

CHAPTER 2

Adolescent Health (AH)

Lead Agencies

Centers for Disease Control and Prevention
Health Resources and Services Administration
Office of Adolescent Health, Office of the Assistant Secretary for Health
Substance Abuse and Mental Health Services Administration

Contents

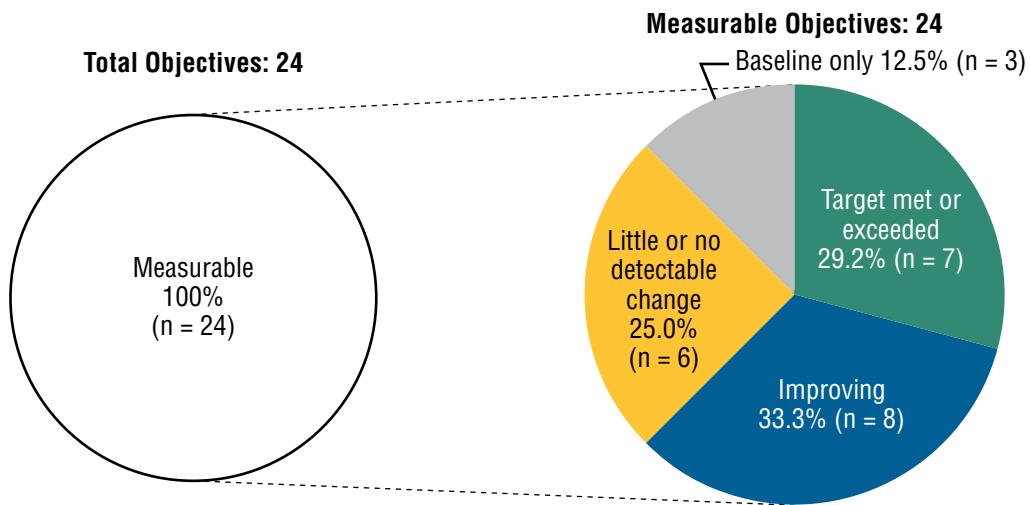
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Goal: Improve the healthy development, health, safety, and well-being of adolescents and young adults.

This chapter includes objectives that monitor the use of health care, healthy adolescent development, positive adult involvement, educational attainment and skills, school breakfast programs, schools as safe environments, and adolescent and young adult safety. The *Reader's Guide* provides a step-by-step explanation of the content of this chapter, including criteria for highlighting objectives in the Selected Findings.¹

Status of Objectives

Figure 2–1. Midcourse Status of the Adolescent Health Objectives



All of the 24 objectives in the Adolescent Health Topic Area were measurable² (Figure 2–1, Table 2–1). The status of these objectives (Table 2–2) was as follows:

- 7 objectives had met or exceeded their 2020 targets,³
- 8 objectives were improving,⁴
- 6 objectives demonstrated little or no detectable change,⁵ and
- 3 objectives had baseline data only.⁶

Selected Findings

Healthy Adolescent Development

- The proportion of adolescents aged 10–17 who had received a wellness checkup in the past 12 months (AH-1) increased from 68.7% in 2008 to 78.8% in 2014, exceeding the 2020 target (Table 2–2).
 - » In 2014, there were statistically significant disparities by family income and geographic location in the proportion of adolescents aged 10–17 who
- The proportion of adolescents aged 12–17 participating in extracurricular and/or out-of-school activities (AH-2) demonstrated little or no detectable change from 2007 to 2011–2012 (82.5% and 82.7%, respectively) (Table 2–2).
 - » In 2011–2012, there were statistically significant disparities by sex, race and ethnicity, family income, and geographic location in the proportion of adolescents aged 12–17 participating in extracurricular and/or out-of-school activities (AH-2, Table 2–3).
- The proportion of adolescents aged 12–17 who had an adult in their lives with whom they could discuss serious problems (AH-3.1) increased from 75.6% in 2008 to 78.2% in 2013, moving toward the 2020 target (Table 2–2).

had received a wellness checkup in the past 12 months (AH-1, Table 2–3). The disparities by sex and race and ethnicity were not statistically significant.

- The proportion of adolescents aged 12–17 participating in extracurricular and/or out-of-school activities (AH-2) demonstrated little or no detectable change from 2007 to 2011–2012 (82.5% and 82.7%, respectively) (Table 2–2).
 - » In 2011–2012, there were statistically significant disparities by sex, race and ethnicity, family income, and geographic location in the proportion of adolescents aged 12–17 participating in extracurricular and/or out-of-school activities (AH-2, Table 2–3).
- The proportion of adolescents aged 12–17 who had an adult in their lives with whom they could discuss serious problems (AH-3.1) increased from 75.6% in 2008 to 78.2% in 2013, moving toward the 2020 target (Table 2–2).

