

SD 2.1

PHYSICAL FIGHTING BY YOUTH

Physical violence is a major cause of injury and homicide among adolescents.¹⁶ In 1995, almost half of all male students and nearly one third of female students in grades 9 through 12 reported having been involved in a physical fight during the previous year. For males, the percentage that reported involvement in a fight decreased from 51 percent in 1993 to 46 percent in 1995 (see Figure SD 2.1).

Differences by Age. In both 1993 and 1995, the percentage of students who report being involved in fights decreased with age (see Table SD 2.1). In 1995, 47 percent of 9th-grade students and 31 percent of 12th-grade students reported being involved in a fight. It is unclear, however, whether this reduction reflects the effects of increasing maturity, a change in the propensity to report having been in a fight, or a tendency for violence-prone youth to drop out of school, leaving a less violent pool of students in the higher grades.

Differences by Race.¹⁷ In 1995, 36 percent of white students reported involvement in a physical fight within the last year, compared with 42 percent of black students and 48 percent of Hispanic students (see Table SD 2.1).

Table SD 2.1

Percentage of students in grades 9 through 12 in the United States reporting that they have been in a physical fight within the last year, by gender, grade, and race and Hispanic origin: 1993 and 1995

	1993			1995		
	Total	Male	Female	Total	Male	Female
Total	42	51	32	39	46	31
Grade						
9	50	59	41	47	55	37
10	42	52	32	40	46	34
11	41	52	28	37	46	28
12	35	43	27	31	38	24
Race and Hispanic origin^a						
White, non-Hispanic	40	50	30	36	44	27
Black, non-Hispanic	50	58	42	42	49	35
Hispanic	43	52	34	48	56	40

^aEstimates for whites and blacks exclude Hispanics of those races. Persons of Hispanic origin may be of any race.

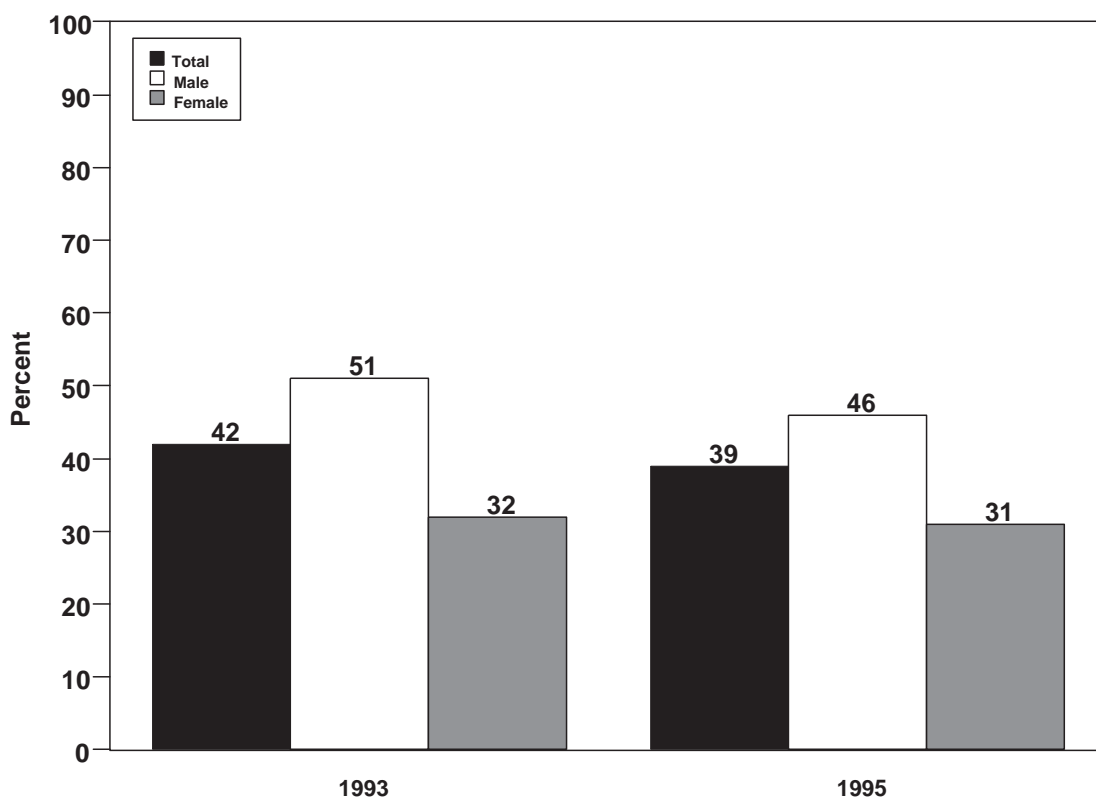
Sources: Data for 1993: Kann, L., Warren, C.W., Harris, W.A., Collins, J.L., Douglas, K.A., Collins, M.E., Williams, B.I., Ross, J.G., Kolbe, L.J., and State and Local YRBSS (Youth Risk Behavior Surveillance System) Coordinators. "Youth Risk Behavior Surveillance -- United States, 1993." In *CDC Surveillance Summaries*, March 24, 1995. *Morbidity and Mortality Weekly Report* 44(SS-1): Table 6; Data for 1995: Kann, L., Warren, C.W., Harris, W.A., Collins, J.L., Williams, B.I., Ross, J.G., and Kolbe, L.J. "Youth Risk Behavior Surveillance--United States, 1995." In *CDC Surveillance Summaries*, September 27, 1996. *Morbidity and Mortality Weekly Report* 45(SS-4): Table 6.

