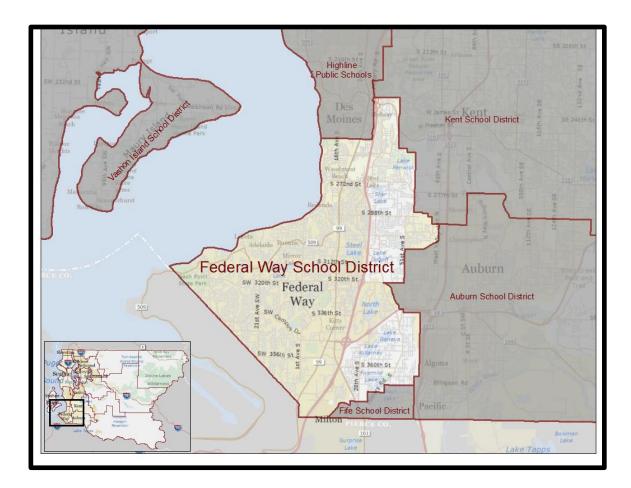
Revised January 2017



Federal Way Public Schools District Health Profile King County, Washington (HYS 2012)



Suggested citation: Assessment, Policy Development & Evaluation Unit. *School District Health Profile: [School district name].* Seattle (WA): Public Health – Seattle & King County: 2013.

Introduction

The Healthy Youth Survey (HYS) is a collaborative effort of the Office of the Superintendent of Public Instruction, the Department of Health, the Department of Social and Health Service's Division of Behavioral Health and Recovery, the Department of Commerce, and the Liquor Control Board.

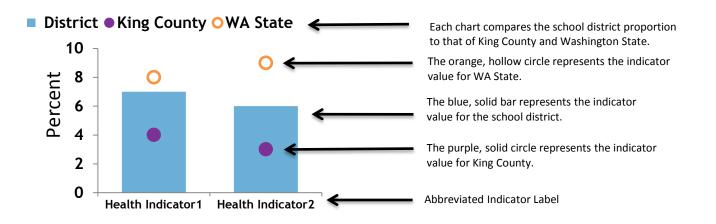
The survey provides important information about youth in Washington State. The Information from HYS is used to guide policy and programs that serve youth and to identify trends in the patterns of behavior over time. In October of even-numbered years, since 2002, students in grades 6, 8, 10, and 12 answered questions about safety and violence, physical activity and diet, alcohol, tobacco and other drug use, and related risk and protective factors.

This School District Health Profile, developed by Public Health in collaboration with school districts, summarizes HYS data to provide information on key health indicators and their determinants. It combines all grades for which the question is asked for 2012 point estimates (see pages 3-9) and stratifies by 8th graders and 10th and 12 graders combined for point estimates from 2004-2012 (see page 10). Comparisons for statistically significant differences between 2010 and 2012 estimates are also included (see page 11). Responses are weighted to district level enrollment by gender and grade level to ensure data were representative of all students in the district within the sampled grades.

The purpose of the report is to inform school policy-makers, health and wellness planners, and the public about student health at the district level. In this series of school district health profiles, King County is divided into 19 school districts. For each of the 19 school districts, the report includes five sections:

- Demographics of survey respondents
- Obesity, physical activity and dietary behavior
- Mental health, personal safety and violence
- Alcohol, tobacco and other drug use and secondhand smoke exposure
- District specific indicators of special interest

For each section, data are presented in a chart and a table. Below is a description on how to read the chart.



The table under each chart has more complete labels for the indicators in the chart. It also contains the actual indicator value for the school district. The table specifies whether or not the health indicator rate for the school district is significantly higher (\uparrow), significantly lower (\downarrow), or not different (-) from the King County point estimates based on overlapping confidence intervals. Additional tables provide within district comparisons by socio-economic status and race/ethnicity.

