



2009

*Falmouth Prevention Partnership  
Community Profile on Youth Substance  
Abuse*

*The Falmouth Prevention Partnership is a project of the Falmouth Substance Abuse Commission and is dedicated to promoting healthy and safe behaviors among Falmouth youth.*

## I: INTRODUCTION

The Falmouth Prevention Partnership is a community effort dedicated to building healthier and safer futures for Falmouth youth. The Partnership seeks to reduce substance abuse among youth by addressing the factors in Falmouth that increase the risk of substance abuse and promoting the factors that protect youth from risks. By establishing key partnerships and strengthening community collaboration, the Falmouth Prevention Partnership plans to implement prevention strategies that are customized to our community needs and resources.

Youth substance abuse is a complex problem that requires the input of the whole community. The Partnership includes representatives from law enforcement, schools, fire department, healthcare, youth, businesses, the faith community, youth-serving organizations, and social service agencies. The Partnership was created through the efforts of the Falmouth Substance Abuse Commission and is supported by the Town of Falmouth. The project is funded by a Drug Free Communities (DFC) Support Grant, which is a federal grant of \$625,000 over a five-year period. The stated purpose of the grant is to help mobilize the community around substance abuse prevention for youth.

The Partnership has four Action Teams representing diverse sectors of the community:

- **School Action Team** addresses prevention programs and policies within Falmouth schools.
- **Community Action Team** is focused on reducing underage access to alcohol by working on community laws, norms and enforcement issues.
- **Parent Action Team** is creating a support network for parents of teens to help them gain the knowledge and skills needed to promote healthy behaviors.
- **Youth Opportunities Team** is working on ways to enhance youth-related programs and activities in Falmouth and make them more accessible for teens.

## II: GENERAL DEMOGRAPHICS

Falmouth has a year-round population of 30,374, including 5293 people under the age of twenty.<sup>1</sup> In a recent census survey, 94.9% identified as White, or combination of another race, 4% as African-American/ Black, 1.4% Native American/Alaska Native, 1.3% Asian, and 1% some other race.<sup>2</sup> There are also a number of ethnic groups including Portuguese, Cape Verdean, Brazilian, and Jamaican. Falmouth does not include a tribal area. The Mashpee Wampanoag Tribe is located in a neighboring town and some members of the tribe live in Falmouth.

In Falmouth, 21.3% of the households have one or more children under the age of 18.<sup>3</sup> The per capita income is \$27,548 and 19 percent of all households receive some type of public financial assistance. 16.9% of students in the Falmouth Public Schools qualify for free or reduced price lunch or receive Transitional Aid to Families or food stamps.<sup>4</sup>

Due to tourism, the population swells considerably during the summer months, creating an atmosphere favorable to partying. With an economy that is heavily dependent on the tourism industry, Falmouth is also vulnerable to economic downturns.

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<sup>1</sup> U.S Census Bureau, 2005-2007 American Community Survey 3-Year Estimates.

<sup>2</sup> Ibid.

<sup>3</sup> Ibid.

<sup>4</sup> Executive Office of Labor and Workforce Development [http://lmi2.detma.org/lmi/lmi\\_town.asp?Area=000037](http://lmi2.detma.org/lmi/lmi_town.asp?Area=000037)

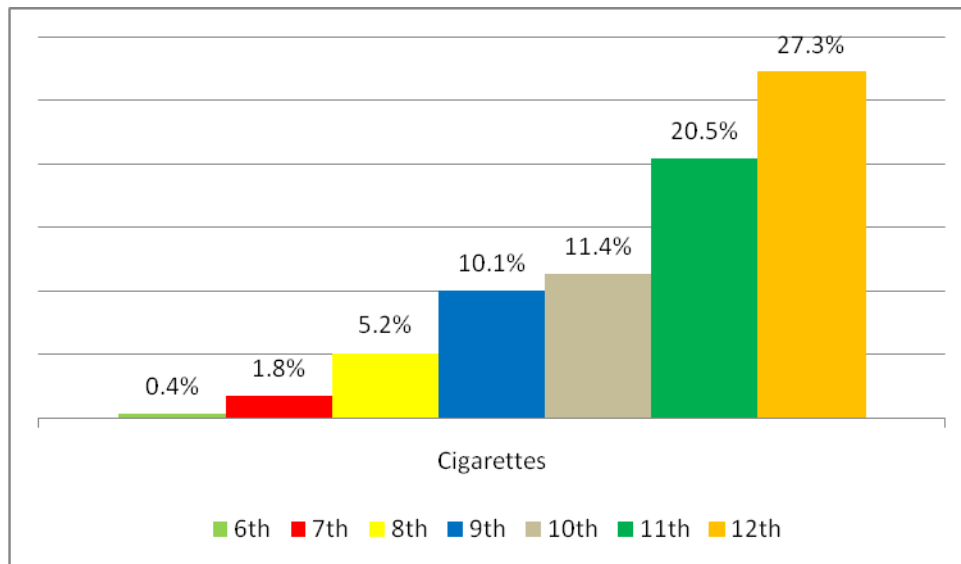
### III: USE RATES OF TOBACCO, ALCOHOL AND MARIJUANA

In early 2009, the Falmouth Prevention Partnership conducted an initial needs assessment on alcohol, tobacco, and other drug use among Falmouth teens. As part of a comprehensive assessment, Falmouth youth in grades 6-12 were surveyed using the Communities that Care Survey (grades 7-12) and the Pride Questionnaire (grade 6). The following is a snapshot of key findings from the data collected to date.