- » In 2013, there was a statistically significant disparity by family income in the proportion of adolescents aged 12–17 who had an adult in their lives with whom they could discuss serious problems (AH-3.1, Table 2–3). The disparities by sex, race and ethnicity, and geographic location were not statistically significant.
- The proportion of **adolescents aged 12–17 whose parents attended their events and activities** (AH-3.2) demonstrated little or no detectable change from 2007 to 2011–2012 (82.1% and 82.6%, respectively) (Table 2–2).
 - » In 2011–2012, there were statistically significant disparities by sex, race and ethnicity, and family income in the proportion of adolescents aged 12–17 whose parents attended their activities and events (AH-3.2, Table 2–3). The disparity by geographic location was not statistically significant.
- The proportion of **adolescents aged 17 in foster care who exhibited early readiness for transition to adulthood** (AH-4.1) was 42.8% in 2010–2011. Data beyond the baseline were not available, so progress toward the 2020 target could not be assessed (Table 2–2).
 - » The proportion of adolescents aged 17 in foster care who exhibited early readiness for transition to adulthood (AH-4.1) varied by state (Map 2–1). In 2010–2011, 24 states and the District of Columbia had met the national 2020 target.
 - » In 2010–2011, the disparities by sex and race and ethnicity in the proportion of adolescents aged 17 in foster care who exhibited early readiness for transition to adulthood (AH-4.1) were not tested for statistical significance (Table 2–3).
- From 2007–2008 to 2012–2013, the proportion of **students aged 14–21 served under the Individuals with Disabilities Education Act (IDEA) who graduated from high school with a diploma** (AH-5.2) increased from 59.1% to 65.1%, exceeding the 2020 target (Table 2–2).
 - » In 2012–2013, the disparities by sex and race and ethnicity in the proportion of students aged 14–21 served under IDEA who graduated high school with a diploma (AH-5.2) were not tested for statistical significance (Table 2–3).
- The proportion of **adolescents aged 12–17 who considered school work meaningful and important** (AH-5.5) increased from 26.4% in 2008 to 27.7% in 2013, moving toward the 2020 target (Table 2–2).
 - » In 2013, there were statistically significant disparities by race and ethnicity and family income in the proportion of adolescents aged 12–17 who considered school work meaningful and important (AH-5.5, Table 2–3). The disparities by sex and geographic location were not statistically significant.
- There was little or no detectable change in the proportion of **adolescents aged 12–17 who missed 11 or more days of school due to illness or injury** (AH-5.6) from 2008 to 2014 (5.0% and 4.4%, respectively) (Table 2–2).
 - » In 2014, there was a statistically significant disparity by geographic location in the proportion of adolescents aged 12–17 who missed 11 or more days of school due to illness or injury (AH-5.6, Table 2–3). The disparities by sex, race and ethnicity, and family income were not statistically significant.

Educational Achievement

Graduation, Attitude Toward School Work, and School Attendance

- The proportion of **students who graduated from high school 4 years after starting the 9th grade** (AH-5.1) increased from 79% in 2010–2011 to 81% in 2012–2013, moving toward the 2020 target (Table 2–2).
 - » The proportion of students who graduated from high school 4 years after starting the 9th grade (AH-5.1) varied by state. In 2012–2013, nine states met the national 2020 target (Map 2–2).
 - » In 2012–2013, the disparity by race and ethnicity in the proportion of students who graduated from high school 4 years after starting the 9th grade

(AH-5.1) was not tested for statistical significance (Table 2–3).

- The proportion of **adolescents aged 12–17 who considered school work meaningful and important** (AH-5.5) increased from 26.4% in 2008 to 27.7% in 2013, moving toward the 2020 target (Table 2–2).
 - » In 2013, there were statistically significant disparities by race and ethnicity and family income in the proportion of adolescents aged 12–17 who considered school work meaningful and important (AH-5.5, Table 2–3). The disparities by sex and geographic location were not statistically significant.
- There was little or no detectable change in the proportion of **adolescents aged 12–17 who missed 11 or more days of school due to illness or injury** (AH-5.6) from 2008 to 2014 (5.0% and 4.4%, respectively) (Table 2–2).
 - » In 2014, there was a statistically significant disparity by geographic location in the proportion of adolescents aged 12–17 who missed 11 or more days of school due to illness or injury (AH-5.6, Table 2–3). The disparities by sex, race and ethnicity, and family income were not statistically significant.
- The proportion of **4th graders with reading skills at or above grade level** (AH-5.3.1) increased from 33.0% in 2009 to 35.2% in 2013, moving toward the 2020 target (Table 2–2).
 - » In 2013, there were statistically significant disparities by sex, race and ethnicity, disability status,⁷ and school's geographic location in the proportion of 4th graders with reading skills at or above grade level (AH-5.3.1, Table 2–3).
- The proportion of **8th graders with reading skills at or above grade level** (AH-5.3.2) increased from 32.4% in 2009 to 36.1% in 2013, exceeding the 2020 target (Table 2–2).

Grade-level Proficiencies

- The proportion of **4th graders with reading skills at or above grade level** (AH-5.3.1) increased from 33.0% in 2009 to 35.2% in 2013, moving toward the 2020 target (Table 2–2).
 - » In 2013, there were statistically significant disparities by sex, race and ethnicity, disability status,⁷ and school's geographic location in the proportion of 4th graders with reading skills at or above grade level (AH-5.3.1, Table 2–3).
- The proportion of **8th graders with reading skills at or above grade level** (AH-5.3.2) increased from 32.4% in 2009 to 36.1% in 2013, exceeding the 2020 target (Table 2–2).