¹⁶Injury-related mortality was the leading cause of death for 15- to 19-year-olds in 1995, accounting for 80 percent of all deaths. Injury-related mortality includes death from motor vehicle crashes, fires and burns, drowning, suffocation, and accidents caused by firearms and other explosive materials, among others. The rate of death from homicide for youth ages 15 through 19 more than doubled between 1970 and 1994. (See, for injury-related and homicide mortality, the report section "Health Conditions and Health Care"). See also: University of California at Los Angeles, CDC (Centers for Disease Control and Prevention). "The Epidemiology of Homicide in Los Angeles, 1970-79." Atlanta: U.S. Department of Health and Human Services, Public Health Service, CDC, 1985. Cited in *Chronic Disease and Health Promotion, Reprints from the Morbidity and Mortality Weekly Report: 1990-1991 Youth Risk Behavior Surveillance System*. Atlanta: U.S. Department of Health and Human Services, Public Health Service, CDC, 1992. p. 37.

¹⁷Estimates for whites and blacks exclude Hispanics of those races.

Figure SD 2.1

Percentage of students in grades 9 through 12 in the United States reporting that they have been in a physical fight within the last year, by gender: 1993 and 1995.



Sources: Data for 1993: Kann, L., Warren, C.W., Harris, W.A., Collins, J.L., Douglas, K.A., Collins, M.E., Williams, B.I., Ross, J.G., Kolbe, L.J., and State and Local YRBSS (Youth Risk Behavior Surveillance System) Coordinators. "Youth Risk Behavior Surveillance -- United States, 1993." In *CDC Surveillance Summaries*, March 24, 1995. *Morbidity and Mortality Weekly Report* 44(SS-1): Table 6; Data for 1995: Kann, L., Warren, C.W., Harris, W.A., Collins, J.L., Williams, B.I., Ross, J.G., and Kolbe, L.J. "Youth Risk Behavior Surveillance--United States, 1995." In *CDC Surveillance Summaries*, September 27, 1996. *Morbidity and Mortality Weekly Report* 45(SS-4): Table 6.

SD 2.2

WEAPON CARRYING AMONG HIGH SCHOOL YOUTH

Weapon carrying is associated with the most serious injuries resulting from violence. Carrying a weapon significantly increases the risk that a violent argument will result in death, disability, or other serious injury.¹⁸

Since 1991, the percentage of students who report carrying weapons has declined; for example, in 1995, 20 percent of students in grades 9 through 12 reported carrying a weapon, compared with 22 percent in 1993 and 26 percent in 1991 (see Table SD 2.2A). The definition of weapon includes knives, razors, clubs, and handguns and other firearms.

Differences by Age. In general, students in the lower grades are more likely than students in the upper grades to carry a weapon. In 1995, 23 percent of 9th graders reported having carried a weapon in the last 30 days, compared with 16 percent of 12th graders.

Differences by Gender. High school males are much more likely than females to carry a weapon. This is true across all grades and for all racial and ethnic groups (see Figure SD 2.2.A); for example, in 1995, 31 percent of males in grades 9 through 12 reported carrying a weapon, compared with 8 percent of all females in grades 9 through 12.

Differences by Race and Hispanic Origin.¹⁹ In 1995, 19 percent of white, 22 percent of black, and 25 percent of Hispanic teens reported having carried a weapon. For white and black students, these represent reductions from 1991 rates of 25 and 33 percent, respectively.

Youth Who Report Carrying a Gun. In both 1993 and 1995, 8 percent of high school students report having carried a gun at some time in the last 30 days. In 1995, 11 percent of black and Hispanic students and 6 percent of white students reported carrying a gun (see Table SD 2.2.B).

¹⁸"Measuring the Health Behavior of Adolescents: The Youth Risk Behavior Surveillance System and Recent Public Health Reports on High-Risk Adolescents." *Public Health Reports* 108(Supp. 1). Rockville, Md.: Public Health Service, 1993.

¹⁹Estimates for whites and blacks exclude Hispanics of those races.

Table SD 2.2.A

Percentage of students in grades 9 through 12 in the United States who report having carried a weapon^a at least once within the last 30 days, by gender, grade, and race and Hispanic origin: 1991, 1993, and 1995

	1991			1993			1995		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
Total	26	41	11	22	34	9	20	31	8
Grade									
9	28	44	10	26	39	11	23	34	9
10	27	42	11	21	33	10	21	32	9
11	29	44	13	22	33	9	20	32	8
12	21	33	10	20	33	7	16	26	6
Race and Hispanic origin^a									
White, non-Hispanic	25	41	8	21	33	7	19	31	6
Black, non-Hispanic	33	43	24	29	38	19	22	30	16
Hispanic	26	40	13	24	37	12	25	37	13

^aWeapons include knives, razors, clubs, and firearms (including handguns). - ^bEstimates for whites and blacks exclude Hispanics of those races. Persons of Hispanic origin may be of any race.

Sources: Data for 1991: Centers for Disease Control and Prevention. 1990-1991 Youth Risk Behavior Surveillance System (YRBSS). In *Chronic Disease and Health Promotion Reporting from the MMWR*, Table 2, p. 68; Data for 1993: Kann, L., Warren, C.W., Harris, W.A., Collins, J.L., Douglas, K.A., Collins, M.E., Williams, B.I., Ross, J.G., Kolbe, L.J., and State and Local YRBSS Coordinators. "Youth Risk Behavior Surveillance--United States, 1993." In *CDC Surveillance Summaries*, March 24, 1995. *Morbidity and Mortality Weekly Report* 44(SS-1): Table 4; Data for 1995: Kann, L., Warren, C.W., Harris, W.A., Collins, J.L., Williams, B.I., Ross, J.G., and Kolbe, L.J. "Youth Risk Behavior Surveillance--United States, 1995." In *CDC Surveillance Summaries*, September 27, 1996. *Morbidity and Mortality Weekly Report* 45(SS-4): Table 4.