This report is produced by the Assessment, Policy Development & Evaluation Unit at Public Health – Seattle & King County. For more information and update alerts, please visit <u>http://www.kingcounty.gov/healthservices/health/data.aspx</u> or contact <u>data.request@kingcounty.gov</u>

Demographics of HYS (2012) Respondents

	Federal Way		King County ¹	WA State ¹
Total 2012 Respondents	n=803		n=51,943	n=33,270
Demographic		% ¹	%	%
Age (years)				
<=12	*	*	0.6	0.6
13-14	*	*	32.4	40.4
15-16	478	47.8	33.1	33.3
17-18	303	49.7	33.0	25.3
19+	*	*	0.8	0.5
Race/ethnicity				
White, NH ²	245	30.4	45.6	52.6
Black, NH	91	11.1	7.4	4.0
Hispanic/Latino	175	23.0	10.5	15.0
American Indian/Alaska Native (AIAN), NH	*	*	1.7	3.5
Asian, NH	119	14.4	17.1	7.7
Native Hawaiian/Pacific Islander (NHPI), NH	56	6.7	2.3	1.6
Other (Includes multiracial)	105	13.1	15.4	15.7
Grade				
6	0	0.0	24.6	24.7
8	0	0.0	24.5	30.7
10	492	48.6	25.2	25.2
12	310	51.4	25.7	19.4
Gender				
Male	377	50.0	51.7	49.3
Female	425	50.0	48.3	50.7
Language				
Non-English speaking at home ³	252	32.2	25.1	19.3
Socio-economic status (SES) ⁴				
Lower SES	315	32.2	29.3	36.5
Moderate-higher SES	358	52.4	70.7	63.5

¹King County respondents include all HYS 2012 voluntary and required participants; WA State respondents include only required HYS participants. All percentages for district, King County and WA presented are those with which survey weights have been applied. ²NH=non-Hispanic.

³Speaking a language other than English at home.

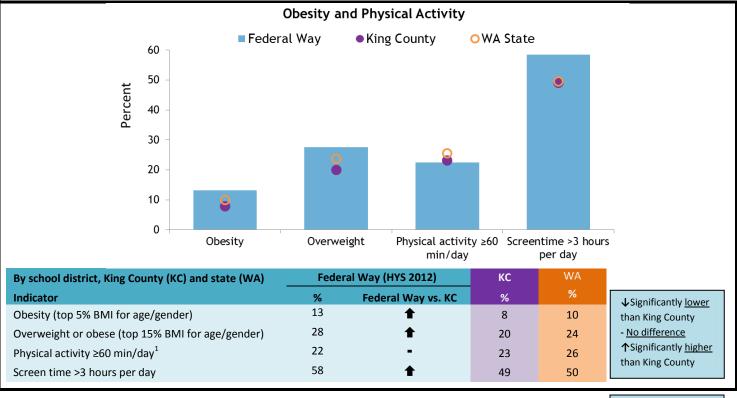
⁴Level of completed education by the student's mother is a proxy measure for SES. "Lower SES" corresponds to no post-high school maternal education and "moderate - higher SES" if maternal education includes any post-high school education.

Non-English languages spoken at home reported by Federal Way HYS (2012) respondents grades 8, 10 & 12

Language	N	% 1
Spanish	129	17.2
Chinese	*	*
Vietnamese	*	*
Russian	16	1.8
Korean	24	3.1
Japanese	0	0.0
Ukrainian	*	*
Other (not specified)	57	6.9

Obesity and Physical Activity

Obesity prevention and reduction remain a key focus area of school health and wellness programming. Children and adolescents who are obese are likely to be obese as adults and are therefore more at risk for adult health problems. Self-reported height and weight of students in grade 8, 10 and 12 are used to calculate body mass index (BMI). Obesity is defined as a BMI-for-age-and-gender \ge 95th percentile. To promote health and prevent obesity, national guidelines recommend that youth engage in 60+ minutes of physical activity on most days of the week.



