescription or in a manner other than prescribed? T a. Prescription stimulants such as Ritalin, Adderall, or Dexe b. Prescription painkillers such as OxyContin, Vicodin, Cocc. Prescription tranquilizers such as Valium, Xanax, or Libr d. Prescription sedatives such as phenobarbital, Tuinal, Ner During the past 12 months, have you talked with the	OTAL edrine deine, ium mbutal	# OF Domerol or Secondary	AYS: [RANGE , Darvon, or F onal outh in your	:: 0 - 366] Days: Percocet Days Days: Days: Days:	: : or who are
	close to you about the risks of using prescription drugthan prescribed? Yes No I do not have any children or youth in my h	•	•	•	or in a man	ner other
32.	How much influence do you think you have on the choclose to you regarding their decision to use prescript ☐ No influence ☐ Some influence ☐ A lot of influence					

The	e next few questions are about alcoho	ol and prescription drug	use treatme	nt services		
33.	If a child or youth that you know h know where to go to get help?	nad an alcohol and/or p □ Yes □ No	rescription	drug use	problem, wo	ould you
34.	If a child or youth that you know reproblem, who is the first person your Private counselor or therapist		alk to?		ol or prescr	
	☐ Doctor/Pediatrician	☐ Minister or religious o	,		on't know	☐ Other
35.	What are the main reasons that p prescription drug problem from g Cannot afford the cost Do not know where to go for service Do not want others to find out treatment Think treatment would not help None. People in my neighborhood a	etting the help they ne Think they ca Es Do not have Health insura	ed? [CHECk n handle the time nce does not eighbors/cor	CALL THA problem w cover eno	T APPLY] rithout treatm ugh treatment	ent t or any
36.	To what extent do you agree or d following statements?	isagree with the	Strongly agree	Agree	Disagree	Strongly disagree
a.	Adults in your neighborhood look dow alcohol treatment programs.	n on people who are in	Ğ	ا ت		
b.	Adults in your neighborhood look dow prescription drug treatment programs.	n on people who are in				
37.	e last few questions are about marijuals Is it okay for youth to use marijuals Is it okay for adults to use marijua	na (grass, pot) or hashi	•	,		
	Thank you so	much for taking the time ar opinions are very impe	e to answer	this survey		

Tackling Youth Substance Abuse (TYSA) Initiative Focus Group Consent Form

Dear Staten Island resident.

Metis Associates, a New York-based research and evaluation firm, was hired by the Staten Island Partnership for Community Wellness to conduct a study to assess the needs, attitudes, and perceptions of Staten Island residents concerning alcohol and substance abuse. As part of this study we are conducting focus groups with Staten Island residents to hear their opinions about alcohol and substance abuse issues in their communities. We would like to invite you to take part in one of these discussions. This discussion should take about one hour and a half.

All information we collect for this study will be confidential, which means private. Although the discussion will be tape recorded, all recordings will be destroyed after they are transcribed, and your name will never be linked to your responses. However, while we will keep all data confidential, we cannot guarantee that other members of the focus group will not share comments made in the group. At the beginning of the session, we will make sure to discuss the need for members of the group to respect each other's privacy. There are minimal risks to this study, such as potential discomfort answering specific questions. Please note that during the discussion, you do not have to answer any questions you do not wish to answer, and you will be free to leave the group at any time. Although there are no immediate benefits to focus group participants, the results will be used to inform the efforts to tackle substance abuse among Staten Island youth; therefore, there may be long-term benefits for the community.

If you have any questions about the study, please contact me at 212-425-8833 or email me at <u>jalemany@metisassoc.com</u>. If you have questions about the rights of human subjects related to this study, please contact Dr. Manuel Gutiérrez at <u>mgutierrez@metisassoc.com</u> or at 212-425-8833.

Thank you for your cooperation.

Sincerely,

Julia Alemany Senior Research Associate

FOCUS GROUP CONSENT FORM

This is to certify that I have read the information participate in a focus group conditions.	provided to me and I have received a copy of this form. Educted by Metis Associates.	} y
Print your name:	Your signature:	
By signing here, I agree to tape recording of the dis	scussion:	
To be signed by the researcher:		
(Printed name of person who obtained consent)	(Signature and date)	

Tackling Youth Substance Abuse (TYSA) Initiative Focus Group Protocol

Introduction:

Thank you for talking to us today. My name is _____ and this is _____. We were asked by the Staten Island Partnership for Community Wellness to conduct a study on Staten Island residents' attitudes and opinions about alcohol and prescription drug use. As you may know, Staten Island has the highest rate of underage drinking and the highest proportion of youth using a prescription painkiller without a prescription in New York City.

Your opinions are very important and will be used to inform the efforts that TYSA - the Tackling Youth Substance Abuse Initiative - is carrying out to improve the youth substance abuse prevention and treatment services in Staten Island. Please be honest with your responses. All the information we collect will be confidential, which means private. Although the discussion will be tape recorded, all recordings will be destroyed after they are transcribed, and your name will never be linked to your responses. Please do not share what is being said in this group with people outside of the group, so that everything is being said can be kept confidential. Do you have any questions before we begin?

- 1. Are there any children or youth living in your household?
 - a. If so, what are their ages?
 - b. What is your relationship to them (e.g., parent, grandparent, other relative, legal guardian)?
 - c. Are you the primary caregiver?

The first set of questions is about alcohol use and underage drinking in your neighborhood. By neighborhood, we mean the geographic areas of North Shore, Mid-Island and South Shore (or you may think about a smaller area surrounding where you reside).

- 2. Do you think underage drinking is a problem in your neighborhood? (Please specify which neighborhood you reside in when answering this question).
 - a. How do you know so? Where have you heard about this being an issue?
 - b. At what age do you think underage youth in your neighborhood start drinking?
 - c. At what age do you think it is ok for youth to consume an alcoholic beverage?
 - d. Is it ever ok for a youth to consume alcohol if there is an adult present? And if so, in what occasions is it okay (for example at a family celebration or block party)?
- 3. Why do you think underage youth in your neighborhood drink?
 - a. Is underage drinking a rite of passage in Staten Island? If so, why?
 - b. When is it a rite of passage versus a problem?
- 4. Where do you think youth in your neighborhood are getting alcohol?
- 5. Are adults on SI liable for underage drinking at their homes when they are not present?
 - a. Should they be liable? In what instances?
- 6. Have you talked to your children or the children living in your household about the risks of underage drinking?
 - a. If so, what kinds of things have you discussed? Did you initiate the conversation or did they? What led you to have that conversation?
 - b. If not, why not?

- 7. What do you think could be done to address the problem of underage drinking in your neighborhood? Probe for:
 - a. What can parents and families do?
 - b. What can schools do?
 - c. What can the neighborhood do? (Probe for: police, retail stores, neighborhood programs, churches...)
 - d. Anything else that could be done?
 - e. Of all of the things that were mentioned, what do you think can have the most impact in helping address underage drinking in your neighborhood?

The next few questions are about prescription drug use in your neighborhood.

- 8. Do you think that using prescription drugs without a doctor's prescription or in a manner other than prescribed is a problem among youth in your neighborhood? (Once again, please specify which neighborhood you reside in before answering this question).
 - a. If so, how do you know so? Where have you heard about this being an issue?
- 9. Why do you think youth from your neighborhood are using prescription drugs without a prescription or in a manner other than prescribed?
- 10. Where do you think youth in your neighborhood get prescription drugs?
- 11. Do you think taking prescription medications without a script or in a manner other than prescribed is safer than doing street drugs such as heroin or cocaine?
- 12. Is it ever ok for adults to use prescription medications without a script or in a manner other than prescribed? And if so, in what occasions is it okay (for example giving a painkiller to a friend or family member who is in pain)?
- 13. Have you talked to your children or the children living in your household about the risks of misusing prescription drugs?
 - a. If so, what kinds of things have you discussed? Did you initiate the conversation or did they? What led you to have that conversation?
 - b. If not, why not?
 - c. Do you feel prepared to have these conversations? If not, why not?
- 14. Do you know how to dispose of unused, unwanted or expired medications, such as prescription drugs? What do you do?
- 15. What do you think could be done to address the problem of using prescription drugs without a prescription or in a manner other than prescribed in your neighborhood? Probe for:
 - a. What can parents and families do?
 - b. What can schools do?
 - c. What can the neighborhood do?
 - d. Anything else that could be done?
 - e. Of all of the things that were mentioned, what do you think can have the most impact in helping address the prescription drug use problem in your neighborhood?
- 16. Is there anything else you would like to share that we have not covered yet?

Appendix B: Results by Population Subgroup

Appendix B includes tables with the detailed survey data for population subgroups. Please note the following:

- Percentages are calculated based on the total number of respondents that answered each question.
- Column percentages may not total 100% because of rounding.
- Percentages are not presented when the total number of respondents is less than 10.

Table B1: Survey Responses Regarding Alcohol Use by Geographic Region and UHF Neighborhood

			Geographic R	egion		United Hospi	United Hospital Fund Neighborhood				
Survey Item	s	Response categories	North Shore	Mid-Island	South	Port	Willow-	Stapleton –	South Beach		
		C. I I		20/	Shore	Richmond 3%	brook	St. George	Tottenville 2%		
		Strongly disagree	2%	2%	2%		2%	2%	2%		
	My family has clear rules about alcohol use	Disagree	5%		2%	8%	2%	3%			
Γο what	alconol use	Agree	39%	42%	32%	40%	42%	38%	32%		
extent do		Strongly agree	54% 18%	54% 17%	63% 13%	49% 14%	54% 17%	56% 20%	63%		
ou agree	l., , , , , , , , , , , , , ,	Strongly disagree									
or disagree	Underage drinking is a problem in	Disagree	29%	34%	30%	22%	34%	32%	30%		
vith the	my neighborhood	Agree	28%	30%	31%	32%	30%	26%			
ollowing		Strongly agree	25%	19%	25%	32%	19%	21%	25%		
tatements	I wish I knew better what to say	Strongly disagree	21%	18%	20%	19%	18%	22%	20%		
	to children and youth about the	Disagree	27%	31%	32%	26%	31%	27%	32%		
	risks of underage drinking	Agree	27%	31%	29%	26%	31%	28%	29%		
		Strongly agree	25%	20%	19%	29%	20%	23%	19%		
		Very difficult	17%	16%	15%	12%	16%	19%	15%		
	in stores with a fake ID	Somewhat difficult	25%	29%	30%	24%	29%	26%	30%		
		Somewhat easy	28%	31%	30%	30%	31%	27%	30%		
		Very easy	30%	25%	25%	35%	25%	28%	25%		
		Very difficult	33%	37%	37%	31%	37%	34%	37%		
	in stores without a fake ID	Somewhat difficult	34%	37%	33%	38%	37%	32%	33%		
		Somewhat easy	18%	17%	16%	16%	17%	19%	16%		
		Very easy	15%	10%	14%	16%	10%	15%	14%		
		Very difficult	14%	14%	13%	14%	14%	14%	13%		
Thinking	from someone they know under	Somewhat difficult	21%	24%	23%	22%	24%	20%	23%		
bout your	21	Somewhat easy	33%	33%	38%	31%	33%	34%	38%		
neighbor- nood, how		Very easy	32%	29%	27%	33%	29%	31%	27%		
asy do you		Very difficult	13%	18%	13%	10%	18%	14%	13%		
hink it is	from someone they know age	Somewhat difficult	18%	21%	21%	21%	21%	17%	21%		
or	21 or older	Somewhat easy	33%	34%	36%	33%	34%	34%	36%		
ınderage		Very easy	36%	28%	30%	36%	28%	35%	30%		
outh to		Very difficult	34%	39%	38%	33%	39%	35%	38%		
get	from their home with their	Somewhat difficult	33%	35%	32%	33%	35%	33%	32%		
lcohol	parents' permissions	Somewhat easy	19%	16%	19%	19%	16%	19%	19%		
		Very easy	14%	10%	10%	15%	10%	13%	10%		
		Very difficult	15%	17%	15%	13%	17%	16%	15%		
	from their home without their	Somewhat difficult	19%	20%	21%	17%	20%	20%	21%		
	parents' permissions	Somewhat easy	37%	35%	34%	39%	35%	36%	34%		
		Very easy	29%	27%	30%	32%	27%	28%	30%		
		Very difficult	28%	28%	33%	25%	28%	30%	33%		
	from a stronger	Somewhat difficult	41%	42%	41%	45%	42%	39%	41%		
	from a stranger	Somewhat easy	18%	21%	18%	19%	21%	18%	18%		
		Very easy	12%	9%	8%	12%	9%	12%	8%		

