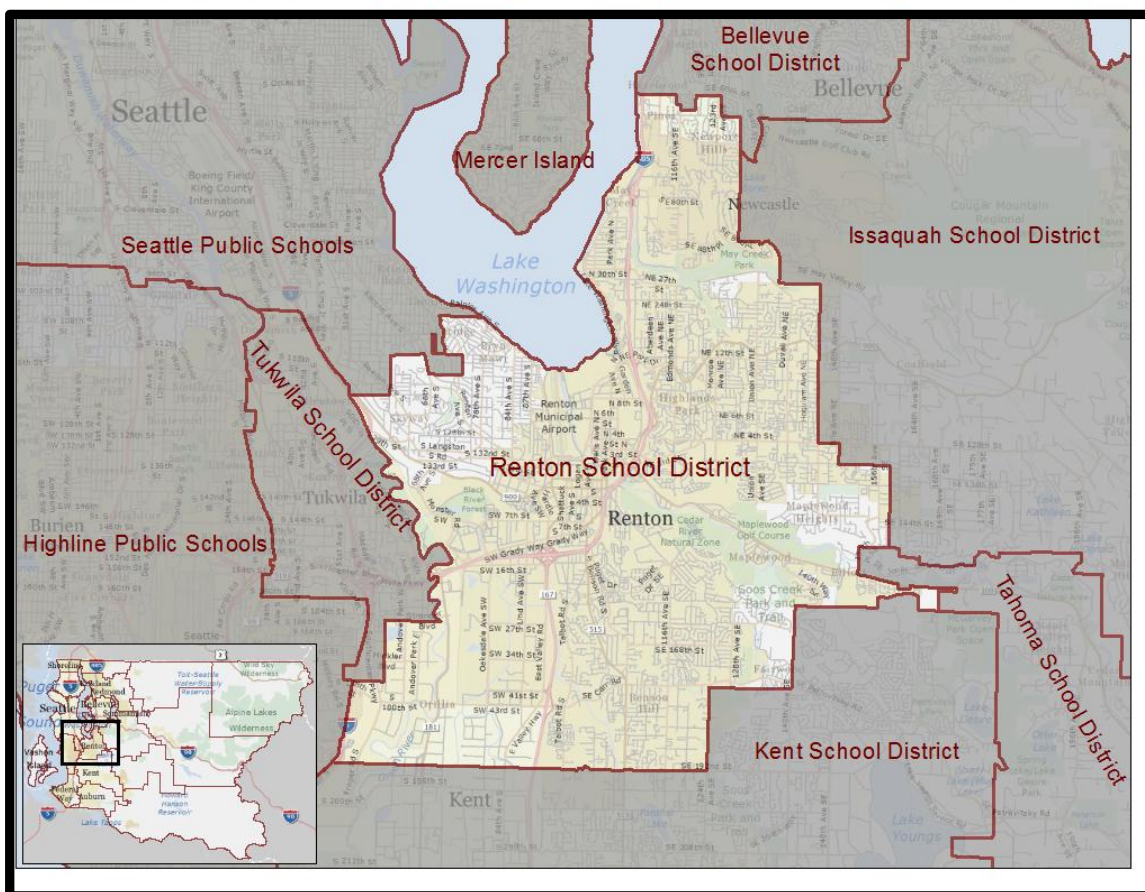




Renton School District Health Profile

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.

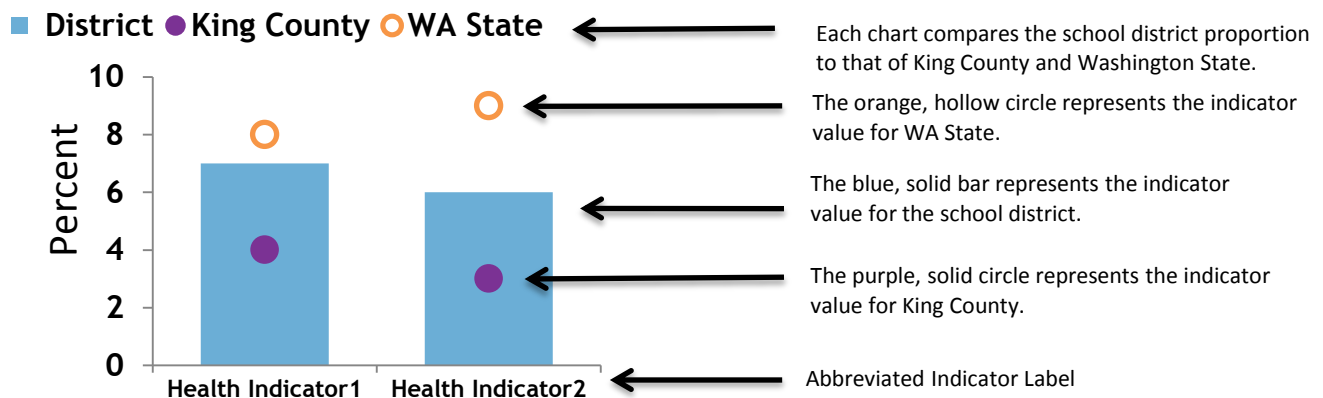
The survey provides important information about youth in Washington State. The Information from HYS is used to guide policy and programs that serve youth and to identify trends in the patterns of behavior over time. In October of even-numbered years, since 2002, students in grades 6, 8, 10, and 12 answered 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 (↑), significantly lower (↓), 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 <http://www.kingcounty.gov/healthservices/health/data.aspx> or contact data.request@kingcounty.gov