By socio-economic status (SES)		_	cantly <u>lower</u>					
Indicator	Low SES Low vs. Mod/High Moderate/High SES % %					- <u>No diff</u>		
Obesity (top 5% BMI for age/gender)	16	-		11		↑Significantly <u>high</u> than Mod/High SES		
Overweight or obese (top 15% BMI for age/gender)	33	-		24		* <u>Data not available</u>		
Physical activity ≥60 min/day ¹	20	-		30		due to c	ell count <10	
Screen time >3 hours per day	59	-		56				
By race ²			Federal \	Way (HYS 2012)				
Indicator	Asian %	AIAN Bla			v וי	Vhite %	Other %	

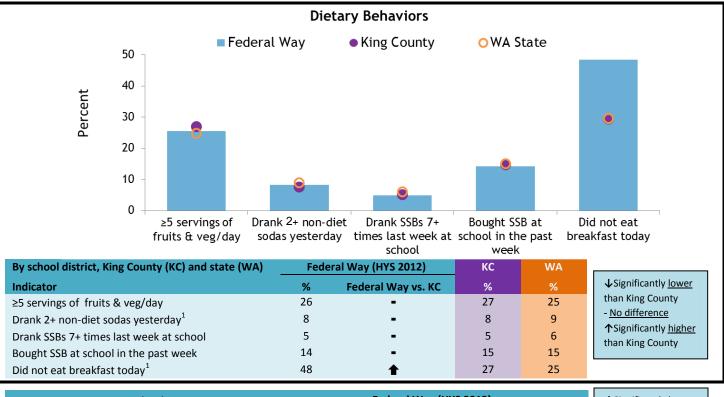
	%	%	%	%	%	%	%
Obesity (top 5% BMI for age/gender)	*	*	*	16	*	10	*
Overweight or obese (top 15% BMI for age/gender)	22	*	25	31	52	22	33
Physical activity ≥60 min/day ¹	*	*	31	16	*	27	35
Screen time >3 hours per day	59	40	*	60	54	53	57
1 +b				th.			

¹Indicator includes 6th grade respondents. Not all questionnaire items were included in the 6th grade version

²AIAN=American Indian/Alaska Native; NHPI=Native Hawaiian/Pacific Islander; Hispanic considered as a separate group and not included in any other group. Race/ethnicity categories may have a small number of respondents (see Demographic Table on page 3); estimates should be interpreted with caution.

Dietary Habits

Healthy lifestyle habits, including healthy eating, can lower the risk of becoming obese and developing related diseases. Schools play a particularly critical role by establishing a safe and supportive environment with policies and practices that support healthy behaviors, including reducing consumption of sugary sweetened beverages (SSBs). Schools also provide opportunities for students to learn about and practice healthy eating and physical activity behaviors.



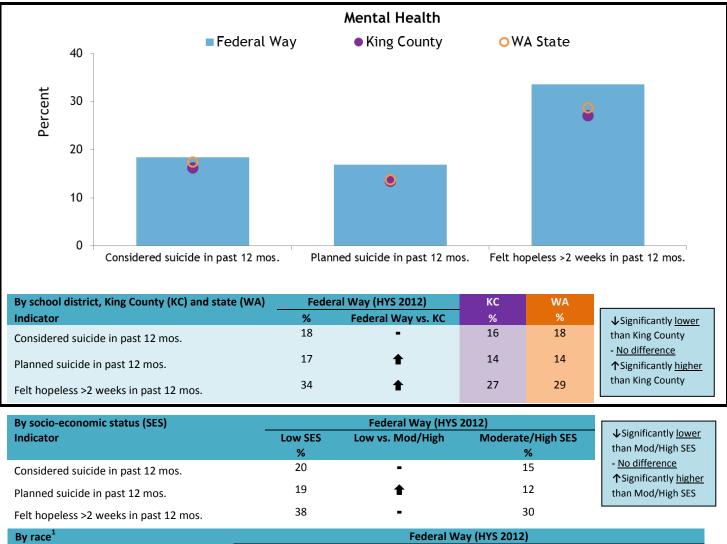
By socio-economic status (SES)		Federal Way (HYS	2012)	↓ Significantly <u>lower</u>
Indicator	Low SES	Low vs. Mod/High	Moderate/High SES	than Mod/High SES
	%		%	- <u>No difference</u>
≥5 servings of fruits & veg/day	24	-	29	↑ Significantly <u>higher</u>
Drank 2+ non-diet sodas yesterday ¹	10	-	6	than Mod/High SES
Drank SSBs 7+ times last week at school	*	*	*	*Data not available
Bought SSB at school in the past week	10	-	18	due to cell count <10
Did not eat breakfast today ¹	60	1	38	