#### Cigarettes

In the sixth grade, less than 1% of Falmouth youth reported smoking cigarettes. Cigarette use increases significantly during the middle grade years, with over 10% reporting cigarette use by the 8<sup>th</sup> grade. On average, 2.8% of Falmouth 6-8 graders reported smoking in the past 30 days, which is in line with the state average of 3%. The survey also indicates that the average Falmouth youth first tries cigarettes at the age of thirteen. During the high school years, cigarette use ranges from 10.1% (9<sup>th</sup> grade) to 27.3% (12<sup>th</sup> grade). The average rate for 9-12 graders in Falmouth is 17.5%, which is 2% higher than the state average of 15%.

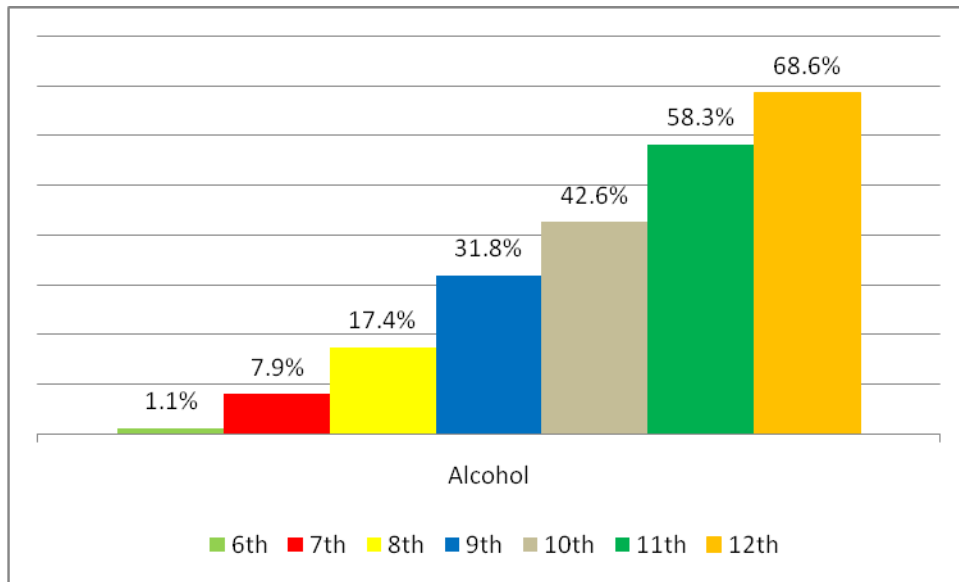
Table 1



#### Alcohol

Alcohol is the most frequently used substance among Falmouth youth. In the sixth grade, only 1% report having used in the past 30-days. This number multiplies rapidly during the middle grade years, with 17% reporting use by the eighth grade. In high school, alcohol use rates continue to rise steadily; 32% of ninth-graders report having had at least one drink in the past 30-days. Among seniors, nearly 69% report alcohol use. The average rate for 9-12 graders is 51%, while the state average is 46%.

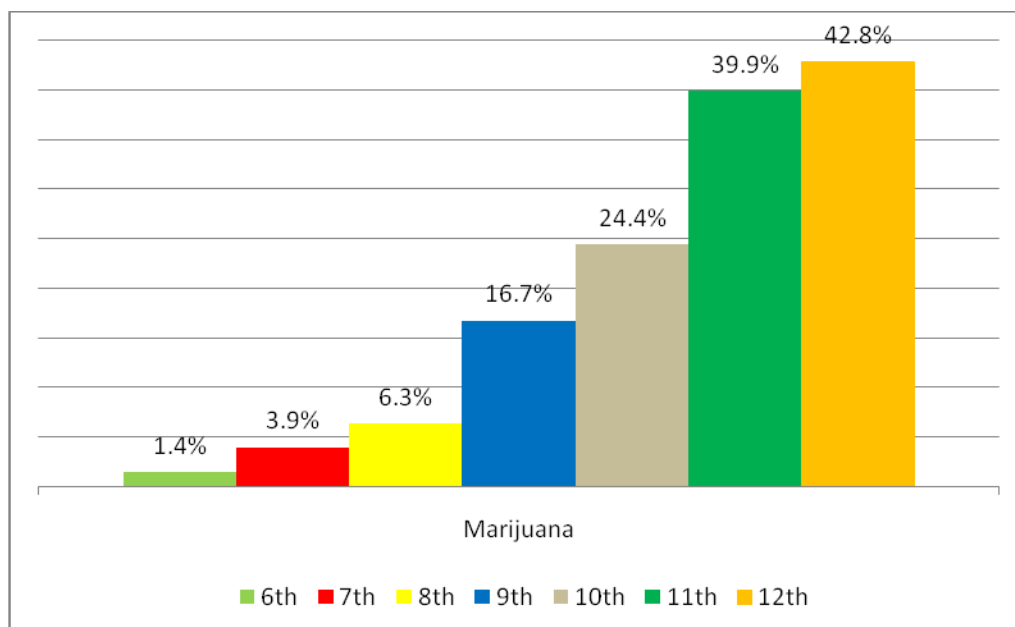
Table 2



## Marijuana

Marijuana use increases steadily among Falmouth youth as they increase in age. Out of the 276 sixth graders surveyed, 4 reported having smoked marijuana in the past thirty days. In the eighth grade, 17 out of 271 reported use. The average use rate for middle grades students in Falmouth is 3.8%, which is slightly less than the state average of 5%. Between eighth and ninth grade, marijuana use more than doubles; out of 180 ninth graders surveyed, 30 indicated use in the past thirty days. Over the course of the high school years, marijuana use nearly triples, with 42.8% of 12<sup>th</sup> graders reporting regular use. The average 30-day use rate for 9-12 graders is 31.5%, compared to the state average of 25%.