Demographics of HYS (2012) Respondents

	Renton		King County ¹	WA State ¹
Total 2012 Respondents	n=3,171		n=51,943	n=33,270
Demographic		% ¹	%	%
Age (years)				
<=12	*	*	0.6	0.6
13-14	935	33.1	32.4	40.4
15-16	669	31.6	33.1	33.3
17-18	561	33.8	33.0	25.3
19+	19	1.1	0.8	0.5
Race/ethnicity				
White, NH ²	739	24.6	45.6	52.6
Black, NH	431	13.9	7.4	4.0
Hispanic/Latino	491	15.3	10.5	15.0
American Indian/Alaska Native (AIAN), NH	46	1.4	1.7	3.5
Asian, NH	769	24.7	17.1	7.7
Native Hawaiian/Pacific Islander (NHPI), NH	96	3.0	2.3	1.6
Other (Includes multiracial)	567	17.1	15.4	15.7
Grade				
6	974	25.4	24.6	24.7
8	938	24.7	24.5	30.7
10	676	23.7	25.2	25.2
12	579	26.2	25.7	19.4
Gender				
Male	1,605	52.2	51.7	49.3
Female	1,562	47.8	48.3	50.7
Language				
Non-English speaking at home ³	765	35.7	25.1	19.3
Socio-economic status (SES) ⁴				
Lower SES	678	41.1	29.3	36.5
Moderate-higher SES	957	58.9	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.

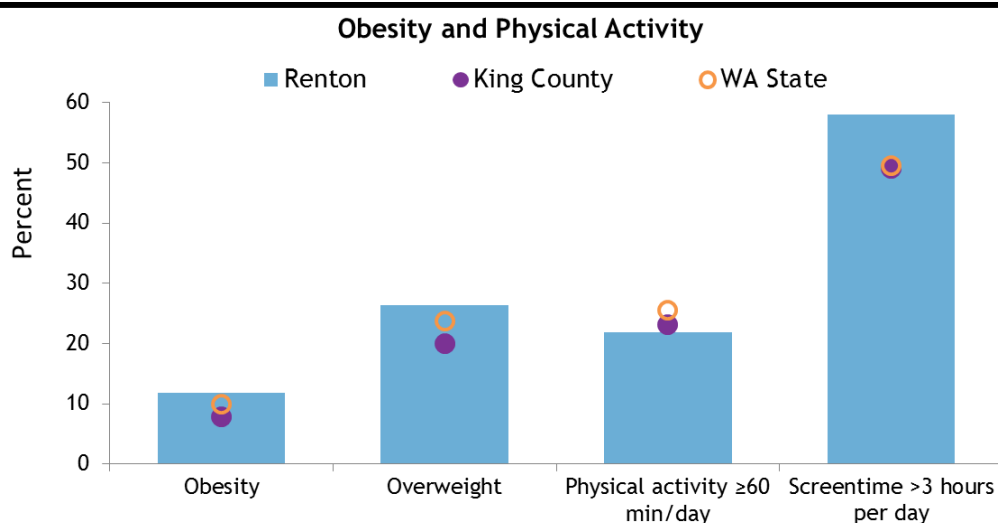
Non-English languages spoken at home reported by Renton HYS (2012) respondents grades 8, 10 & 12

Language	N	% ¹
Spanish	266	12.1
Chinese	65	3.2
Vietnamese	149	7.2
Russian	38	1.7
Korean	*	*
Japanese	*	*
Ukrainian	22	0.9
Other (not specified)	210	9.8