By race ²	Federal Way (HYS 2012)							
Indicator	Asian	AIAN	Black	Hispanic	NHPI	White	Other	
	%	%	%	%	%	%	%	
≥5 servings of fruits & veg/day ¹	24	*	*	22	36	25	39	
Drank 2+ non-diet sodas yesterday	*	*	*	15	*	8	*	
Drank SSBs 7+ times last week at school	*	*	*	*	0	*	*	
Bought SSB at school in the past week	20	*	10	11	7	18	14	
Did not eat breakfast today ¹	41	*	49	55	62	44	46	
¹ Indicator includes 6 th grade respondents. No	ot all question	inaire items w	vere included	in the 6 th grade	e version			

²AIAN=American Indian/Alaska Native; NHPI=Native Hawaiian/Pacific Islander; Hispanic considered as a separate group and not included in any other group. Race/ethnicity categories may have a small number of respondents (see Demographic Table on page 3); estimates should be interpreted with caution.

Mental Health

Mental health is important to overall health. Mental disorders are chronic health conditions that can continue throughout the lifespan. Without early diagnosis and treatment, youth with mental disorders can have problems at home, in school, and in forming friendships. This can also interfere with their healthy development, and these problems can continue into adulthood. Suicide (i.e., taking one's own life) is a serious public health problem that affects even young people. For youth between the ages of 10 and 24, suicide is the third leading cause of death. Suicide affects all youth, but some groups are at higher risk than others.

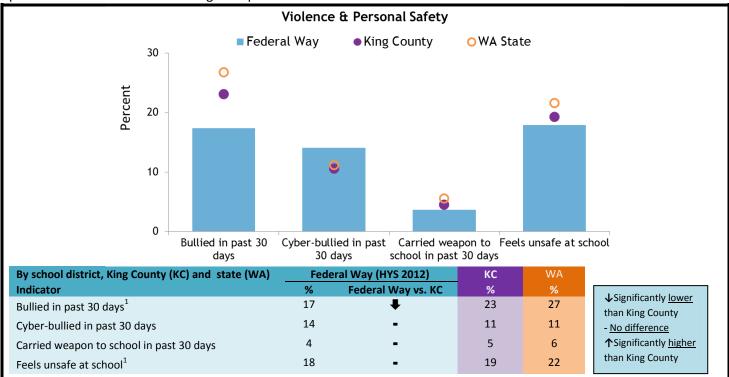


By race ¹	Federal Way (HYS 2012)								
Indicator	Asian	AIAN	Black	Hispanic	NHPI	White	Other		
	%	%	%	%	%	%	%		
Considered suicide in past 12 mos.	16	*	14	17	24	19	20		
Planned suicide in past 12 mos.	*	*	*	*	30	19	25		
Felt hopeless >2 weeks in past 12 mos.	35	*	31	35	41	32	32		

¹AIAN=American Indian/Alaska Native; NHPI=Native Hawaiian/Pacific Islander; Hispanic considered as a separate group and not included in any other group. Race/ethnicity categories may have a small number of respondents (see Demographic Table on page 3); estimates should be interpreted with caution.