Table SD 2.2.B

Percentage of students in grades 9 through 12 in the United States who report having carried a gun at least once within the last 30 days, by gender, grade, and race and Hispanic origin: 1993 and 1995

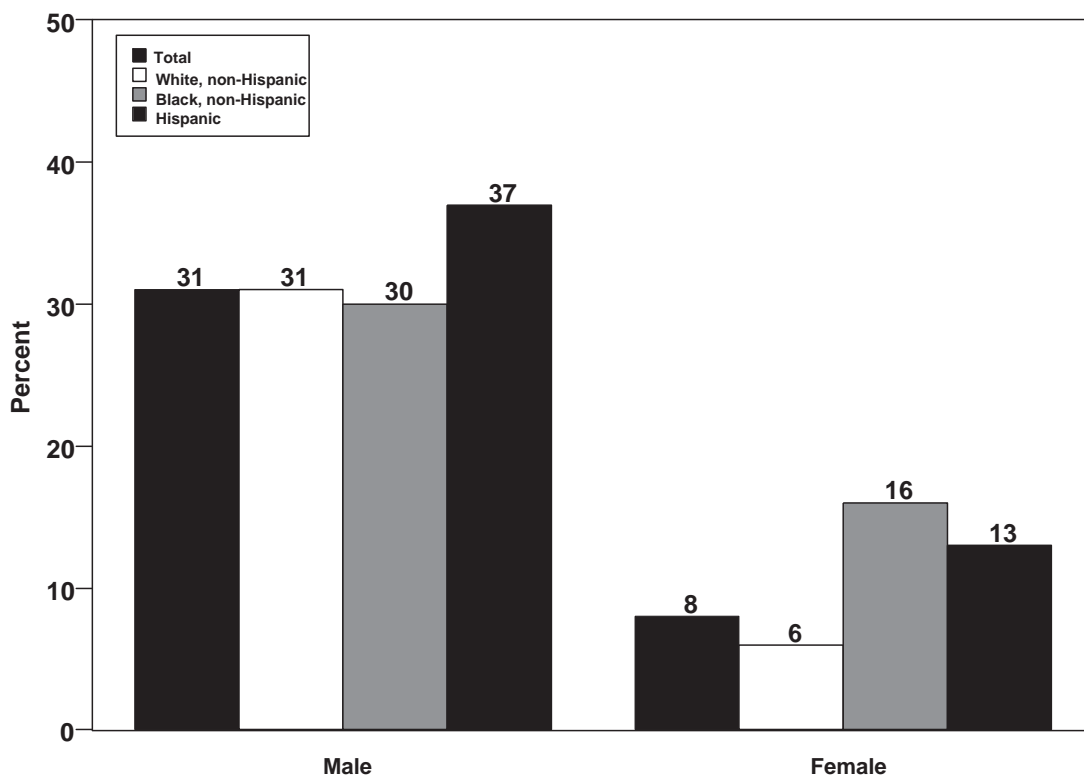
	1993			1995		
	Total	Male	Female	Total	Male	Female
Total	8	14	2	8	12	3
Grade						
9	9	16	2	9	14	3
10	9	15	2	8	13	3
11	7	13	1	7	12	1
12	7	12	1	6	11	2
Race and Hispanic origin^a						
White, non-Hispanic	7	12	1	6	10	2
Black, non-Hispanic	12	21	4	11	19	4
Hispanic	10	17	3	11	17	5

^aEstimates for whites and blacks exclude Hispanics of those races. Persons of Hispanic origin may be of any race.

Sources: Data for 1993: Kann, L., Warren, C.W., Harris, W.A., Collins, J.L., Douglas, K.A., Collins, M.E., Williams, B.I., Ross, J.G., Kolbe, L.J., and State and Local YRBSS (Youth Risk Behavior Surveillance System) Coordinators. "Youth Risk Behavior Surveillance--United States, 1993." In *CDC Surveillance Summaries*, March 24, 1995. *Morbidity and Mortality Weekly Report* 44(SS-1): Table 4; Data for 1995: Kann, L., Warren, C.W., Harris, W.A., Collins, J.L., Williams, B.I., Ross, J.G., and Kolbe, L.J. "Youth Risk Behavior Surveillance--United States, 1995." In *CDC Surveillance Summaries*, September 27, 1996. *Morbidity and Mortality Weekly Report* 45(SS-4): Table 4.