			Geographic R	egion		United Hospi	United Hospital Fund Neighborhood					
Survey Items	S	Response categories	North Shore	Mid-Island	South Shore	Port Richmond	Willow- brook	Stapleton – St. George	South Beach Tottenville			
Is it okay	Graduation parties	No	88%	93%	89%	90%	93%	87%	89%			
for	Graduation parties	Yes	12%	7%	11%	10%	7%	13%	11%			
underage	Family or sultimal calabrations	No	78%	81%	78%	80%	81%	77%	78%			
youth to	Family or cultural celebrations	Yes	22%	19%	22%	20%	19%	23%	22%			
drink on	Public gatherings	No	97%	98%	97%	98%	98%	97%	97%			
any of the	Fublic gatherings	Yes	3%	2%	3%	2%	2%	3%	3%			
following	Other occasions not mentioned	No	93%	93%	92%	95%	93%	92%	92%			
occasions?	above	Yes	7%	7%	8%	5%	7%	8%	8%			
Da way think	it is also for you to drink five or	No	77%	83%	82%	75%	83%	78%	82%			
	t it is okay for you to drink five or in one sitting?	Sometimes	12%	9%	8%	14%	9%	11%	8%			
inore urinks	in one sitting:	Yes	11%	8%	10%	11%	8%	11%	10%			
la 4h a alaah a	Lin	No	34%	39%	36%	34%	39%	34%	36%			
	I in your home locked up in a ored in a secure place?	Yes	33%	36%	37%	28%	36%	36%	37%			
Cabinet or St	ored iii a secure place:	N/A	33%	25%	26%	38%	25%	30%	26%			
During the p	ast 12 months, have you talked with	No	39%	44%	37%	46%	44%	36%	37%			
the children	or youth in your household or close	Yes	56%	53%	59%	49%	53%	60%	59%			
to you about	the risks of underage drinking?	N/A	4%	3%	4%	5%	3%	4%	4%			
How much in	nfluence do you think you have on	No influence	9%	7%	5%	7%	7%	9%	5%			
the children	or youth in your household or close	Some influence	19%	25%	19%	20%	25%	18%	19%			
to you regard drink alcohol	ding their decisions to drink or not !?	A lot of influence	72%	69%	76%	72%	69%	72%	76%			
Would holding	ng adults legally responsible for	No	20%	16%	13%	20%	16%	20%	13%			
	ng in their homes help prevent	Yes	80%	84%	87%	80%	84%	80%	87%			
		Less than once a month	7%	7%	6%	7%	7%	7%	6%			
		I-3 times per month	7%	9%	8%	7%	9%	7%	8%			
	o you have a family meal with the	Once a week	10%	12%	9%	9%	12%	11%	9%			
	outh in your household or who are	2-4 times a week	15%	16%	13%	16%	16%	14%	13%			
close to you?		5+ times a week	55%	53%	59%	55%	53%	55%	59%			
		N/A	6%	4%	5%	7%	4%	5%	5%			
		0	44%	47%	42%	42%	47%	45%	42%			
		1-2	24%	28%	29%	27%	28%	23%	29%			
		3-5	18%	13%	18%	15%	13%	19%	18%			
	y occasions have you had alcoholic	6-9	6%	6%	5%	6%	6%	5%	5%			
beverages to	drink during the last 30 days?	10-19	6%	3%	4%	7%	3%	5%	4%			
		20-39	3%	2%	3%	3%	2%	3%	3%			
		40 or more	0%	1%	0%	0%	1%	0%	0%			
		None	88%	93%	92%	88%	93%	87%	92%			
		Once	9%	5%	4%	10%	5%	8%	4%			
Think back o	over the last two weeks, how many	Twice	2%	1%	2%	1%	1%	3%	2%			
	ou had five or more drinks in a row?	3-5 times	1%	0%	1%	0%	0%	1%	1%			
cs nave y	and the or more drinks in a low.	6-9 times	0%	0%	0%	0%	0%	0%	0%			
		10 or more times	0%	1%	0%	0%	1%	0%	0%			
		TO OF THOSE USINES	U/0	I /o	U/o	U/0	1 /0	U/o	U/o			

Table B2: Survey Responses Regarding Alcohol Use by Gender, Race/Ethnicity, and Age Group

			Gende	r	Race/eth	nnicity				Age group					
urvev items	ent do	Response categories				African									
di vey item.	•	response categories	Male	Female	White	Ameri-	Asian	sian Other	Latino	18-29	30-39	40-49	50-59	60+	
						can									
	My family has clear	Strongly disagree	2%	2%	2%	2%	3%	3%	1%	5%	3%	1%	2%	3%	
		Disagree	2%	4%	3%	5%	5%	2%	5%	7%	5%	3%	1%	5%	
		Agree	39%	36%	37%	32%	31%	42%	38%	36%	36%	33%	38%	44%	
o what		Strongly agree	57%	58%	58%	61%	60%	53%	55%	51%	56%	63%	59%	489	
xtent do	Underage drinking is	Strongly disagree	18%	14%	16%	12%	21%	12%	19%	27%	17%	13%	14%	219	
ou agree 	a problem in my	Disagree	30%	30%	31%	25%	26%	23%	31%	31%	28%	29%	27%	37%	
		Agree	26%	33%	29%	36%	32%	35%	27%	20%	32%	32%	32%	25%	
		Strongly agree	26%	23%	24%	27%	21%	30%	24%	22%	23%	26%	26%	17%	
		Strongly disagree	23%	18%	20%	24%	21%	15%	18%	30%	20%	22%	20%	159	
atements		Disagree	28%	31%	30%	28%	25%	17%	35%	33%	33%	32%	27%	24%	
		Agree	26%	31%	29%	26%	35%	34%	23%	17%	28%	27%	31%	339	
	about the risks of underage drinking	Strongly agree	23%	20%	21%	23%	19%	34%	24%	20%	19%	19%	22%	289	
		Very difficult	15%	16%	16%	18%	12%	22%	15%	17%	18%	13%	16%	199	
	in stores with a fake	Somewhat difficult	24%	31%	28%	27%	22%	29%	28%	19%	30%	31%	24%	279	
	ID	Somewhat easy	30%	28%	31%	29%	32%	10%	23%	38%	26%	30%	32%	289	
		Very easy	30%	24%	25%	26%	34%	38%	34%	25%	26%	26%	28%	259	
		Very difficult	36%	35%	37%	33%	29%	27%	28%	40%	29%	38%	35%	379	
	fake ID	Somewhat difficult	30%	37%	34%	38%	37%	34%	29%	25%	41%	33%	36%	309	
		Somewhat easy	17%	17%	17%	16%	18%	14%	19%	19%	17%	17%	14%	189	
		Very easy	17%	12%	12%	14%	16%	25%	24%	17%	13%	12%	15%	159	
	The second secon	Very difficult	13%	13%	13%	11%	12%	26%	16%	19%	14%	12%	12%	169	
hinking	from someone they	Somewhat difficult	20%	24%	23%	20%	14%	23%	24%	17%	21%	23%	22%	249	
bout your	know under 21	Somewhat easy	33%	36%	36%	38%	47%	18%	31%	33%	38%	36%	35%	339	
eighbor-		Very easy	33%	26%	29%	31%	27%	33%	29%	31%	27%	30%	31%	269	
ood, how		Very difficult	14%	13%	14%	7%	11%	12%	13%	15%	10%	13%	14%	189	
asy do you	from someone they	Somewhat difficult	18%	22%	20%	20%	18%	19%	21%	17%	15%	22%	19%	229	
nink it is or	know age 21 or older	Somewhat easy	34%	35%	35%	36%	34%	30%	35%	31%	39%	34%	38%	309	
nderage		Very easy	35%	29%	31%	37%	38%	39%	31%	37%	36%	31%	29%	309	
outh to		Very difficult	35%	38%	38%	35%	31%	23%	40%	37%	34%	38%	41%	339	
et	from their home	Somewhat difficult	30%	35%	34%	34%	24%	25%	29%	39%	32%	35%	28%	369	
cohol	with their parents'	Somewhat easy	20%	17%	18%	19%	24%	28%	19%	14%	21%	17%	19%	199	
	permissions	Very easy	15%	9%	10%	12%	20%	25%	13%	10%	13%	10%	12%	129	
		Very difficult	15%	16%	16%	13%	23%	8%	15%	11%	10%	14%	18%	199	
	from their home	Somewhat difficult	18%	22%	21%	18%	16%	16%	19%	11%	13%	19%	24%	249	
	without their parents'	Somewhat easy	34%	36%	36%	38%	32%	31%	35%	40%	44%	38%	31%	299	
	permissions	Very easy	33%	27%	28%	32%	30%	44%	31%	38%	33%	29%	27%	289	
		Very difficult	30%	30%	31%	33%	19%	30%	24%	40%	27%	31%	30%	319	
		Somewhat difficult	36%	45%	42%	34%	48%	33%	44%	28%	40%	43%	42%	409	
	from a stranger	Somewhat easy	21%	17%	18%	23%	21%	25%	20%	14%	23%	18%	19%	169	
		Very easy	13%	8%	9%	11%	12%	12%	12%	18%	10%	8%	8%	129	

			Gende	r	Race/eth	nicity				Age gro	oup			
Survey items	S	Response categories	Male	Female	White	African Ameri- can	Asian	Other	Latino	18-29	30-39	40-49	50-59	60+
Is it okay	Graduation parties	No	92%	87%	89%	90%	85%	88%	94%	72%	91%	92%	90%	87%
for	Graduation parties	Yes	8%	13%	11%	10%	15%	12%	6%	28%	9%	8%	10%	13%
underage	Family or cultural	No	84%	75%	78%	84%	59%	88%	87%	65%	78%	84%	77%	74%
youth to	celebrations	Yes	16%	25%	22%	16%	41%	12%	13%	35%	22%	16%	23%	26%
drink on	Public gatherings	No	98%	97%	97%	96%	95%	100%	98%	95%	97%	98%	99%	95%
any of the	Tublic gatherings	Yes	2%	3%	3%	4%	5%	0%	2%	5%	3%	2%	1%	5%
following	Other occasions not	No	94%	91%	92%	94%	90%	92%	93%	85%	94%	93%	93%	91%
occasions?	mentioned above	Yes	6%	9%	8%	6%	10%	8%	7%	15%	6%	7%	7%	9%
	t it is okay for you to	No	90%	73%	80%	76%	81%	83%	81%	45%	75%	81%	84%	85%
	more drinks in one	Sometimes	6%	13%	10%	13%	7%	11%	8%	22%	14%	10%	9%	7%
sitting?		Yes	4%	14%	10%	11%	12%	6%	11%	33%	11%	9%	8%	8%
Is the alcohol	l in your home locked	No	27%	43%	38%	32%	29%	27%	30%	44%	24%	37%	41%	35%
up in a cabino	et or stored in a secure	Yes	36%	35%	37%	28%	41%	14%	33%	36%	44%	34%	33%	33%
place?		N/A	38%	22%	25%	39%	29%	59%	36%	20%	32%	29%	26%	32%
During the pa	ast 12 months, have you	No	36%	42%	41%	32%	47%	53%	24%	67%	57%	29%	35%	46%
	he children or youth in	Yes	60%	54%	56%	66%	45%	41%	71%	24%	42%	70%	61%	44%
•	old or close to you ks of underage drinking?	N/A	4%	4%	4%	2%	9%	6%	4%	9%	1%	1%	5%	10%
How much in	nfluence do you think	No influence	7%	7%	6%	5%	16%	15%	8%	15%	4%	3%	5%	16%
you have on t	the children or youth in	Some influence	19%	21%	20%	21%	14%	25%	18%	36%	7%	16%	22%	31%
•	old or close to you eir decisions to drink or ohol?	A lot of influence	73%	73%	74%	75%	70%	60%	74%	49%	89%	81%	73%	53%
Would holdin	ng adults legally	No	14%	18%	16%	15%	22%	20%	16%	27%	16%	14%	16%	20%
	or youth drinking in help prevent underage	Yes	86%	82%	84%	85%	78%	80%	84%	73%	84%	86%	84%	80%
		Less than once a month	7%	6%	7%	6%	7%	8%	2%	7%	3%	3%	6%	16%
How often de	o you have a family	I-3 times per month	8%	7%	8%	6%	7%	8%	4%	13%	4%	3%	5%	21%
	e children or youth in	Once a week	10%	10%	10%	10%	12%	6%	11%	7%	5%	8%	11%	16%
your househo	old or who are close to	2-4 times a week	13%	15%	14%	20%	7%	15%	17%	15%	13%	13%	20%	13%
you?		5+ times a week	56%	57%	56%	54%	56%	56%	62%	38%	74%	72%	53%	23%
		N/A	6%	5%	5%	3%	11%	8%	3%	20%	1%	2%	6%	10%
		0	49%	39%	42%	41%	52%	63%	47%	38%	40%	39%	46%	53%
		1-2	29%	26%	28%	24%	24%	25%	26%	22%	30%	29%	26%	24%
On how man	y occasions have you	3-5	12%	20%	18%	16%	17%	5%	16%	24%	17%	18%	16%	13%
	beverages to drink	6-9	4%	6%	5%	11%	2%	2%	5%	7%	6%	6%	5%	2%
during the las	st 30 days?	10-19	4%	5%	5%	5%	3%	3%	4%	2%	4%	5%	5%	4%
		20-39	1%	4%	3%	4%	0%	3%	1%	7%	3%	2%	2%	3%
		40 or more	0%	0%	0%	0%	2%	0%	0%	0%	0%	0%	0%	1%
Think back o	over the last two weeks,	None	93%	88%	91%	86%	89%	98%	86%	78%	87%	90%	90%	93%
	mes have you had five	Once	4%	7%	6%	11%	2%	0%	10%	11%	9%	6%	7%	3%
HOW ITIATIV LIE														