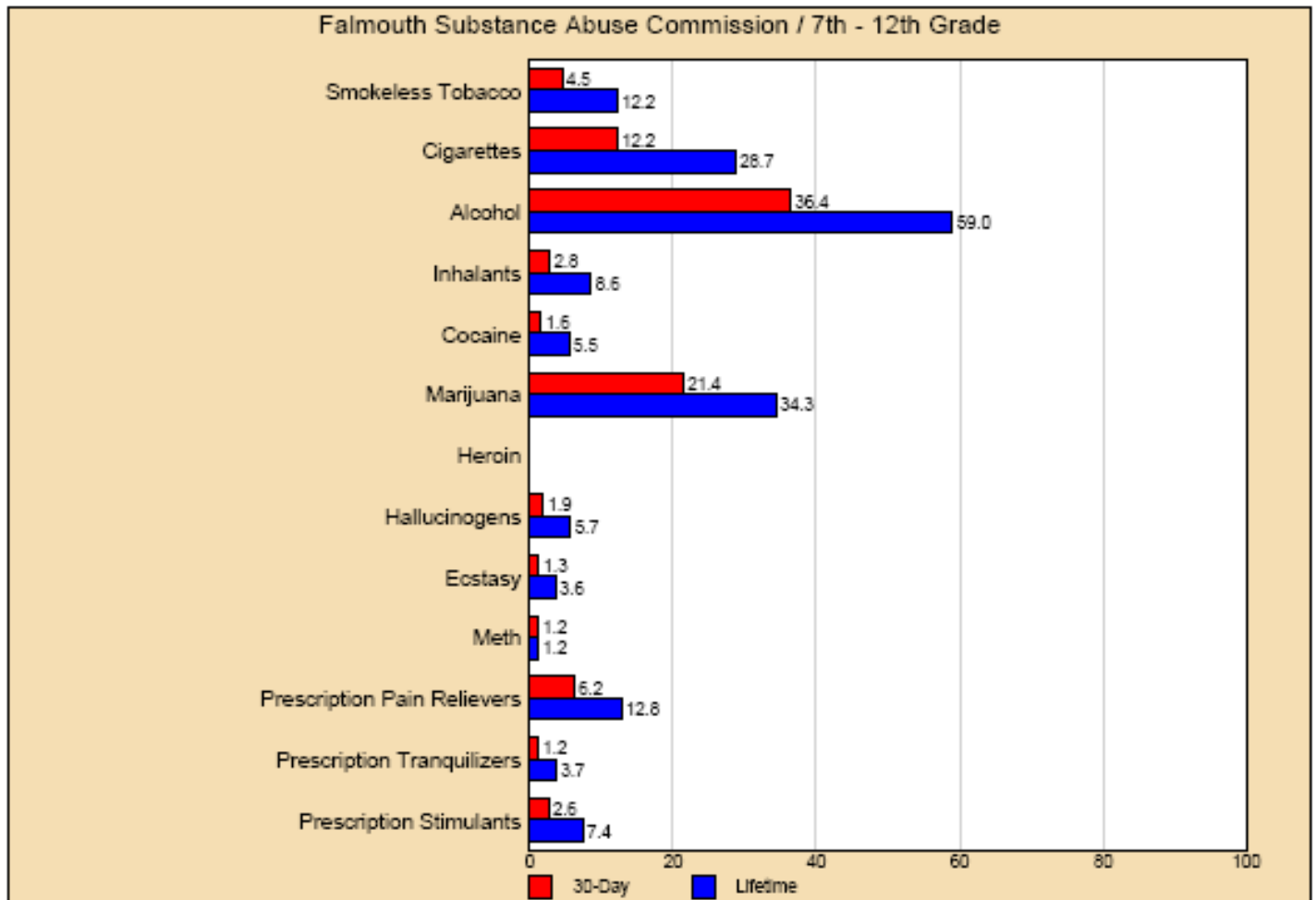
Table 3



## Other Drugs

The *Communities that Care Survey* also measured use of other drugs. Table 4 illustrates both lifetime and 30-day use rates for all measured substances. Prescription drug abuse is a growing trend among American youth. The survey shows that 13% of 7-12 graders have used prescription pain relievers for non-medical purposes at least once in their lifetime and 7% report having abused prescription stimulants. The use of inhalants in the middle grade years is also on the rise across the nation. In Falmouth, 8% of 7-8 grade students reported having used inhalants at least once in their lifetime.