- » In 2013, there were statistically significant disparities by sex, race and ethnicity, parent's education, disability status,⁷ and school's geographic location in the proportion of 8th graders with reading skills at or above grade level (AH-5.3.2, Table 2-3).
- The proportion of **12th graders with reading skills at or above grade level** (AH-5.3.3) increased from 35.4% in 2005 to 37.6% in 2013, moving toward the 2020 target (Table 2-2).
 - » In 2013, there were statistically significant disparities by sex, race and ethnicity, parent's education, and disability status⁷ in the proportion of 12th graders with reading skills at or above grade level (AH-5.3.3, Table 2-3).
- The proportion of **4th graders with mathematics skills at or above grade level** (AH-5.4.1) increased from 39.1% in 2009 to 41.8% in 2013, moving toward the 2020 target (Table 2-2).
 - » In 2013, there were statistically significant disparities by sex, race and ethnicity, disability status,⁷ and school's geographic location in the proportion of 4th graders with mathematics skills at or above grade level (AH-5.4.1, Table 2-3).
- The proportion of **8th graders with mathematics skills at or above grade level** (AH-5.4.2) increased from 33.9% in 2009 to 35.5% in 2013, moving toward the 2020 target (Table 2-2).
 - » In 2013, there were statistically significant disparities by sex, race and ethnicity, parent's education, disability status,⁷ and school's geographic location in the proportion of 8th graders with mathematics skills at or above grade level (AH-5.4.2, Table 2-3).
- The proportion of **12th graders with mathematics skills at or above grade level** (AH-5.4.3) increased from 23.0% in 2005 to 25.7% in 2013, exceeding the 2020 target (Table 2-2).
 - » In 2013, there were statistically significant disparities by sex, race and ethnicity, parent's education, and disability status⁷ in the proportion of 12th graders with mathematics skills at or above grade level (AH-5.4.3, Table 2-3).

Positive School Experience

- The proportion of **public and private elementary, middle, and high schools with a school breakfast program** (AH-6) increased from 68.6% in 2006 to 77.1% in 2014, exceeding the 2020 target (Table 2-2).

- There was little or no detectable change in the proportion of **adolescents in grades 9–12 who have been offered, sold, or given an illegal drug on school property** (AH-7) from 2009 to 2013 (22.7% and 22.1%, respectively) (Table 2-2).
 - » In 2013, there were statistically significant disparities by sex and race and ethnicity in the proportion of adolescents in grades 9–12 who have been offered, sold, or given an illegal drug on school property (AH-7, Table 2-3).
- The proportion of **adolescents aged 12–17 whose parents considered them to be safe at school** (AH-8) increased from 86.4% in 2007 to 90.9% in 2011–2012, moving toward the 2020 target (Table 2-2).
 - » In 2011–2012, there were statistically significant disparities by race and ethnicity and family income in the proportion of adolescents aged 12–17 whose parents considered them to be safe at school (AH-8, Table 2-3). The disparities by sex and geographic location were not statistically significant.
- There was little or no detectable change in the median percentage of **middle and high schools that prohibited harassment based on a student's sexual orientation or gender identity** (AH-9) from 2010 to 2012 (88.2% and 87.4%, respectively) (Table 2-2).
 - » In 2012, the proportion of schools prohibiting harassment based on sexual orientation or gender identity (AH-9) varied by state (Map 2-3). Eight states had met the national 2020 target.
- In 2013, 12.4% of **students aged 12–18 reported the presence of gangs at school** (AH-11.3). Data beyond the baseline were not available, so progress toward the 2020 target could not be assessed (Table 2-2).
 - » In 2013, there were statistically significant disparities by race and ethnicity, family income, and geographic location in the proportion of students aged 12–18 who reported the presence of gangs at school (AH-11.3, Table 2-3). The disparity by sex was not statistically significant.

Adolescent Safety

- Between 2008 and 2012, the rate of **arrests of minors and young adults aged 10–24 for serious violent crimes** (AH-11.1) decreased from 444.0 to 323.5 per 100,000 population, and the rate of **arrests of minors and young adults aged 10–24 for serious property crimes** (AH-11.2) decreased from 1,526.7 to 1,222.7 per 100,000 population, both exceeding their respective 2020 targets (Table 2-2).

- » In 2012, the disparity by sex in the rate of arrests of minors and young adults aged 10–24 for serious violent crimes (AH-11.1) was not tested for statistical significance (Table 2–3).
- » In 2012, the disparity by sex in the rate of arrests of minors and young adults aged 10–24 for serious property crimes (AH-11.2) was not tested for statistical significance (Table 2–3).
- In 2013, the rate of **violent crimes experienced by youth aged 12–24** (AH-11.4) was 42.0 per 1,000 population. Data beyond the baseline were not available, so progress toward the 2020 target could not be assessed (Table 2–2).
- » In 2013, there were statistically significant disparities by race and ethnicity and family income in the rate of violent crimes experienced by youth aged 12–24 (AH-11.4, Table 2–3). The disparities by sex and geographic location were not statistically significant.