		Gende	r	Race/eth	nicity			Age group					
Survey items	Response categories	Male	Female	White	African Ameri- can	Asian	Other	Latino	18-29	30-39	40-49	50-59	60+
	3-5 times	0%	1%	1%	1%	2%	0%	1%	0%	1%	1%	1%	1%
	6-9 times	0%	0%	0%	0%	0%	0%	0%	4%	0%	0%	0%	0%
	10 or more times	0%	0%	0%	0%	2%	2%	0%	2%	0%	0%	0%	0%

Table B3 Survey Responses Regarding Alcohol Use by Highest Degree Completed and Income Level

			Highest d	egree com	oleted				Income	Income level				
Survey items		Response categories	Less than HS	HS/ GED	Some college	2-year college degree	4-year college degree	MA, MS+	Less than \$15K	\$15K- <\$50K	\$50K- <\$100K	\$100K+		
	My family has clear	Strongly disagree	0%	2%	1%	4%	1%	3%	4%	2%	2%	1%		
	rules about alcohol	Disagree	9%	4%	4%	2%	3%	4%	3%	3%	4%	3%		
	use	Agree	25%	38%	29%	47%	38%	32%	52%	44%	35%	29%		
To what		Strongly agree	66%	56%	67%	47%	58%	61%	42%	51%	58%	66%		
extent do	Underage drinking is	Strongly disagree	4%	13%	11%	24%	20%	15%	22%	25%	18%	6%		
ou agree	a problem in my	Disagree	44%	30%	33%	24%	32%	30%	18%	24%	31%	37%		
or disagree	neighborhood	Agree	33%	30%	34%	27%	27%	31%	26%	26%	30%	33%		
with the	neighborhood	Strongly agree	19%	27%	22%	25%	21%	24%	34%	25%	20%	24%		
following	I wish I knew better	Strongly disagree	21%	17%	16%	24%	23%	22%	22%	22%	20%	18%		
statements	what to say to	Disagree	21%	26%	31%	27%	30%	37%	19%	20%	31%	38%		
	children and youth	Agree	38%	32%	33%	24%	29%	23%	28%	30%	27%	30%		
	about the risks of underage drinking	Strongly agree	21%	25%	20%	26%	18%	18%	31%	28%	22%	13%		
		Very difficult	23%	16%	15%	20%	14%	15%	26%	18%	18%	10%		
	fake ID S	Somewhat difficult	30%	27%	28%	26%	28%	31%	19%	28%	26%	32%		
		Somewhat easy	23%	28%	29%	24%	33%	32%	30%	26%	29%	32%		
		Very easy	23%	29%	28%	30%	25%	22%	24%	29%	27%	27%		
		Very difficult	28%	35%	33%	33%	36%	39%	33%	34%	35%	37%		
Thinking	in stores without a	Somewhat difficult	32%	33%	41%	33%	30%	36%	30%	33%	33%	36%		
about your	fake ID	Somewhat easy	16%	19%	14%	17%	18%	17%	15%	15%	18%	18%		
neighbor-		Very easy	24%	13%	12%	17%	16%	8%	21%	17%	14%	9%		
nood, how		Very difficult	10%	17%	13%	15%	13%	6%	21%	18%	13%	8%		
easy do you	from someone	Somewhat difficult	31%	19%	27%	17%	23%	27%	20%	18%	23%	26%		
think it is	they know under 21	Somewhat easy	17%	33%	35%	34%	35%	43%	27%	33%	38%	36%		
or		Very easy	41%	30%	25%	33%	29%	24%	32%	31%	26%	30%		
underage	6	Very difficult	10%	15%	14%	13%	15%	9%	15%	18%	14%	9%		
outh to get	from someone they know age 21 or	Somewhat difficult	24%	23%	18%	20%	18%	21%	15%	18%	20%	23%		
lcohol	older	Somewhat easy	31%	29%	41%	31%	37%	37%	34%	32%	34%	37%		
	Older	Very easy	34%	33%	27%	36%	30%	33%	36%	31%	32%	31%		
	form their house	Very difficult	43%	39%	35%	35%	43%	28%	35%	34%	38%	39%		
	from their home with their parents'	Somewhat difficult	37%	33%	33%	42%	27%	33%	31%	33%	34%	32%		
	permissions	Somewhat easy	10%	16%	23%	11%	19%	28%	18%	17%	19%	19%		
	permissions	Very easy	10%	12%	9%	12%	11%	12%	16%	16%	9%	9%		

			Highest d	egree com	pleted				Income level			
Is it okay for underage youth to drink on any of the following	s	Response categories	Less than HS	HS/ GED	Some college	2-year college degree	4-year college degree	MA, MS+	Less than \$15K	\$15K- <\$50K	\$50K- <\$100K	\$100K+
	from their home	Very difficult	36%	16%	17%	17%	16%	7%	17%	17%	15%	14%
	without their	Somewhat difficult	18%	25%	18%	23%	17%	15%	23%	18%	20%	21%
	parents' permissions	Somewhat easy	21%	27%	38%	35%	38%	43%	34%	34%	37%	36%
	parente permissions	Very easy	25%	31%	27%	25%	29%	35%	26%	32%	28%	30%
		Very difficult	48%	31%	32%	27%	30%	28%	32%	33%	32%	26%
	from a stranger	Somewhat difficult	19%	38%	38%	44%	41%	52%	35%	33%	41%	49%
	in one a scranger	Somewhat easy	26%	20%	21%	16%	21%	15%	17%	20%	19%	18%
		Very easy	7%	12%	8%	13%	9%	6%	16%	14%	8%	7%
Is it okay	Graduation parties	No	82%	92%	90%	88%	89%	87%	88%	90%	90%	89%
for	<u>'</u>	Yes	18%	8%	10%	12%	11%	13%	12%	10%	10%	11%
underage	Family or cultural	No	79%	85%	83%	78%	76%	68%	79%	80%	81%	76%
•	celebrations	Yes	21%	15%	17%	22%	24%	32%	21%	20%	19%	24%
	Public gatherings	No	97%	97%	98%	98%	97%	97%	97%	98%	98%	97%
	r done gaererings	Yes	3%	3%	2%	2%	3%	3%	3%	2%	2%	3%
•	Other occasions not	No	91%	93%	94%	93%	93%	89%	92%	91%	94%	92%
occasions?	mentioned above	Yes	9%	7%	6%	7%	7%	11%	8%	9%	6%	8%
Do you think	t it is okay for you to	No	82%	79%	81%	83%	76%	82%	91%	83%	82%	73%
drink five or	more drinks in one	Sometimes	15%	10%	10%	7%	12%	9%	5%	8%	9%	14%
sitting?		Yes	3%	11%	9%	9%	11%	9%	4%	9%	8%	13%
Is the alcoho	l in your home locked	No	21%	31%	36%	30%	40%	48%	25%	29%	37%	43%
up in a cabin	et or stored in a secure	Yes	26%	36%	36%	36%	35%	35%	30%	31%	37%	39%
place?		N/A	53%	33%	28%	34%	24%	17%	45%	41%	26%	18%
During the p	ast 12 months, have	No	29%	36%	38%	42%	44%	38%	34%	36%	45%	38%
you talked w	rith the children or	Yes	56%	59%	59%	54%	55%	58%	59%	60%	53%	58%
, ,	r household or close to e risks of underage	N/A	15%	5%	4%	4%	2%	4%	7%	4%	2%	5%
How much in	nfluence do you think	No influence	6%	10%	4%	7%	6%	6%	19%	10%	4%	4%
•	the children or youth in	Some influence	16%	20%	21%	22%	19%	19%	12%	21%	19%	23%
•	old or close to you eir decisions to drink or ohol?	A lot of influence	77%	70%	75%	71%	74%	74%	69%	69%	77%	74%
	ng adults legally	No	15%	16%	17%	16%	17%	16%	22%	14%	16%	17%
	for youth drinking in		10,0		1	1070	1170	1070		1	10.0	1
	help prevent underage	Yes	85%	84%	83%	84%	83%	84%	78%	86%	84%	83%
		Less than once a month	3%	8%	6%	7%	5%	6%	11%	9%	5%	4%
How often de	o you have a family	I-3 times per month	12%	8%	7%	10%	7%	5%	12%	7%	9%	6%
	e children or youth in	Once a week	6%	8%	10%	14%	11%	8%	9%	11%	12%	8%
	old or who are close to	2-4 times a week	9%	14%	13%	14%	15%	16%	9%	15%	16%	14%
you?		5+ times a week	65%	54%	59%	50%	58%	61%	49%	51%	55%	64%
		N/A	6%	7%	6%	5%	4%	4%	11%	7%	3%	4%
On how man	ny occasions have you	0	70%	52%	44%	49%	35%	31%	66%	52%	44%	30%

		Highest de	egree comp	leted				Income	level		
Survey items	Response categories	Less than HS	HS/ GED	Some college	2-year college degree	4-year college degree	MA, MS+	Less than \$15K	\$15K- <\$50K	\$50K- <\$100K	\$100K+
had alcoholic beverages to drink	1-2	6%	26%	26%	28%	30%	30%	16%	30%	26%	29%
during the last 30 days?	3-5	12%	14%	17%	14%	20%	20%	7%	12%	17%	23%
	6-9	3%	3%	7%	4%	6%	6%	3%	3%	5%	8%
	10-19	6%	3%	5%	3%	5%	6%	5%	2%	4%	6%
	20-39	3%	1%	1%	2%	4%	5%	3%	1%	3%	3%
	40 or more	0%	0%	0%	0%	0%	1%	0%	0%	0%	1%
	None	94%	92%	90%	91%	88%	90%	93%	95%	91%	85%
Think had seen the last two weeks	Once	3%	5%	6%	5%	8%	7%	4%	3%	5%	10%
Think back over the last two weeks, how many times have you had five	Twice	0%	2%	3%	2%	3%	1%	1%	1%	2%	3%
or more drinks in a row?	3-5 times	3%	1%	1%	2%	1%	0%	0%	0%	1%	2%
or more arms in a row.	6-9 times	0%	0%	0%	0%	0%	1%	1%	0%	0%	1%
	10 or more times	0%	1%	0%	0%	0%	1%	0%	0%	0%	0%

