Carbon-Lehigh Intermediate Unit #21
2025 PA Youth Survey (PAYS) Analysis

WARNING: This is a data heavy session.

https://projectawarepa.findhelp.com/

CLIU SEW - Mental Health

Dr. Michael Heater Jr. Ed. D.
Coordinator C&I Department CLIU #21
PA Region 3 SEW Lead
heaterm@cliu.org
@mheat33

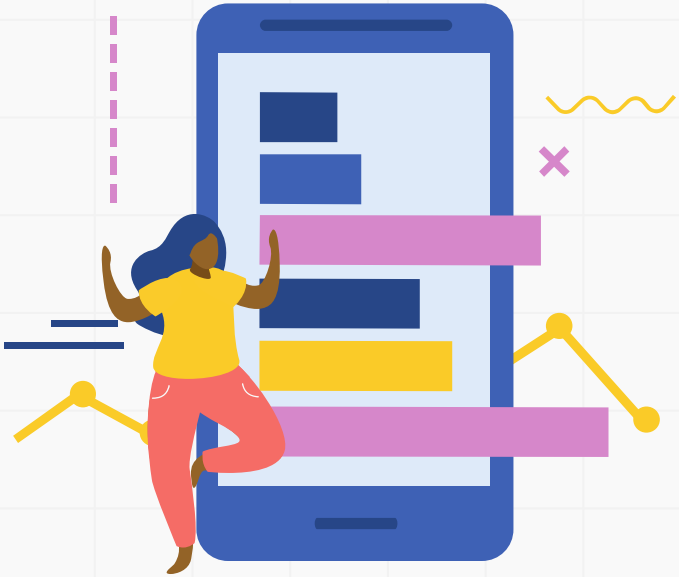
Jason Savenelli, LPC
Behavioral Health Supervisor
Project Aware Manager
Carbon Lehigh Intermediate Unit 21

Today’s Session

Overview, Purpose and Background of PA Youth Survey

Breakdown and Analysis of the 8 sections included in the CLIU report

Opportunity for discussion surrounding the data and findings across the region

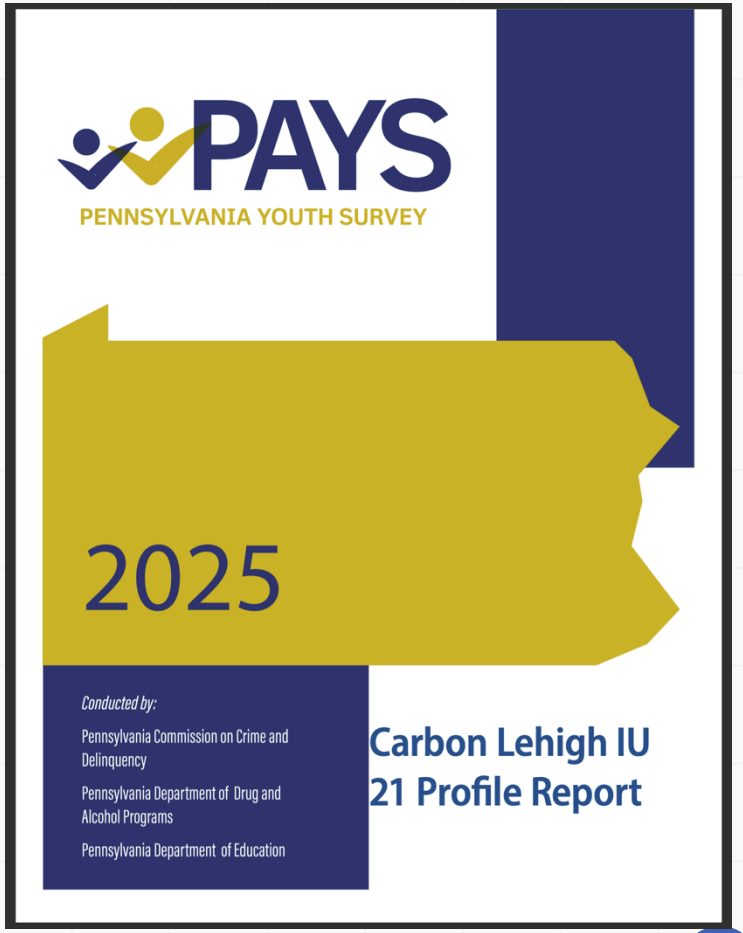


pennsylvania
COMMISSION ON CRIME AND DELINQUENCY

pennsylvania
DEPARTMENT OF DRUG AND ALCOHOL PROGRAMS

pennsylvania
DEPARTMENT OF EDUCATION

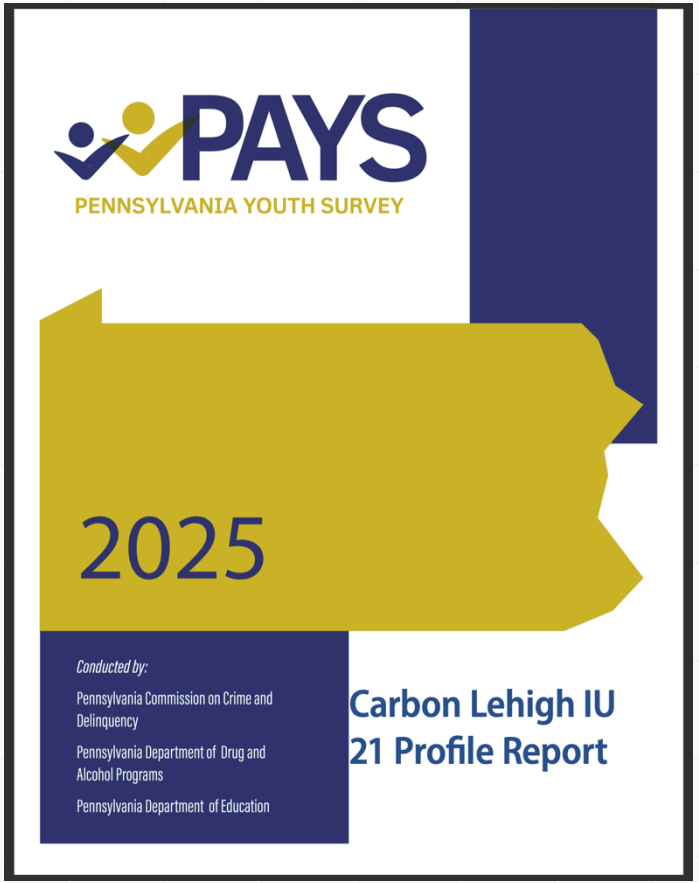
Statewide Collaboration



PAYS Overview

Gather information about their knowledge, attitudes, and behaviors towards alcohol, tobacco, and other drug use to help communities address root causes of antisocial behavior.

1989 - 2023 biennial
Grades 6,8,10, & 12
Paper/pencil or online
Voluntary - anonymous - confidential
3rd addition of IU specific report



In what ways can you utilize the PAYS survey in your building and/or districts?

Food for thought

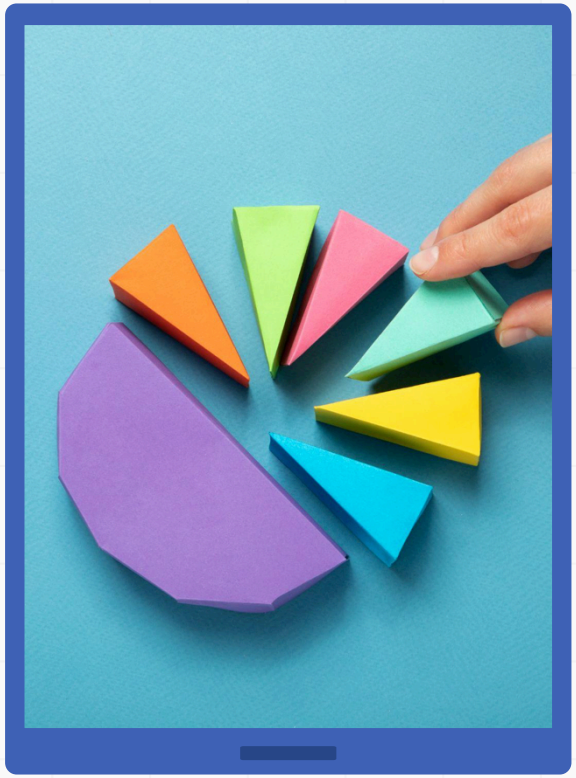
PAYS as a tool

PAYS is a primary tool in Pennsylvania's prevention approach of using data to drive decision making.

By looking not just at rates of problem behaviors but also at the root causes of those behaviors, PAYS allows schools and communities to address reasons (such as a lack of commitment to school) rather than only looking at the symptoms after the fact (like poor grades).

This approach has been repeatedly shown in national research studies to be the most effective in helping youth develop into healthy, productive members of their society.

Participation



Statewide

267,379 valid surveys across PA

74.4% Participation Rate

1,048 Schools participated

IU 21

12,466 valid surveys

14 School Districts

4 Charter Schools

Validity

In order to ensure the highest level of confidence in the survey results, measures are implemented to retain only valid surveys. The following validity checks were utilized:

1. the student indicated that they had used a fictitious drug (2,421 surveys statewide were identified as dishonest with this check)

2. the student reported an improbably high level of multiple drug use (847 surveys statewide)

3. the student reported an age that was inconsistent with their grade or the grades served by their school (1,040 surveys statewide)

Invalid and incomplete surveys were eliminated from the data and are not included in the final analyses. Of the 271,111 survey questionnaires from grades 6, 8, 10, and 12 completed and returned to Bach Harrison for analysis, 3,732 (1.3%) were eliminated for meeting one or more of the above criteria.

The results within this IU report are based on 12,466 surveys of 12,668 total administered. .

01 Demographic

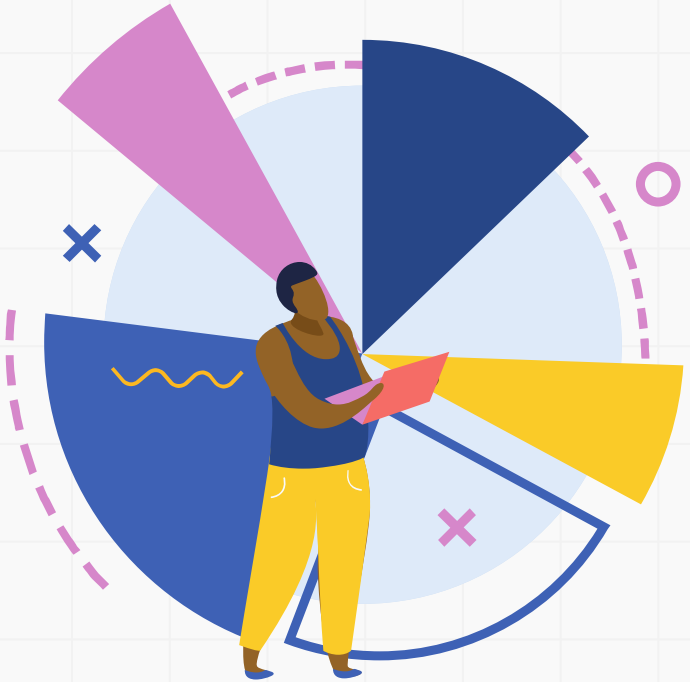
Demographics

IU 21

Significant Increase in number of responses (7-8k) compared to 2021

	IU 2025		State 2025	
	Number	Percent	Number	Percent
Survey respondents				
All	12,466	100.0	267,379	100.0
Survey respondents by grade				
6	3,550	28.5	72,102	27.0
8	3,722	29.9	74,972	28.0
10	2,853	22.9	65,178	24.4
12	2,341	18.8	55,127	20.6
Survey respondents by gender				
Female	5,913	48.7	126,638	48.4
Male	6,070	50.0	130,997	50.1
Other	167	1.4	3,959	1.5
Survey respondents by race*				
Asian	493	4.0	11,432	4.3
Black, African American	793	6.4	21,745	8.1
Hispanic or Latino	2,910	23.3	24,545	9.2
White	5,089	40.8	159,135	59.5
Middle Eastern or North African	329	2.6	2,343	0.9
Native Hawaiian or Other Pacific Islander	13	0.1	308	0.1
Alaska Native/American Indian/Native American	78	0.6	1,657	0.6
Multi-racial	1,745	14.0	28,336	10.6
I don't know what this question is asking	531	4.3	9,212	3.4
Race Unmarked	1,016	8.2	17,878	6.7

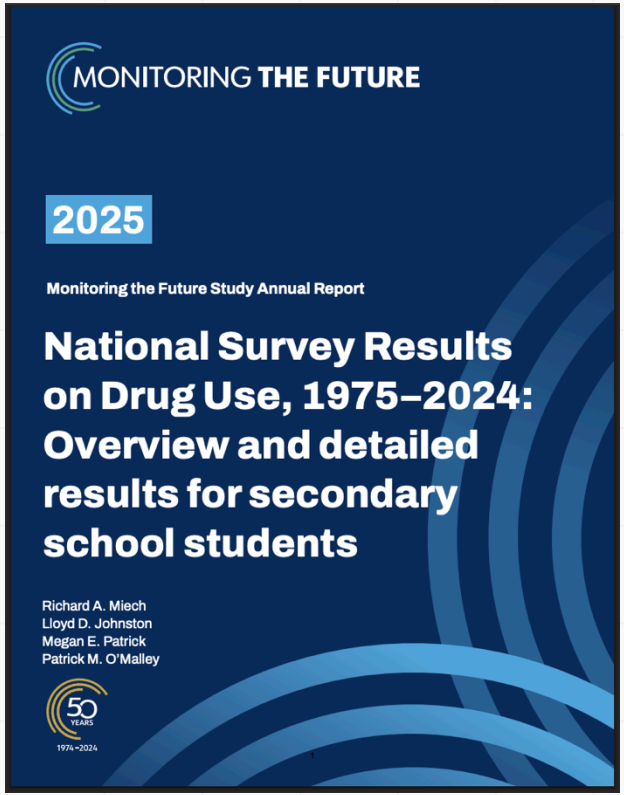
02 Substance Abuse



Nation Trends ATODs

Monitoring the Future Data

The Monitoring the Future (MTF) survey project, which provides prevalence–of–use information for ATODs from a nationally representative sample of 8th, 10th, and 12th graders, is conducted annually by the Survey Research Center of the Institute for Social Research at the University of Michigan (see www.monitoring the future.org). For a review of the methodology of this study, please see https://monitoringthefuture.org/about/.