Table 4



#### IV: RISK AND PROTECTIVE FACTORS

Just as eating a high-fat diet is a risk factor for heart disease and getting regular exercise is a protective factor for heart disease, there are also characteristics of the community, schools, family, peer groups and individuals that can help protect youth from drug use and other problem behaviors, or put them at risk for drug use and other problem behaviors.<sup>5</sup> Protective factors, also known as assets, are conditions that buffer children and teens from exposure to risk by either reducing the impact of the risks or changing the way that young people respond to the risks. Risk factors are conditions that increase the likelihood of a young person becoming involved in drug use, delinquency, school dropout, and violence.

There is substantial research showing that adolescents' exposure to a greater number of risk factors is associated with more drug use and delinquency. There is also evidence that exposure to a number of protective factors is associated with lower prevalence rates of problem behaviors.

The risk factors in Falmouth were measured through the *Communities that Care Survey* and by looking at other municipal data sources such as police and hospital records.

The overall risk and protective factor scores in Falmouth are represented in Tables 5 and 6. Each of the risk and protective factors scores are measured on a scale of 0 to 100. A score of 50 is the normative average for this scale. A low score indicates the relative absence of a risk or protective factor. A high score indicates an elevated level of the risk or protective factor. Because risk factors are associated with an increased likelihood of alcohol and drug use, and other problem behaviors, **lower scores on risk factors are desirable**. Conversely, because protective factors are associated with a decreased likelihood of problem behaviors, **higher scores on the protective factors is desirable**.

Risk and protective factor analysis is a powerful tool for understanding both positive and negative adolescent behavior and for helping the Partnership design prevention programs that address the specific issues faced by Falmouth youth.

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<sup>5</sup> Communities that Care Youth Survey Report, Page 19

Table 5



### Risk Factor Priorities

Risk and protective factor analysis is a powerful tool for understanding both positive and negative adolescent behavior and for helping the Partnership design prevention programs that address the specific issues faced by Falmouth youth. To address the areas of greatest need, the Partnership analyzed data from the needs assessment and prioritized four main risk factors to focus on, including: *Availability, Community Laws and Norms, Favorable Youth Attitudes and Favorable Parental Attitudes.*