Table B4: Survey Responses Regarding Alcohol Use by Type of Relationship to and Age of Children and Youth

Survey items	openios regainengin	Response	Relatio with ch or you	nship ildren	Prima caregi	ry	Type of Re	elationship				Age of o	:hildren	and you	th
		categories	No	Yes	No	Yes	Parent/ guardian	Grand- parent	Sibling	Other relative	Non- relative	Under 10	11- 13	14- 17	18- 20
	Mar formilla han alana	Strongly disagree	4%	4%	3%	1%	1%	3%	0%	5%	6%	2%	2%	2%	2%
	My family has clear rules about alcohol	Disagree	9%	4%	5%	2%	3%	4%	0%	5%	0%	4%	3%	2%	3%
	use	Agree	41%	42%	39%	36%	35%	41%	40%	41%	35%	37%	36%	34%	38%
	use	Strongly agree	46%	50%	53%	61%	61%	52%	60%	49%	59%	58%	59%	63%	58%
To what extent do	11.1	Strongly disagree	25%	20%	19%	14%	14%	22%	10%	14%	12%	16%	16%	15%	15%
you agree or disagree	Underage drinking	Disagree	30%	32%	35%	29%	30%	36%	40%	24%	31%	31%	32%	32%	23%
with the following	is a problem in my neighborhood	Agree	29%	25%	25%	32%	31%	23%	30%	28%	31%	31%	29%	28%	33%
statements	incignibornio d	Strongly agree	16%	22%	22%	26%	25%	19%	20%	34%	25%	22%	23%	26%	29%
	I wish I knew better	Strongly disagree	16%	17%	18%	22%	22%	15%	30%	20%	24%	18%	21%	21%	22%
	what to say to children and youth	Disagree	22%	26%	29%	31%	32%	21%	30%	33%	29%	30%	30%	28%	25%
	about the risks of	Agree	39%	29%	29%	27%	27%	35%	20%	22%	29%	29%	28%	28%	30%
	underage drinking	Strongly agree	24%	27%	25%	20%	20%	29%	20%	25%	18%	23%	22%	22%	23%
Thinking about your		Very difficult	22%	15%	16%	15%	15%	15%	-	17%	12%	15%	16%	13%	12%
neighborhood, how easy do you think it is	in stores with a fake ID	Somewhat difficult	21%	28%	30%	28%	29%	30%	-	26%	29%	30%	28%	29%	24%
for underage youth to get alcohol	lake ib	Somewhat easy	26%	30%	31%	29%	29%	27%	-	37%	29%	29%	30%	30%	27%

Survey items		Response categories	Relation with character with character with character with the charact	nildren	Prima caregi		Type of Re	elationship				Age of o			
		Categories	No	Yes	No	Yes	Parent/ guardian	Grand- parent	Sibling	Other relative	Non- relative	Under 10	11- 13	14- 17	18- 20
		Very easy	31%	27%	23%	28%	27%	29%	-	21%	29%	25%	26%	29%	37%
		Very difficult	34%	38%	37%	35%	35%	37%	-	39%	29%	33%	37%	37%	33%
	in stores without	Somewhat difficult	26%	28%	32%	36%	37%	27%	-	30%	29%	34%	33%	36%	32%
	a fake ID	Somewhat easy	20%	19%	18%	16%	16%	18%	-	18%	29%	18%	19%	15%	18%
		Very easy	20%	15%	13%	13%	12%	17%	-	12%	12%	14%	11%	12%	16%
		Very difficult	15%	14%	15%	12%	13%	18%	-	10%	6%	14%	14%	12%	10%
	from someone	Somewhat difficult	25%	20%	22%	22%	23%	22%	-	21%	6%	21%	23%	24%	19%
	they know under 21	Somewhat easy	36%	37%	34%	35%	35%	31%	-	38%	50%	36%	34%	34%	35%
		Very easy	23%	30%	29%	30%	29%	30%	-	31%	38%	29%	29%	30%	35%
		Very difficult	17%	12%	13%	13%	13%	14%	-	14%	6%	13%	15%	14%	9%
	from someone they know age 21 or	Somewhat difficult	19%	19%	21%	20%	20%	22%	-	16%	24%	18%	22%	23%	18%
	older	Somewhat easy	36%	36%	36%	34%	35%	34%	-	32%	47%	34%	34%	35%	37%
		Very easy	28%	33%	31%	33%	33%	30%	-	38%	24%	34%	29%	29%	35%
		Very difficult	33%	36%	35%	38%	38%	37%	-	33%	18%	38%	39%	40%	35%
	from their home with their parents'	Somewhat difficult	30%	36%	36%	32%	33%	34%	-	41%	18%	35%	34%	31%	31%
	permissions	Somewhat easy	19%	18%	19%	18%	18%	19%	-	17%	35%	17%	17%	19%	20%
		Very easy	18%	10%	10%	11%	11%	11%	-	9%	29%	10%	10%	10%	14%
		Very difficult	17%	15%	15%	15%	15%	18%	-	8%	6%	14%	16%	17%	17%
	from their home	Somewhat difficult	20%	21%	23%	19%	19%	25%	-	16%	19%	18%	21%	23%	24%
	parents' permissions	Somewhat easy	30%	35%	35%	36%	37%	31%	-	44%	31%	39%	37%	33%	30%
		Very easy	34%	29%	27%	29%	29%	26%	-	32%	44%	29%	26%	28%	29%
		Very difficult	33%	31%	31%	29%	29%	32%	-	33%	19%	29%	30%	32%	28%
	from a stranger	Somewhat difficult	35%	39%	42%	42%	43%	37%	-	43%	31%	42%	43%	40%	38%
	iroin a stranger	Somewhat easy	20%	18%	16%	19%	19%	16%	-	17%	31%	18%	18%	19%	22%
		Very easy	12%	12%	10%	9%	9%	15%	-	7%	19%	10%	9%	9%	12%

Survey items		Response	Relation with character with character with the cha	nildren	Prima caregi		Type of Re	elationship				Age of o	hildren	and you	th
		categories	No	Yes	No	Yes	Parent/ guardian	Grand- parent	Sibling	Other relative	Non- relative	Under 10	11- 13	14- 17	18- 20
	Graduation parties	No	86%	86%	85%	91%	91%	88%	60%	83%	82%	90%	94%	89%	86%
	Graduation parties	Yes	14%	14%	15%	9%	9%	12%	40%	17%	18%	10%	6%	11%	14%
Is it okay for	Family or cultural	No	73%	72%	74%	82%	81%	79%	70%	74%	47%	80%	84%	79%	76%
underage youth to	celebrations	Yes	27%	28%	26%	18%	19%	21%	30%	26%	53%	20%	16%	21%	24%
drink on any of the	Public gatherings	No	94%	97%	97%	98%	98%	97%	90%	94%	94%	97%	98%	98%	98%
following occasions?	Tublic gatherings	Yes	6%	3%	3%	2%	2%	3%	10%	6%	6%	3%	2%	2%	2%
	Other occasions not	No	91%	91%	92%	93%	93%	93%	90%	90%	82%	93%	92%	93%	91%
	mentioned above	Yes	9%	9%	8%	7%	7%	7%	10%	10%	18%	7%	8%	7%	9%
Do you think it is okay	for you to drink five	No	84%	80%	79%	80%	80%	87%	20%	71%	76%	78%	81%	79%	81%
or more drinks in one		Sometimes	6%	9%	10%	10%	10%	7%	40%	17%	0%	11%	11%	9%	8%
		Yes	9%	11%	11%	9%	10%	6%	40%	12%	24%	11%	8%	11%	11%
Is the alcohol in your h	ome locked up in a	No	36%	38%	36%	35%	36%	31%	70%	41%	59%	32%	37%	42%	38%
cabinet or stored in a s		Yes	39%	29%	28%	38%	38%	31%	10%	24%	24%	37%	31%	31%	30%
	•	N/A	25%	33%	35%	27%	27%	38%	20%	34%	18%	32%	32%	27%	32%
During the past 12 mo		No	47%	53%	51%	34%	34%	51%	20%	51%	53%	51%	32%	24%	29%
with the children or yo		Yes	31%	41%	42%	66%	65%	44%	70%	40%	41%	47%	66%	74%	68%
or close to you about t drinking?	ne risks of underage	N/A	22%	6%	6%	0%	1%	5%	10%	9%	6%	2%	2%	2%	3%
How much influence d	o you think you have	No influence	16%	15%	13%	3%	4%	14%	0%	9%	29%	7%	4%	4%	7%
on the children or your or close to you regardi	th in your household	Some influence	28%	38%	32%	15%	13%	34%	40%	46%	53%	19%	20%	24%	27%
drink or not drink alco	•	A lot of influence	56%	47%	55%	82%	83%	52%	60%	46%	18%	75%	76%	72%	65%
Would holding adults I	egally responsible for	No	21%	21%	20%	14%	14%	20%	30%	20%	29%	15%	16%	15%	15%
youth drinking in their underage drinking?		Yes	79%	79%	80%	86%	86%	80%	70%	80%	71%	85%	84%	85%	85%
		Less than once a month	12%	17%	14%	3%	2%	17%	-	12%	29%	6%	5%	6%	7%
		I-3 times per month	15%	24%	19%	2%	2%	22%	-	23%	18%	8%	8%	7%	12%
How often do you have the children or youth i	<u>-</u>	Once a week	9%	22%	20%	6%	6%	23%	-	19%	24%	10%	11%	10%	13%
who are close to you?		2-4 times a week	7%	14%	14%	15%	15%	14%	-	15%	12%	13%	15%	18%	16%
		5+ times a week	22%	14%	27%	73%	73%	20%	-	15%	12%	61%	57%	55%	48%
		N/A	34%	8%	6%	1%	1%	4%	-	16%	6%	2%	3%	3%	5%
0.1		0	50%	51%	52%	40%	39%	60%	20%	43%	41%	45%	42%	43%	48%
On how many occasion		1-2	26%	23%	25%	28%	29%	22%	10%	27%	29%	27%	29%	27%	27%
alcoholic beverages to 30 days?	drink during the last	3-5	16%	11%	11%	19%	18%	12%	50%	10%	0%	16%	17%	16%	12%
Jo days:		6-9	2%	5%	4%	6%	6%	1%	10%	9%	6%	6%	5%	6%	5%

Survey items	Response categories	Relatio with ch or you	ildren	Prima caregi		Type of Re	elationship				Age of c	hildren	and you	th
	Categories	No	Yes	No	Yes	Parent/ guardian	Grand- parent	Sibling	Other relative	Non- relative	Under 10	11- 13	14- 17	18- 20
	10-19	1%	7%	6%	4%	5%	3%	10%	7%	12%	4%	6%	6%	5%
	20-39	3%	2%	2%	3%	3%	1%	0%	4%	12%	2%	1%	1%	3%
	40 or more	1%	0%	0%	0%	0%	0%	0%	1%	0%	0%	0%	0%	0%
	None	94%	90%	90%	90%	89%	94%	50%	89%	81%	90%	92%	88%	89%
	Once	3%	4%	5%	7%	7%	3%	30%	4%	12%	6%	5%	7%	6%
Think back over the last two weeks, how	Twice	0%	5%	4%	2%	2%	2%	20%	6%	6%	3%	2%	3%	3%
many times have you had five or more drinks	3-5 times	1%	1%	1%	1%	1%	1%	0%	1%	0%	1%	1%	1%	2%
in a row?	6-9 times	2%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
	10 or more times	1%	0%	0%	0%	0%	0%	0%	0%	0%	0%	1%	0%	0%