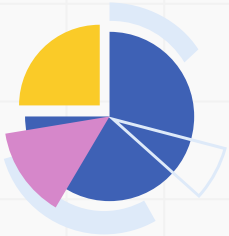


Measurement

Alcohol, tobacco, and other drug (ATOD) use and access is measured in PAYS by a set of 34 questions. The questions are similar to those used in the Monitoring the Future study, a nationwide study of drug use by middle and high school students.

Lifetime Use

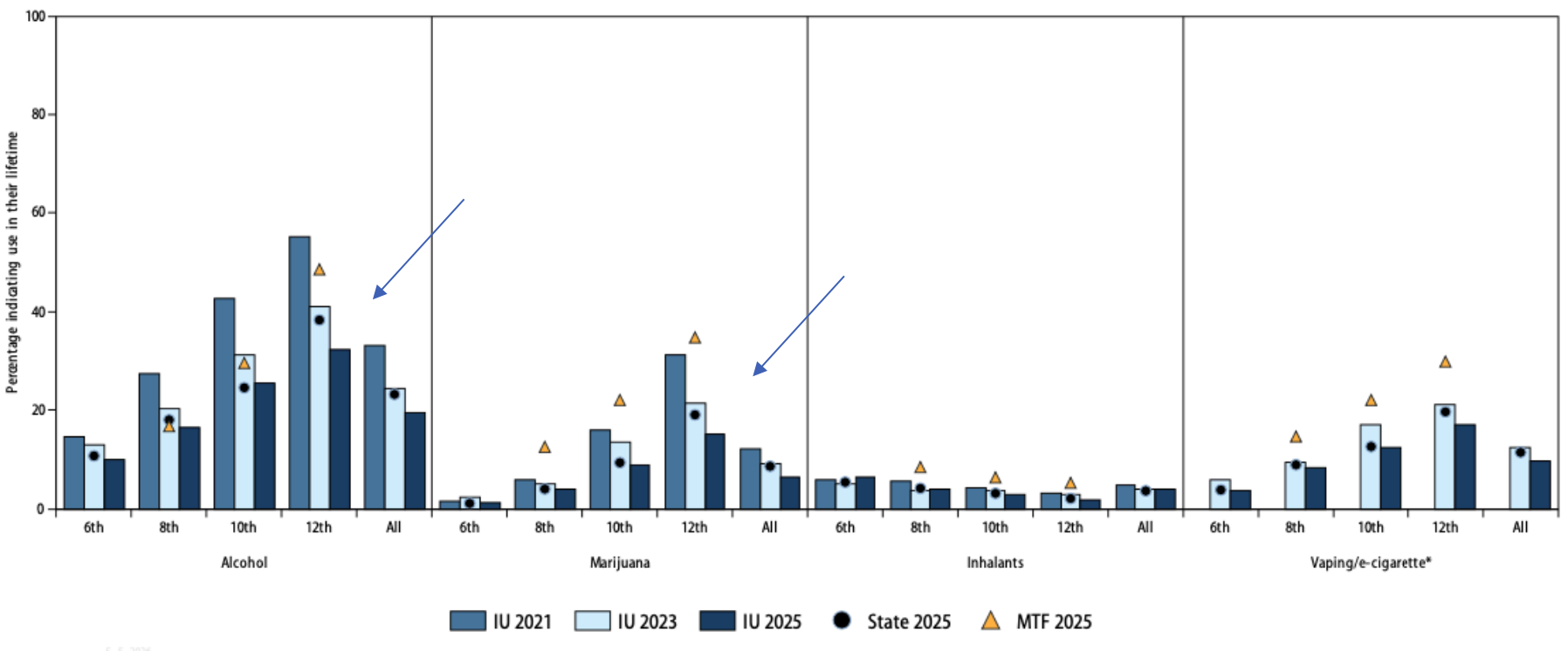
Lifetime use is a measure of the percentage of students who tried the particular substance at least once in their lifetime and is used to show the percentage of students who have had experience with a particular substance. Lifetime prevalence of use (whether the student has ever used the drug) is a good measure of student experimentation with a given substance.



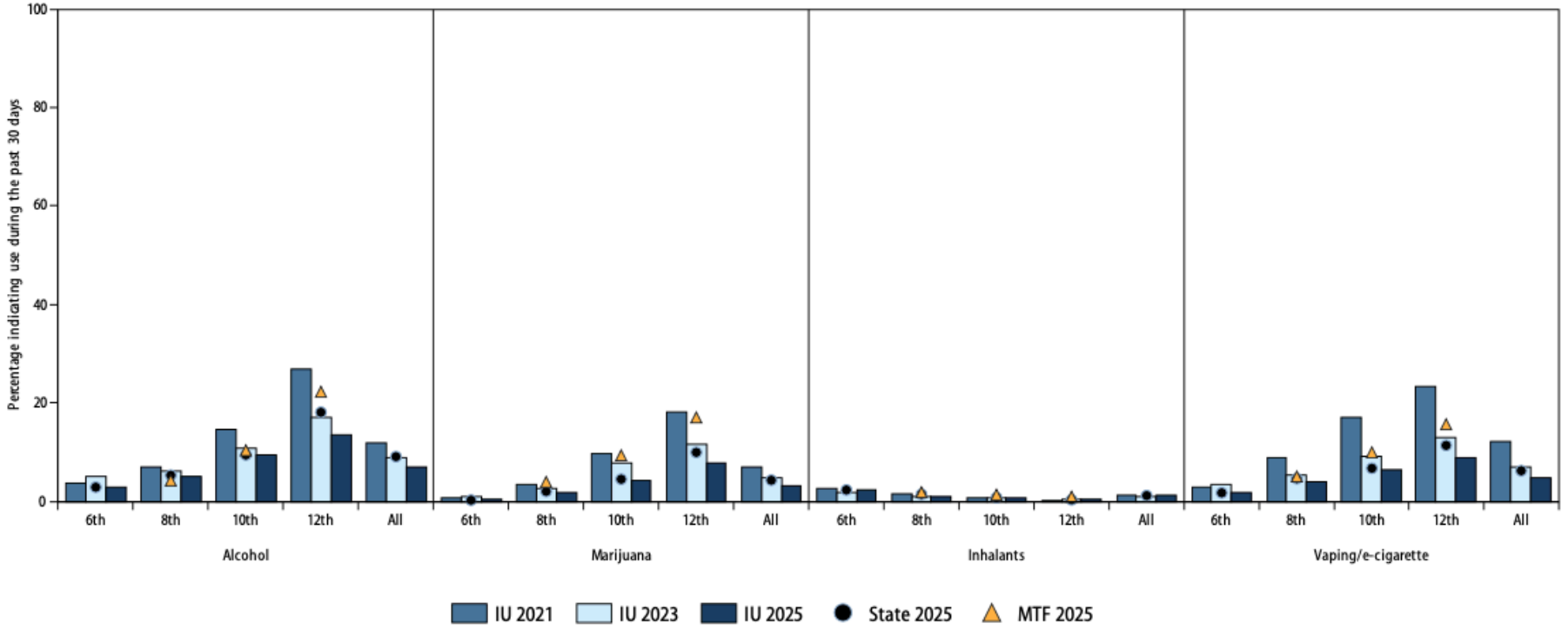
30 Day Use

30-day use (whether the student has recently used the drug) is a more sensitive measure of current activities.

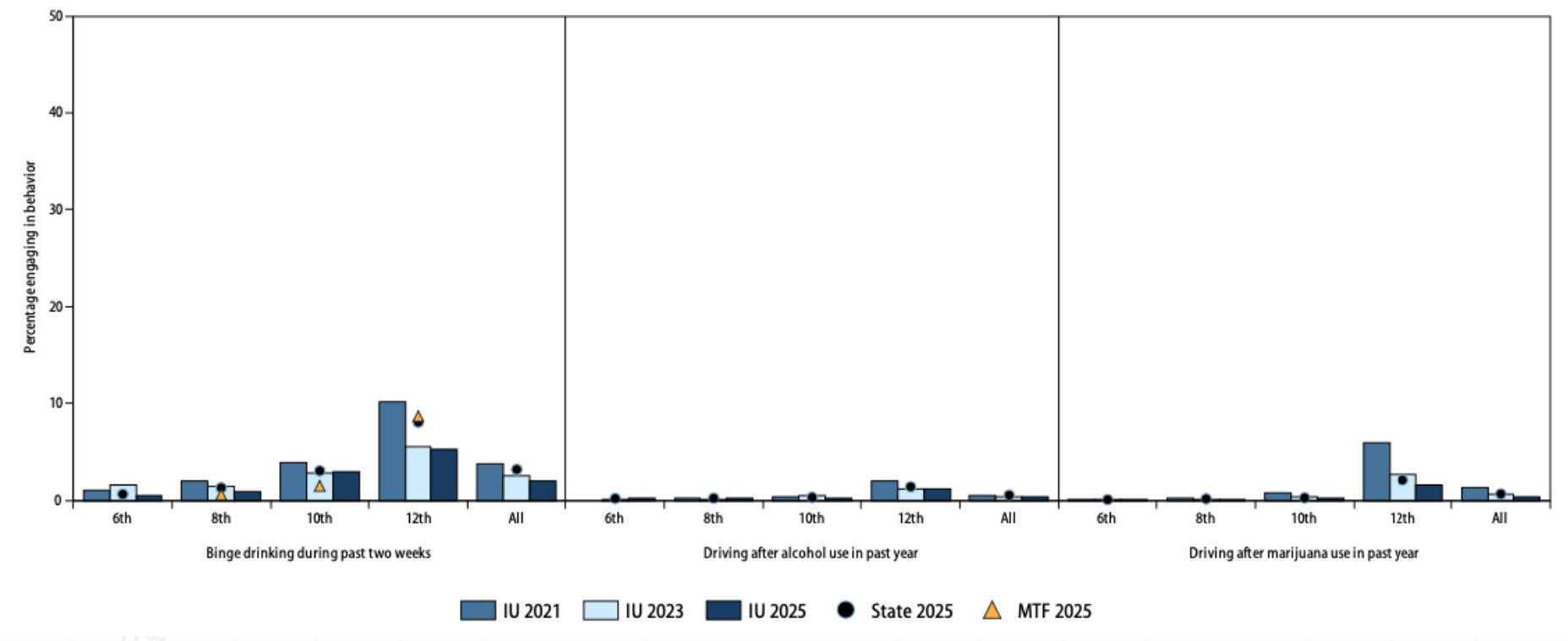
Lifetime Use - Alcohol, Marijuana, Inhalants, Vaping