*Too few cases to protect confidentiality and/or report reliable rates

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 $\geq 95^{\text{th}}$ 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 school district, King County (KC) and state (WA)	Renton (HYS 2012)		KC	WA	<div>↓Significantly lower than King County - No difference ↑Significantly higher than King County</div>
Indicator	%	Renton vs. KC	%	%	
Obesity (top 5% BMI for age/gender)	12	⬆	8	10	
Overweight or obese (top 15% BMI for age/gender)	26	⬆	20	24	
Physical activity ≥60 min/day ¹	22	-	23	26	
Screen time >3 hours per day	58	⬆	49	50	

By socio-economic status (SES)		Renton (HYS 2012)		
Indicator	Low SES %	Low vs. Mod/High	Moderate/High SES %	
Obesity (top 5% BMI for age/gender)	11	-	13	↓ Significantly lower than Mod/High SES
Overweight or obese (top 15% BMI for age/gender)	25	-	28	- No difference
Physical activity ≥ 60 min/day ¹	19	-	20	↑ Significantly higher than Mod/High SES
Screen time >3 hours per day	59	-	58	

By race ²		Renton (HYS 2012)					
Indicator	Asian %	AIAN %	Black %	Hispanic %	NHPI %	White %	Other %
Obesity (top 5% BMI for age/gender)	8	*	15	16	*	11	14
Overweight or obese (top 15% BMI for age/gender)	20	*	25	38	*	25	30
Physical activity ≥ 60 min/day ¹	17	*	26	21	20	22	28
Screen time >3 hours per day	65	*	55	59	72	55	53

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

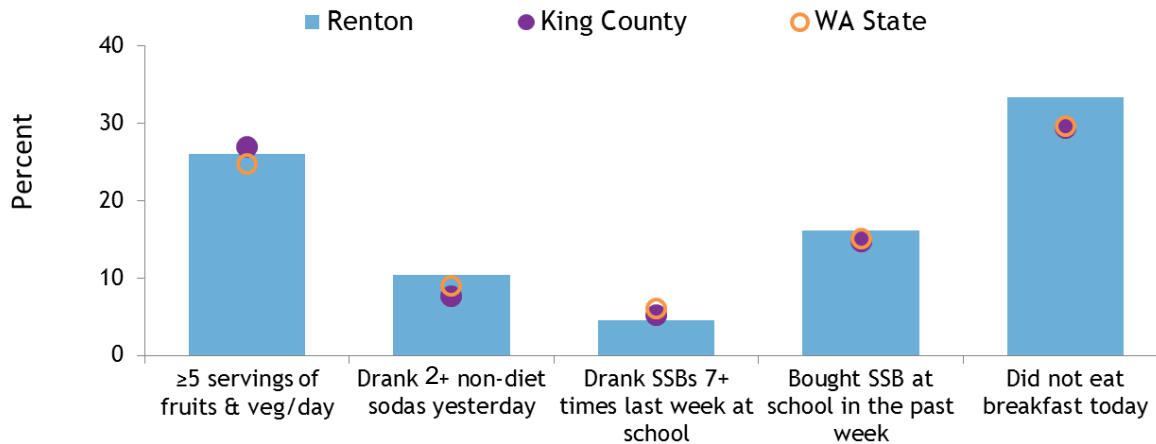
²AIAN=American Indian/Alaska Native; NHPI=Native Hawaiian/Pacific Islander; Hispanic considered as a separate group and not included in any other group. Race/ethnicity categories may have a small number of respondents (see Demographic Table on page 3); estimates should be interpreted with caution.

*Too few cases to protect confidentiality and/or report reliable rates

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.

Dietary Behaviors



By school district, King County (KC) and state (WA)

Indicator	Renton (HYS 2012)		KC	WA
	%	Renton vs. KC	%	%
≥5 servings of fruits & veg/day	26	■	27	25
Drank 2+ non-diet sodas yesterday ¹	10	▲	8	9
Drank SSBs 7+ times last week at school	5	■	5	6
Bought SSB at school in the past week	16	■	15	15
Did not eat breakfast today ¹	33	■	27	25

↓ Significantly lower than King County
 - No difference
 ▲ Significantly higher than King County

By socio-economic status (SES)