More Information

Readers interested in more detailed information about the objectives in this topic area are invited to visit the [HealthyPeople.gov](http://www.healthypeople.gov) website, where extensive substantive and technical information is available:

- For the background and importance of the topic area, see: <https://www.healthypeople.gov/2020/topics-objectives/topic/Adolescent-Health>
- For data details for each objective, including definitions, numerators, denominators, calculations, and data limitations, see:
[Select an objective, then click on the “Data2020” icon.](https://www.healthypeople.gov/2020/topics-objectives/topic/Adolescent-Health/objectives>Select an objective, then click on the “Data Details” icon.■ For objective data by population group (e.g., sex, race and ethnicity, or family income), including rates, percentages, or counts for multiple years, see:
<a href=)

Data for the measurable objectives in this chapter were from the following data sources:

- Common Core of Data: <http://nces.ed.gov/ccd/>
- Individuals with Disabilities Education Act Data: <http://idea.ed.gov/explore/home>
- National Assessment of Educational Progress: <http://nces.ed.gov/nationsreportcard/>

- National Crime Victimization Survey: <http://www.bjs.gov/index.cfm?ty=dcdetail&id=245>
- National Health Interview Survey: <http://www.cdc.gov/nchs/nhis.htm>
- National Survey of Children’s Health: <http://www.cdc.gov/nchs/slaits/nsch.htm>
- National Survey on Drug Use and Health: <http://www.drugabuse.gov/national-survey-drug-use-health>
- National Youth in Transition Database: <http://youth.gov/feature-article/national-youth-transition-database>
- School Crime Supplement to the National Crime Victimization Survey: <http://nces.ed.gov/programs/crime/surveys.asp>
- School Health Policies and Practices Study: <http://www.cdc.gov/healthyyouth/data/shpps/index.htm>
- School Health Profiles: <http://www.cdc.gov/healthyyouth/data/profiles/index.htm>
- School Survey on Crime and Safety: <http://nces.ed.gov/surveys/ssocs/>
- Uniform Crime Reporting Program: <https://www.fbi.gov/about-us/cjis/ucr/ucr>
- Youth Risk Behavior Surveillance System: <http://www.cdc.gov/healthyyouth/data/yrbs/index.htm>

Footnotes

¹The **Technical Notes** provide more information on Healthy People 2020 statistical methods and issues.

²**Measurable** objectives had a national baseline value.

³**Target met or exceeded**—One of the following, as specified in the Midcourse Progress Table:

- » At baseline the target was not met or exceeded and the midcourse value was equal to or exceeded the target. (The percentage of targeted change achieved was equal to or greater than 100%.)
- » The baseline and midcourse values were equal to or exceeded the target. (The percentage of targeted change achieved was not assessed.)

⁴**Improving**—One of the following, as specified in the Midcourse Progress Table:

- » Movement was toward the target, standard errors were available, and the percentage of targeted change achieved was statistically significant.
- » Movement was toward the target, standard errors were not available, and the objective had achieved 10% or more of the targeted change.

⁵**Little or no detectable change**—One of the following, as specified in the Midcourse Progress Table:

- » Movement was toward the target, standard errors were available, and the percentage of targeted change achieved was not statistically significant.
- » Movement was toward the target, standard errors were not available, and the objective had achieved less than 10% of the targeted change.
- » Movement was away from the baseline and target, standard errors were available, and the percentage change relative to the baseline was not statistically significant.
- » Movement was away from the baseline and target, standard errors were not available, and the objective had moved less than 10% relative to the baseline.
- » There was no change between the baseline and the midcourse data point.

⁶**Baseline only**—The objective only had one data point, so progress toward target attainment could not be assessed.

⁷Children with disabilities are defined as those with an Individualized Educational Program as required by the Individuals with Disabilities Education Act, or a 504 plan as mandated in the Americans with Disabilities Act. Academic assessment test data for students with disabilities cannot be generalized to the total population of disabled students because some students are unable to take the test.

Suggested Citation

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Review. Hyattsville, MD. 2016.

Table 2–1. Adolescent Health Objectives

LEGEND

	Data for this objective are available in this chapter's Midcourse Progress Table.		Disparities data for this objective are available, and this chapter includes a Midcourse Health Disparities Table.		A state or county level map for this objective is available at the end of the chapter.
Not Applicable	Midcourse data availability is not applicable for developmental and archived objectives. Developmental objectives did not have a national baseline value. Archived objectives are no longer being monitored due to lack of data source, changes in science, or replacement with other objectives.				