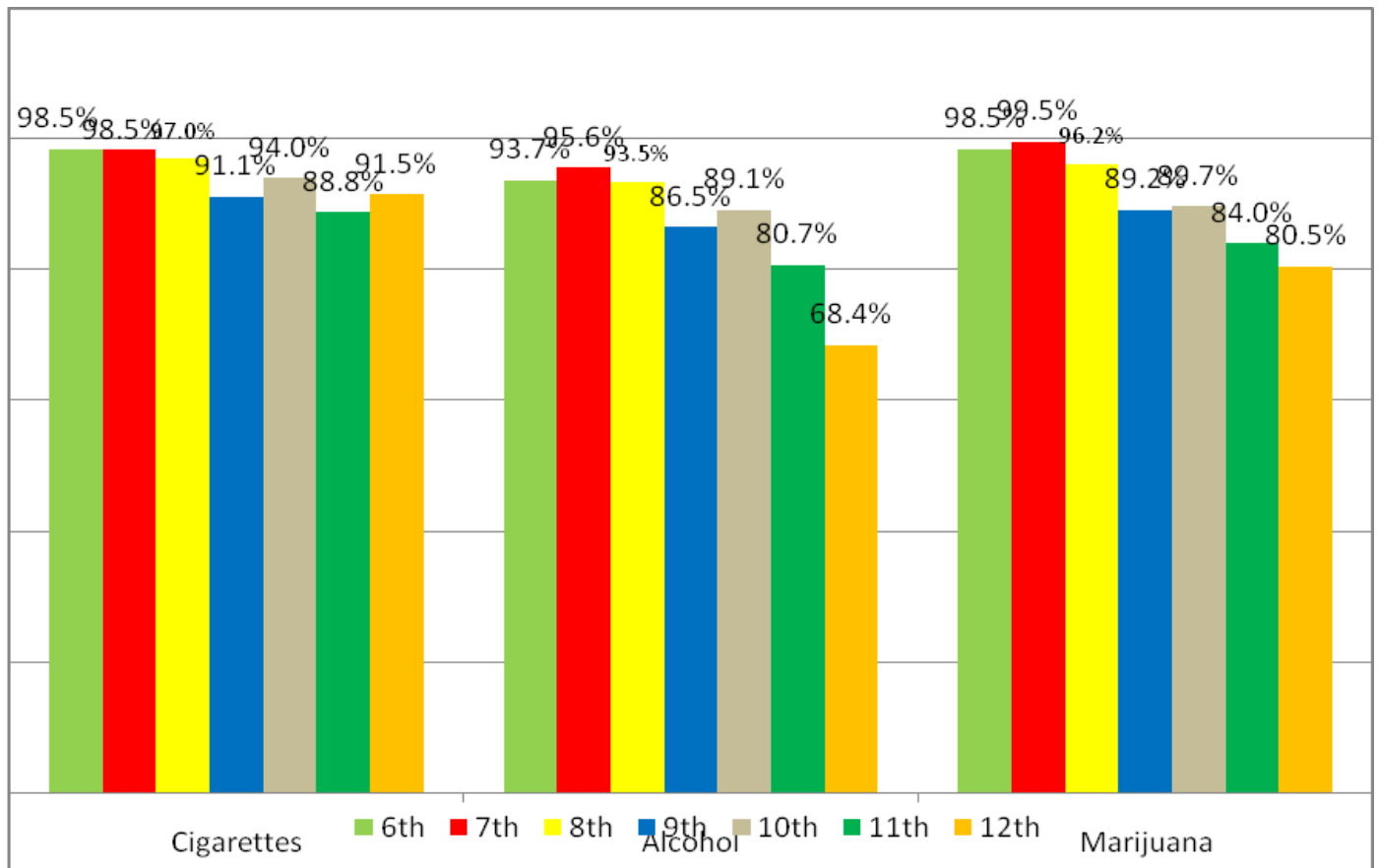
### Parental Attitudes

Research shows that youth are more likely to use substances if they don't get a clear message of disapproval from their parents. In Falmouth, youth perceptions of parental disapproval vary considerably among the three substances. As Table 2 indicates, during the middle grades the majority of youth believe that their parents disapprove of them using alcohol, tobacco or marijuana. Despite their age, most youth perceive that their parents disapprove of cigarette use. For alcohol and marijuana, perception of parental disapproval decreases as youth get older. Eighty-seven percent of 9<sup>th</sup> graders reported that their parents think it would be “wrong” or

“very wrong” for them to drink alcohol, compared with 68 % of 12<sup>th</sup> graders. Likewise, 89% of 9<sup>th</sup> graders reported parental disapproval of marijuana, compared with 81% of 12<sup>th</sup> graders.

The youth survey also asked youth if their parents had a clear policy on drugs and alcohol – 24% of seniors reported that there were no clear rules in their house. In addition, 44% of all youth report that someone in their family has had an alcohol or drug problem.