Indicator	Renton (HYS 2012)		
	Low SES %	Low vs. Mod/High	Moderate/High SES %
≥5 servings of fruits & veg/day	23	■	29
Drank 2+ non-diet sodas yesterday ¹	11	■	10
Drank SSBs 7+ times last week at school	6	■	4
Bought SSB at school in the past week	17	■	16
Did not eat breakfast today ¹	45	▲	27

↓ Significantly lower than Mod/High SES
 - No difference
 ▲ Significantly higher than Mod/High SES

By race²

Indicator	Renton (HYS 2012)						
	Asian %	AIAN %	Black %	Hispanic %	NHPI %	White %	Other %
≥5 servings of fruits & veg/day ¹	29	*	30	20	38	19	34
Drank 2+ non-diet sodas yesterday	8	*	11	12	16	9	12
Drank SSBs 7+ times last week at school	*	*	*	*	*	*	9
Bought SSB at school in the past week	20	*	24	14	*	10	15
Did not eat breakfast today ¹	33	*	33	47	33	26	34

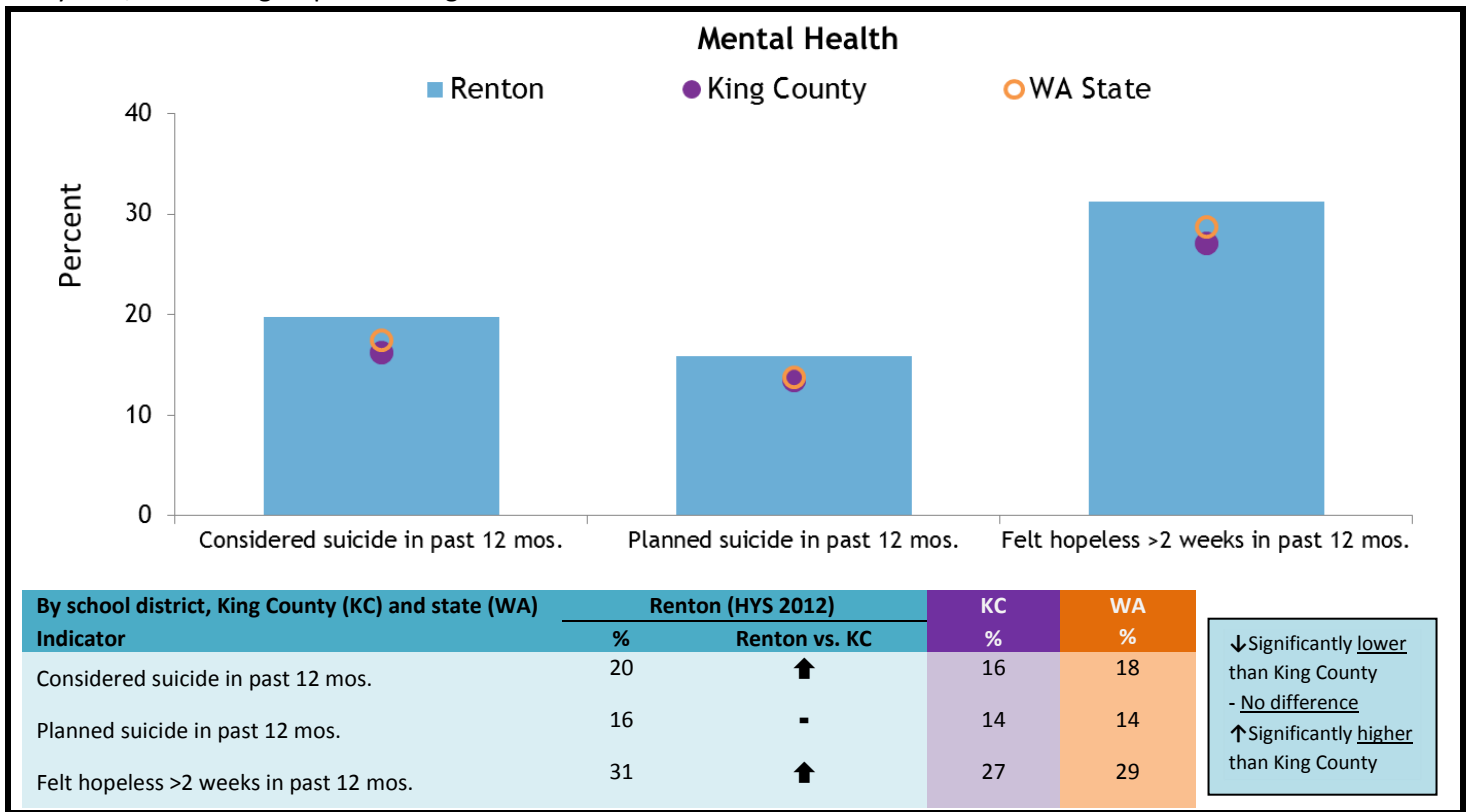
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Mental Health