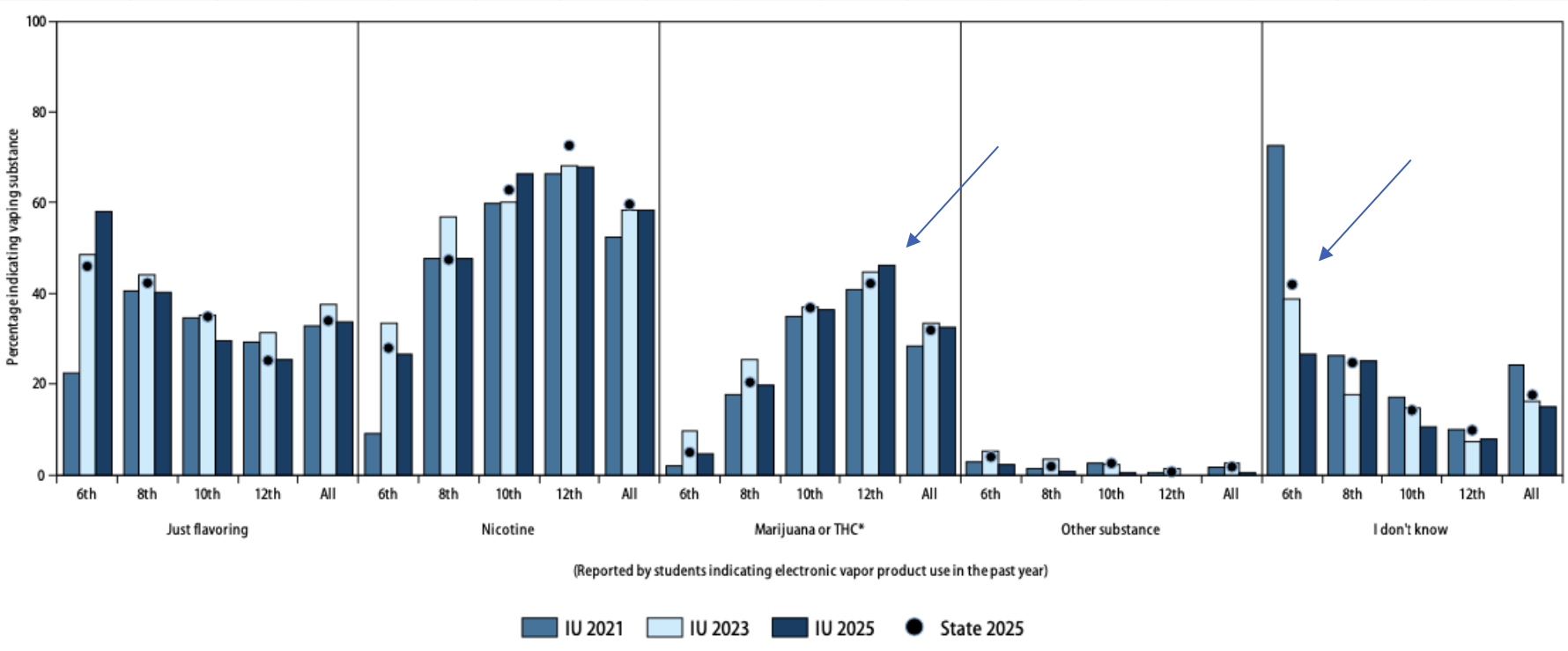
30 Day Use - Alcohol, Marijuana, Inhalants, Vaping



Binge Drinking and Driving Under



Vaping substances used by students indicating electronic vaping product use in the past year Carbon Lehigh IU 21 2025 Pennsylvania Youth Survey



Other Drugs - IU 21

Prescription and Performance Enhancing Drugs including PEDs/Steroids (0.8%), Prescription Pain Relievers (3.6%), Prescription Tranquilizers (0.8%), Prescription Stimulants (1.4%) for all student groups across lifetime use.

*All within one-tenth percent v. state average

Hallucinogens (Acid, Shrooms, Ecstacy, Molly) (1.0%),

Heroin, Cocaine, Crack, Meth (0.4%)

Synthetic Drugs including K2, Spice, Fake Weed, Bath Salts (1.2%)

*All within three-tenths percent v. state average

Breakout Time

Analyze the recent trends presented.

1. Are they consistent with your school building and/or district?
2. Are there are other behavioral patterns related to substance abuse that you see?
3. Has your school or district taken actions to prevent substance abuse? If so, what?

03 Mental Health

Mental Health: Summary of Key Findings

Prevalence of Distress:

Emotional distress is widespread; a significant proportion of surveyed students report ongoing depression, hopelessness, self-harm, or suicidal ideation.

Support System Disconnect:

Students rely predominantly on peers and family members; engagement with school personnel or mental health professionals remains exceptionally low.

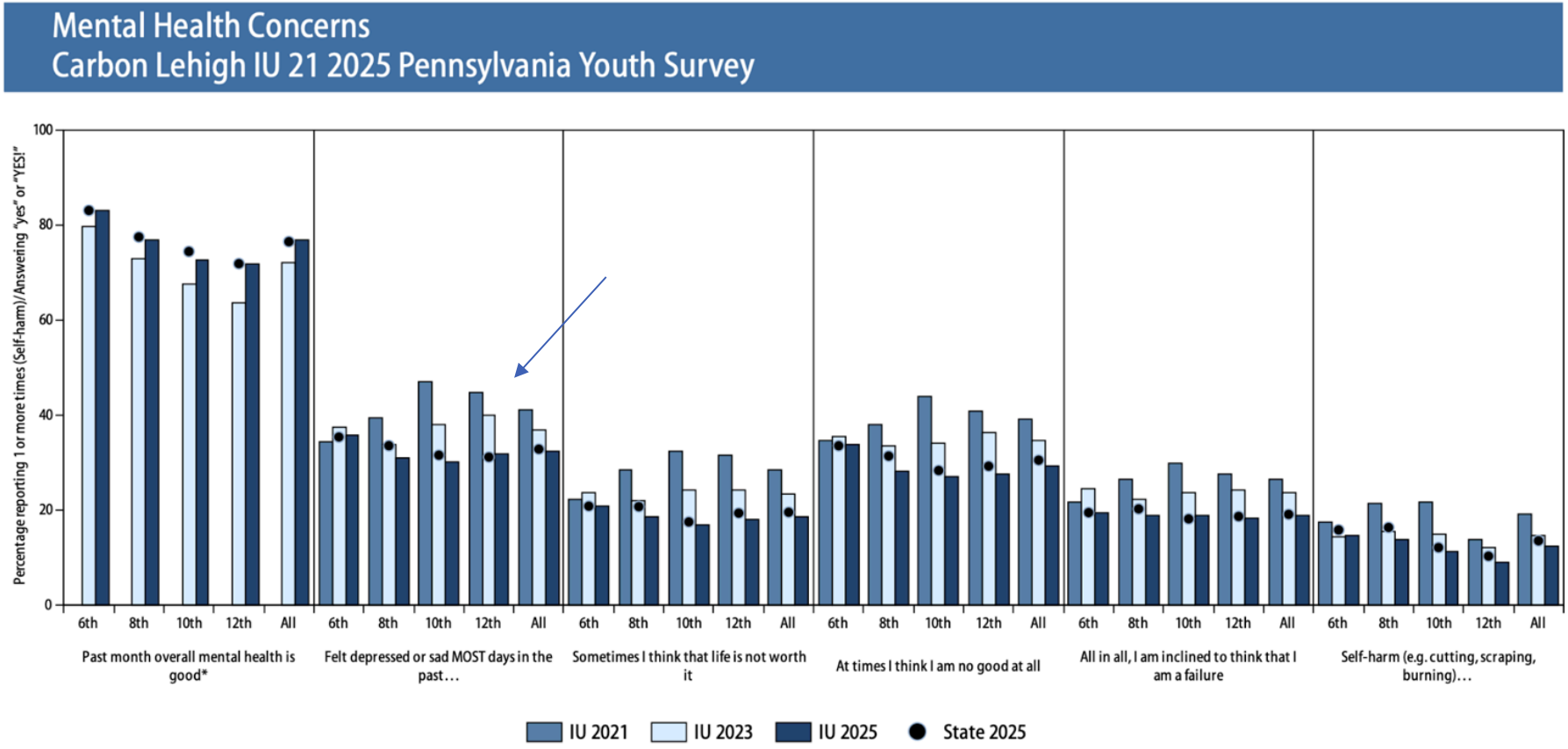
Co-Occurring Risk Factors:

High depressive symptoms directly correlate with exponential increases in substance use and exposure to bullying.

Core Mandate:

Prevention and intervention efforts must combine early identification, mental health literacy for families/peers, and anti-bullying climate strategies.

Mental Health Concerns



Mental Health Indicators

32.2% **Showing Depressive Symptoms**

29.3% **Showing Low Self-Worth**

20% **Diagnosable Mental Health Disorder**

Mental health concerns are **not isolated to a small subset** of students.

Emotional distress impacts a broad segment of the student population, requiring universal tier-1 and targeted tier-2 interventions.

Suicide Risk and Self harm

23.4% Sadness/ Hopelessness for 2+ weeks

19% Engaged in self-harm behaviors (cutting, scraping, burning)

13% Seriously considered suicide

10% Made a plan

4.7% Attempted suicide

Suicide and Self Harm: Analysis

Self Harm Exceeds Suicide Attempts

Significant emotional pain is widespread even when it does not escalate to suicidal behavior.

Focus:

Early intervention must address coping mechanisms and emotional distress prior to crisis escalation.

Support Seeking Behavior

40% Go to Peers

36% Go to Parents or Caregivers

Less than 10% Go to Staff, Counselors, Teachers

Friends are the primary line of support but usually lack crisis intervention skills. Caregivers are also primary but sometimes lack the same skills.

Action Item: Priorities must include **Mental Health Literacy Training** (e.g., QPR) for staff, families, and peer groups. Aevidum or similar peer support groups must be encouraged. Family engagement can be expanded.

Mental Health and Substance Use Connection

Students with high depressive symptoms show higher odds of substance use compared to their peers.

Substance use functions as a coping skill.

Recommendation:
Screen for both and use co-occurring prevention models.

Alcohol	4x More Likely
Marijuana	8x More Likely
Cigarettes	12x More Likely

Impact of Bullying on Mental Health

45.1%	Sadness/ Hopelessness for 2+ weeks	29.7 %	Seriously considered suicide
23.3%	Made a plan	9.7%	Attempted suicide

Bullying: Analysis

Depression related to bullying shows nearly double the serious related issues (sadness, suicidal thinking and attempts) compared to baseline

Focus:

Bullying is a direct driver of severe mental distress. Improving school climate is a primary suicide prevention strategy.

Major Themes and Implications

Early Detection

Screen and identify risk before crisis.
Universal screening at tier 1.

Build Resiliency

Enhance Peer and Caregiver support and school climate

Integrated Response

Align Mental Health, Substance Abuse Treatment, and school climate plans.

Community Literacy

Educate parents and peers on warning signs and basic ways to make referrals

Breakout Time

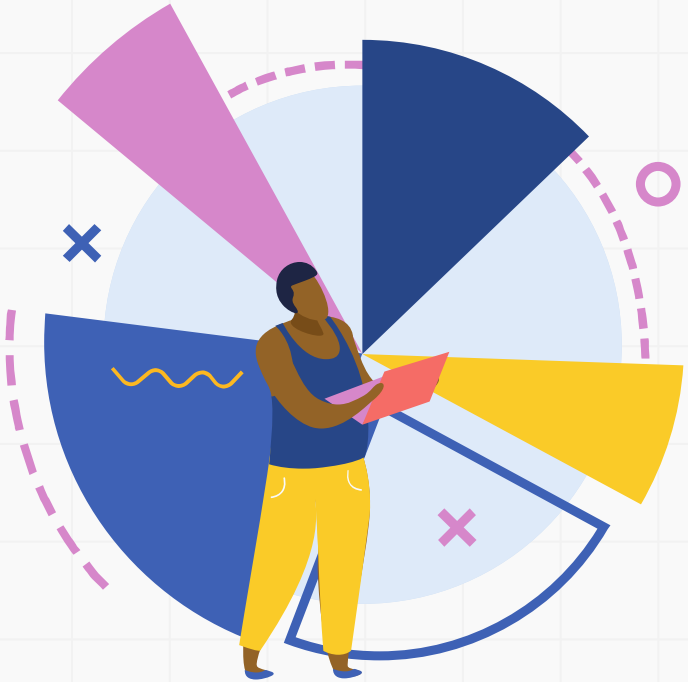
Analyze the recent trends presented.

1. Are they consistent with your school building and/or district?
2. Are there are other behavioral patterns related to mental health that you see?
3. Has your school or district taken actions to support mental wellness? If so, what?