Table 6: Perception of Parental Disapproval



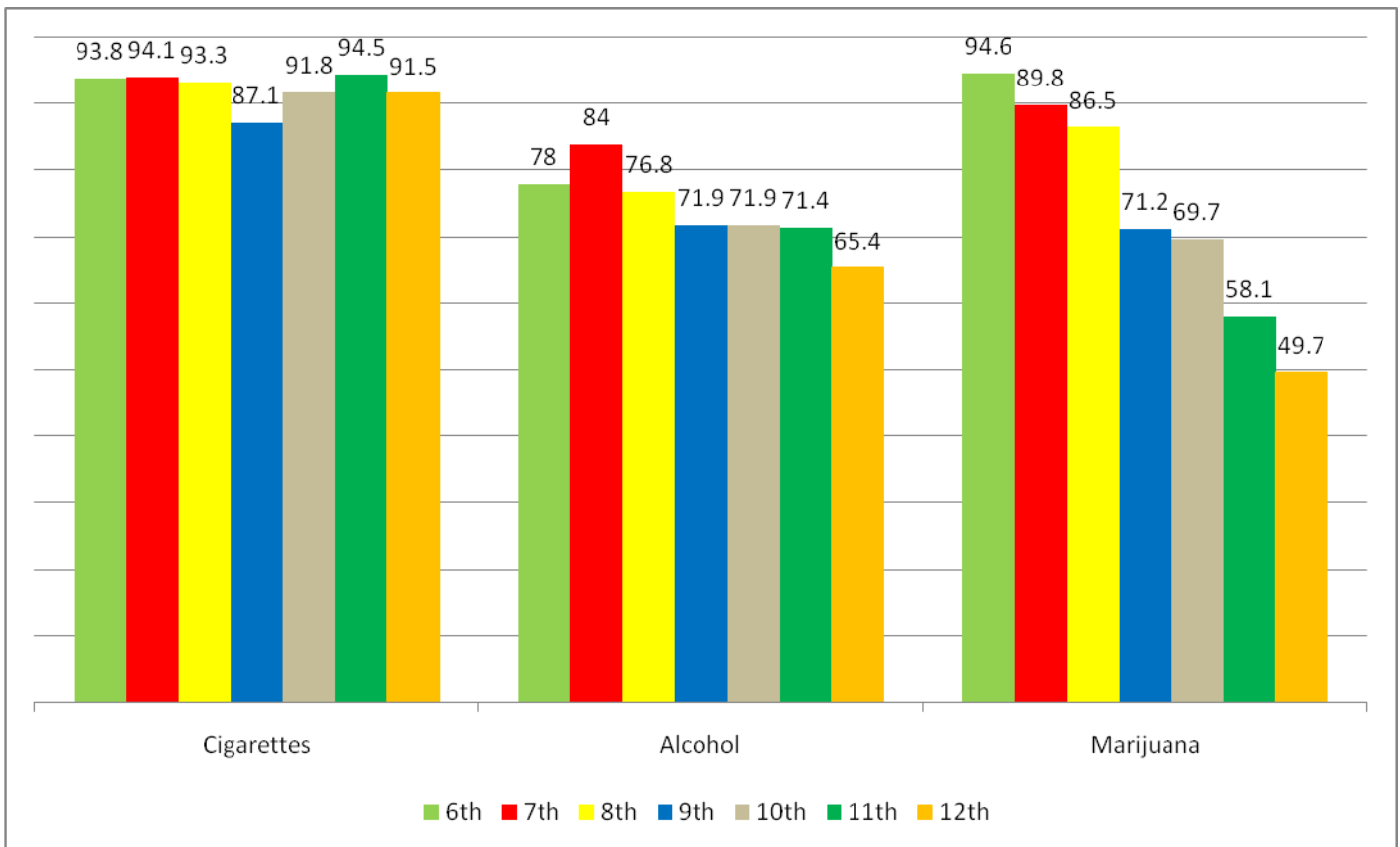
### Favorable Youth Attitudes

As youth get older, their perception of the risks of alcohol, tobacco and other drugs drops, placing them at greater risk of using these substances. In Falmouth, the perception of risk differs somewhat depending on substance. For example, youth perception that cigarette use is a moderate or great risk ranged from a high of 95% (11<sup>th</sup> grade) to a low of 87% (ninth grade). While the majority of youth across all ages view cigarettes as risky, perceptions of alcohol and marijuana use diminishes as youth get older. Views on the riskiness of alcohol range from 84% (7<sup>th</sup> grade) to 65% (12<sup>th</sup> grade). Perceptions of risk related to marijuana use declined steadily from 95% (6<sup>th</sup> grade) to 50% (12<sup>th</sup> grade). By the 12<sup>th</sup> grade, nearly twice as many students see harm in cigarette use compared to marijuana.

Youth are much more likely to abuse substances when they feel there are no clear standards or consequences for their behavior. The survey revealed that Falmouth youth perceive little risk of being caught by parents, police or school officials. For example 67% percent of 9<sup>th</sup>–12<sup>th</sup> graders and 37% percent of 7<sup>th</sup>–8<sup>th</sup> graders reported they would not get caught by parents for drinking. In addition, 88% of 9<sup>th</sup>–12<sup>th</sup> graders and 75% of 7<sup>th</sup>–8<sup>th</sup> graders reported they would not get caught by police. Twenty-one percent of 9<sup>th</sup>–12<sup>th</sup> graders report being high or drunk at school in the past year.

For marijuana use, 83% of 9<sup>th</sup>–12<sup>th</sup> graders and 54% percent of 7<sup>th</sup>–8<sup>th</sup> graders reported that “a kid smoking marijuana in their neighborhood” would not get caught by police. Focus group and key informant data also indicate that the new Massachusetts law decriminalizing marijuana may also be creating confusion about use and consequences.

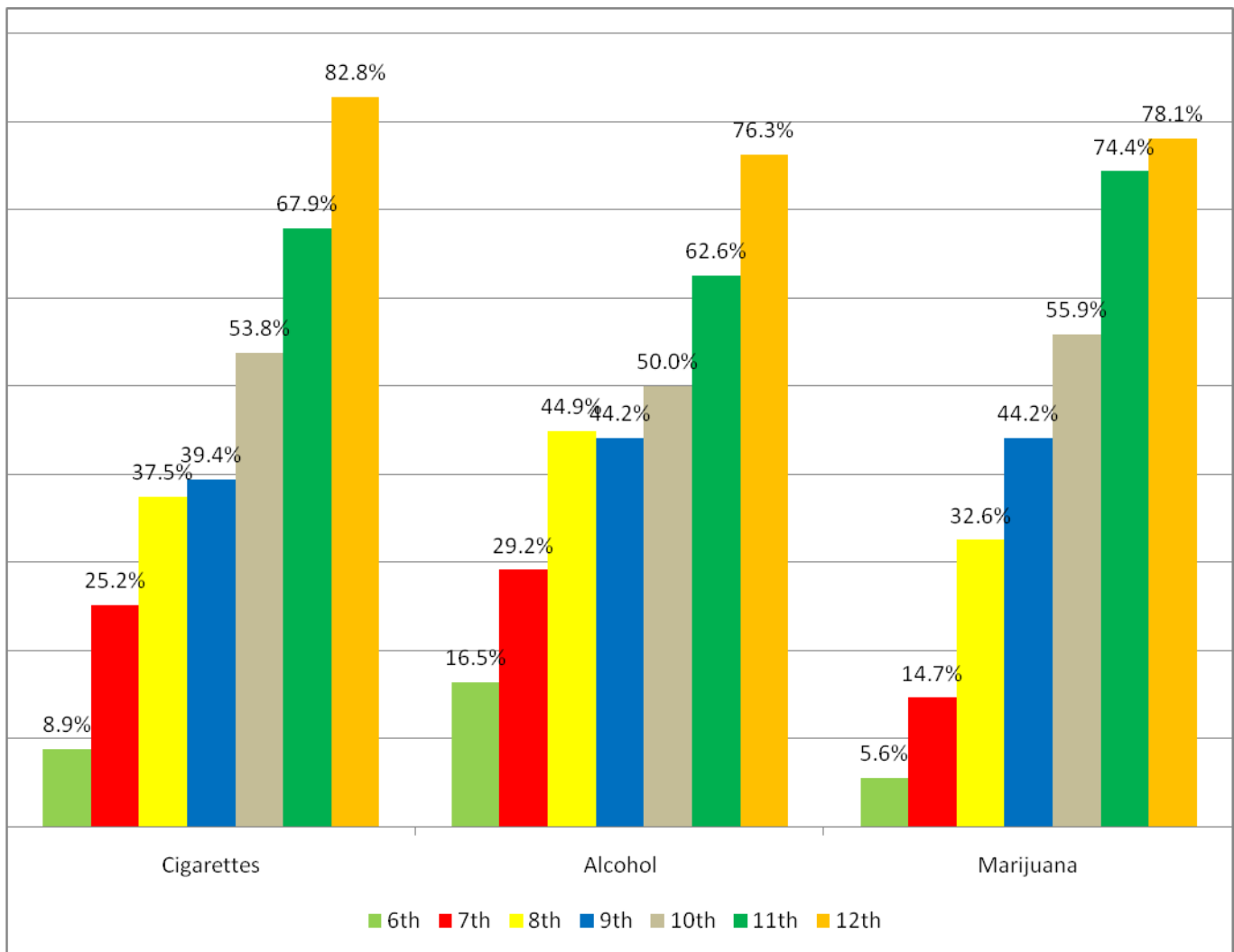
*Table 7: Students Perception that Using is a Moderate or Great Risk*