Table B5: Survey Responses Regarding Prescription Drug Use by Geographic Region and UHF Neighborhood

	our vey Responses Regarding Trescript	Response	Geographic R				tal Fund Neigh	borhood	
Survey Items	5	categories	North Shore	Mid-Island	South Shore	Port Richmond	Willow- brook	Stapleton – St. George	South Beach Tottenville
	The new processited use of	Strongly disagree	13%	12%	7%	13%	12%	13%	7%
	The non-prescribed use of prescription drugs is a problem	Disagree	17%	17%	15%	16%	17%	18%	15%
	among youth in my neighborhood	Agree	32%	38%	29%	30%	38%	34%	29%
To what	among youth in my neighborhood	Strongly agree	37%	33%	48%	41%	33%	35%	48%
extent do	Taking prescription drugs without a	Strongly disagree	48%	49%	52%	49%	49%	48%	52%
you agree	prescription or in a manner other	Disagree	37%	37%	33%	37%	37%	37%	33%
or disagree	than prescribed is safer than doing	Agree	9%	9%	9%	8%	9%	10%	9%
with the following	street drugs, such as heroin or cocaine.	Strongly agree	6%	6%	6%	6%	6%	5%	6%
statements	Lucial Daniel Barriera	Strongly disagree	25%	21%	25%	25%	21%	25%	25%
	I wish I knew better what to say to youth about the risks of non-	Disagree	29%	27%	28%	27%	27%	29%	28%
	prescribed use of prescription drugs.	Agree	25%	28%	24%	27%	28%	24%	24%
	prescribed use of prescription drugs.	Strongly agree	21%	23%	23%	20%	23%	22%	23%
		Very difficult	13%	13%	10%	10%	13%	14%	10%
	prescription drugs from friends or	Somewhat difficult	18%	22%	16%	16%	22%	19%	16%
	peers in school.	Somewhat easy	34%	36%	35%	35%	36%	33%	35%
Thinking		Very easy	35%	29%	39%	38%	29%	34%	39%
about your		Very difficult	18%	16%	20%	16%	16%	19%	20%
neighbor-	prescription drugs from their own	Somewhat difficult	18%	22%	19%	20%	22%	16%	19%
hood, how	home.	Somewhat easy	35%	38%	31%	32%	38%	36%	31%
easy do you think it is		Very easy	30%	24%	30%	31%	24%	29%	30%
for youth		Very difficult	37%	32%	32%	42%	32%	34%	32%
to get	nucceintion during from doctors	Somewhat difficult	31%	36%	33%	24%	36%	35%	33%
6	prescription drugs from doctors.	Somewhat easy	17%	16%	18%	16%	16%	18%	18%
		Very easy	15%	16%	17%	18%	16%	13%	17%
	prescription drugs on the street.	Very difficult	11%	10%	10%	10%	10%	12%	10%

		Bosnones	Geographic R	egion		United Hospi	tal Fund Neigh	borhood	
Survey Items		Response categories	North Shore	Mid-Island	South Shore	Port Richmond	Willow- brook	Stapleton – St. George	South Beach Tottenville
		Somewhat difficult	16%	16%	13%	15%	16%	16%	13%
		Somewhat easy	36%	36%	35%	39%	36%	34%	35%
		Very easy	37%	38%	42%	37%	38%	38%	42%
Do you think it	t would be okay for you to use	No	95%	94%	95%	93%	94%	95%	95%
prescription dr	ugs without a prescription or in a	Sometimes	3%	5%	3%	4%	5%	3%	3%
manner other	than prescribed?	Yes	2%	1%	1%	2%	1%	2%	1%
Have the child	ren in your household or who are	No	93%	93%	94%	95%	93%	91%	94%
	rer been prescribed prescription has Ritalin, Adderall, or Dexedrine?	Yes	7%	7%	6%	5%	7%	9%	6%
	Stimulants such as Ritalin, Adderall,	No	96%	96%	97%	96%	96%	96%	97%
	or Dexedrine	Yes	4%	4%	3%	4%	4%	4%	3%
the	Painkillers such as OxyContin,	No	77%	82%	79%	81%	82%	75%	79%
prescrip-	Vicodin, Codeine, Demerol, Darvon, or Percocet	Yes	23%	18%	21%	19%	18%	25%	21%
tion drugs	Tranquilizers such as Valium, Xanax,	No	92%	93%	91%	92%	93%	91%	91%
present in	or Librium	Yes	8%	7%	9%	8%	7%	9%	9%
your household?	Sedatives such as phenobarbital,	No	99%	99%	98%	100%	99%	98%	98%
	Tuinal, Nembutal, or Seconal	Yes	1%	1%	2%	0%	1%	2%	2%
		No	20%	19%	19%	20%	19%	19%	19%
	iption drugs in your home locked up stored in a secure place?	Yes	51%	58%	55%	50%	58%	51%	55%
in a cabinet or	stored in a secure place:	N/A	29%	23%	26%	29%	23%	29%	26%
D		No	35%	36%	32%	32%	36%	36%	32%
in your house?	n inventory of the prescription drugs	Yes	40%	44%	47%	43%	44%	38%	47%
iii your nouse:		N/A	26%	20%	21%	25%	20%	26%	21%
On how many days in the pas	Stimulants such as Ritalin, Adderall, or Dexedrine	Average N Days	0.36	0.03	0.54	0.04	0.03	0.53	0.54
12 months did you use any of the following	Painkillers such as OxyContin, Vicodin, Codeine, Demerol, Darvon, or Percocet	Average N Days	1.12	4.82	1.49	2.16	4.82	0.55	1.49
prescription drugs without		Average N Days	0.83	2.27	0.16	0.38	2.27	1.08	0.16
prescription or a manner othe than prescribe	r phenobarbital, Tuinal,	Average N Days	0.02	0.00	0.02	0.02	0.00	0.02	0.02
	t 12 months, have you talked with the	No	45%	49%	42%	44%	49%	46%	42%
•	th in your household or who are	Yes	50%	48%	56%	52%	48%	49%	56%
	out the risks of using prescription a prescription or in a manner other d?	N/A	4%	3%	3%	4%	3%	5%	3%
	uence do you think you have on the	No influence	5%	4%	5%	4%	4%	6%	5%
	ve in your household or who are close	Some influence	17%	21%	14%	15%	21%	18%	14%
, ,	ng their decision to use prescription other than prescribed?	A lot of influence	78%	75%	81%	81%	75%	77%	81%

Table B6: Survey Responses Regarding Prescription Drug Use by Gender, Race/Ethnicity, and Age Group

			Gender		Race/et					Age gr	oup			
Survey Items		Response				African								
		categories	Male	Female	White	Ameri- can	Asian	Other	Latino	18-29	30-39	40-49	50-59	60+
	The non-prescribed use	Strongly disagree	10%	10%	10%	12%	8%	18%	6%	20%	10%	10%	9%	12%
	of prescription drugs is a problem among youth	Disagree	15%	17%	14%	23%	22%	22%	21%	18%	16%	15%	15%	20%
	in my neighborhood	Agree	33%	31%	33%	28%	27%	25%	36%	24%	30%	31%	33%	389
	, -	Strongly agree	41%	41%	42%	37%	43%	35%	37%	38%	44%	44%	43%	319
Γο what extent do you	Taking prescription drugs without a	Strongly disagree	51%	48%	49%	53%	54%	52%	47%	51%	55%	52%	50%	439
agree or	prescription or in a	Disagree	37%	34%	36%	32%	31%	33%	37%	35%	34%	33%	36%	39
disagree with	manner other than	Agree	8%	10%	9%	11%	10%	8%	11%	9%	8%	10%	7%	113
the following statements	prescribed is safer than doing street drugs, such as heroin or cocaine.	Strongly agree	4%	7%	6%	4%	6%	8%	5%	5%	4%	5%	7%	7%
	I wish I knew better what to say to youth	Strongly disagree	25%	23%	25%	17%	24%	29%	20%	35%	25%	26%	27%	179
	about the risks of non-	Disagree	28%	28%	27%	32%	27%	27%	31%	33%	30%	31%	28%	209
	prescribed use of	Agree	25%	26%	26%	24%	24%	22%	25%	13%	26%	22%	24%	34
	prescription drugs.	Strongly agree	22%	22%	22%	27%	25%	22%	24%	19%	19%	21%	21%	29
		Very difficult	10%	13%	11%	13%	12%	10%	15%	16%	8%	12%	11%	15
	prescription drugs from friends or peers in	Somewhat difficult	15%	20%	16%	23%	27%	17%	25%	24%	17%	16%	14%	23
	school.	Somewhat easy	34%	35%	37%	26%	31%	36%	29%	27%	35%	37%	38%	29
		Very easy	41%	32%	36%	38%	31%	37%	31%	33%	40%	34%	37%	33
		Very difficult	17%	19%	18%	13%	26%	15%	27%	24%	12%	17%	22%	21
Thinking	prescription drugs from their own home.	Somewhat difficult	18%	20%	19%	19%	26%	18%	21%	18%	15%	18%	20%	24
about your neighborhood,	irom their own home.	Somewhat easy	33%	34%	35%	38%	24%	35%	26%	31%	40%	35%	31%	29
how easy do		Very easy	32%	26%	29%	30%	24%	32%	26%	27%	34%	29%	28%	26
you think it is for youth to	nucceintion dures	Very difficult Somewhat	30%	37%	33% 32%	42% 32%	35% 38%	31%	35% 37%	35% 33%	32% 36%	35%	36% 27%	32
get	prescription drugs from doctors.	difficult												
		Somewhat easy	20%	15%	18%	16%	11%	19%	16%	16%	17%	17%	18%	18
		Very easy	19%	14%	17%	11%	16%	17%	12%	16%	16%	14%	19%	15
	prescription drugs on	Very difficult Somewhat difficult	9% 13%	11%	9% 13%	21%	10% 18%	16% 21%	15% 17%	13% 17%	11%	9% 14%	10%	12 17
	the street.	Somewhat easy	36%	36%	37%	33%	25%	24%	37%	36%	33%	38%	36%	36
		Very easy	42%	37%	40%	34%	47%	40%	31%	34%	43%	38%	40%	35
Oo you think it y	would be okay for you to	No	95%	95%	95%	96%	95%	91%	95%	89%	95%	95%	96%	96
	drugs without a	Sometimes	4%	4%	4%	3%	3%	3%	3%	5%	5%	3%	3%	3%
	in a manner other than	Yes	1%	2%	1%	1%	2%	6%	2%	5%	0%	2%	1%	1%
	en in your household or	No	92%	93%	93%	94%	96%	91%	92%	98%	96%	94%	90%	92
who are close to		Yes	8%	7%	7%	6%	4%	9%	8%	2%	4%	6%	10%	8%