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 socio-economic status (SES)		Renton (HYS 2012)		
Indicator		Low SES	Low vs. Mod/High	Moderate/High SES
		%		%
Considered suicide in past 12 mos.		22	-	19
Planned suicide in past 12 mos.		19	-	16
Felt hopeless >2 weeks in past 12 mos.		37	↑	27

↓ Significantly lower than Mod/High SES
 - No difference
 ↑ Significantly higher than Mod/High SES

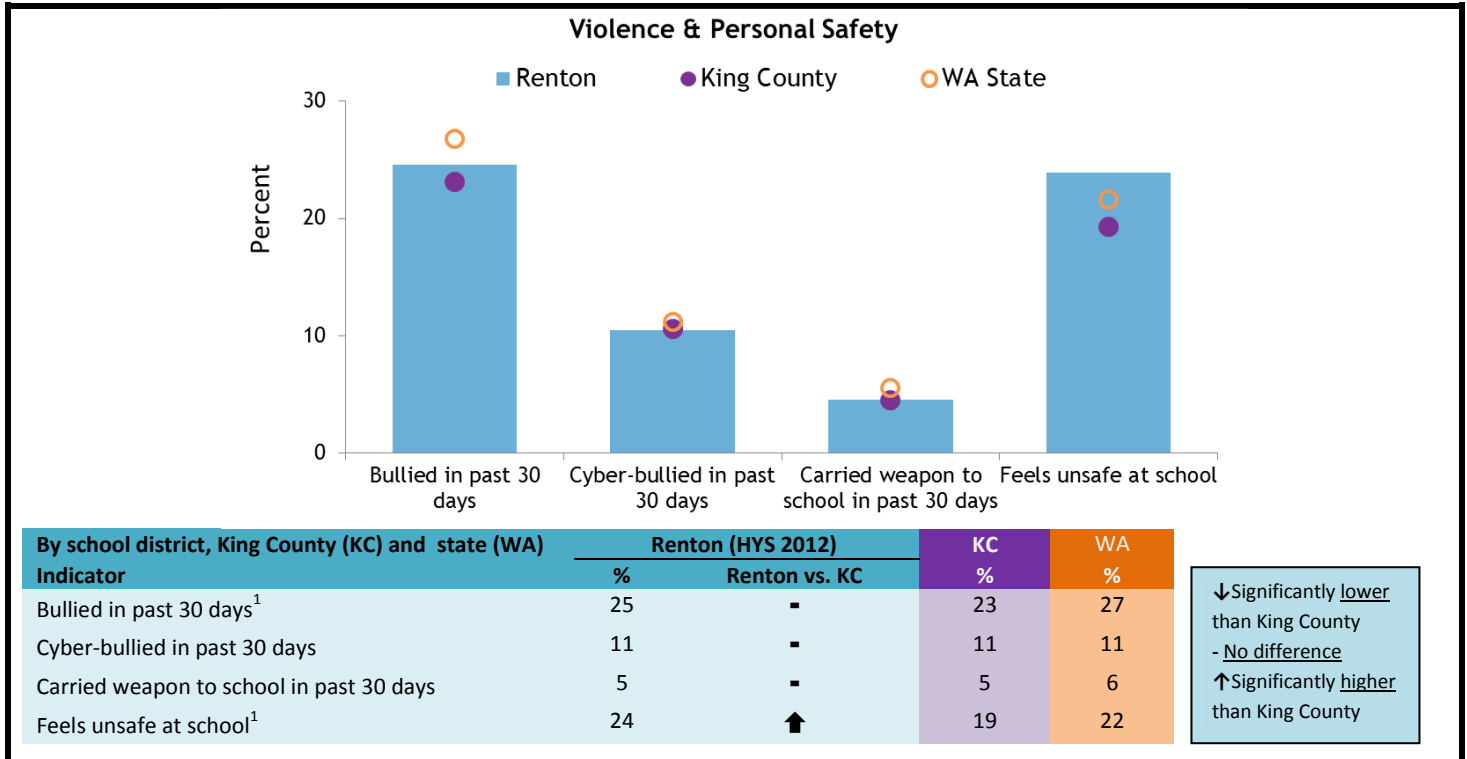
By race ¹		Renton (HYS 2012)					
Indicator		Asian	AIAN	Black	Hispanic	NHPI	White
		%	%	%	%	%	%
Considered suicide in past 12 mos.		20	*	16	19	23	19
Planned suicide in past 12 mos.		15	*	15	18	*	16
Felt hopeless >2 weeks in past 12 mos.		35	*	24	30	32	29

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.