Figure SD 2.2.A

Percentage of students in grades 9 through 12 in the United States who report having carried a weapon^a at least once within the last 30 days, by gender and by race and Hispanic origin:^b 1995



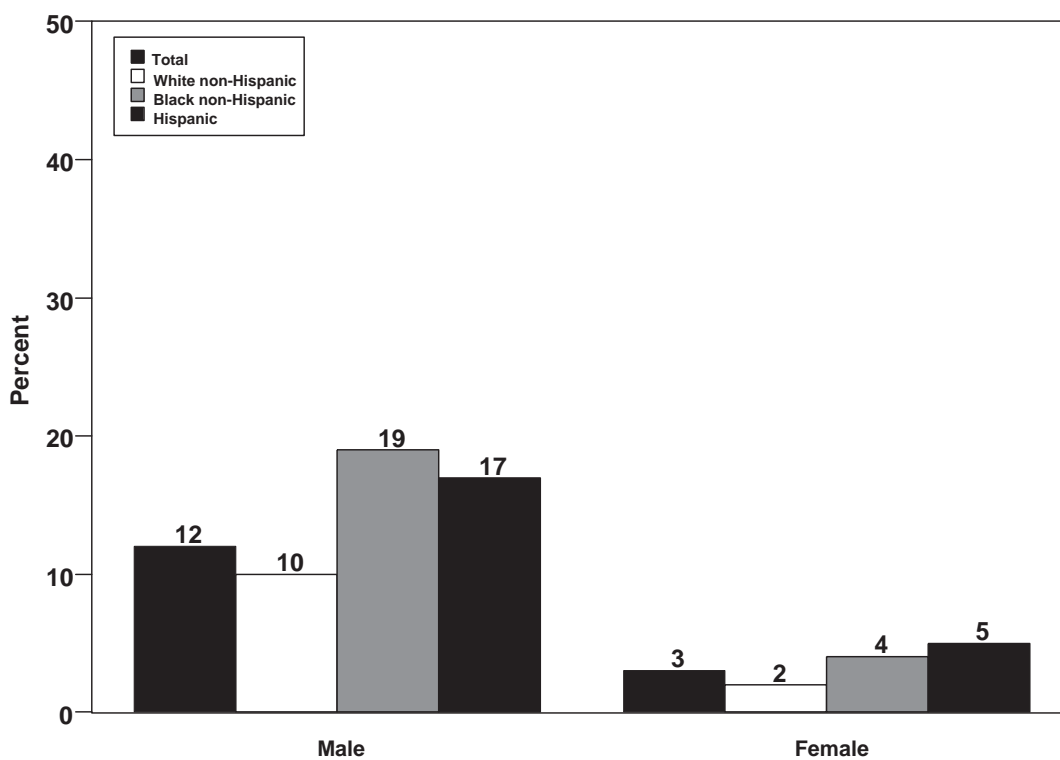
^aWeapons include knives, razors, clubs, and firearms (including handguns).

^bEstimates for whites and blacks exclude Hispanics of those races. Persons of Hispanic origin may be of any race.

Sources: Data for 1991: Centers for Disease Control and Prevention. 1990-1991 Youth Risk Behavior Surveillance System (YRBSS). In *Chronic Disease and Health Promotion Reporting from the MMWR*, Table 2, p. 68; Data for 1993: Kann, L., Warren, C.W., Harris, W.A., Collins, J.L., Douglas, K.A., Collins, M.E., Williams, B.I., Ross, J.G., Kolbe, L.J., and State and Local YRBSS Coordinators. "Youth Risk Behavior Surveillance--United States, 1993." In *CDC Surveillance Summaries*, March 24, 1995. *Morbidity and Mortality Weekly Report* 44(SS-1): Table 4; Data for 1995: Kann, L., Warren, C.W., Harris, W.A., Collins, J.L., Williams, B.I., Ross, J.G., and Kolbe, L.J. "Youth Risk Behavior Surveillance--United States, 1995." In *CDC Surveillance Summaries*, September 27, 1996. *Morbidity and Mortality Weekly Report* 45(SS-4): Table 4.

Figure SD 2.2.B

Percentage of students in grades 9 through 12 in the United States who report having carried a gun at least once within the last 30 days, by gender and by race and Hispanic origin:^a 1995



^aEstimates for whites and blacks exclude Hispanics of those races. Persons of Hispanic origin may be of any race.

Sources: Data for 1993: Kann, L., Warren, C.W., Harris, W.A., Collins, J.L., Douglas, K.A., Collins, M.E., Williams, B.I., Ross, J.G., Kolbe, L.J., and State and Local YRBSS (Youth Risk Behavior Surveillance System) Coordinators. "Youth Risk Behavior Surveillance--United States, 1993." In *CDC Surveillance Summaries*, March 24, 1995. *Morbidity and Mortality Weekly Report* 44(SS-1): Table 4; Data for 1995: Kann, L., Warren, C.W., Harris, W.A., Collins, J.L., Williams, B.I., Ross, J.G., and Kolbe, L.J. "Youth Risk Behavior Surveillance--United States, 1995." In *CDC Surveillance Summaries*, September 27, 1996. *Morbidity and Mortality Weekly Report* 45(SS-4): Table 4.

SD 2.3

SEAT BELT USE

Motor vehicle crashes are among the leading causes of injury-related mortality²⁰ for 15- to 19-year-olds, accounting for approximately 40 percent of all teenage injury deaths in 1995.²¹ Motor vehicle crashes are also the leading cause of death for younger children.²² Consistent use of seat belts and child safety seats dramatically lessens the risk of injury or death in a motor vehicle crash. Yet the National Highway Traffic Safety Administration estimates that in 1993, 55 percent of all children under age 5 who were killed while occupants of a motor vehicle were not protected by seat belts or child safety seats.²³

Overall, regular seat belt or child safety seat use among children increased between 1985 and 1990. This increase has been particularly dramatic among children ages 5 and older (see Table SD 2.3.A); for example, among children ages 5 through 9, reported rates of regular seat belt use increased from 49 percent to 76 percent.

Differences by Age. In both 1985 and 1990, younger children were more likely than older children to routinely wear a seat belt or be in a child safety seat. In 1990, 87 percent of children ages 1 through 4 were reported to have used seat belts (or a child safety seat) all or most of the time, compared with 68 percent of 15- through 17-year-olds (see Figure SD 2.3); however, as mentioned above, the greatest increases in seat belt usage occurred among children ages 5 through 17. In fact, the older the age group, the greater the increase in the percentage who regularly wore their seat belts.