## Availability

The more accessible alcohol, tobacco and other drugs are, the more likely youth are to use them. As *Table 8* illustrates, all three substances are perceived as more readily available as age increases. Among the 6<sup>th</sup> grade students, 17% report that alcohol was “sort of easy” or “very easy” to get. The Partnership also has data documenting that youth are getting alcohol by giving others money to buy it for them in package store parking lots or getting it from social sources such as older siblings and family. There are also frequent house parties where alcohol is readily available. Marijuana is also reported as being widely available for purchase – more than 17% of juniors and seniors reported selling drugs over the past year.

*Table 8: Perception of Availability*



## **Favorable Community Laws and Norms**

Youth substance abuse rates are also influenced by laws and norms within the community. On the risk factor scale, Favorable Community Laws and Norms scored 54, which is four points above the normative score. Communities where laws or standards pertaining to drug use or other risky behavior are unclear or favorable have higher rates of substance abuse, violence, and delinquency. Focus group and key informant data indicate that as a tourist community, drinking is the “norm” in Falmouth for summer recreational activities – a large number of community events and celebrations involve alcohol. 57% of all 8<sup>th</sup> graders report that they know an adult who has been drunk or high. In terms of consequences, over 80% of 7<sup>th</sup> -12<sup>th</sup> graders report that they did not feel kids would get caught by police for smoking marijuana or drinking in their neighborhoods. In addition, 28% of 12<sup>th</sup> graders report being high or drunk at school in the past year.

## **Understanding Protective Factors in Falmouth**

The *Communities that Care* Survey also measured elements and characteristics that exist in Falmouth which protect a young person from the risks of substance abuse and other risky behaviors. Protective Factors, also known as assets, are conditions that buffer children and youth from exposure to risk by reducing the impact of the risks or changing the way young people respond to the risks.

Protective factors identified through research include strong bonding to family, school, community, and peers. These groups support the development of healthy behaviors for children by setting and communicating healthy beliefs and clear standards or expectations for a child’s behavior. Young people are more likely to follow those standards set by these groups if the bonds are strong. Strong bonds are encouraged by providing young people with opportunities to make meaningful contributions, by teaching skills needed to be successful in these new opportunities, and by recognizing their contributions.<sup>6</sup>

Table 9 illustrates the overall protective factor scores in Falmouth. The *Communities that Care* survey measured a score of 52 (normative average is 50) on the protective factor of *Family Rewards for Pro-social Involvement*. This factor represents a strength that can be built upon in Falmouth. Youth that took the survey indicated through a number of their answers that they feel recognized and rewarded within their families for their involvement in positive and healthy activities.

The lowest protective score is *Community Rewards for Pro-social involvement* (40), which is 10 points below the normative average. Although an above average number of youth feel recognized within their own family systems for positive engagement in activities, the score of 40 indicates that Falmouth needs to do more as a community to recognize and reward youth for their positive engagement in the community.

The protective factor score for *Community Opportunities for Pro-Social Involvement* is 44, which is 6 points below the normative average. Key informant interviews indicate that many youth face significant barriers to community involvement such as cultural barriers, transportation, financial barriers, and adult support. By targeting these areas of weakness through our prevention efforts, we can reduce the likelihood that they will engage in risky behavior.

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<sup>6</sup> Communities that Care Youth Survey Report, pg.19

Table 9: Protective Factors in Falmouth



**Community Strengths Related to Prevention:**

The Town of Falmouth is fortunate to have a number of substance abuse prevention resources available, including:

- The Falmouth Substance Abuse Commission is an appointed board of the Town of Falmouth whose mission is to prevent substance abuse among Falmouth’s youth, provide information and education to the community and to promote the development and availability of a continuum of substance abuse services for all Falmouth residents.
- The Falmouth Public Schools implement 3 evidence-based curriculums in grades K-9: 1) Second Step, a SAMHSA model program in grades K-4; 2) PeaceBuilders, a Drug Free Schools exemplary prevention program, in grades K-8; and 3) Life Skills Training (LST), a SAMHSA model program, in grade 9.
- A contractual agreement between Falmouth Human Services and Falmouth Public Schools has been developed to offer free mental health and substance abuse assessment and referral services for students and their families and free counseling services for those students and parents without health insurance or ability to pay. Trained language interpreter services are available as needed for non English speaking residents. A psycho-educational group has begun at the junior high school and the middle school as a collaborative project between Falmouth Human Services and the guidance departments at the schools.
- *Girls Circle*, a structured support group for girls that is designed to foster self-esteem and to develop and maintain positive connections to peers and adult women in their community is being offered to girls in grades 6-8 through collaboration between Falmouth Human Services and the Community Health Center of Cape Cod.