Violence & Personal Safety

Youth violence includes various behaviors. Some violent acts—such as bullying, slapping, or hitting—can cause more emotional harm than physical harm. Bullying is a form of youth violence and is widespread in the United States. Bullying can also occur through technology and is called electronic aggression or cyber-bullying. Cyber-bullying is bullying that occurs through e-mail, a chat room, instant messaging, a website, text messaging, or videos or pictures posted on websites or sent through cell phones.



By socio-economic status (SES)	y socio-economic status (SES) Federal Way (HYS 2012)						
Indicator	Low SES	Low vs. Mod/High	Moderate/High SES	↓Significantly <u>lower</u> than Mod/High SES			
	%		%	- <u>No difference</u>			
Bullied in past 30 days ¹	18	-	16	↑ Significantly <u>higher</u>			
Cyber-bullied in past 30 days	17	-	12	than Mod/High SES			
Carried weapon to school in past 30 days	5	-	3	* <u>Data not available</u>			
Feels unsafe at school ¹	21	-	17	due to cell count <10			

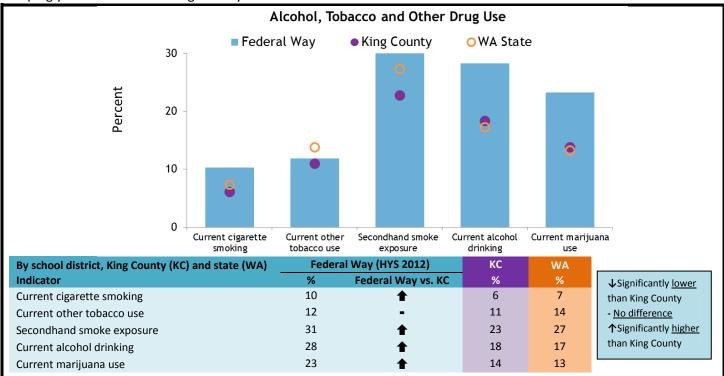
By race ²	Federal Way (HYS 2012)								
Indicator	Asian	AIAN	Black	Hispanic	NHPI	White	Other		
	%	%	%	%	%	%	%		
Bullied in past 30 days ¹	18	*	14	17	*	22	15		
Cyber-bullied in past 30 days	*	*	*	16	*	12	*		
Carried weapon to school in past 30 days	*	*	*	*	*	*	9		
Feels unsafe at school ¹	22	*	17	12	*	17	24		

¹Indicator includes 6th grade respondents. Not all questionnaire items were included in the 6th grade version

¹AIAN=American Indian/Alaska Native; NHPI=Native Hawaiian/Pacific Islander; Hispanic considered as a separate group and not included in any other group. Race/ethnicity categories may have a small number of respondents (see Demographic Table on page 3); estimates should be interpreted with caution.

Alcohol, Tobacco and Other Drug Use

Alcohol and other drug use among our nation's youth remains a major public health problem. Substance use and abuse can increase the risk for injuries, violence, HIV infection, and other diseases. Smoking and other tobacco use are initiated and established primarily during adolescence. Tobacco use in adolescence is associated with use of alcohol, use of marijuana and other drugs, and high-risk sexual behavior. Schools play a critical role is promoting health and helping youth establish lifelong healthy behaviors.