Objective Number	Objective Statement	Data Sources	Midcourse Data Availability
AH-1	Increase the proportion of adolescents who have had a wellness checkup in the past 12 months	National Health Interview Survey (NHIS), CDC/NCHS	
AH-2	Increase the proportion of adolescents who participate in extracurricular and/or out-of-school activities	National Survey of Children's Health (NSCH), HRSA/MCHB and CDC/NCHS	
AH-3.1	Increase the proportion of adolescents who have an adult in their lives with whom they can talk about serious problems	National Survey on Drug Use and Health (NSDUH), SAMHSA	
AH-3.2	Increase the proportion of parents who attend events and activities in which their adolescents participate	National Survey of Children's Health (NSCH), HRSA/MCHB and CDC/NCHS	
AH-4.1	Increase the proportion of adolescents in foster care who exhibit positive early indicators of readiness for transition to adulthood	National Youth in Transition Database (NYTD), ACF	
AH-5.1	Increase the proportion of students who graduate with a regular diploma 4 years after starting 9th grade	Common Core of Data (CCD), ED/NCES	
AH-5.2	Increase the proportion of students who are served under the Individuals with Disabilities Education Act who graduate high school with a diploma	Individuals with Disabilities Education Act data (IDEA data), ED/OSERS	
AH-5.3.1	Increase the proportion of 4th grade students whose reading skills are at or above the proficient achievement level for their grade	National Assessment of Educational Progress (NAEP), ED/NCES	
AH-5.3.2	Increase the proportion of 8th grade students whose reading skills are at or above the proficient achievement level for their grade	National Assessment of Educational Progress (NAEP), ED/NCES	
AH-5.3.3	Increase the proportion of 12th grade students whose reading skills are at or above the proficient achievement level for their grade	National Assessment of Educational Progress (NAEP), ED/NCES	
AH-5.4.1	Increase the proportion of 4th grade students whose mathematics skills are at or above the proficient achievement level for their grade	National Assessment of Educational Progress (NAEP), ED/NCES	

Table 2–1. Adolescent Health Objectives—Continued**LEGEND**

	Data for this objective are available in this chapter's Midcourse Progress Table.		Disparities data for this objective are available, and this chapter includes a Midcourse Health Disparities Table.		A state or county level map for this objective is available at the end of the chapter.
Not Applicable	Midcourse data availability is not applicable for developmental and archived objectives. Developmental objectives did not have a national baseline value. Archived objectives are no longer being monitored due to lack of data source, changes in science, or replacement with other objectives.				

Objective Number	Objective Statement	Data Sources	Midcourse Data Availability
AH-5.4.2	Increase the proportion of 8th grade students whose mathematics skills are at or above the proficient achievement level for their grade	National Assessment of Educational Progress (NAEP), ED/NCES	
AH-5.4.3	Increase the proportion of 12th grade students whose mathematics skills are at or above the proficient achievement level for their grade	National Assessment of Educational Progress (NAEP), ED/NCES	
AH-5.5	Increase the proportion of adolescents who consider their school work to be meaningful and important	National Survey on Drug Use and Health (NSDUH), SAMHSA	
AH-5.6	Decrease school absenteeism among adolescents due to illness or injury	National Health Interview Survey (NHIS), CDC/NCHS	
AH-6	Increase the proportion of schools with a school breakfast program	School Health Policies and Practices Study (SHPPS), CDC/NCHHSTP	
AH-7	Reduce the proportion of adolescents who have been offered, sold, or given an illegal drug on school property	Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP	
AH-8	Increase the proportion of adolescents whose parents consider them to be safe at school	National Survey of Children's Health (NSCH), HRSA/MCHB and CDC/NCHS	
AH-9	Increase the proportion of middle and high schools that prohibit harassment based on a student's sexual orientation or gender identity	School Health Profiles, CDC/NCHHSTP	
AH-10	Reduce the proportion of public schools with a serious violent incident	School Survey on Crime and Safety (SSOCS), ED/NCES	
AH-11.1	Reduce the rate of minor and young adult perpetration of violent crimes	Uniform Crime Reporting Program (UCR), DOJ/FBI	
AH-11.2	Reduce the rate of minor and young adult perpetration of serious property crimes	Uniform Crime Reporting Program (UCR), DOJ/FBI	
AH-11.3	Decrease the proportion of secondary school students who report the presence of youth gangs at school during the school year	School Crime Supplement to the National Crime Victimization Survey (SCS), DOJ/BJS	
AH-11.4	Reduce the rate of adolescent and young adult victimization from crimes of violence	National Crime Victimization Survey (NCVS), DOJ/BJS	