			Gender		Race/et					Age gr	oup			
Survey Items		Response categories	Male	Female	White	African Ameri- can	Asian	Other	Latino	18-29	30-39	40-49	50-59	60+
as Ritalin, Add	lerall, or Dexedrine?													
	Stimulants such as Ritalin,	No	95%	98%	97%	96%	98%	92%	96%	98%	95%	96%	96%	98%
	Adderall, or Dexedrine	Yes	5%	2%	3%	4%	2%	8%	4%	2%	5%	4%	4%	2%
Are any of	Painkillers such as	No	80%	77%	79%	81%	81%	77%	76%	87%	80%	81%	72%	78%
the following prescription	OxyContin, Vicodin, Codeine, Demerol, Darvon, or Percocet	Yes	20%	23%	21%	19%	19%	23%	24%	13%	20%	19%	28%	22%
drugs	Tranquilizers such as	No	90%	92%	91%	92%	95%	91%	93%	93%	92%	92%	92%	90%
present in your	Valium, Xanax, or Librium	Yes	10%	8%	9%	8%	5%	9%	7%	7%	8%	8%	8%	10%
household?	Sedatives such as	No	98%	99%	98%	98%	98%	100%	98%	98%	98%	99%	99%	97%
	phenobarbital, Tuinal, Nembutal, or Seconal	Yes	2%	1%	2%	2%	2%	0%	2%	2%	2%	1%	1%	3%
Are the presci	ription drugs in your home	No	16%	23%	21%	16%	14%	21%	16%	16%	11%	18%	22%	24%
locked up in a	cabinet or stored in a	Yes	55%	53%	54%	56%	53%	42%	59%	36%	60%	53%	51%	58%
secure place?		N/A	29%	24%	26%	28%	33%	36%	25%	47%	28%	29%	26%	17%
Do way kaon a	ın inventory of the	No	29%	38%	36%	26%	31%	29%	31%	25%	43%	32%	33%	33%
	rugs in your house?	Yes	45%	42%	43%	50%	41%	39%	45%	31%	34%	44%	45%	50%
prescription a	rugs iii your nouse:	N/A	26%	21%	22%	24%	28%	32%	24%	44%	23%	24%	22%	17%
On how many days in the pa		Average N Days	0.03	0.63	0.38	0.00	1.96	0.00	0.14	0.07	0.04	0.21	0.31	0.36
12 months did you use any of the following prescription		Average N Days	2.22	1.77	1.08	0.59	0.13	10.13	7.25	0.04	0.47	1.49	1.95	4.10
drugs without prescription o in a manner		Average N Days	0.19	1.32	1.05	0.46	0.05	0.03	0.01	0.05	2.85	0.12	0.09	1.66
other than prescribed?	Sedatives such as phenobarbital, Tuinal, Nembutal, or Seconal	Average N Days	0.01	0.02	0.02	0.00	0.00	0.03	0.00	0.00	0.00	0.02	0.03	0.01
During the pa	st 12 months, have you	No	41%	47%	44%	42%	60%	58%	39%	53%	63%	39%	34%	54%
	e children or youth in your	Yes	56%	49%	52%	57%	29%	39%	61%	31%	37%	60%	61%	40%
the risks of us	who are close to you about ing prescription drugs scription or in a manner escribed?	N/A	3%	4%	4%	1%	10%	3%	0%	16%	0%	1%	5%	6%
How much inf	luence do you think you	No influence	6%	4%	4%	1%	8%	12%	7%	9%	3%	2%	3%	12%
	nildren who live in your	Some influence	15%	17%	17%	12%	24%	15%	12%	35%	5%	12%	18%	28%
regarding thei	who are close to you r decision to use rugs in a way other than	A lot of influence	79%	78%	79%	87%	68%	72%	81%	56%	92%	85%	80%	60%

Table B7: Survey Responses Regarding Prescription Drug Use by Highest Degree Completed and Income Level

			Highest deg	ree comple	ted				Income	Level		
Survey Items		Response categories	Less than HS	HS/ GED	Some college	2-year college degree	4-year college degree	MA, MS +	Less than \$15K	\$15K- <\$50K	\$50K- <\$100K	\$100K-
	The non-prescribed use	Strongly disagree	4%	8%	10%	13%	12%	11%	20%	13%	11%	5%
	of prescription drugs is a	Disagree	29%	18%	19%	14%	15%	14%	17%	14%	17%	17%
	problem among youth in	Agree	29%	32%	30%	33%	33%	33%	31%	38%	33%	28%
	my neighborhood	Strongly agree	39%	41%	41%	40%	40%	43%	31%	35%	39%	50%
Γο what	Taking prescription	Strongly disagree	48%	50%	52%	47%	46%	56%	40%	45%	50%	56%
extent do you	drugs without a	Disagree	30%	34%	35%	39%	38%	28%	40%	39%	35%	31%
gree or	prescription or in a	Agree	18%	8%	10%	6%	11%	11%	9%	9%	10%	9%
disagree with the following statements	manner other than prescribed is safer than doing street drugs, such as heroin or cocaine.	Strongly agree	3%	8%	4%	8%	5%	5%	11%	8%	5%	4%
	I wish I knew better what	Strongly disagree	15%	20%	21%	29%	27%	25%	25%	24%	24%	24%
	to say to youth about the	Disagree	30%	26%	27%	22%	30%	35%	22%	21%	29%	33%
	risks of non-prescribed	Agree	24%	28%	33%	23%	23%	19%	25%	28%	26%	23%
	use of prescription drugs.	Strongly agree	30%	25%	19%	26%	19%	21%	28%	26%	21%	20%
		Very difficult	4%	12%	13%	15%	11%	8%	19%	13%	11%	9%
	prescription drugs from friends or peers in	Somewhat difficult	32%	18%	15%	16%	17%	21%	21%	15%	18%	19%
	school.	Somewhat easy	21%	27%	40%	36%	38%	38%	31%	37%	32%	37%
		Very easy	43%	42%	32%	32%	34%	33%	29%	35%	39%	35%
		Very difficult	40%	21%	19%	19%	18%	10%	20%	19%	19%	18%
Thinking .	prescription drugs	Somewhat difficult	20%	18%	18%	21%	18%	21%	23%	19%	19%	18%
about your	from their own home.	Somewhat easy	23%	32%	36%	29%	36%	38%	28%	32%	35%	35%
neighborhood,		Very easy	17%	29%	27%	31%	28%	31%	30%	30%	27%	28%
now easy do		Very difficult	26%	34%	38%	35%	36%	25%	36%	35%	33%	33%
ou think it is or youth to	prescription drugs	Somewhat difficult	29%	27%	33%	33%	32%	44%	33%	34%	28%	36%
get	from doctors.	Somewhat easy	23%	20%	15%	16%	17%	18%	15%	15%	20%	17%
		Very easy	23%	19%	14%	16%	14%	13%	16%	15%	19%	14%
		Very difficult	17%	11%	8%	13%	10%	9%	17%	13%	9%	8%
	prescription drugs on	Somewhat difficult	20%	14%	16%	14%	14%	15%	14%	13%	12%	18%
	the street.	Somewhat easy	13%	29%	38%	36%	40%	42%	35%	38%	40%	30%
		Very easy	50%	46%	39%	37%	36%	34%	34%	36%	39%	44%
Oo you think it	would be okay for you to	No	91%	94%	95%	98%	94%	93%	95%	95%	95%	94%
	n drugs without a	Sometimes	6%	3%	4%	1%	4%	5%	1%	3%	4%	5%
orescription or increased?	in a manner other than	Yes	3%	2%	1%	1%	1%	1%	3%	1%	1%	2%
Have the childre	en in your household or	No	88%	93%	92%	96%	91%	94%	94%	93%	93%	93%
who are close to prescription stir	you ever been prescribed mulants such as Ritalin,	Yes	12%	7%	8%	4%	9%	6%	6%	7%	7%	7%
Adderall, or De				1					1		1	
Are any of the	Stimulants such as	No	94%	97%	96%	97%	95%	99%	96%	96%	98%	96%

			Highest deg	ree comple	ted			_	Income	Level		
Survey Items		Response categories	Less than HS	HS/ GED	Some college	2-year college degree	4-year college degree	MA, MS+	Less than \$15K	\$15K- <\$50K	\$50K- <\$100K	\$100K+
following prescription	Ritalin, Adderall, or Dexedrine	Yes	6%	3%	4%	3%	5%	1%	4%	4%	2%	4%
drugs present	Painkillers such as	No	88%	80%	77%	78%	79%	77%	81%	80%	77%	78%
in your household?	OxyContin, Vicodin, Codeine, Demerol, Darvon, or Percocet	Yes	12%	20%	23%	22%	21%	23%	19%	20%	23%	22%
	Tranquilizers such as	No	97%	91%	91%	91%	93%	90%	88%	93%	91%	92%
	Valium, Xanax, or Librium	Yes	3%	9%	9%	9%	7%	10%	12%	7%	9%	8%
	Sedatives such as	No	100%	99%	99%	98%	99%	97%	96%	99%	99%	98%
	phenobarbital, Tuinal, Nembutal, or Seconal	Yes	0%	1%	1%	2%	1%	3%	4%	1%	1%	2%
Are the prescrip	otion drugs in your home	No	3%	16%	18%	19%	22%	27%	17%	16%	21%	22%
	abinet or stored in a	Yes	65%	55%	56%	51%	52%	53%	56%	51%	54%	55%
secure place?		N/A	32%	29%	26%	30%	25%	19%	26%	34%	25%	23%
D	***************************************	No	24%	31%	33%	31%	36%	43%	23%	28%	35%	41%
	inventory of the igs in your house?	Yes	47%	46%	44%	43%	41%	41%	58%	43%	42%	40%
prescription aru	igs in your nouse:	N/A	29%	23%	23%	26%	22%	17%	18%	29%	24%	19%
On how many	Stimulants such as Ritalin, Adderall, or Dexedrine	Average N Days	0.06	0.01	0.04	0.89	0.86	0.01	0.00	0.28	0.45	0.45
days in the past 12 months did you use any of the following	OxyContin, Vicodin,	Average N Days	0.00	2.80	4.34	1.20	0.29	1.74	0.63	1.12	4.37	4.37
prescription drugs without a prescription or i	in Librium	Average N Days	0.03	0.21	1.67	1.64	0.75	0.19	0.77	0.07	1.33	1.33
a manner other than prescribed		Average N Days	0.00	0.01	0.03	0.00	0.00	0.04	0.00	0.02	0.01	0.01
	12 months, have you	No	35%	40%	44%	47%	46%	49%	46%	39%	48%	45%
	children or youth in your	Yes	59%	55%	53%	50%	52%	48%	47%	55%	50%	53%
the risks of using	no are close to you about g prescription drugs ription or in a manner cribed?	N/A	6%	5%	4%	4%	2%	3%	7%	6%	2%	3%
	ence do you think you	No influence	15%	7%	3%	4%	4%	5%	10%	8%	3%	2%
	dren who live in your	Some influence	15%	14%	18%	16%	16%	20%	17%	17%	14%	18%
regarding their	no are close to you decision to use igs in a way other than	A lot of influence	70%	79%	79%	80%	80%	75%	73%	75%	83%	79%

Table B8: Survey Responses Regarding Prescription Drug Use by Type of Relationship to and Age of Children and Youth

Survey Items		Response categories	Relation with cluster or you	onship hildren th	Prima caregi		Type of R	elationship)					and you	
			No	Yes	No	Yes	Parent/ guardian	Grand- parent	Sibling	Other relative	Non- relative	Under 10	11- 13	14- 17	18- 20
	The non-prescribed use of prescription	Strongly disagree	12%	10%	9%	11%	11%	10%	-	3%	12%	10%	11%	11%	8%
	drugs is a problem	Disagree	19%	19%	18%	15%	16%	20%	-	10%	19%	15%	16%	17%	17%
	among youth in my	Agree	32%	34%	34%	31%	31%	37%	-	36%	38%	32%	34%	34%	34%
	neighborhood	Strongly agree	37%	37%	38%	42%	42%	33%	-	51%	31%	44%	39%	39%	419
To what	Taking prescription drugs without a	Strongly disagree	45%	46%	46%	52%	52%	45%	50%	44%	53%	50%	52%	51%	49%
extent do you	prescription or in a	Disagree	38%	36%	35%	35%	35%	36%	40%	32%	29%	35%	37%	34%	35%
agree or	manner other than	Agree	11%	10%	12%	8%	8%	12%	10%	15%	6%	10%	8%	9%	10%
disagree with the following statements	prescribed is safer than doing street drugs, such as heroin or cocaine.	Strongly agree	6%	7%	7%	5%	5%	8%	0%	10%	12%	6%	3%	6%	6%
	I wish I knew better what to say to	Strongly disagree	18%	19%	19%	27%	27%	16%	30%	24%	6%	22%	26%	27%	24%
	youth about the	Disagree	20%	23%	27%	30%	31%	18%	40%	29%	24%	29%	29%	28%	27%
	risks of non-	Agree	34%	29%	27%	24%	23%	34%	10%	22%	29%	26%	24%	23%	249
	prescribed use of prescription drugs.	Strongly agree	28%	29%	27%	20%	19%	32%	20%	24%	41%	23%	21%	22%	24%
		Very difficult	14%	11%	11%	11%	11%	15%	10%	3%	19%	11%	13%	10%	8%
	prescription drugs from friends	Somewhat difficult	16%	19%	20%	17%	18%	20%	30%	14%	19%	18%	18%	18%	199
	or peers in school.	Somewhat easy	30%	34%	33%	36%	36%	31%	30%	33%	31%	35%	35%	35%	36%
		Very easy	40%	37%	36%	35%	35%	34%	30%	50%	31%	35%	34%	37%	379
		Very difficult	16%	19%	18%	19%	19%	22%	30%	10%	19%	18%	22%	23%	20%
Thinking about your	prescription drugs from their	Somewhat difficult	20%	19%	19%	19%	19%	23%	30%	15%	0%	18%	19%	19%	19%
neighborhood,	own home.	Somewhat easy	32%	33%	34%	34%	34%	29%	30%	35%	50%	34%	32%	32%	349
how easy do		Very easy	33%	29% 31%	29% 30%	28% 35%	28% 35%	26% 31%	10%	39% 24%	31% 24%	30%	27% 34%	27% 35%	27% 32%
you think it is for youth to	prescription	Very difficult Somewhat difficult	30%	36%	35%	32%	33%	36%	30%	33%	29%	34%	34%	32%	32%
get	drugs from doctors.	Somewhat easy	16%	17%	18%	17%	17%	17%	10%	21%	24%	18%	19%	17%	19%
		Very easy	21%	15%	16%	15%	15%	16%	10%	21%	24%	16%	14%	16%	17%
		Very difficult	13%	9%	10%	10%	10%	10%	10%	4%	19%	10%	12%	9%	9%
	prescription	Somewhat difficult	11%	16%	17%	15%	15%	16%	20%	14%	6%	16%	16%	15%	169
	drugs on the street.	Somewhat easy	35%	35%	36%	36%	36%	35%	30%	33%	38%	35%	35%	36%	36%
		Very easy	42%	40%	38%	39%	38%	38%	40%	49%	38%	39%	37%	39%	399
	would be okay for	No	95%	94%	94%	95%	95%	95%	100%	88%	100%	94%	96%	95%	949
you to use preso		Sometimes	4%	4%	3%	4%	4%	3%	0%	6%	0%	4%	2%	3%	4%
without a presci manner other tl	•	Yes	1%	2%	2%	1%	1%	1%	0%	6%	0%	2%	2%	2%	2%