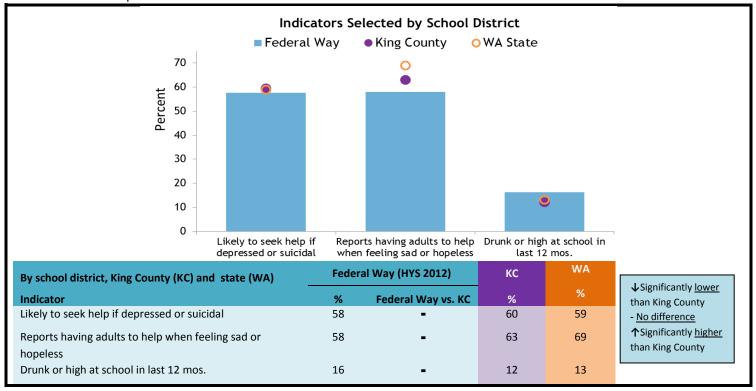


By socio-economic status (SES)				↓Significantly lower				
Indicator	Lov	v SES Lo	Low vs. Mod/High		Moderate/High SES		than Mod/High SES	
		%			%		- No difference	
Current cigarette smoking		12	-		9		↑ Signi	ficantly <u>higher</u>
Current other tobacco use		8	-		14		than M	od/High SES
Secondhand smoke exposure		37	≜		27		* <u>Data</u>	not available
Current alcohol drinking		31	-		27		due to cell count <10	
Current marijuana use		25	-		24			
By race ²			Federa	l Way (HYS 2	012)			
Indicator	Asian	AIAN	Black	Hispanic	NHPI	١	Vhite	Other
	%	%	%	%	%		%	%
Current cigarette smoking	*	*	*	8	23		14	*
Current other tobacco use	*	*	*	13	*		15	*
Secondhand smoke exposure	26	*	43	18	54		32	23
Current alcohol drinking	14	*	26	34	26		30	32
Current marijuana use	12	*	25	22	30		25	29

¹Indicator includes 6th grade respondents. Not all questionnaire items were included in the 6th grade version ²AIAN=American Indian/Alaska Native; NHPI=Native Hawaiian/Pacific Islander; Hispanic considered as a separate group and not included in any other group. Race/ethnicity categories may have a small number of respondents (see Demographic Table on page 3); estimates should be interpreted with caution.

Indicators Selected by Federal Way School District

Indicators of special interest were selected from questionnaire items on the 2012 HYS questionnaire by key health and wellness personnel at individual school districts. Special interest indicators included sexual health, however low response rates for sexual health questionnaire items resulted in imprecise estimates and were therefore not included in this report. Selected indicators reflect issues identified as priorities by health and wellness leadership of each school district. This set of indicators is unique to each school district.



By socio-economic status (SES)		Federal Way (HYS 2012)						
Indicator	Low SES %	Low vs. Mod/High	Moderate/High SES %	↓ Significantly <u>lowe</u>				
Likely to seek help if depressed or suicidal	53	-	63	than Mod/High SES - No difference				
Reports having adults to help when feeling sad or hopeless	53	-	62	↑Significantly <u>high</u> than Mod/High SES				
Drunk or high at school in past 12 mos.	21	-	13					

By race ¹			F	ederal Way (HY	'S 2012)		
Indicator	Asian	AIAN	Black	Hispanic	NHPI	White	Other
	%	%	%	%	%	%	%
Likely to seek help if depressed or suicidal	72	*	*	55	63	54	46
Reports having adults to help when feeling sad or hopeless	60	*	60	54	74	60	46
Drunk or high at school in past 12 mos.	*	*	16	19	22	18	17

¹Indicator includes 6th grade respondents. Not all questionnaire items were included in the 6th grade version

² AIAN=American Indian/Alaska Native; NHPI=Native Hawaiian/Pacific Islander; Hispanic considered as a separate group and not included in any other group. Race/ethnicity categories may have a small number of respondents (see Demographic Table on page 3); estimates should be interpreted with caution.