04

Screen Time

*New to 2025



Screen Time

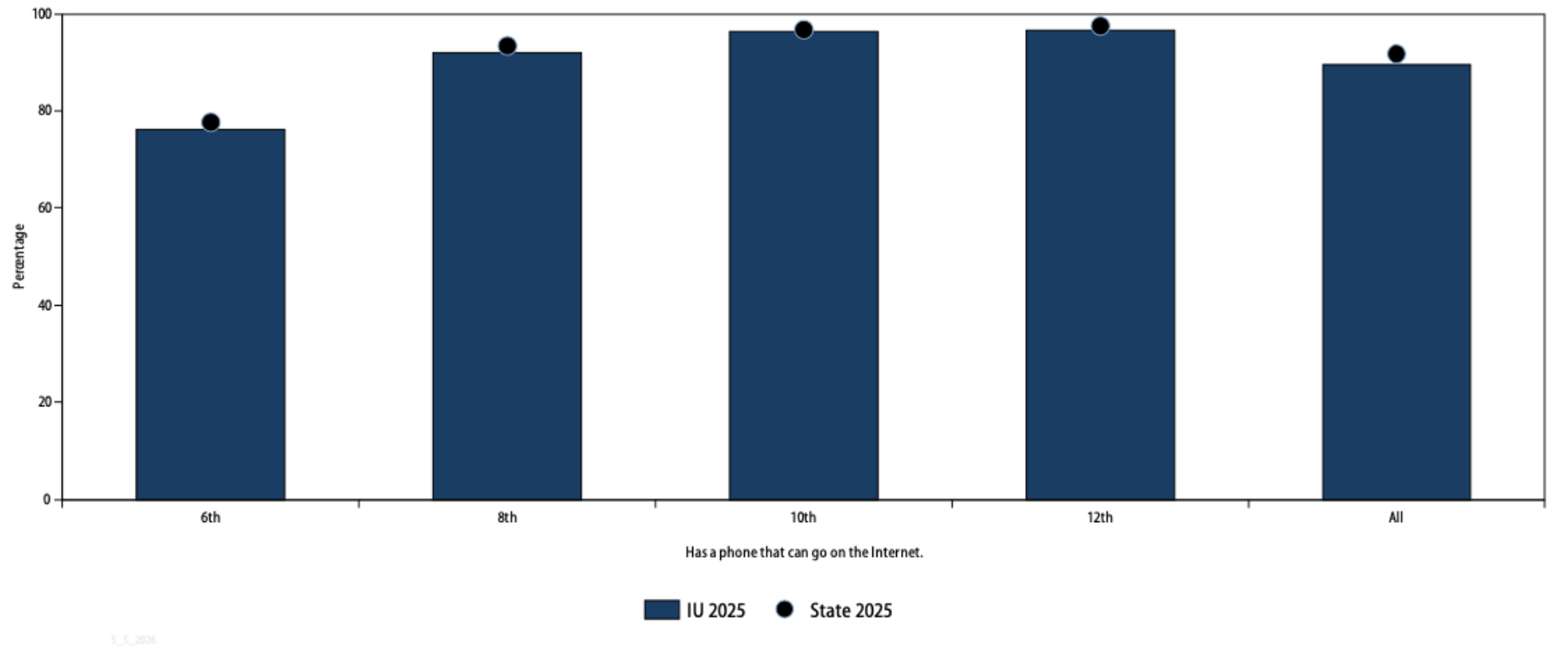
Excessive Use

Excessive screen time or frequent exposure to negative online interactions can contribute to increased stress, disrupted sleep, and difficulty maintaining focus at school. Extended time on social media may expose children and adolescents to content that heightens anxiety or lowers self-esteem. Screen use —particularly before bedtime—can interfere with healthy sleep routines, which can affect concentration, academic performance, and overall well-being. Encouraging balanced and mindful use helps reduce these risks and supports healthier online habits.

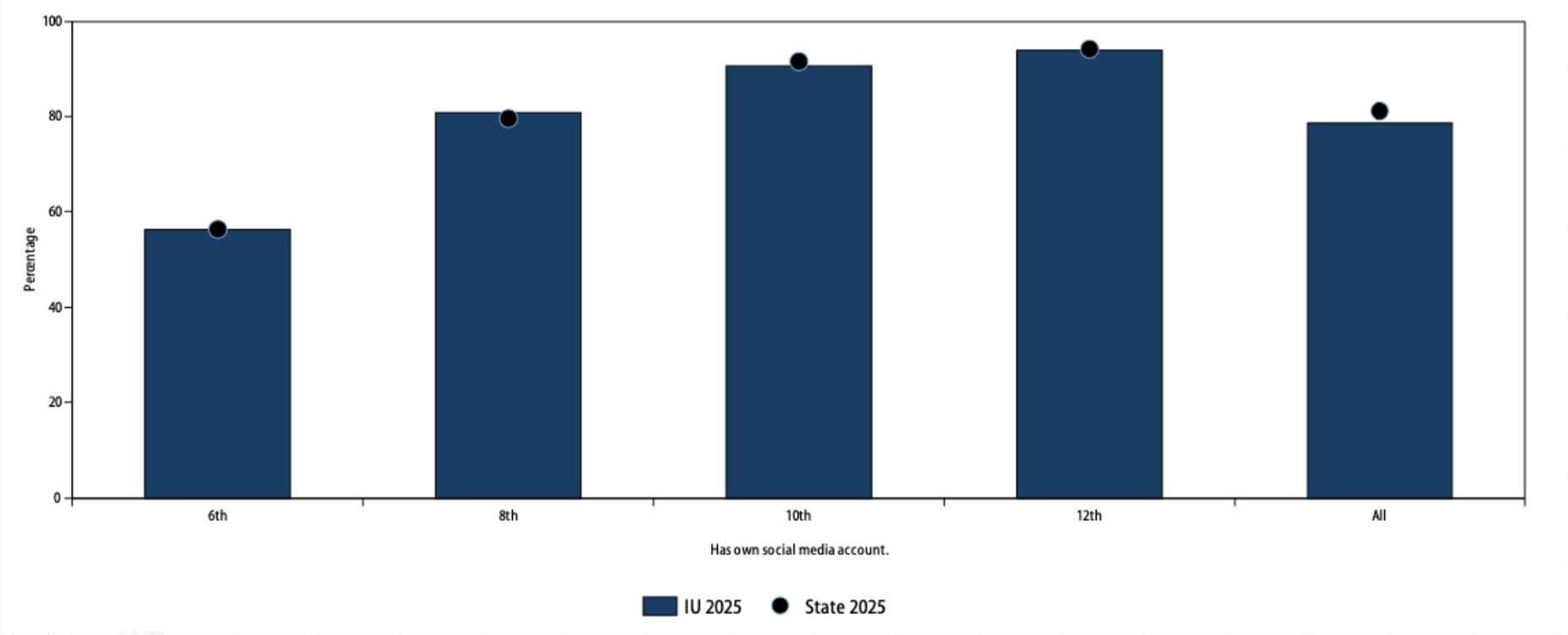
Benefits of Use

When used in moderation, technology can support learning, creativity, and communication. Online platforms may help young people build social confidence, practice self-expression, and engage with diverse perspectives. For some teens, moderated online spaces can also provide opportunities to connect with peers, seek support, and participate in activities aligned with their interests.