Table 2–2. Midcourse Progress for Measurable¹ Adolescent Health Objectives

LEGEND

	Target met or exceeded ^{2,3}		Improving ^{4,5}		Little or no detectable change ^{6–10}		Getting worse ^{11,12}		Baseline only ¹³		Informational ¹⁴
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Objective Description	Baseline Value (Year)	Midcourse Value (Year)	Target	Movement Toward Target ¹⁵	Movement Away From Baseline ¹⁶	Movement Statistically Significant ¹⁷
² AH-1 Adolescents receiving a wellness checkup in the past 12 months (percent, 10–17 years)	68.7% (2008)	78.8% (2014)	75.6%	146.4%		Yes
⁶ AH-2 Adolescents participating in extracurricular and out-of-school activities (percent, 12–17 years)	82.4% (2007)	82.7% (2011–2012)	90.6%	3.7%		No
⁴ AH-3.1 Adolescents having an adult in their lives with whom they can discuss serious problems (percent, 12–17 years)	75.6% (2008)	78.2% (2013)	83.2%	34.2%		Yes
⁶ AH-3.2 Adolescents whose parents attend their events and activities (percent, 12–17 year olds)	82.1% (2007)	82.6% (2011–2012)	90.3%	6.1%		No
¹³ AH-4.1 Adolescents in foster care who exhibit early readiness for adulthood (percent, 17 year olds)	42.8% (2010–2011)		47.1%			
⁵ AH-5.1 Students graduating from high school 4 years after starting 9th grade (percent)	79% (2010–2011)	81% (2012–2013)	87%	25.0%		
² AH-5.2 Students served under the Individuals with Disabilities Education Act who graduate high school with a diploma (percent, 14–21 years)	59.1% (2007–2008)	65.1% (2012–2013)	65.0%	101.7%		
⁴ AH-5.3.1 Fourth graders whose reading skills are at or above grade level (percent)	33.0% (2009)	35.2% (2013)	36.3%	66.7%		Yes
² AH-5.3.2 Eighth graders whose reading skills are at or above grade level (percent)	32.4% (2009)	36.1% (2013)	35.6%	115.6%		Yes
⁴ AH-5.3.3 Twelfth graders whose reading skills are at or above grade level (percent)	35.4% (2005)	37.6% (2013)	38.9%	62.9%		Yes
⁴ AH-5.4.1 Fourth graders whose mathematics skills are at or above grade level (percent)	39.1% (2009)	41.8% (2013)	43.0%	69.2%		Yes
⁴ AH-5.4.2 Eighth graders whose mathematics skills are at or above grade level (percent)	33.9% (2009)	35.5% (2013)	37.3%	47.1%		Yes
² AH-5.4.3 Twelfth graders whose mathematics skills are at or above grade level (percent)	23.0% (2005)	25.7% (2013)	25.3%	117.4%		Yes
⁴ AH-5.5 Adolescents who consider school work to be meaningful and important (percent, 12–17 years)	26.4% (2008)	27.7% (2013)	29.0%	50.0%		Yes
⁶ AH-5.6 Adolescents missing school for 11+ days due to illness or injury (percent, 12–17 years)	5.0% (2008)	4.4% (2014)	3.6%	42.9%		No
² AH-6 Schools with a school breakfast program (percent, elementary, middle, and high schools)	68.6% (2006)	77.1% (2014)	75.5%	123.2%		Yes

Table 2–2. Midcourse Progress for Measurable¹ Adolescent Health Objectives—Continued

LEGEND

	Target met or exceeded ^{2,3}		Improving ^{4,5}		Little or no detectable change ^{6–10}		Getting worse ^{11,12}		Baseline only ¹³		Informational ¹⁴
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Objective Description	Baseline Value (Year)	Midcourse Value (Year)	Target	Movement Toward Target ¹⁵	Movement Away From Baseline ¹⁶	Movement Statistically Significant ¹⁷
⁶ AH-7 Adolescents who have been offered, sold, or given an illegal drug on school property (percent, grades 9–12)	22.7% (2009)	22.1% (2013)	20.4%	26.1%		No
⁴ AH-8 Adolescents whose parents consider them to be safe at school (percent, 12–17 years)	86.4% (2007)	90.9% (2011–2012)	95.0%	52.3%		Yes
⁹ AH-9 Proportion of middle and high schools that prohibit harassment based on a student's sexual orientation or gender identity (median of reporting states)	88.2% (2010)	87.4% (2012)	92.2%		0.9%	
⁶ AH-10 Schools with a serious violent incident (percent)	17.2% (2007–2008)	16.4% (2009–2010)	15.5%	47.1%		No
² AH-11.1 Arrests of minors and young adults for serious violent crimes (per 100,000 population, 10–24 years)	444.0 (2008)	323.5 (2012)	399.6	271.4%		
² AH-11.2 Arrests of minors and young adults for serious property crimes (per 100,000 population, 10–24 years)	1,526.7 (2008)	1,222.7 (2012)	1,374.0	199.1%		
¹³ AH-11.3 Secondary school students who report the presence of gangs at school (percent, 12–18 years)	12.4% (2013)		10.4%			
¹³ AH-11.4 Youth victimization from crimes of violence (per 1,000 population, 12–24 years)	42.0 (2013)		37.8			

Table 2–2. Midcourse Progress for Measurable¹ Adolescent Health Objectives—Continued