Differences by Race. Among children age 4 and under, there has been an increase in the percentage of both white and black children who are regularly in child safety seats (or, for some of the older or larger preschoolers, wearing seat belts). Between 1985 and 1990, the percentage of white children in this age group who regularly were in a child safety seat or wore a seat belt rose from 84 percent to 88 percent. Among black children in this age group, the percentage increased from 67 percent to 79 percent. The percentage of Hispanic children age 4 and under who regularly used a seat belt or child safety seat was fairly steady at 73 percent and 71 percent in 1985 and 1990, respectively. For children ages 5 through 17, however, percentages for all three races rose considerably between 1985 and 1990 (see Table SD 2.3.A).

The 1985 and 1990 data described above and presented in Table SD 2.3.A are based on parent and self reports; data for 1994, presented in Table SD 2.3.B, are based on observations and thus cannot be directly compared with the earlier data; however, the observational results suggest that the percentages of children under 5 who are in child safety seats or are wearing seat belts is much lower than the percentages suggested from the self reports in 1985 and 1990.

²⁰Injury-related mortality was the leading cause of death for 15- to 19-year-old teenagers in 1995, accounting for 80 percent of all deaths. Injury-related mortality includes death from motor vehicle crashes, fires and burns, drowning, suffocation, and accidents caused by firearms and other explosive materials, among others. See "Health Conditions and Health Care," section 3 of this report.

²¹National Center for Health Statistics. 1995 Detail Mortality File. Unpublished data.

²²Ibid.

²³National Highway Traffic Safety Administration. 1994. *Traffic Safety Facts 1993*. DOT HS 808 169. Washington, D.C.: U.S. Department of Transportation.

Table SD 2.3.A

Percentage of children and youth in the United States reported to have worn a seat belt or been placed in a child safety seat all or most of the time, by age and by race and Hispanic origin: 1985 and 1990

	1985	1990
Children and youth by age		
Under age 1	92	93
Ages 1-4	82	87
Ages 5-9	49	76
Ages 10-14	33	67
Ages 15-17	31	68
Race and Hispanic origin^a by age		
White		
Under age 5	84	88
Ages 5-17	40	73
Black		
Under age 5	67	79
Ages 5-17	32	59
Hispanic		
Under age 5	73	71
Ages 5-17	36	62

^aEstimates for whites and blacks include Hispanics of those races. Persons of Hispanic origin may be of any race.

Sources: Data for 1985: Schoenborn, C.A. "Health Promotion and Disease Prevention: United States, 1985." National Center for Health Statistics. *Vital Health Statistics* Series No. 10 (163), February 1988; Data for 1990: Piani, A., and Schoenborn, C.A. "Health Promotion and Disease Prevention: United States, 1990." National Center for Health Statistics. *Vital Health Statistics* Series No. 10 (185), April 1993.

Table SD 2.3.B

Percentage of children and youth in the United States who are observed to have worn a seat belt or been placed in a child safety seat, by age:^a 1994

<u>Children and Youth by Age</u>	<u>1994</u>
Infant (Under age1) ^b	88
Toddler (1-4 years) ^c	61
Youth (5-15 years)	58
Young adult (16-24 years)	53

^aAge group is based on the best judgment of the observers in the National Occupant Protection Use Survey (NOPUS) Controlled Intersection Study.

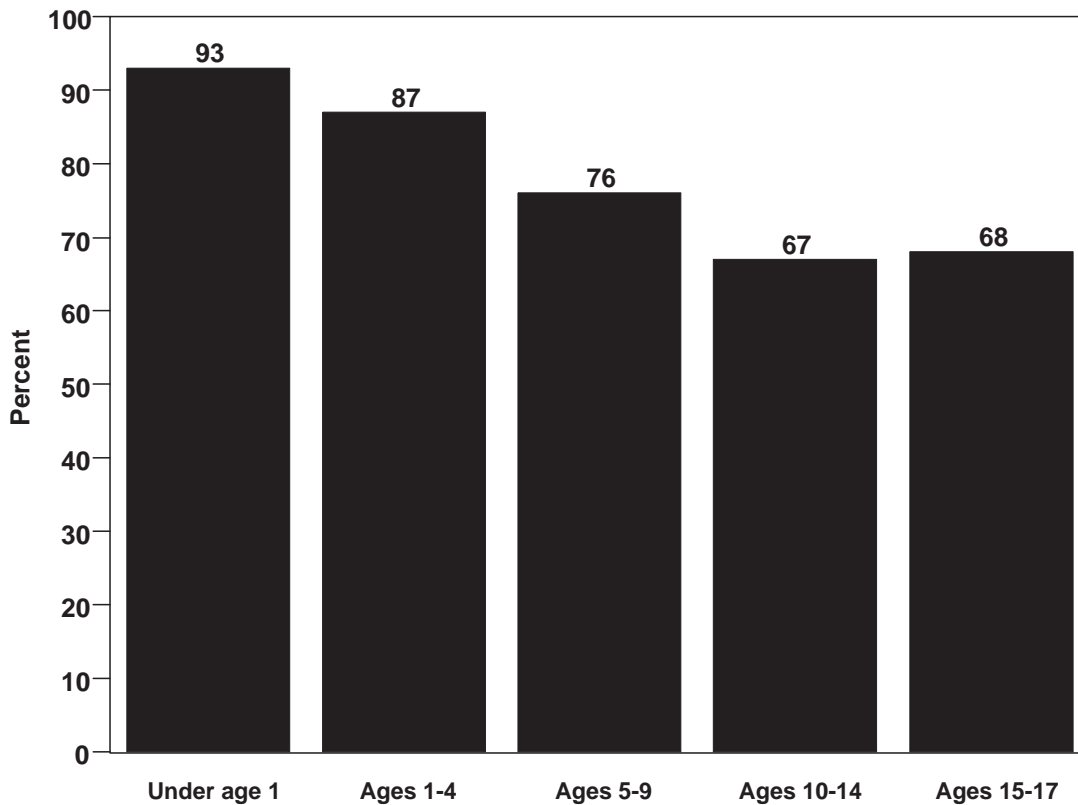
^bUse of restraints for infants refers to child safety seats.