Survey Items		Response	Relation with cluster or you	hildren	Prima caregi		Type of Ro	elationship	·			Age of o	children	and you	th
		categories	No	Yes	No	Yes	Parent/ guardian	Grand- parent	Sibling	Other relative	Non- relative	Under 10	11- 13	14- 17	18- 20
	en in your household	No	93%	92%	92%	93%	93%	92%	100%	90%	100%	93%	91%	91%	90%
	e to you ever been cription stimulants Adderall, or	Yes	7%	8%	8%	7%	7%	8%	0%	10%	0%	7%	9%	9%	10%
	Stimulants such as	No	99%	97%	98%	96%	96%	97%	100%	98%	100%	96%	96%	95%	96%
	Ritalin, Adderall, or Dexedrine	Yes	1%	3%	2%	4%	4%	3%	0%	2%	0%	4%	4%	5%	4%
	Painkillers such as	No	85%	74%	75%	79%	79%	79%	90%	63%	82%	80%	80%	78%	75%
Are any of the following prescription	OxyContin, Vicodin, Codeine, Demerol, Darvon, or Percocet	Yes	15%	26%	25%	21%	21%	21%	10%	37%	18%	20%	20%	22%	25%
drugs present in your	Tranquilizers such	No	93%	91%	89%	92%	92%	92%	70%	88%	59%	91%	93%	93%	92%
household?	as Valium, Xanax, or Librium	Yes	7%	9%	11%	8%	8%	8%	30%	12%	41%	9%	7%	7%	8%
	Sedatives such as	No	99%	97%	98%	99%	99%	99%	100%	94%	100%	98%	98%	98%	99%
	phenobarbital, Tuinal, Nembutal, or Seconal	Yes	1%	3%	2%	1%	1%	1%	0%	6%	0%	2%	2%	2%	1%
Are the prescrip	tion drugs in your	No	21%	26%	25%	17%	18%	25%	10%	16%	44%	16%	21%	21%	21%
home locked up		Yes	47%	53%	54%	55%	54%	56%	40%	64%	44%	58%	53%	49%	54%
stored in a secu	re place?	N/A	31%	21%	22%	28%	28%	19%	50%	20%	12%	26%	26%	29%	26%
Do you keep an	inventory of the	No Yes	29% 44%	35%	34% 44%	35% 43%	35% 42%	32% 48%	30% 20%	29% 50%	53% 35%	35% 43%	34% 44%	33% 41%	33% 44%
prescription dru	gs in your house?	N/A	26%	45%	22%	22%	23%	19%	50%	21%	12%	22%	22%	26%	23%
	Stimulants such as Ritalin, Adderall, or Dexedrine	Average N Days	0.01	0.34	0.29	0.45	0.43	0.46	0.10	0.04	0.00	0.58	0.40	0.39	0.57
On how many days in the past months did you use any of the following prescription dru without a	Codeine, Demerol, Darvon, or Percocet	Average N Days	0.11	2.99	5.06	1.04	.89	8.01	.10	1.89	1.76	1.88	3.08	2.04	1.94
prescription or i a manner other than prescribed	such as Valium, Xanax, or Librium	Average N Days	0.09	1.28	1.26	0.77	0.74	0.38	0.10	4.68	0.24	1.53	0.08	0.69	1.23
	Sedatives such as phenobarbital, Tuinal,	Average N Days	0.00	0.01	0.01	0.01	0.01	0.02	0.00	0.00	0.00	0.01	0.02	0.03	0.02

Survey Items		Response categories	Relation with cluster or you	hildren	Prima caregi	_	Type of Ro	elationship	,			Age of o	hildren	and you	th
		categories	No	Yes	No	Yes	Parent/ guardian	Grand- parent	Sibling	Other relative	Non- relative	Under 10	11- 13	14- 17	18- 20
	Nembutal, or Seconal														
During the past 12 talked with the chil		No	40%	56%	55%	41%	43%	51%	40%	57%	53%	55%	34%	29%	37%
your household or	who are close to	Yes	29%	40%	42%	59%	57%	46%	60%	40%	47%	44%	65%	70%	62%
you about the risks prescription drugs prescription or in a than prescribed?	without a	N/A	31%	3%	3%	0%	0%	3%	0%	2%	0%	1%	1%	0%	1%
How much influence	e do you think	No influence	14%	10%	9%	2%	2%	8%	0%	10%	12%	4%	3%	3%	4%
you have on the chi		Some influence	23%	35%	30%	10%	9%	35%	50%	32%	69%	16%	16%	19%	22%
your household or you regarding their prescription drugs than prescribed?	decision to use	A lot of influence	63%	55%	61%	88%	88%	57%	50%	58%	19%	80%	81%	78%	74%

Table B9: Survey Responses Regarding Substance Abuse Treatment by Geographic Region and UHF Neighborhood

		Geographi	c Region		United Hosp	ital Fund Neig	hborhood	
Survey Items	Response categories	North Shore	Mid-Island	South Shore	Port Richmond	Willow- brook	Stapleton – St. George	South Beach Tottenville
If a child or youth that you know had	No	30%	38%	26%	29%	38%	30%	26%
an alcohol and/or prescription drug use problem, would you know where to go to get help	Yes	70%	62%	74%	71%	62%	70%	74%
	Private counselor or therapist	23%	18%	21%	20%	18%	24%	21%
If a child or youth that you know	Doctor/Pediatrician	36%	45%	45%	32%	45%	38%	45%
needed treatment or counseling for an	Support group (e.g., AA)	11%	12%	8%	12%	12%	11%	8%
alcohol or prescription drug problem,	Minister or religious official	7%	5%	5%	7%	5%	7%	5%
who is the first person you would tell	School counselor	17%	17%	16%	23%	17%	13%	16%
them to talk to?	Don't know	9%	5%	7%	8%	5%	9%	7%
	Other	6%	2%	5%	5%	2%	6%	5%
	Cannot afford the cost	15%	14%	14%	20%	14%	13%	14%
	Think they can handle the problem without treatment	20%	14%	17%	26%	14%	17%	17%
What are the main reasons that prevent people in your neighborhood	Do not know where to go for services	33%	30%	33%	40%	30%	28%	33%
who have an alcohol or a prescription	Do not have time	16%	14%	16%	18%	14%	15%	16%
drug problem from getting the help	Do not want others to find out	48%	50%	53%	52%	50%	46%	53%
they need?	Health insurance does not cover enough treatment or any treatment	8%	7%	8%	10%	7%	7%	8%
	Think treatment would not	14%	12%	14%	19%	12%	11%	14%

			Geographic	Region		United Hosp	ital Fund Neig	hborhood	
Survey Items		Response categories	North Shore	Mid-Island	South Shore	Port Richmond	Willow- brook	Stapleton – St. George	South Beach Tottenville
		help							
		Might cause neighbors/community to have a negative opinion	13%	14%	15%	10%	14%	15%	15%
		None. People in my neighborhood are getting the help they need.	7%	7%	5%	4%	7%	8%	5%
	Adults in your	Strongly disagree	23%	20%	15%	19%	20%	25%	15%
To what	neighborhood look	Disagree	34%	35%	41%	35%	35%	34%	41%
extent do	down on people who	Agree	26%	29%	28%	26%	29%	26%	28%
you agree or disagree	are in alcohol treatment programs.	Strongly agree	16%	16%	16%	20%	16%	15%	16%
with the	Adults in your	Strongly disagree	22%	18%	12%	18%	18%	25%	12%
following	neighborhood look	Disagree	32%	33%	38%	31%	33%	33%	38%
statements?	down on people who	Agree	27%	32%	33%	30%	32%	26%	33%
	are in prescription drug treatment programs.	Strongly agree	18%	18%	17%	21%	18%	16%	17%

Table B10: Survey Responses Regarding Substance Abuse Treatment by Gender, Race/Ethnicity, and Age Group

		Gender		Race/et	hnicity				Age gro	oup			
Survey Items	Response categories	Male	Female	White	African Ameri- can	Asian	Other	Latino	18-29	30-39	40-49	50-59	60+
If a child or youth that you know	No	28%	31%	31%	23%	31%	24%	24%	25%	32%	30%	26%	35%
had an alcohol and/or prescription drug use problem, would you know where to go to get help	Yes	72%	69%	69%	77%	69%	76%	76%	75%	68%	70%	74%	65%
If a child or youth that you know	Private counselor or therapist	23%	19%	22%	22%	11%	10%	26%	26%	25%	20%	22%	19%
needed treatment or counseling	Doctor/Pediatrician	40%	43%	43%	33%	49%	37%	35%	36%	44%	45%	39%	40%
for an alcohol or prescription	Support group (e.g., AA)	10%	10%	9%	12%	9%	17%	14%	11%	8%	10%	9%	14%
drug problem, who is the first	Minister or religious official	7%	5%	4%	9%	7%	17%	11%	2%	4%	5%	7%	8%
person you would tell them to	School counselor	14%	18%	17%	16%	22%	12%	13%	19%	12%	18%	18%	16%
talk to?	Don't know	6%	8%	7%	6%	5%	11%	10%	4%	9%	5%	8%	9%
	Other	5%	4%	5%	9%	2%	7%	1%	6%	6%	4%	6%	4%
	Cannot afford the cost	18%	12%	16%	14%	9%	9%	10%	31%	9%	15%	10%	21%
What are the main reasons that prevent people in your	Think they can handle the problem without treatment	20%	16%	18%	19%	13%	14%	22%	19%	18%	16%	16%	24%
neighborhood who have an alcohol or a prescription drug problem from getting the help	Do not know where to go for services	37%	29%	32%	34%	26%	41%	30%	29%	34%	33%	30%	33%
they need?	Do not have time	18%	14%	15%	21%	6%	15%	18%	25%	17%	16%	13%	15%
they need.	Do not want others to find out	50%	51%	51%	42%	50%	50%	51%	58%	53%	55%	50%	41%