NOTES	DATA SOURCES
See HealthyPeople.gov for all Healthy People 2020 data. The Technical Notes provide more information on the measures of progress.	AH-1 National Health Interview Survey (NHIS), CDC/NCHS AH-2 National Survey of Children's Health (NSCH), HRSA/MCHB and CDC/NCHS
FOOTNOTES	AH-3.1 National Survey on Drug Use and Health (NSDUH), SAMHSA AH-3.2 National Survey of Children's Health (NSCH), HRSA/MCHB and CDC/NCHS
¹ Measurable objectives had a national baseline value.	AH-4.1 National Youth in Transition Database (NYTD), ACF AH-5.1 Common Core of Data (CCD), ED/NCES
Target met or exceeded:	AH-5.2 Individuals with Disabilities Education Act data (IDEA data), ED/OSERS AH-5.3.1 National Assessment of Educational Progress (NAEP), ED/NCES AH-5.3.2 National Assessment of Educational Progress (NAEP), ED/NCES
² At baseline the target was not met or exceeded and the midcourse value was equal to or exceeded the target. (The percentage of targeted change achieved was equal to or greater than 100%.)	AH-5.3.3 National Assessment of Educational Progress (NAEP), ED/NCES AH-5.4.1 National Assessment of Educational Progress (NAEP), ED/NCES
³ The baseline and midcourse values were equal to or exceeded the target. (The percentage of targeted change achieved was not assessed.)	AH-5.4.2 National Assessment of Educational Progress (NAEP), ED/NCES AH-5.4.3 National Assessment of Educational Progress (NAEP), ED/NCES
Improving:	AH-5.5 National Survey on Drug Use and Health (NSDUH), SAMHSA AH-5.6 National Health Interview Survey (NHIS), CDC/NCHS
⁴ Movement was toward the target, standard errors were available, and the percentage of targeted change achieved was statistically significant.	AH-6 School Health Policies and Practices Study (SHPPS), CDC/NCHHSTP
⁵ Movement was toward the target, standard errors were not available, and the objective had achieved 10% or more of the targeted change.	AH-7 Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP AH-8 National Survey of Children's Health (NSCH), HRSA/MCHB and CDC/NCHS
Little or no detectable change:	AH-9 School Health Profiles, CDC/NCHHSTP AH-10 School Survey on Crime and Safety (SSOCS), ED/NCES
⁶ Movement was toward the target, standard errors were available, and the percentage of targeted change achieved was not statistically significant.	AH-11.1 Uniform Crime Reporting Program (UCR), DOJ/FBI AH-11.2 Uniform Crime Reporting Program (UCR), DOJ/FBI
⁷ Movement was toward the target, standard errors were not available, and the objective had achieved less than 10% of the targeted change.	AH-11.3 School Crime Supplement to the National Crime Victimization Survey (SCS), DOJ/BJS AH-11.4 National Crime Victimization Survey (NCVS), DOJ/BJS
⁸ Movement was away from the baseline and target, standard errors were available, and the percentage change relative to the baseline was not statistically significant.	
⁹ Movement was away from the baseline and target, standard errors were not available, and the objective had moved less than 10% relative to the baseline.	
¹⁰ There was no change between the baseline and the midcourse data point.	
Getting worse:	
¹¹ Movement was away from the baseline and target, standard errors were available, and the percentage change relative to the baseline was statistically significant.	
¹² Movement was away from the baseline and target, standard errors were not available, and the objective had moved 10% or more relative to the baseline.	
¹³ Baseline only: The objective only had one data point, so progress toward target attainment could not be assessed.	
¹⁴ Informational: A target was not set for this objective, so progress toward target attainment could not be assessed.	
¹⁵ For objectives that moved toward their targets, movement toward the target was measured as the percentage of targeted change achieved (unless the target was already met or exceeded at baseline):	
$\text{Percentage of targeted} = \frac{\text{Midcourse value} - \text{Baseline value}}{\text{HP2020 target} - \text{Baseline value}} \times 100$	
¹⁶ For objectives that moved away from their baselines and targets, movement away from the baseline was measured as the magnitude of the percentage change from baseline:	
$\text{Magnitude of percentage} = \frac{ \text{Midcourse value} - \text{Baseline value} }{\text{Baseline value}} \times 100$	
¹⁷ Statistical significance was tested when the objective had a target and at least two data points, standard errors of the data were available, and a normal distribution could be assumed. Statistical significance of the percentage of targeted change achieved or the magnitude of the percentage change from baseline was assessed at the 0.05 level using a normal one-sided test.	

Table 2–3. Midcourse Health Disparities¹ for Population-based Adolescent Health Objectives

Most favorable (least adverse) and least favorable (most adverse) group rates and summary disparity ratios^{2,3} for selected characteristics at the midcourse data point

LEGEND

At the midcourse data point	Group with the most favorable (least adverse) rate	Group with the least favorable (most adverse) rate	Data are available, but this group did not have the highest or lowest rate.	Data are not available for this group because the data were statistically unreliable, not collected, or not analyzed.
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Population-based Objectives	Sex		Race and Ethnicity		Summary Disparity Ratio ²		Education ⁴		Family Income ⁵		Disability		Location														
	Male	Female	American Indian or Alaska Native	Asian	Native Hawaiian or other Pacific Islander	Two or more races	Hispanic or Latino	Black, not Hispanic	White, not Hispanic	Less than high school	High school graduate	At least some college	Associate's degree	4-year college degree	Advanced degree	Summary Disparity Ratio ²	Poor	Near-poor	Middle	Near-high	High	Summary Disparity Ratio ²	Persons with disabilities	Persons without disabilities	Summary Disparity Ratio ²	Metropolitan	Nonmetropolitan
AH-1 Adolescents receiving a wellness checkup in the past 12 months (percent, 10–17 years) (2014)			1.004												1.088						1.108*						1.112*
AH-2 Adolescents participating in extracurricular and out-of-school activities (percent, 12–17 years) (2011–2012)			1.026*												1.093*						1.222*						1.045*
AH-3.1 Adolescents having an adult with whom they can discuss serious problems (percent, 12–17 years) (2013)			1.015												1.052						1.048*						1.009
AH-3.2 Adolescents whose parents attend their events and activities (percent, 12–17 year olds) (2011–2012)			1.027*												1.209*						1.191*						1.015
AH-4.1 Adolescents in foster care who exhibit early readiness for adulthood (percent, 17 year olds) (2010–2011)			1.313†												1.097†												
AH-5.1 Students graduating from high school 4 years after starting 9th grade (percent) (2012–2013)															1.175†												
AH-5.2 Students served under the Individuals with Disabilities Education Act who graduate high school with a diploma (percent, 14–21 years) (2012–2013)			1.038†												1.150†												
AH-5.3.1 Fourth graders whose reading skills are at or above grade level (percent) (2013)			1.196*												1.777*												1.194*