*Too few cases to protect confidentiality and/or report reliable rates

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)		Renton (HYS 2012)					
Indicator	Low SES		Low vs. Mod/High	Moderate/High SES			
	%			%			
Bullied in past 30 days ¹	21	■		23			
Cyber-bullied in past 30 days	13	■		9			
Carried weapon to school in past 30 days	5	■		5			
Feels unsafe at school ¹	27	■		24			

By race ²		Renton (HYS 2012)						
Indicator	Asian	AIAN	Black	Hispanic	NHPI	White	Other	
	%	%	%	%	%	%	%	
Bullied in past 30 days ¹	22	35	21	23	28	27	29	
Cyber-bullied in past 30 days	10	*	8	8	*	11	16	
Carried weapon to school in past 30 days	3	*	6	6	*	3	6	
Feels unsafe at school ¹	23	38	28	24	28	21	25	

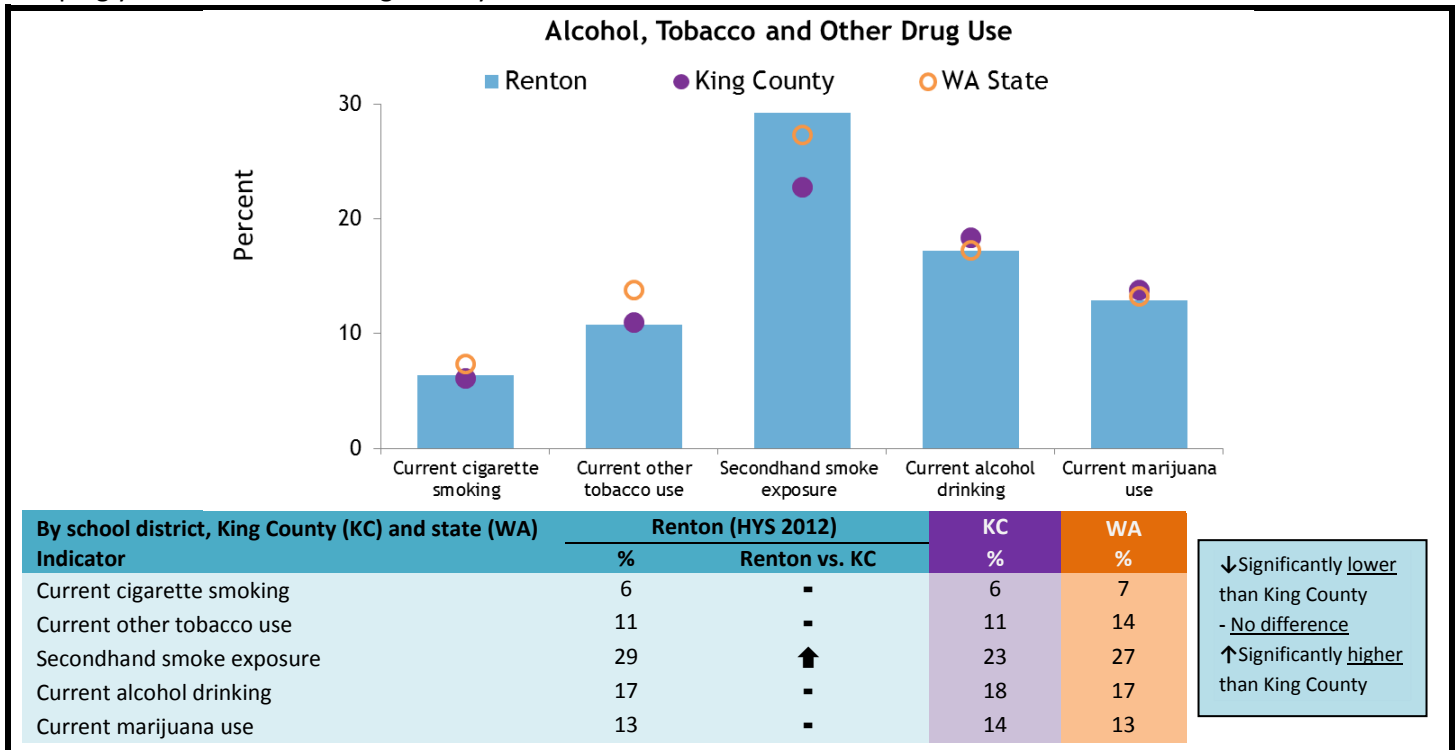
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*Too few cases to protect confidentiality and/or report reliable rates

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 in promoting health and helping youth establish lifelong healthy behaviors.