			Gender	•	Race/et	hnicity				Age gro	oup			
Survey Items		Response categories	Male	Female	White	African Ameri- can	Asian	Other	Latino	18-29	30-39	40-49	50-59	60+
		Health insurance does not cover enough treatment or any treatment	9%	7%	8%	6%	0%	5%	10%	13%	8%	8%	7%	9%
		Think treatment would not help	16%	12%	13%	16%	2%	12%	18%	19%	14%	12%	13%	15%
		Might cause neighbors/community to have a negative opinion	15%	13%	15%	15%	19%	11%	10%	12%	18%	17%	12%	11%
		None. People in my neighborhood are getting the help they need.	4%	8%	7%	2%	7%	5%	7%	0%	2%	6%	7%	11%
	Adults in your	Strongly disagree	22%	17%	19%	23%	17%	27%	21%	27%	20%	17%	18%	23%
	neighborhood	Disagree	36%	39%	38%	36%	36%	34%	33%	35%	39%	40%	36%	35%
	look down on	Agree	24%	29%	27%	27%	32%	21%	27%	20%	27%	28%	30%	24%
To what extent do you agree	people who are in alcohol treatment programs.	Strongly agree	18%	15%	16%	14%	15%	18%	18%	18%	14%	15%	16%	18%
or disagree	Adults in your	Strongly disagree	21%	15%	17%	17%	14%	28%	19%	22%	17%	17%	16%	18%
with the	neighborhood	Disagree	34%	35%	34%	40%	31%	40%	33%	24%	35%	35%	33%	38%
following	look down on	Agree	27%	33%	31%	25%	43%	18%	29%	31%	29%	32%	32%	25%
statements?	people who are in prescription drug treatment programs.	Strongly agree	19%	17%	18%	18%	12%	14%	20%	22%	20%	16%	18%	19%

Table BII: Survey Responses Regarding Substance Abuse Treatment by Highest Degree Completed and Income Level

		Highest	Degree Co	ompleted				Income	Level		
Survey Items	Response categories	Less than HS	HS/ GED	Some college	2-year college degree	4-year college degree	MA, MS+	Less than \$15K	\$15K- <\$50K	\$50K- <\$100K	\$100K+
If a child or youth that you know had an alcohol and/or	No	41%	35%	34%	28%	26%	24%	35%	32%	30%	26%
prescription drug use problem, would you know where to go to get help	Yes	59%	65%	66%	72%	74%	76%	65%	68%	70%	74%
	Private counselor or therapist	13%	18%	21%	22%	22%	24%	26%	21%	22%	20%
If a child or youth that you know	Doctor/Pediatrician	43%	42%	45%	38%	43%	39%	37%	39%	41%	46%
needed treatment or counseling	Support group (e.g., AA)	13%	11%	10%	13%	10%	7%	9%	13%	11%	8%
for an alcohol or prescription drug problem, who is the first	Minister or religious official	10%	7%	6%	5%	5%	7%	9%	6%	5%	6%
person you would tell them to	School counselor	17%	17%	14%	16%	16%	20%	16%	14%	19%	16%
talk to?	Don't know	12%	10%	7%	9%	6%	3%	15%	7%	5%	7%
can co.	Other	3%	5%	4%	6%	4%	3%	3%	8%	3%	4%
What are the main reasons that	Cannot afford the cost	14%	18%	18%	12%	11%	14%	12%	19%	14%	12%
prevent people in your neighborhood who have an	Think they can handle the problem without treatment	25%	16%	20%	19%	18%	15%	18%	20%	18%	17%

			Highest	Degree Co	ompleted				Income	Level		
Survey Items		Response categories	Less than HS	HS/ GED	Some college	2-year college degree	4-year college degree	MA, MS+	Less than \$15K	\$15K- <\$50K	\$50K- <\$100K	\$100K+
	rescription drug	Do not know where to go for services	29%	29%	32%	31%	34%	38%	27%	38%	32%	30%
they need?		Do not have time	21%	15%	16%	15%	18%	13%	15%	19%	16%	13%
		Do not want others to find out	43%	48%	49%	46%	55%	55%	39%	46%	52%	55%
		Health insurance does not cover enough treatment or any treatment	14%	9%	6%	6%	10%	7%	5%	10%	10%	6%
		Think treatment would not help	11%	13%	16%	11%	15%	10%	15%	14%	16%	10%
		Might cause neighbors/community to have a negative opinion	7%	13%	13%	13%	16%	16%	13%	13%	16%	13%
		None. People in my neighborhood are getting the help they need.	7%	8%	5%	8%	5%	3%	9%	5%	7%	6%
	Adults in your	Strongly disagree	16%	21%	18%	30%	18%	9%	33%	26%	21%	10%
	neighborhood	Disagree	38%	41%	41%	28%	36%	41%	25%	30%	37%	46%
	look down on	Agree	31%	24%	28%	22%	29%	35%	19%	25%	26%	32%
To what extent do you agree	people who are in alcohol treatment programs.	Strongly agree	16%	15%	13%	21%	17%	15%	22%	19%	16%	12%
or disagree	Adults in your	Strongly disagree	13%	20%	15%	23%	17%	9%	31%	24%	19%	8%
with the	neighborhood	Disagree	39%	36%	39%	30%	32%	37%	22%	29%	36%	41%
following	look down on	Agree	32%	28%	30%	26%	31%	38%	23%	26%	28%	37%
statements?	people who are in prescription drug treatment programs.	Strongly agree	16%	16%	15%	22%	19%	17%	24%	21%	17%	14%

Table B12: Survey Responses Regarding Substance Abuse Treatment by Type of Relationship to and Age of Children and Youth

Survey Items		Response	Relation with cluster or you	hildren	Prima caregi	_	Type of R	elationship	,			Age of o	hildren	and you	th
•		categories	No	Yes	No	Yes	Parent/ guardian	Grand- parent	Sibling	Other relative	Non- relative	Under 10	11- 13	14- 17	18- 20
lf a child or you	ith that you	No	33%	31%	30%	29%	29%	35%	20%	21%	18%	29%	30%	31%	28%
	cohol and/or ug use problem, w where to go to	Yes	67%	69%	70%	71%	71%	65%	80%	79%	82%	71%	70%	69%	72%
		Private counselor or therapist	17%	21%	21%	22%	22%	20%	60%	16%	13%	22%	20%	20%	20%
lf a child or you	ith that you	Doctor/Pediatrician	37%	45%	43%	42%	42%	42%	10%	49%	33%	42%	40%	39%	45%
know needed to	reatment or	Support group (e.g., AA)	11%	13%	12%	9%	9%	13%	0%	19%	0%	11%	13%	13%	13%
	ug problem, who on you would tell	Minister or religious official	8%	5%	5%	6%	5%	8%	10%	7%	0%	5%	5%	8%	6%
them to talk to		School counselor	19%	13%	16%	16%	17%	14%	10%	9%	40%	17%	17%	16%	13%
		Don't know	6%	10%	8%	7%	7%	9%	0%	9%	12%	8%	6%	8%	10%
		Other	8%	3%	3%	5%	5%	2%	10%	0%	13%	3%	5%	5%	3%
		Cannot afford the cost	23%	20%	18%	12%	12%	18%	50%	17%	20%	14%	13%	15%	18%
		Think they can handle the problem without treatment	17%	19%	18%	18%	18%	25%	10%	7%	20%	18%	17%	19%	199
		Do not know where to go for services	25%	28%	30%	34%	35%	29%	60%	19%	33%	33%	32%	33%	349
		Do not have time	23%	17%	16%	14%	14%	18%	30%	15%	13%	16%	14%	14%	149
What are the n	nain reasons that	Do not want others to find out	48%	46%	47%	52%	52%	43%	70%	52%	60%	53%	52%	50%	475
	who have an	Health insurance does not cover enough treatment or any treatment	14%	7%	7%	8%	7%	7%	30%	5%	0%	7%	9%	7%	8%
they need?		Think treatment would not help	13%	12%	11%	14%	14%	17%	40%	1%	0%	14%	14%	12%	13%
		Might cause neighbors/community to have a negative opinion	8%	13%	12%	16%	16%	11%	20%	6%	27%	15%	18%	13%	139
		None. People in my neighborhood are getting the help they need.	4%	11%	10%	5%	5%	15%	0%	7%	0%	5%	5%	8%	9%
To what	Adults in your	Strongly disagree	23%	24%	22%	18%	18%	26%	-	20%	19%	19%	20%	18%	169
extent do	neighborhood	Disagree	40%	33%	37%	37%	38%	32%	-	38%	50%	38%	37%	36%	379
you agree or	look down on	Agree	22%	26%	24%	29%	29%	24%	-	24%	25%	26%	27%	30%	319
disagree with	people who are	Strongly agree	15%	17%	17%	16%	16%	17%	-	18%	6%	16%	15%	16%	169

Survey Items		Response categories	Relation with cluster or you	hildren	Prima caregi	_	Type of Ro	elationship)			Age of c	:hildren	and you	th
		Categories	No	Yes	No	Yes	Parent/ guardian	Grand- parent	Sibling	Other relative	Non- relative	Under 10	11- 13	14- 17	18- 20
the following statements?	in alcohol treatment programs.														
	Adults in your	Strongly disagree	20%	19%	17%	17%	17%	19%	-	18%	19%	17%	19%	16%	14%
	neighborhood	Disagree	35%	35%	38%	33%	34%	37%	-	41%	44%	36%	36%	33%	35%
	look down on	Agree	28%	27%	26%	32%	32%	26%	-	25%	19%	29%	30%	33%	32%
	people who are in prescription drug treatment programs.	Strongly agree	17%	19%	19%	17%	17%	19%	-	16%	19%	18%	16%	18%	19%

Table B13: Survey Responses Regarding Marijuana or Hashish use by Population Subgroup

Characteristic	Population subgroup	ls it okay fo pot) or has	or youth to use ma hish (hash, hash oi	rijuana (grass,)?		or adults to use mar shish (hash, hash oil)	
		No	Sometimes	Yes	No	Sometimes	Yes
	North Shore	93%	3%	4%	71%	18%	12%
Geographic region	Mid-Island	94%	3%	4%	79%	14%	7%
	South Shore	95%	4%	2%	79%	14%	7%
	Port Richmond	94%	3%	2%	74%	17%	9%
Hill and all the sales and	Willowbrook	94%	3%	4%	79%	14%	7%
JHF neighborhood	Stapleton-St. George	93%	3%	4%	69%	18%	13%
	South Beach Tottenville	95%	4%	2%	79%	14%	7%
S d	Male	96%	3%	2%	77%	17%	7%
Gender	Female	93%	4%	3%	75%	15%	10%
	White	94%	3%	3%	77%	14%	9%
	African American	94%	3%	4%	66%	24%	10%
ace/ethnicity	Asian	93%	5%	2%	77%	13%	11%
	Other	94%	3%	3%	70%	21%	9%
	Latino	98%	2%	0%	78%	16%	5%
	18-29	89%	0%	11%	64%	7%	29%
	30-39	95%	4%	2%	74%	17%	10%
Age group	40-49	96%	2%	2%	80%	14%	6%
.sc 8. oup	50-59	93%	3%	4%	71%	17%	12%
	60+	93%	5%	2%	75%	17%	7%
	Less than HS	91%	0%	9%	91%	3%	3%
	HS/GED	95%	2%	3%	78%	13%	13%
	Some college	94%	4%	2%	74%	17%	17%
Highest degree completed	2-year college degree	94%	2%	4%	76%	15%	15%
	4-year college degree	93%	4%	3%	75%	16%	16%
	MA, MS +	94%	4%	2%	72%	19%	19%
	Less than \$15K	93%	2%	5%	81%	11%	7%
	\$15K-<\$50K	95%	3%	3%	72%	20%	8%
ncome level	\$50K-<\$100K	95%	2%	3%	78%	13%	9%
	\$100K+	93%	5%	2%	75%	15%	10%
Relationship with children or	No	94%	6%	1%	76%	17%	8%
outh	Yes	90%	4%	6%	67%	19%	14%
	No	92%	4%	5%	69%	18%	14%
Primary caregiver	Yes	95%	3%	2%	79%	14%	7%
	Parent/guardian	95%	3%	2%	78%	15%	8%
	Grandparent	92%	4%	4%	75%	16%	9%
ype of relationship	Sibling	80%	0%	20%	40%	0%	60%
,,	Other relative	89%	2%	9%	60%	21%	20%
	Non-relative	100%	0%	0%	53%	41%	6%
	Under 10	93%	4%	3%	77%	14%	9%
	11-13	96%	2%	2%	81%	13%	6%
Age of children and youth	14-17	94%	3%	3%	78%	13%	10%
	18-20	92%	4%	5%	76%	15%	9%