^cUse of restraints for toddlers refers to safety belts or child safety seats.

Source: Research Note. "National Occupant Protection Use Survey: Controlled Intersection Study." National Highway Traffic Safety Administration, U.S. Department of Transportation, May 1, 1995.

Figure SD 2.3

Percentage of children and youth in the United States reported to have worn a seat belt or been placed in a child safety seat all or most of the time, by age: 1990



Sources: Data for 1985: Schoenborn, C.A. "Health Promotion and Disease Prevention: United States, 1985." National Center for Health Statistics. *Vital Health Statistics* Series No. 10 (163), February 1988; Data for 1990: Piani, A., and Schoenborn, C.A. "Health Promotion and Disease Prevention: United States, 1990." National Center for Health Statistics. *Vital Health Statistics* Series No. 10 (185), April 1993.

SD 2.4

REGULAR PHYSICAL EXERCISE

Sixty (60) percent of Americans do not exercise regularly according to a 1996 report by the surgeon general, despite the many health benefits associated with physical activity.²⁴ People of all ages, both male and female, benefit from regular physical activity. Significant health benefits can be obtained by including a moderate amount of physical activity (e.g., 30 minutes of brisk walking or raking leaves, 15 minutes of running, or 45 minutes of playing volleyball) on most, if not all, days of the week.

The percentage of 12th-grade students who report actively participating in sports or exercise "almost every day" has remained fairly stable since 1976, varying between 44 and 48 percent. Rates have also been stable for 8th- and 10th-grade students since 1991, the first year in which data were collected for those grades (see Table SD 2.4.A).

Differences by Age. The percentages of students who report that they actively participate in sports or exercise "almost every day" decreased with age. In 1996, for example, 54 percent of 8th-graders, 52 percent of 10th graders, and 45 percent of 12th-graders reported daily or almost daily exercise (see Figure SD 2.4). A similar pattern emerged in a survey that asked teens whether they had exercised vigorously three or more times in the past week (see Table SD 2.4.B).

Differences by Gender. Males consistently report exercising or participating in sports more often than females. In 1996, for each age group, male rates were 16 to 26 percentage points higher than female rates, a trend that exists for nearly every year that data are available (see Table SD 2.4.A).

Differences by Race. Black and white students in the 8th- and 10th-grade are about equally likely to exercise regularly (see Table SD 2.4.A). Among 12th-grade students, blacks appeared to be less likely than whites to exercise regularly during most years in the 1990s. Other survey data, reported in Table SD 2.4.B, show larger differences by race and Hispanic origin. In 1995, 67 percent of non-Hispanic white teens reported exercising vigorously at least three times a week, compared with 53 percent of non-Hispanic black teens and 57 percent of Hispanic teens.

²⁴U.S. Department of Health and Human Services. *Physical Activity and Health: A Report of the Surgeon General*. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, 1996.

Table SD 2.4.A

Percentage of 8th-, 10th-, and 12th-grade students in the United States who report that they actively participate in sports or exercise "almost every day," by gender and race: selected years, 1976-1996

	1976	1981	1986	1991	1992	1993	1994	1995	1996
8th Grade									
Total	—	—	—	57	55	55	53	56	54
Gender									
Male	—	—	—	65	65	65	63	66	63
Female	—	—	—	49	45	46	44	47	47
Race									
White	—	—	—	58	56	58	56	59	57
Black	—	—	—	61	57	54	52	55	56
10th Grade									
Total	—	—	—	54	54	53	53	53	52
Gender									
Male	—	—	—	63	64	62	62	62	60
Female	—	—	—	45	45	45	44	45	44
Race									
White	—	—	—	55	55	54	54	55	53
Black	—	—	—	54	52	56	50	52	53
12th Grade									
Total	44	48	44	46	46	44	45	45	45
Gender									
Male	52	56	54	55	59	55	56	55	58
Female	36	39	36	36	33	33	36	37	32
Race									
White	43	47	46	48	48	46	49	46	48
Black	49	53	43	43	41	39	39	48	40

Sources: Bachman, J.G., Johnston, L.D., and O'Malley, P.M. *Monitoring the Future: Questionnaire Responses from the Nation's High School Seniors*. 1976, 1981, 1986, 1991, 1992, 1993, 1994, 1995, 1996. Ann Arbor, Mich.: Institute for Social Research, The University of Michigan. 8th and 10th grade 1991 Questionnaire Forms 1 and 2, item A04E; 1992-1996 Questionnaire Forms 1 and 2, item A03E. 12th grade 1991-1996 Questionnaire Form 2, item A02H.

Table SD 2.4.B

Percentage of students in grades 9 through 12 in the United States who report having exercised vigorously three or more times in the past seven days, by gender, grade, and race and Hispanic origin: 1993 and 1995.