By socio-economic status (SES)		Renton (HYS 2012)		
Indicator	Low SES		Low vs. Mod/High	Moderate/High SES
	%			%
Current cigarette smoking	10	-		8
Current other tobacco use	10	-		13
Secondhand smoke exposure	38	↑		24
Current alcohol drinking	25	-		22
Current marijuana use	20	-		16

↓ Significantly lower than Mod/High SES
 - No difference
 ↑ Significantly higher than Mod/High SES

By race ²		Renton (HYS 2012)					
Indicator	Asian		AIAN	Black	Hispanic	NHPI	White
	%	%					
Current cigarette smoking	4	*	7	9	11	7	6
Current other tobacco use	6	*	13	12	*	14	9
Secondhand smoke exposure	35	*	26	26	41	25	34
Current alcohol drinking	9	*	20	20	18	22	17
Current marijuana use	4	*	20	17	16	14	14

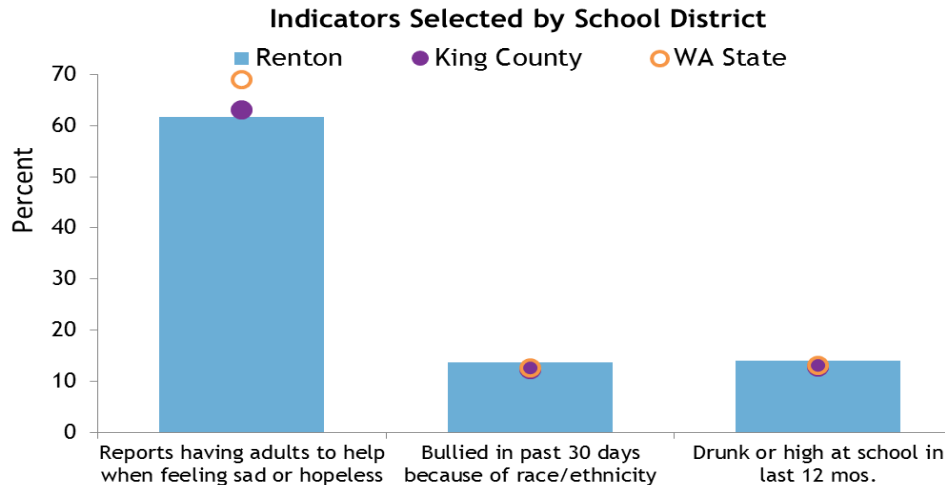
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*Too few cases to protect confidentiality and/or report reliable rates

Indicators Selected by Renton 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 school district, King County (KC) and state (WA)			Renton (HYS 2012)		KC	WA
Indicator	%	Renton vs. KC	%		%	%
Reports having adults to help when feeling sad or hopeless	62	-	63		69	
Bullied in past 30 days because of race/ethnicity	14	-	12		13	
Drunk or high at school in last 12 mos.	14	-	13		13	

↓ Significantly lower than King County
 - No difference
 ↑ Significantly higher than King County

By socio-economic status (SES)		Renton (HYS 2012)		
Indicator		Low SES	Low vs. Mod/High	Moderate/High SES
	%			%
Reports having adults to help when feeling sad or	52		↓	63
Bullied in past 30 days because of race/ethnicity	13		-	14
Drunk or high at school in past 12 mos.	17		-	13

↓ Significantly lower than Mod/High SES
 - No difference
 ↑ Significantly higher than Mod/High SES

By race ¹		Renton (HYS 2012)						
Indicator		Asian	AIAN	Black	Hispanic	NHPI	White	Other
	%	%	%	%	%	%	%	%
Reports having adults to help when feeling sad	52	60	67	59	59	70	63	
Bullied in past 30 days because of race/ethnicity	15	*	10	16	*	10	21	
Drunk or high at school in past 12 mos.	8	*	18	14	16	15	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.