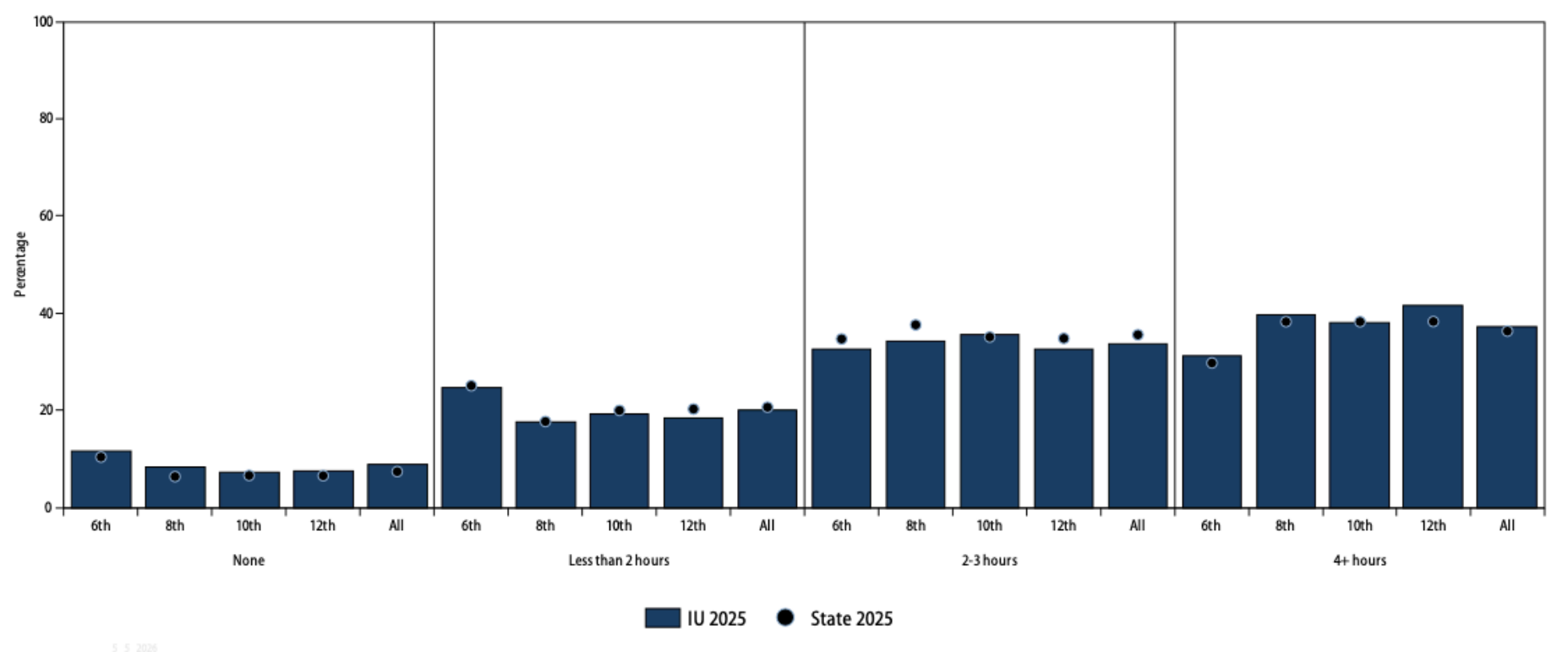
Internet Capable Phone



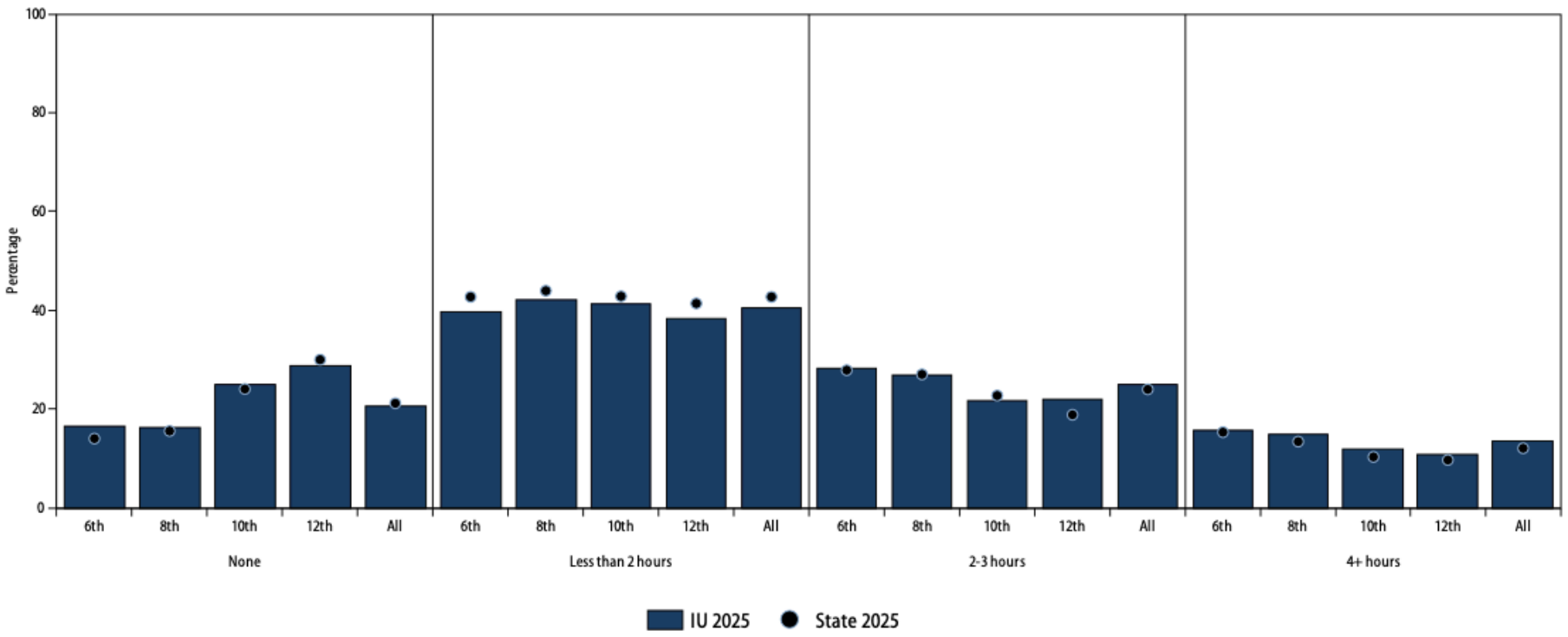
Social Media Account



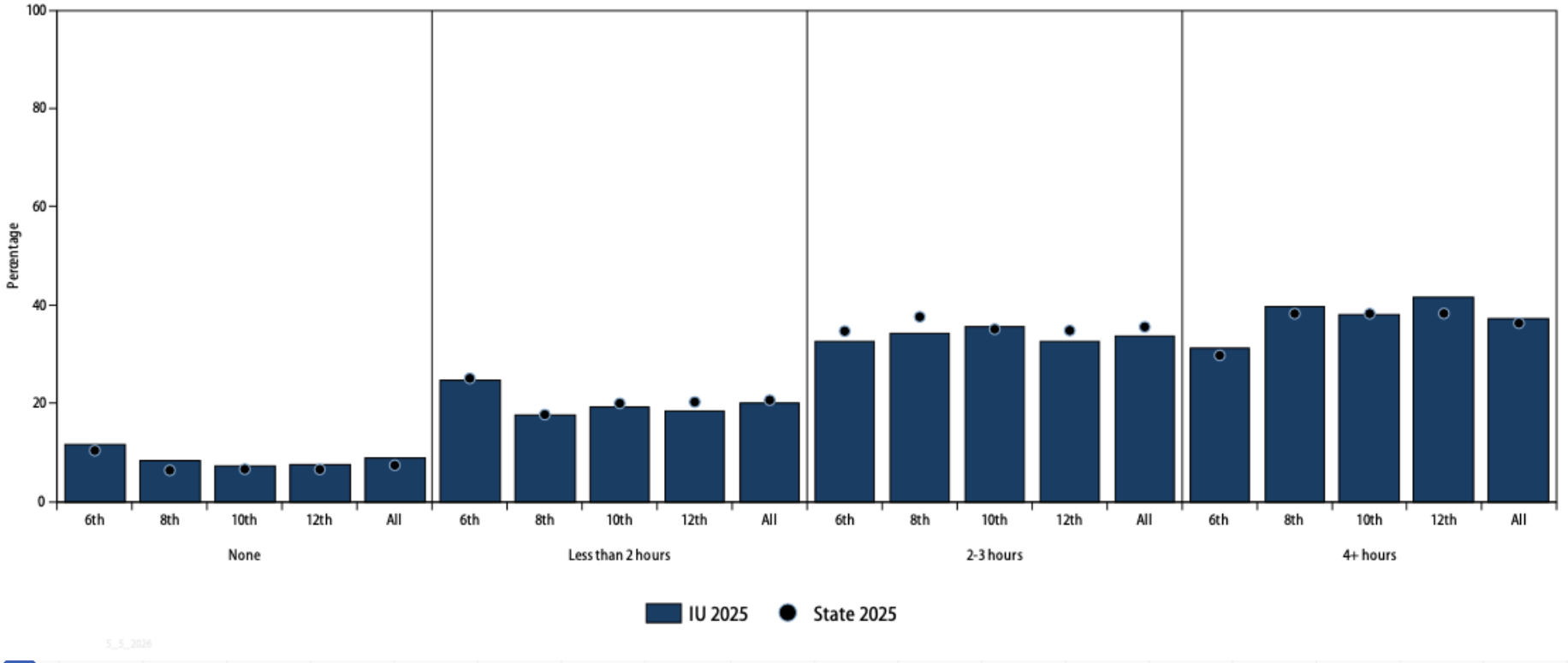
Hours Spent on Social Media



Hours spent playing games on



Total electronic device usage per school day (not schoolwork)



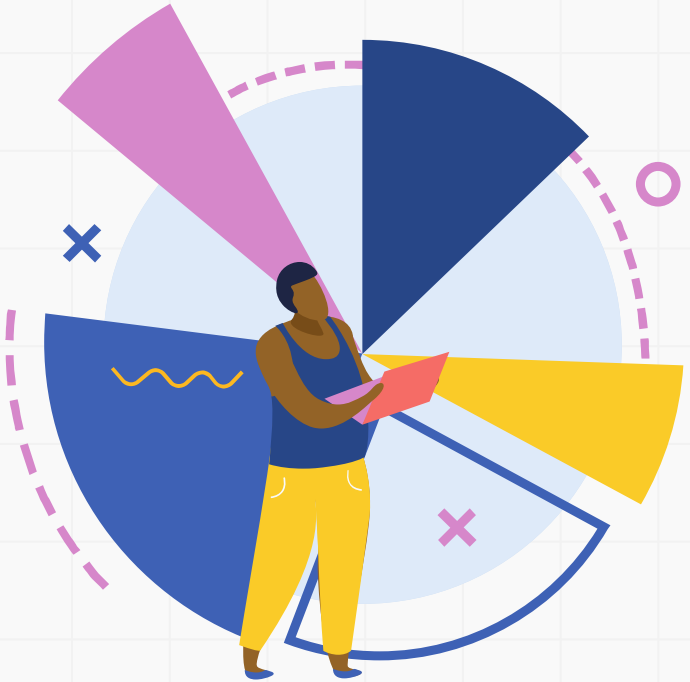
Breakout Time

Analyze the recent trends presented.

1. How has screen time impacted learning and interaction in your school setting?
2. In what ways can we model, teach, and reinforce positive use of technology in our school systems?

05

Gambling

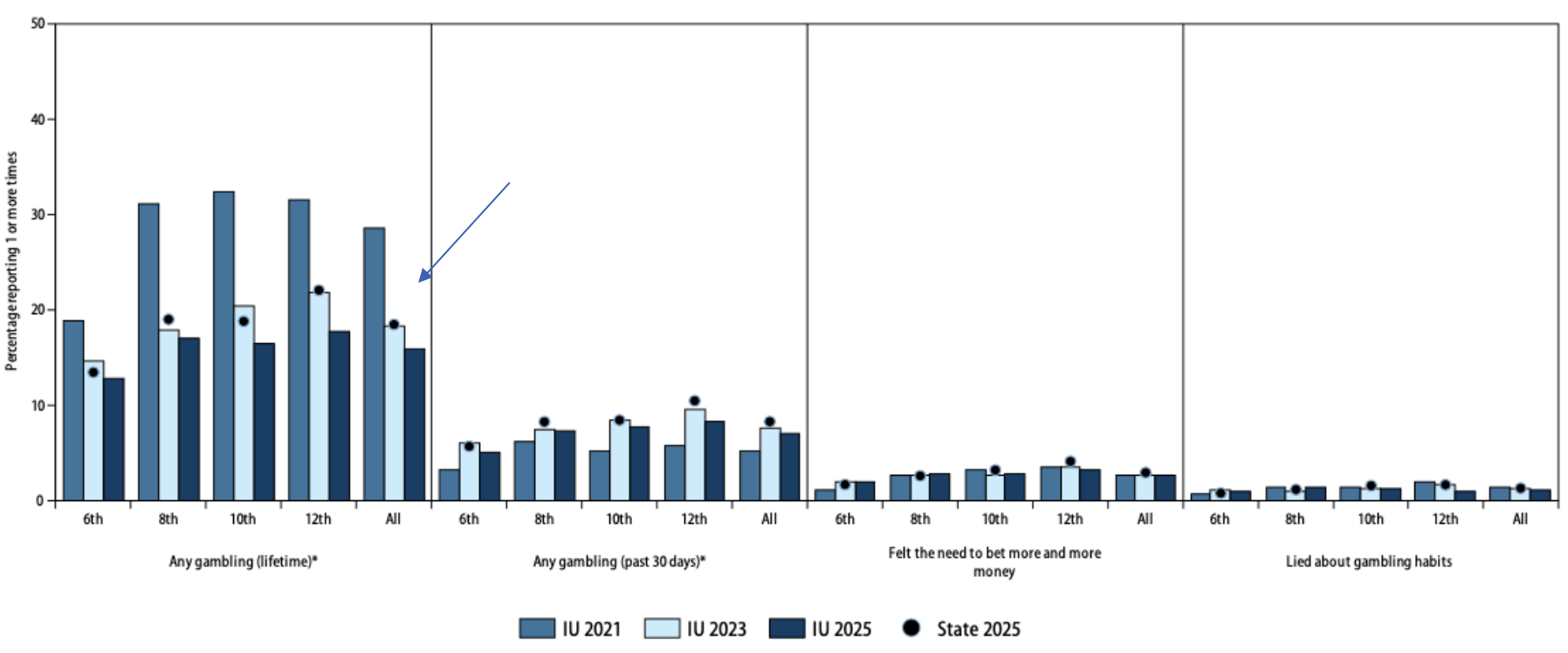


Gambling

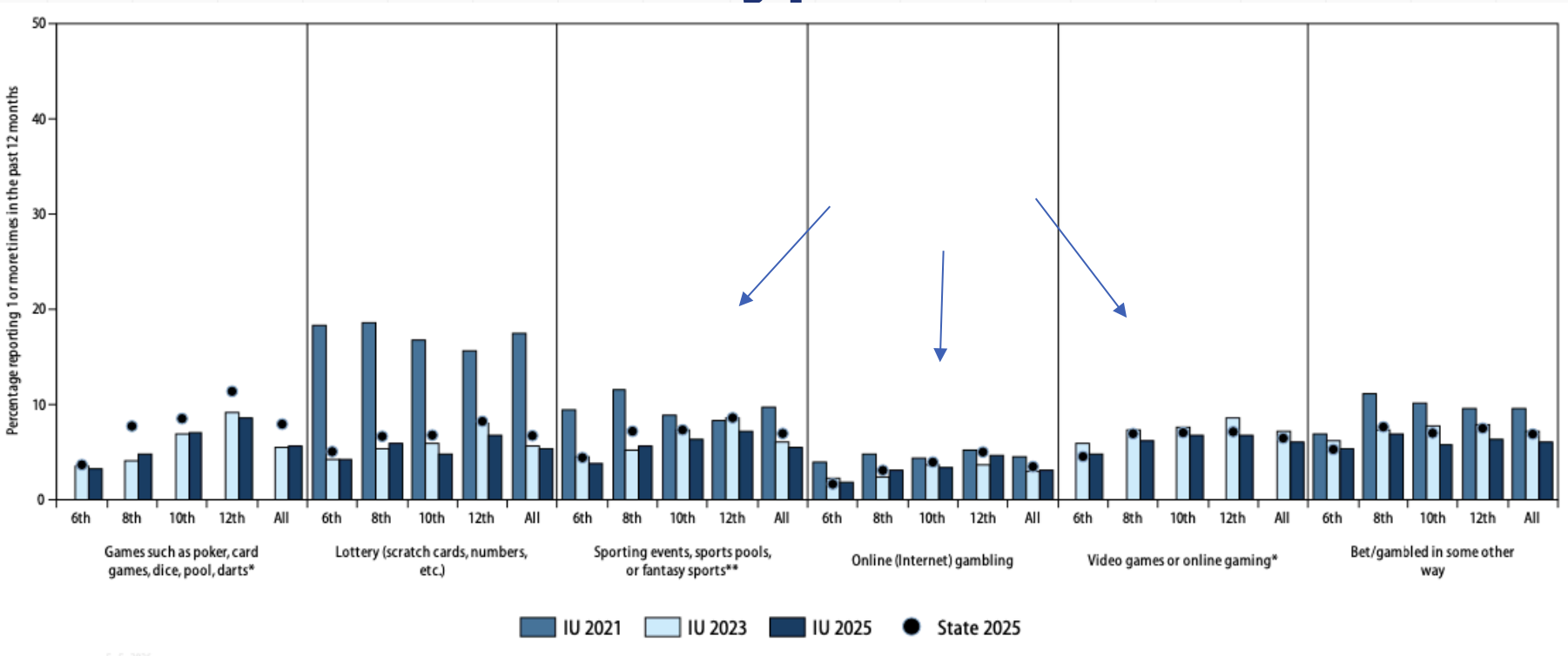
Even though gambling activities are legally restricted to adults, there is clear evidence that underage youth actively participate in gambling.