	1993			1995		
	Total	Male	Female	Total	Male	Female
Total	66	75	56	64	74	52
Grade						
9	75	81	68	72	80	62
10	70	77	61	69	79	59
11	63	71	53	60	72	47
12	58	70	45	55	67	42
Race and Hispanic origin^a						
White, non-Hispanic	68	76	59	67	76	57
Black, non-Hispanic	60	71	49	53	68	41
Hispanic	59	69	50	57	70	45

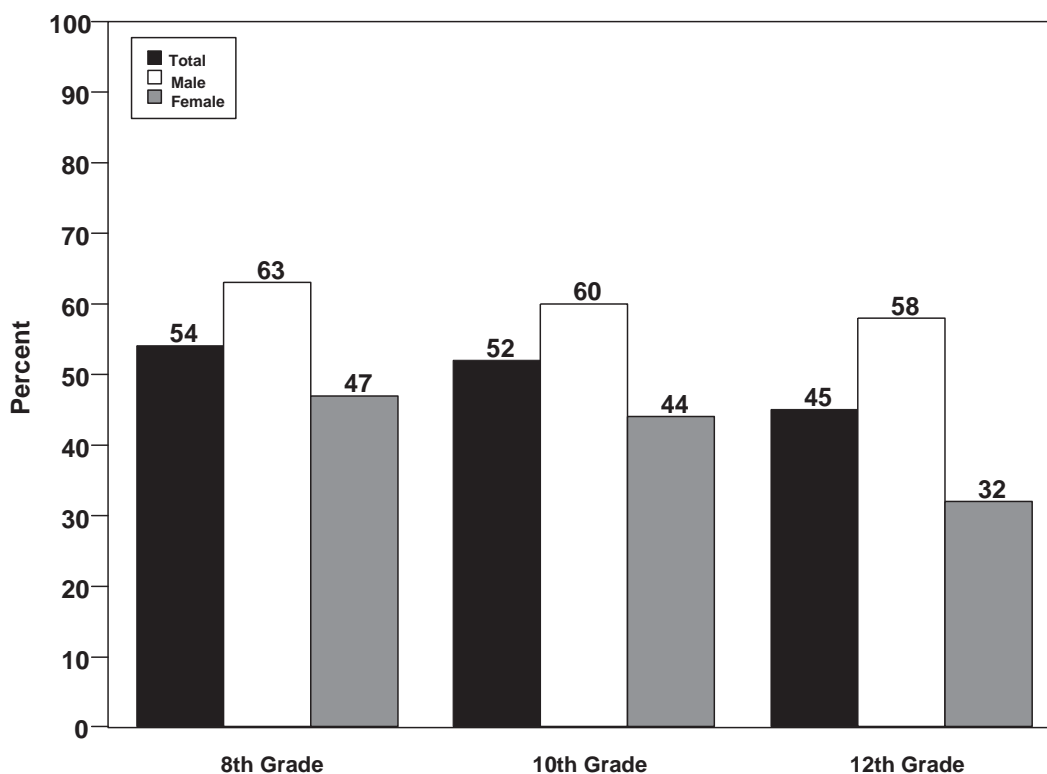
^aEstimates for whites and blacks exclude Hispanics of those races. Persons of Hispanic origin may be of any race.

Note: Vigorous physical exercise is defined as activities that cause sweating and hard breathing for at least 20 minutes.

Sources: Data for 1993: Kann, L., Warren, C.W., Harris, W.A., Collins, J.L., Douglas, K.A., Collins, M.E., Williams, B.I., Ross, J.G., Kolbe, L.J., and State and Local YRBSS (Youth Risk Behavior Surveillance System) Coordinators. "Youth Risk Behavior Surveillance--United States, 1993." In *CDC Surveillance Summaries*, March 24, 1995. *Morbidity and Mortality Weekly Report* 44(SS-1): Table 24; Data for 1995: Kann, L., Warren, C.W., Harris, W.A., Collins, J.L., Williams, B.I., Ross, J.G., and Kolbe, L.J. "Youth Risk Behavior Surveillance--United States, 1995." In *CDC Surveillance Summaries*, September 27, 1996. *Morbidity and Mortality Weekly Report* 45(SS-4): Table 36.

Figure SD 2.4

Percentage of 8th-, 10th-, and 12th-grade students who report that they actively participate in sports or exercise "almost every day", by gender: 1996



Sources: Bachman, J.G., Johnston, L.D., and O'Malley, P.M. *Monitoring the Future: Questionnaire Responses from the Nation's High School Seniors*. 1976, 1981, 1986, 1991, 1992, 1993, 1994, 1995, 1996. Ann Arbor, Mich.: Institute for Social Research, The University of Michigan. 8th and 10th grade 1991 Questionnaire Forms 1 and 2, item A04E; 1992-1996 Questionnaire Forms 1 and 2, item A03E. 12th grade 1991-1996 Questionnaire Form 2, item A02H.

SD 2.5

SUFFICIENT HOURS OF SLEEP

Sufficient hours of sleep on a regular basis is important for optimum functioning throughout the day. Getting enough sleep is also linked to physical health. Individuals who are chronically sleep-deprived may be more susceptible to physical illness and more prone to accidents due to lack of concentration or inattention. Research indicates that sleep loss has a negative effect on motor performance, cognitive function, and mood.²⁵ For adolescents, not getting enough sleep may translate into lower performance in school or may affect socialization.