*Too few cases to protect confidentiality and/or report reliable rates

Renton School District Health Profile

Key findings in HYS data from 2004-2012

HEALTHY YOUTH SURVEY (HYS)	8 th Grade ¹					10 th & 12 th Grade ¹				
SURVEY YEAR (# OF PARTICIPATING STUDENT RESPONDENTS)	2004 801	2006 819	2008 855	2010 807	2012 939	2004 1,134	2006 1,152	2008 1,305	2010 1,318	2012 1,256
Obesity	%					%				
Obesity ²	7	11	14	14	13	11	11	10	14	12
Overweight or obese ²	24	26	30	32	29	23	25	26	24	25
Physical Activity	%					%				
Physical activity ≥60 min/day	-	18	19	26	24	-	16	13	18	18
Screen time >3 hours per day	63	68	63	64	61	54	53	59	60	57
Dietary Behavior	%					%				
≥5 servings of fruits & veg/day	27	32	29	-	32	23	24	24	-	23
Drank 2+ non-diet sodas yesterday	25	20	15	14	12	22	16	12	11	10
Drank SSBs 7+ times last week at school ³	-	14	11	4	3	-	27	15	9	6
Bought SSB at school in the past week ³	-	31	23	3	3	-	44	32	17	23
Did not eat breakfast today	-	36	36	36	33	-	44	46	42	38
Mental Health	%					%				
Considered suicide in past 12 mos.	15	14	16	17	20	16	14	15	16	20
Planned suicide in past 12 mos.	11	9	12	9	17	14	10	13	12	15
Felt hopeless >2 weeks in past 12 mos.	31	25	29	30	29	35	32	29	30	33
Personal Safety and Violence	%					%				
Bullied in past 30 days	30	26	26	31	31	15	18	19	20	19
Cyber-bullied in past 30 days	-	11	11	9	11	-	11	9	12	10
Carried weapon to school in past 30 days	-	6	6	6	5	-	8	7	5	4
Feels unsafe at school	30	32	30	26	26	27	30	25	26	25
Tobacco Use and Exposure	%					%				
Current cigarette smoking	9	5	6	5	5	14	15	11	13	10
Current other tobacco use ⁴	14	16	86	6	6	15	93	89	14	13
Secondhand smoke exposure ⁵	34	38	39	31	31	33	31	36	30	29
Alcohol & Other Drug Use	%					%				
Current alcohol drinking	21	16	16	12	13	34	35	29	27	26
Current marijuana use	13	9	10	9	10	16	17	17	20	20
Indicators of Special Interest	%					%				
Reports having adults to help when feeling sad	-	61	60	52	58	-	56	57	58	58
Bullied in the past 30 days because of race, ethnicity, or national origin	-	20	-	21	18	-	14	-	13	11
Drunk or high at school in last 12 mos.	10	7	9	8	9	14	16	15	15	16

¹Data not available denoted by (-).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

Renton School District Health Profile

Renton School District HYS Comparison from 2010-2012

HEALTHY YOUTH SURVEY (HYS)	8 th Grade ¹	10 th & 12 th Grade ¹
Comparison Years	2012 vs 2010	2012 vs 2010
Obesity		
Obesity ²	-	-
Overweight or obese ²	-	-
Physical Activity		
Physical activity ≥60 min/day	-	-
Screen time >3 hours per day	-	-
Dietary Behavior		
≥5 servings of fruits & veg/day (2010 data not available)	N\A	N\A
Drank 2+ non-diet sodas yesterday	-	-
Drank SSBs 7+ times last week at school ³	-	-
Bought SSB at school in the past week ³	-	-
Ate breakfast today	↓	-
Mental Health		
Considered suicide in past 12 mos.	↑	-
Planned suicide in past 12 mos.	↑	-
Felt hopeless >2 weeks in past 12 mos.	-	-
Personal Safety and Violence		
Bullied in past 30 days	-	-
Cyber-bullied in past 30 days	-	-
Carried weapon to school in past 30 days	-	-
Feels unsafe at school	-	-
Tobacco Use and Exposure		
Current cigarette smoking	-	-
Current other tobacco use ⁴	-	-
Secondhand smoke exposure ⁵	-	-
Alcohol & Other Drug Use		
Current alcohol drinking	-	-
Current marijuana use	-	-
Indicators Selected by School District		
Reports having adults to help when feeling sad	↑	-
Bullied in the past 30 days because of race, ethnicity, or national origin	-	-
Drunk or high at school in last 12 mos.	-	-

Trend Symbols
Getting Better
No Change
Getting Worse
↑ Higher in 2012 than 2010
--Flat, No Change
↓ Lower in 2012 than 2010
N/A: non-applicable

¹Not 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

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.