Despite being promoted as a harmless form of entertainment, gambling operates on the same reward pathways and the same neurotransmitters as ATOD addiction. Youth gambling is associated with alcohol and drug use, truancy, low grades, and risk-taking behavior.

Frequency


Percentage reporting 1 or more times
50
40
30
20
10
0
6th
8th
10th
12th
All
Any gambling (lifetime)*
Any gambling (past 30 days)*
Felt the need to bet more and more money
Lied about gambling habits
IU 2021
IU 2023
IU 2025
State 2025

Type


Percentage reporting 1 or more times in the past 12 months
50
40
30
20
10
0
6th
8th
10th
12th
All
Games such as poker, card games, dice, pool, darts*
Lottery (scratch cards, numbers, etc.)
Sporting events, sports pools, or fantasy sports**
Online (Internet) gambling
Video games or online gaming*
Bet/gambled in some other way
IU 2021
IU 2023
IU 2025
State 2025

06 Community and School Climate and Safety

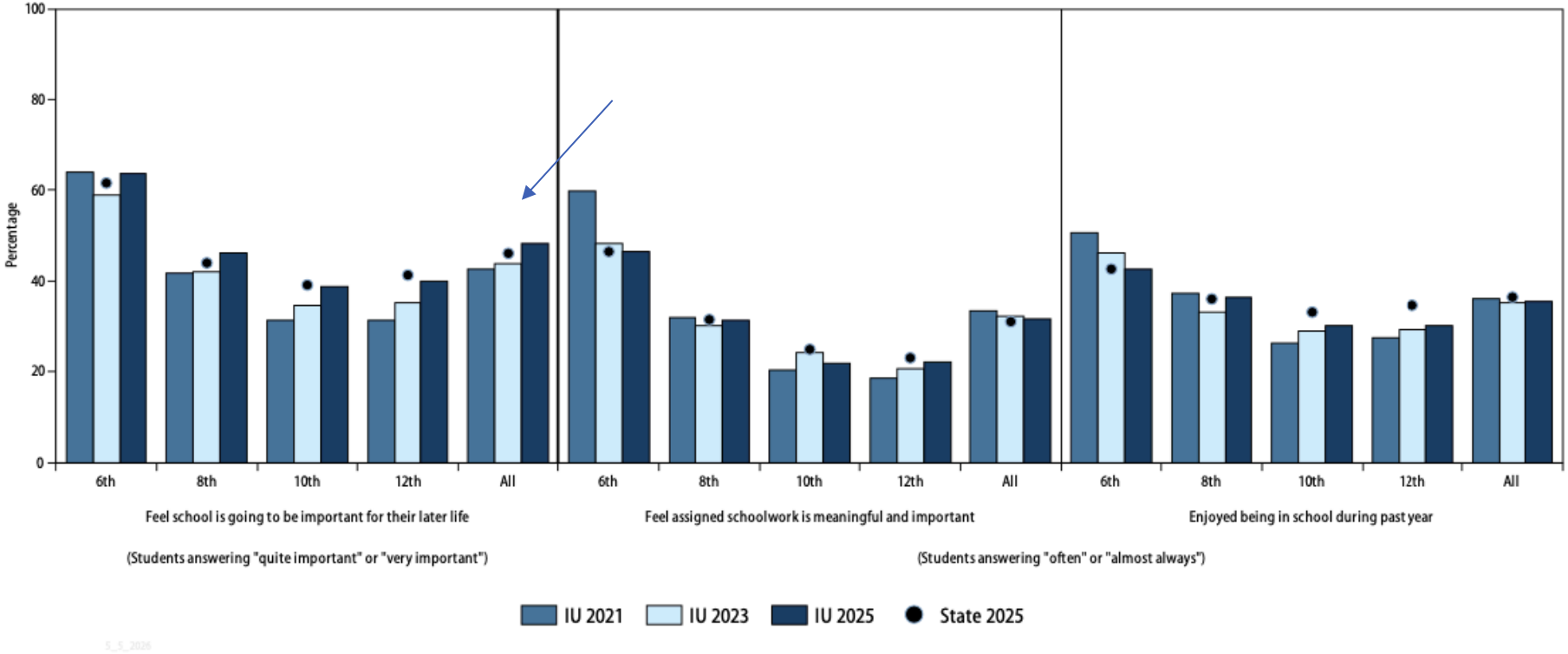
Creating safe supportive schools is essential to ensuring students' academic and social success. There are multiple elements to establishing learning environments in which youth feel a sense of belonging which prompts feelings of safety, connectedness, value, and responsibility for their behavior and learning. School climate and safety are measured in four ways: commitment and involvement at school, involvement in after-school and community programs, violence (actual and threatened), and bullying.

Commitment to School

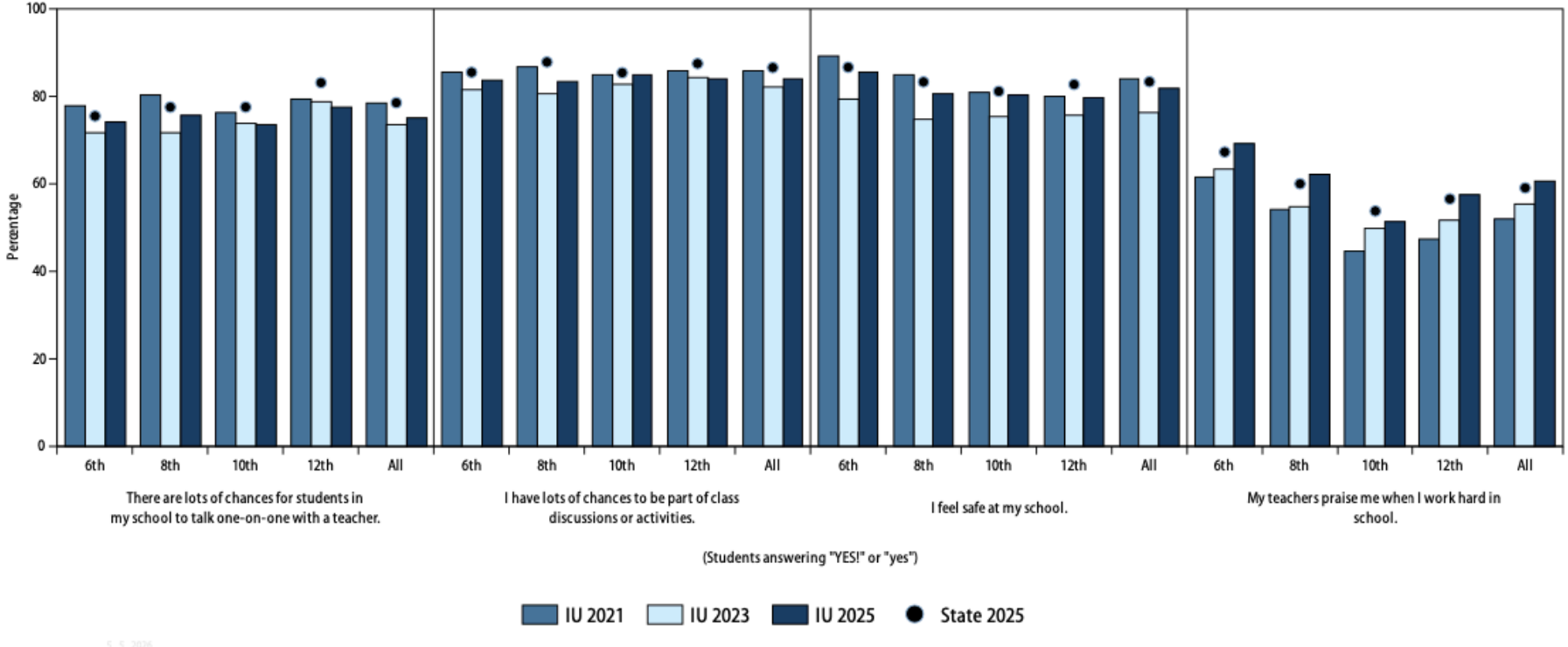
Students who feel appreciated and rewarded for their involvement in school have reduced likelihood of involvement in drug use and problem behaviors. Giving students opportunities to participate in important activities at school helps to create a feeling of personal investment in their school. This increased investment results in greater bonding and adoption of the school's standard of behavior, reducing the likelihood that the students will become involved in problem behaviors.

Students who demonstrate a lack of commitment to school are more likely to have ceased viewing being a student as a positive role. These students have a higher risk for a variety of problem behaviors.

Commitment to School - Perceived Importance



Commitment to School - Positive School

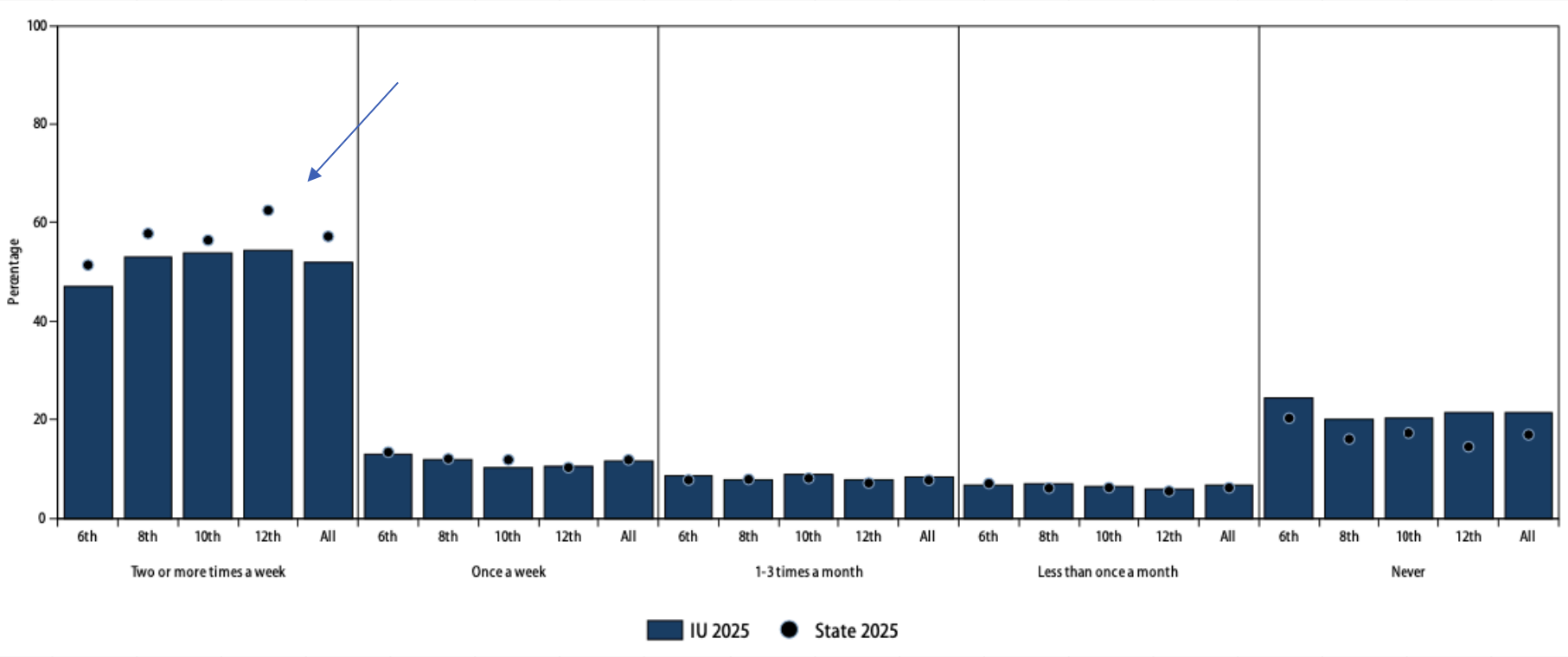


Involvement in Pro-Social Activities

When young people participate in pro-social activities that foster healthy development, they are more likely to develop connections with peers and members of the community who engage in prosocial behaviors. Being engaged in pro-social activities provides opportunities for bonding with adult role models—such as community leaders, neighbors, police, or clergy—who can offer moral guidance and emotional support.

How often do you usually participate in activities after-school or on weekends? Examples could include sports, dance, music, clubs, faith-based activities, a job, or volunteering.