The number of hours that prove to be sufficient may differ between ages and individuals. A recent survey indicates that males ages 12 through 17 average 65.8 hours of sleep per week and females of the same age average 66.8 hours per week (approximately 9.5 hours of sleep a night for both sexes).²⁶ Analyses based on data from the 1995 National Longitudinal Study of Adolescent Health allow for an examination of youth perceptions of whether they obtain the sleep they need. In 1995, 74.1 percent of youth ages 12 through 17 reported that they got enough sleep (see Table SD 2.5).

Differences by Gender. Adolescent males are more likely to report getting enough sleep than their female peers. In 1995, 76.4 percent of males ages 12 through 17 reported getting enough sleep, compared with 71.8 percent of females.

Differences by Age and Grade. In 1995, approximately four out of every five (82.2 percent) youth ages 12 through 14 reported getting enough sleep, compared with 70.5 percent of youth ages 15 through 17. Similarly, in grades 7 and 8, 83.3 percent of students reported getting enough sleep, compared with 72.5 percent of students in grades 9 and 10, and 66.5 percent of students in grades 11 and 12.

Differences by Family Structure. Lower percentages of adolescents who live with a single father reported getting enough sleep (65.6 percent), compared with adolescents in other living arrangements (see Figure SD 2.5).

²⁵Pilcher, J., and Huffcut, A. 1996. "Effects of Sleep Deprivation on Performance: A Meta-analysis." *Sleep* 19(4): 318-26.

²⁶Results from the Americans' Use of Time Project, University of Maryland as reported in Robinson, J.P., and Bianchi, S. 1997. "The Children's Hours." *American Demographics* 12.

Table SD 2.5

Percentage of adolescents ages 12 through 17 in the United States who report that they get enough sleep, by gender, age, grade, race and Hispanic origin,^a and family structure: 1995

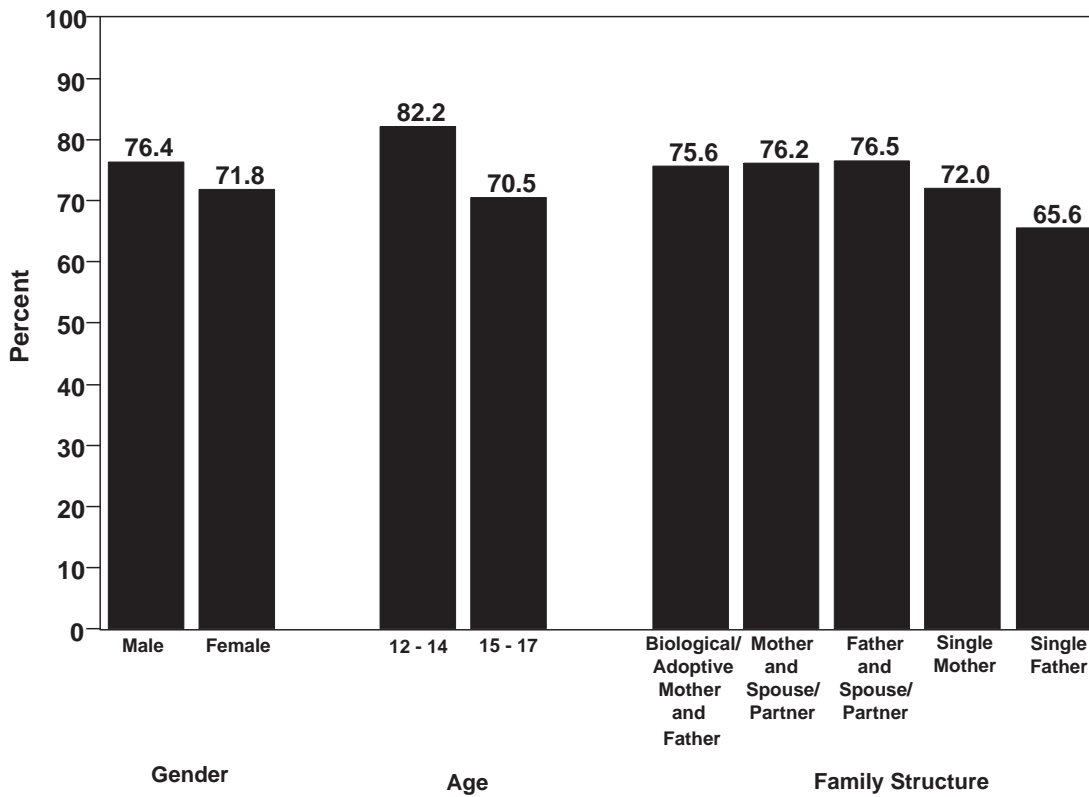
	<u>1995</u>
Total	74.1
Gender	
Male	76.4
Female	71.8
Age	
12-14	82.2
15-17	70.5
Grade	
7-8	83.3
9-10	72.5
11-12	66.5
Race and Hispanic Origin^a	
White, non-Hispanic	75.3
Black, non-Hispanic	72.8
Hispanic	73.5
Family Structure	
Biological/Adoptive Mother and Father	75.6
Mother and Spouse/Partner	76.2
Father and Spouse/Partner	76.5
Single Mother	72.0
Single Father	65.6

^aEstimates for whites and blacks exclude Hispanics of those races. Persons of Hispanic origin may be of any race.

Source: The National Longitudinal Study of Adolescent Health (Add Health) Wave 1, 1995, tabulations by Child Trends, Inc.

Figure SD 2.5

Percentage of adolescents ages 12 through 17 in the United States who report that they get enough sleep, by gender, age, and family structure: 1995



Source: The National Longitudinal Study of Adolescent Health (Add Health) Wave 1, 1995, tabulations by Child Trends, Inc.