- The *Volunteers in Public Schools, Inc.* (VIPS) sponsors Project RISE, an in-school mentoring program utilizing the Massachusetts Mentoring Partnership model, which supports students in grades K-8 who are struggling with academic achievement. VIPS also sponsors the “Parent Connection Series,” which provides free public programs on a variety of topics including parenting skills, health issues, and academic issues.
- The Police Athletic League operates a community center with varied programming for youth.
- Falmouth Human Services is a town department dedicated to improving the quality of life of all Falmouth residents. The clinical staff provide mental health counseling to residents at no charge and participate in a variety of community development projects. Falmouth Human Services obtained the Drug Free Communities grant and manages the Falmouth Prevention Partnership project.
- The Falmouth Recreation Center operates a Teen Center with programming developed for and by youth. The Falmouth Recreation Center recently hired a new Teen Center Director to enhance programming and revitalize the program.
- *Together We Can, Inc.*, a non-profit volunteer organization, sponsors an all night after prom party each year where hundreds of high school students gather to socialize in a safe and drug free setting. The business community donates door prizes and food and volunteers spend countless hours organizing and decorating the event, clearly demonstrating the community’s commitment for keeping Falmouth youth safe and drug free on prom night.
- The Falmouth Police Department conducts alcohol sales compliance checks in local liquor stores and serving establishments. The Falmouth Police Chief has prioritized the reduction of underage drinking within the goals of the department. In 2008, the Department was awarded a \$10,000 Underage Alcohol Enforcement Grant from the Executive Office of Public Safety and Security (EOPSS). The grant has provided resources for increased surveillance of “hot spots” for underage drinking and other drug use and stepped up enforcement of the Zero Tolerance Policy.
- Gosnold, a not for profit corporation, has served individuals and families affected by addiction and mental illness since 1972 and has several programs located within Falmouth and in neighboring communities. The Gosnold Outpatient Counseling Center offers comprehensive behavioral health services for children, adolescents, adults, and families.
- The Community Health Center of Cape Cod’s Family Resource Center provides counseling, information, and support for children, teens, young adults, and their families. The Resource Center has counselors and a child psychiatrist who can address behavioral health concerns and help families through the teenage years. Services are available for children, teens and young adults up to age 23 and insurance is not necessary. The family resource center is a part of the greater Community Health Center of Cape Cod which offers the medical home model to provide ease of access and a comprehensive continuum of care within one agency.
- The Women’s Health Care Task Force, a project of Cape Cod Healthcare, is a network of consumers and providers interested in the health care concerns of women. The Task Force provides educational programming to the community on a variety of topics.

## PROFILE SUMMARY

The Falmouth Prevention Partnership, comprised of 40 partner organizations and individuals, has gathered quantitative and qualitative data regarding the substance use behaviors, attitudes and perceptions of youth as well as the social environment where Falmouth youth are developing.

The information is clear that underage drinking is by far the most frequently used drug by Falmouth teens. Students surveyed in grades 6 through 12 report incremental increases in alcohol use as they age (grade 6 = 1.1% and grade 12 = 68.6%). Marijuana is the second most widely used drug with a similar pattern of incremental increases in use rates by age (grade 6 = 1.4% and grade 12 = 42.8%). Student's perceptions seem to support and coincide with these climbing use rates. Students report that alcohol and marijuana are more and more accessible the older they get and that the disapproval of their parents regarding these substances decreases over time. Many adults express the view that it is a rite of passage for teens to drink alcohol and the community as a whole is supported by a tourist industry where drinking is a normal vacation activity. Furthermore, there is a significant decline in student's perception of the severity of the risks associated with smoking marijuana the older they get (grade 6 = 94.6% and grade 12 = 49.7%).

Cigarette and tobacco use by Falmouth youth is significantly lower than either alcohol or marijuana use (grade 6 = 0.4% and grade 12 = 27.3%). A variety of illegal street drugs (heroin, cocaine, oxycontin, etc.) are used by a minority of youth. These lower use rates seem to be supported by the student's perceptions that these drugs are potentially more harmful to them and that their parents disagree more vehemently with using these substances.

A number of protective factors exist in the Falmouth community as well as some that may need bolstering. Falmouth youth report feeling connected and well supported by their families. However, youth feel less supported and experience few opportunities from the community at large. Key informants cite transportation, cost, and cultural differences as potential barriers to youth involvement in the community. Many organizations and individuals have been working for several years to enhance the social development of Falmouth's youth. The communication and coordination between these projects has been an ongoing challenge that the Falmouth Prevention Partnership hopes to manage.

The accumulation of information about the Falmouth community has allowed the Falmouth Prevention Partnership to focus on those risk factors which, according to national research, place Falmouth youth at higher risk for using alcohol and drugs at an early age. Those factors are:

- Easy access of alcohol and drugs
- Community norms that support routine alcohol use
- Attitudes and perceptions of youth that are favorable to alcohol and drug use
- Attitudes and perceptions of parents that are favorable to alcohol and drug use.

The Partnership has created four action teams to address these community wide issues and welcomes new partners to join in our prevention efforts.