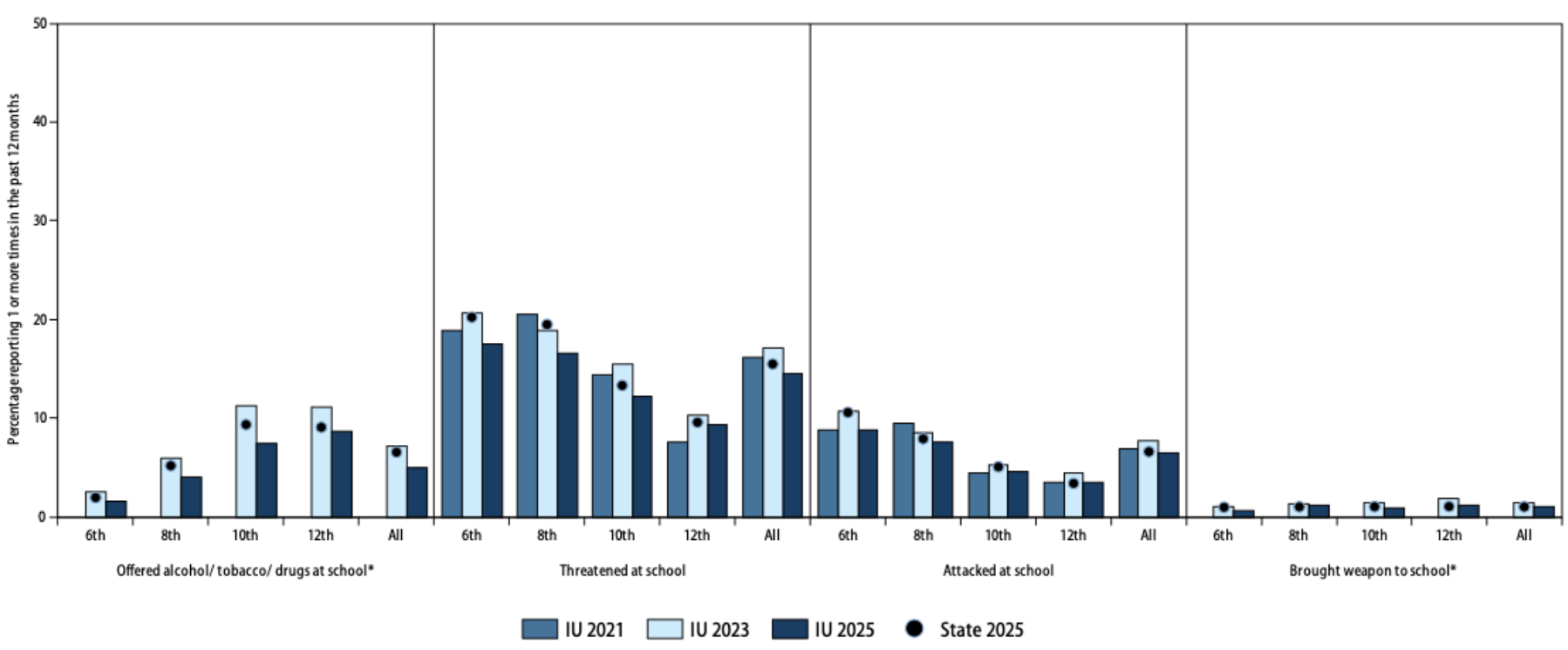
Involvement in Pro-Social Activities



Violence/Drugs School Community

This section highlights the presence of violence and drugs on school property and in the community. This section also presents the percentage of youth who reported engaging in concerning behaviors (e.g., attacking someone with the idea of seriously hurting them, selling substances, attending school while drunk or high), and related consequences (e.g., being suspended from school or arrested).

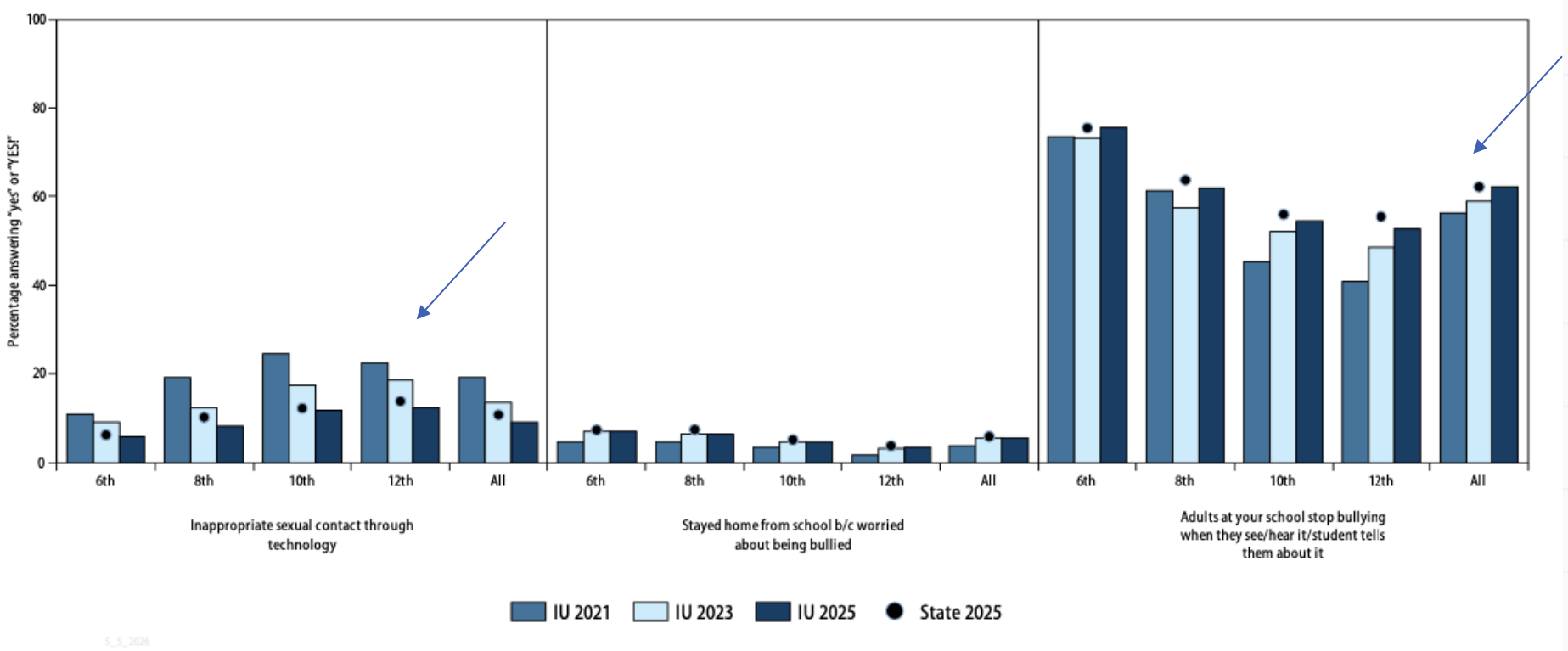
Violence/Drugs School Community



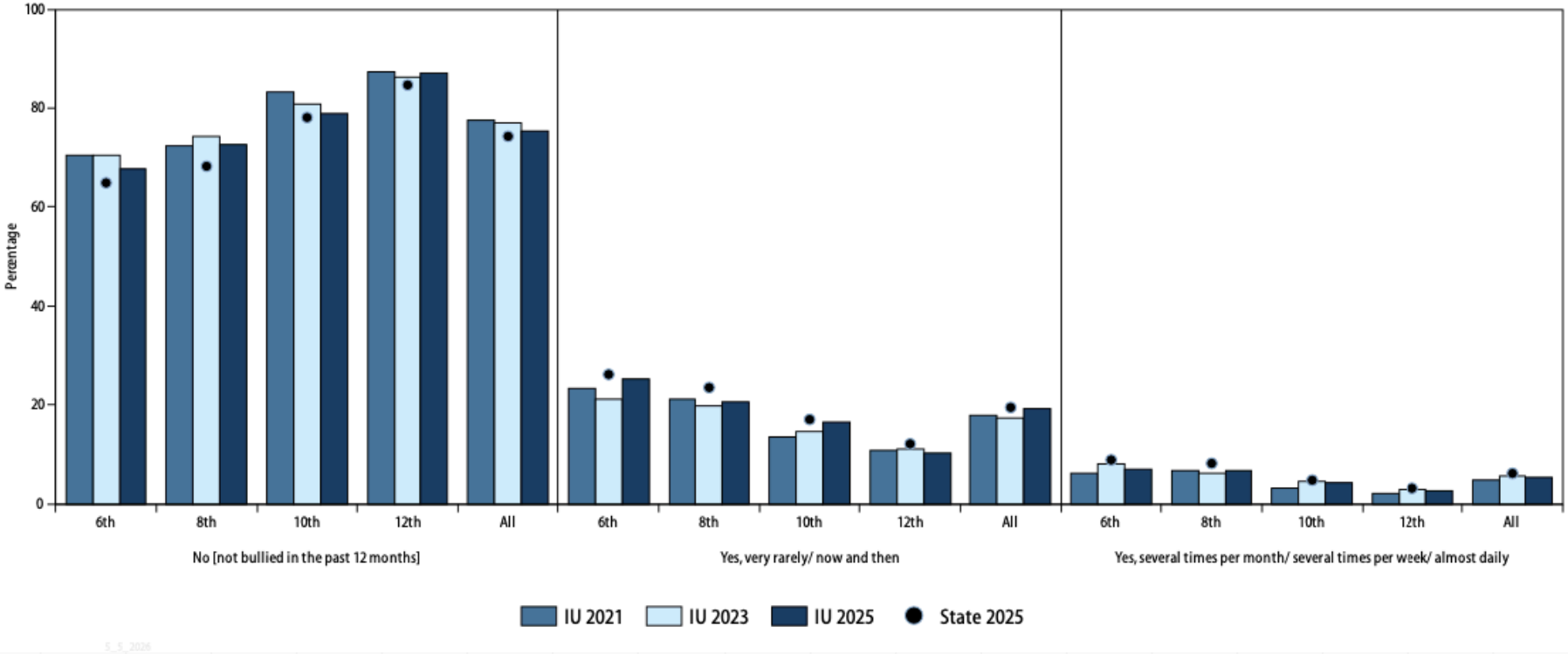
Bullying, Internet Safety and Abuse

Bullying behavior contributes to lower attendance rates, lower student achievement, low self-esteem, and depression, as well as higher rates of both juvenile and adult crime. Although the problem of bullying continues to receive public attention, actual incidents of bullying often go undetected by teachers and parents. The most effective way to address bullying is through comprehensive, school-wide programs.