Key findings in HYS data from 2004-2012

HEALTHY YOUTH SURVEY (HYS)	8 th Grade ¹			10 th & 12 th Grade ¹		
SURVEY YEAR	2004	2006	2012	2004	2006	2012
(# OF PARTICIPATING STUDENT)						
Obesity		%	1		%	
Obesity ²						
Overweight or obese ²						
Physical Activity		%	1		%	
Physical activity ≥60 min/day						
Screen time >3 hours per day						
Dietary Behavior		%			%	
≥5 servings of fruits & veg/day						
Drank 2+ non-diet sodas yesterday						
Drank SSBs 7+ times last						
Bought SSB at school in t						
Did not eat breakfast too						
Mental Health			-			
Considered suicide in pa	naσe	is int	ontini	nallv I	olank.	
Planned suicide in past 1	page	13 1110	CIICIO	lanyi		
Felt hopeless >2 weeks i	• . •				c	
Personal Safety and Viol District data is unavailable for						
Bullied in past 30 days					0.01	
Cyber-bullied in past 30						
Carried weapon to schoo	/ears other than 2012.]					
Feels unsafe at school						
Tobacco Use and Exposu						
Current cigarette smokir						
Current other tobacco u						
Secondhand smoke exposure ⁵						
Alcohol & Other Drug Use		%			%	
Current alcohol drinking						
Current marijuana use						
Indicators of Special Interest	%					

¹Data not available denoted by (-).Not all indicators were included in the HYS 2004 questionnaire. No middle school students participated in Federal Way in 2012. Only 84 high school students participated in 2006. Federal Way did not participate in HYS in 2008 and 2010.

²Obesity (top 5%) and overweight or obese (top 15%) of BMI distribution for age/gender were calculated from self-reported height and weight.

³Includes non-diet soda and other sugary sweetened beverages such as Snapple, Gatorade, and Sobe.

⁴Results should be interpreted with caution, 30% or more of respondents did not answer the question.

⁵The question *"Do you live with someone who smokes now?"* used as a proxy for secondhand smoke exposure.

Produced by the Assessment, Policy Development & Evaluation Unit of Public Health -- Seattle & King County



School District HYS Comparison from 2010-2012

HEALTHY YOUTH SURVEY (HYS)	8 th Grade ¹	10th Grade ¹					
Comparison Years	2012 vs 2010	2012 vs 2010					
Obesity							
Obesity ²							
Overweight or obese ²							
Physical Activity			Trend Symbols				
Physical activity ≥60 min/day							
Screen time >3 hours per day			Getting Better				
Dietary Behavior							
≥5 servings of fruits			No Change				
Drank 2+ non-diet s							
Drank SSBs 7+ times			Getting Worse				
Bought SSB at schoo							
Ate breakfast today [Thic nago is internationally blank THigher in							
al Health [IIIIS Page IS IIILEIILIOIIAIIY DIAIIK. than 2010							
Considered suicide i							
Planned suicide in p Felt hopeless >2 we District data is unavailable for							
Personal Safety and							
Bullied in past 30 da							
	-						
Carried weapon to s							
Feels unsafe at scho							
Tobacco Use and Ex							
Current cigarette sn							
Current other tobacco use							
Secondhand smoke exposure ⁵							
Alcohol & Other Drug Use							
Current alcohol drinking Current marijuana use							
Indicators Selected by School District							
Likely to seek help if depressed or suicidal ⁴							
Reports having adults to turn to for help when feeling sad/hopeless							
Bullied in the past 30 days because of race, ethnicity, or national							
origin							
¹ Not all questionnaire items are included every year. Years when data are not available for specific indicators are noted beside indicators in table and excluded from the							

comparison. No 12th graders participated in HYS (2012) in Auburn School District; analysis includes only 10th graders for 2010 and 2012.

²Obesity (top 5%) and overweight or obese (top 15%) of BMI distribution for age/gender were calculated from self-reported height and weight.

³Includes non-diet soda and other sugary sweetened beverages such as Snapple, Gatorade, and Sobe.

⁴Results should be interpreted with caution, 30% or more of respondents did not answer the question.

⁵The question *"Do you live with someone who smokes now?"* used as a proxy for secondhand smoke exposure.

Produced by the Assessment, Policy Development & Evaluation Unit of Public Health -- Seattle & King County