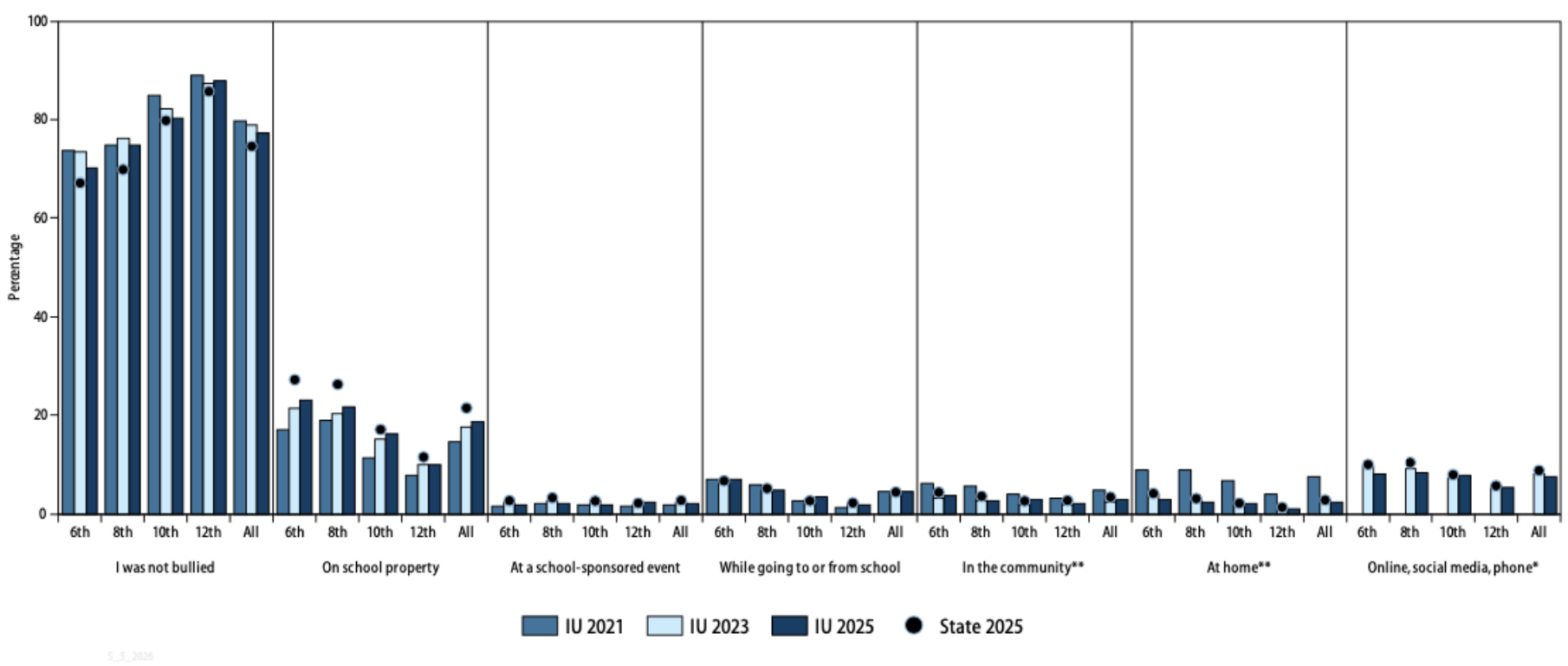
Bullying and Internet Safety



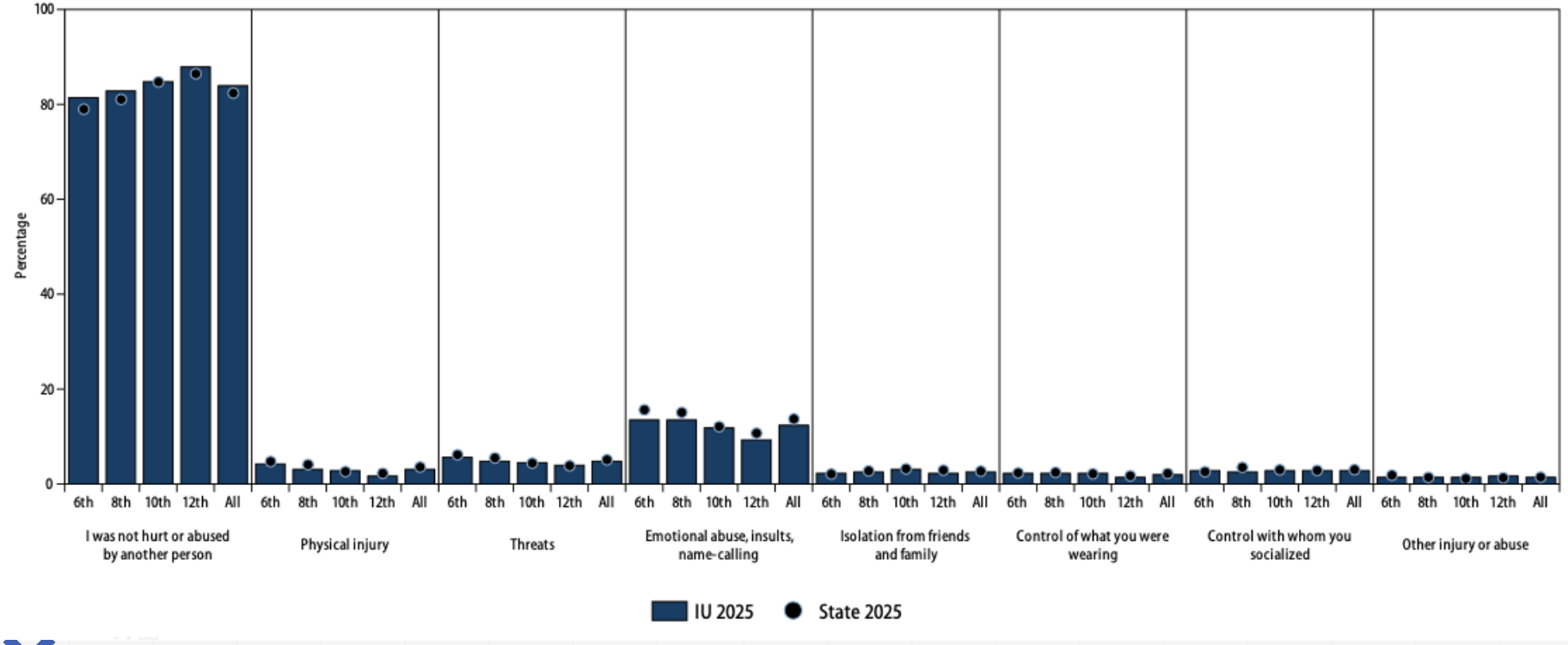
Frequency of Bullying



Location of Bullying



How were students hurt or

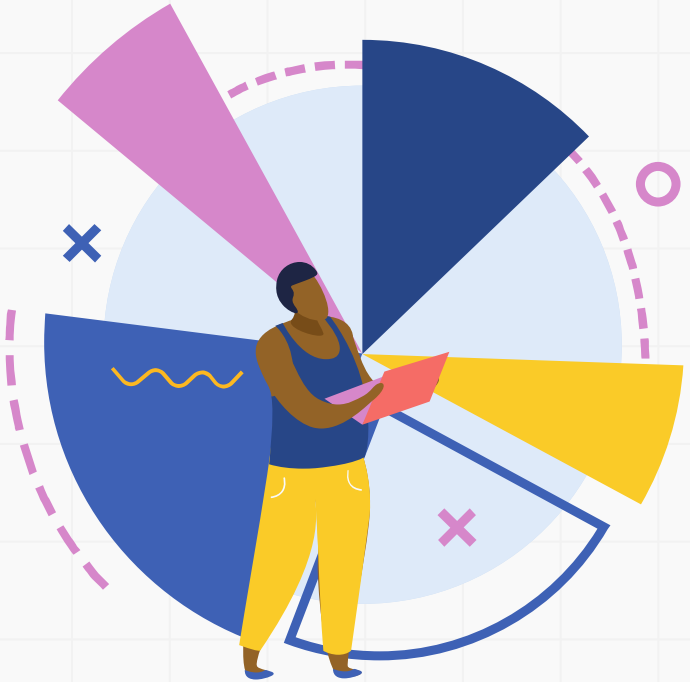


Breakout Time

Analyze the recent trends presented.

1. Are they consistent with your school building and/or district?
2. Does your school or district offer equitable access prosocial activities for ALL students?
3. In what ways has school or district taken actions to decrease bullying behaviors and are there additional steps that can be taken in relation to evolving challenges (technology)?

07 Indicators of Risk



Stressful Events and Sleep

29.6% **Experienced death**

Death of close friend or family member in the last 12 months.

21% **Changing homes**

Moved in the last 12 months.

20.8% **Food insecurity**

Worried they would run out of food in the last year. 13.1% had to skip a meal due to not enough food. Above the state average.

33% **Poor sleeping**

Sleep less than seven hours a night on a school night. 58% are tired or sleepy every day or several times a day.

Stressful Events: Analysis

Sleep Deprivation

A critical percentage of students receive far less than the recommended 8–10 hours of sleep per night, directly compounding depressive symptoms, emotional dysregulation, and poor school engagement.

Grief and Loss

A high percentage of students have experienced the death of a close person in the last year. Grief and loss are triggers for mental health concerns.

Analysis

Kids face a lot of stressors like moving, death of a loved one, and food insecurity. Poor sleep compounds the effects of these issues, and is correlated with mental health problems. Addressing lifestyle and coping needs provides resilience. Counseling also helps.

Perceptions of Risk and Disapproval Related to Substances

- Parental and peer disapproval are strong protective barriers.
- Peer disapproval weakens as students age, increasing vulnerability to peer modeling. Seniors show the lowest levels of peer disapproval.
- Decreased perception of peer disapproval and harm that the substance will cause corresponds with higher usage rates. Seniors also show the lowest levels of perception of harm.
- Substance abuse education for students and caregivers is a valuable resource.

Willingness to Use Substances Before Age 21

9.3%

Willing to try alcohol

Has decreased 2 percentage points since 2023 and tends to increase with age. Highest level is 17% for 12th graders

3.9%

Willing to try Cannabis

Has decreased 2.5 percentage points since 2023. Tends to increase with age, highest level being 9.5 percent for 12th graders. (now in single digits!)

Sources of Alcohol, Vape, Prescription Drugs, and Guns

(As reported by youth who were using them)

Source Category	Key Findings & Vectors
Social Access	Older friends, siblings, and parties remain primary acquisition sources.
Home Availability	Unlocked liquor cabinets and unmonitored prescription medications.
Commercial Sales	Vaping products and nicotine pouches purchased directly or online.
Firearm Access	Unsecured handguns in homes represent a significant risk vector for impulsivity and suicide.

Actionable Priorities

Strengthen Family Engagement & Education

- Launch campaign messaging on the protective power of explicit parental disapproval.
- Promote safe storage initiatives for prescription drugs, alcohol, and firearms at home.

Enhance Environmental Prevention & Retail Compliance

- Partner with local law enforcement to enforce commercial compliance for vape and tobacco sales.
- Restrict physical and social access pathways within the community.

Promote Healthy Youth Routines & Stress Management

- Integrate sleep hygiene education and stress management tools into school health curricula. Address limits on screen time.
- Expand Tier-1 and Tier-2 support for students navigating acute stressful life events.

08
Risk and Protective Factors

Risk Factors

Risk and protective factors help explain *why* students engage in unhealthy behaviors and where prevention efforts can have the greatest impact. Rather than focusing only on outcomes like substance use, these measures identify the underlying conditions that increase or decrease risk.

Examples of risk factors include:

- Availability of drugs/handguns
- Family Conflict
- Low commitment to school
- Academic failure
- Rebelliousness
- Peer antisocial behavior or drug use

Protective Factors or Assets

Conditions that buffer the youth from the risk by reducing the impact of the risks or changing the way they respond to risks.

Examples of protective factors include:

- Rewards and opportunities for prosocial involvement in the family, school, and community.
- Interaction with prosocial peers
- Belief in the moral order
- Religiosity

Overall Student Profile

35.3% Met criteria for elevated risk

55.6% Met the threshold for adequate protection

A majority of students report meaningful protective factors.

More than one-third of students remain at elevated risk and should be a focus of prevention efforts.

Top Risk Factors

Risk Factor	% at Risk
Low Commitment to School	56.5%
Parental Attitudes Favorable Toward Antisocial Behavior	50.9%
Low Neighborhood Attachment	43.8%

- School engagement remains the most significant challenge.
- Many students perceive weak connections to their community.
- Family attitudes and expectations continue to influence behavior.

Low risk factors

- Peer drug use is not perceived as widespread.
- Students generally report limited access to drugs and handguns.
- These areas represent protective community strengths that should be maintained.

How can we address risk factors in our area?

What resources do we have available to address them?

Highest Protective Factors in Carbon and Lehigh Area

67.4%

Family Attachment: You feel close to your family/guardians, you share thoughts and feelings with them.

63.7%

Family Opportunities for Prosocial Involvement: Family members ask what I think about family decisions, we do fun things together, I can go to them for help.

60.4%

School rewards for prosocial involvement: Teacher notices and tells me when I'm doing well, I feel safe at school, school tells my caregivers when I am successful, teachers praise me for working hard.

- All protective factors here have increased since 2023.
- Family remains the strongest protective influence. School-family partnerships appear to be a positive factor.
- Students benefit when adults notice and regard positive behavior.

Grade-Level Trends

The pattern is clear:

- Risk factors increase from 6th to 12th grade.
- Protective factors decrease from 6th to 12th grade.
- The trend mirrors statewide results.

Implications:

- Begin prevention efforts early.
- Increase supports during transitions to middle and high school.
- Focus on high school students who may be losing connections to school and community.

Connections to Other PAYS Findings

The risk factor results align with several findings elsewhere in the report:

- 32.2% reported feeling sad or depressed most days during the past year.
- 13.0% seriously considered suicide.
- Only 35.6% reported enjoying school during the past year.
- 51.8% participated in prosocial activities at least twice per week.

Interpretation

- School connectedness and positive youth engagement appear especially important for prevention planning.

Action Ideas for 2026-2027 (Part 1)

Priority 1: Improve School Connectedness

- Student mentor programs
- Check-and-connect interventions
- Student advisory groups such as Aevidum
- Attendance supports

Priority 2: Expand Prosocial Opportunities

- Clubs and activities
- Service-learning projects
- Peer leadership initiatives
- Volunteer opportunities

Action Ideas for 2026-2027 (Part 2)

Priority 3: Strengthen Family Engagement

- Parent education nights
- Family mental health resources
- Communication about risk and protective factors

Priority 4: Early Identification

- Continue SAP referral processes
- Screen for mental health concerns (Universal Screening)
- Utilize SHAPE system for mental health and support team assessment.
- Strengthen referral pathways to community services

How can we improve on the protective factors we are doing well?

How can we build up others?

In what ways can you utilize the PAYS survey in your districts?

Food for thought?