Table 2–3. Midcourse Health Disparities¹ for Population-based Adolescent Health Objectives—Continued

Most favorable (least adverse) and least favorable (most adverse) group rates and summary disparity ratios^{2,3} for selected characteristics at the midcourse data point

LEGEND

At the midcourse data point



Group with the most favorable (least adverse) rate



Group with the least favorable
(most adverse) rate



Data are available, but this group did not have the highest or lowest rate.



Data are not available for this group because the data were statistically unreliable, not collected, or not analyzed.

Table 2–3. Midcourse Health Disparities¹ for Population-based Adolescent Health Objectives—Continued

Most favorable (least adverse) and least favorable (most adverse) group rates and summary disparity ratios^{2,3} for selected characteristics at the midcourse data point

LEGEND

At the midcourse data point



Group with the most favorable
(least adverse) rate



Group with the least favorable (most adverse) rate



Data are available, but this group did not have the highest or lowest rate.



Data are not available for this group because the data were statistically unreliable, not collected, or not analyzed.

	Characteristics and Groups																							
	Sex		Race and Ethnicity					Education ⁴		Family Income ⁵		Disability	Location											
Population-based Objectives	Male	Female	Summary Disparity Ratio ²					Less than high school	High school graduate	At least some college	Associate's degree	4-year college degree	Advanced degree	Poor	Near-poor	Middle	Near-high	High	Persons with disabilities	Persons without disabilities	Summary Disparity Ratio ²	Metropolitan	Nonmetropolitan	Summary Disparity Ratio ²
AH-8 Adolescents whose parents consider them to be safe at school (percent, 12–17 years) (2011–2012)	[Color Box]	[Color Box]	1.013	a	a	a	a							[Color Box]				1.010						
AH-11.1 Arrests of minors and young adults for serious violent crimes (per 100,000 population, 10–24 years) (2012)	[Color Box]	[Color Box]	4.076†											[Color Box]										
AH-11.2 Arrests of minors and young adults for serious property crimes (per 100,000 population, 10–24 years) (2012)	[Color Box]	[Color Box]	1.686†											[Color Box]										
AH-11.3 Students who report the presence of gangs at school (percent, 12–18 years) (2013)	[Color Box]	[Color Box]	1.074											[Color Box]					I	e				
AH-11.4 Youth victimization from crimes of violence (per 1,000 population, 12–24 years) (2013)	[Color Box]	[Color Box]	1.015											[Color Box]					I	e				

Table 2–3. Midcourse Health Disparities¹ for Population-based Adolescent Health Objectives—Continued

NOTES
See HealthyPeople.gov for all Healthy People 2020 data. The Technical Notes provide more information on the measures of disparities.

FOOTNOTES

Health disparities were assessed among population groups within specified demographic characteristics (sex, race and ethnicity, educational attainment, etc.). This assessment did not include objectives that were not population-based, such as those based on states, worksites, or those monitoring the number of events.

¹When there were only two groups (e.g., male and female), the **summary disparity ratio** was the ratio of the higher to the lower rate.

²When there were three or more groups (e.g., white non-Hispanic, black non-Hispanic, Hispanic) and the most favorable rate (R_b) was the highest rate, the **summary disparity ratio** was calculated as R_b / R_a , where R_a = the average of the rates for all other groups. When there were three or more groups and the most favorable rate was the lowest rate, the summary disparity ratio was calculated as R_a / R_b .

³Education level of the patient.

⁴Unless otherwise footnoted, the poor, near-poor, middle, near-high, and high income groups are for persons whose family incomes were less than 100%, 100%–199%, 200%–399%, 400%–599%, and at or above 600% of the poverty threshold, respectively.

⁵*The summary disparity ratio was significantly greater than 1.000. Statistical significance was assessed at the 0.05 level using a normal one-sided test on the natural logarithm scale.

⁶The summary disparity ratio was not tested for statistical significance because standard errors of the data were not available or normality on the natural logarithm scale could not be assumed.

⁷Data do not include persons of Hispanic origin.

⁸Data are for persons whose family income was 400% or more of the poverty threshold.

⁹Data are for Asian or Pacific Islander persons.

¹⁰Data are for rural locations.

¹¹Location of the school.

¹²Data are for persons whose families earned less than \$20,000.

¹³Data are for persons whose families earned \$20,000 to \$34,999.

FOOTNOTES—Continued

¹⁴Data are for persons whose families earned \$35,000 to \$49,999.

¹⁵Data are for persons whose families earned \$50,000 to \$74,999.

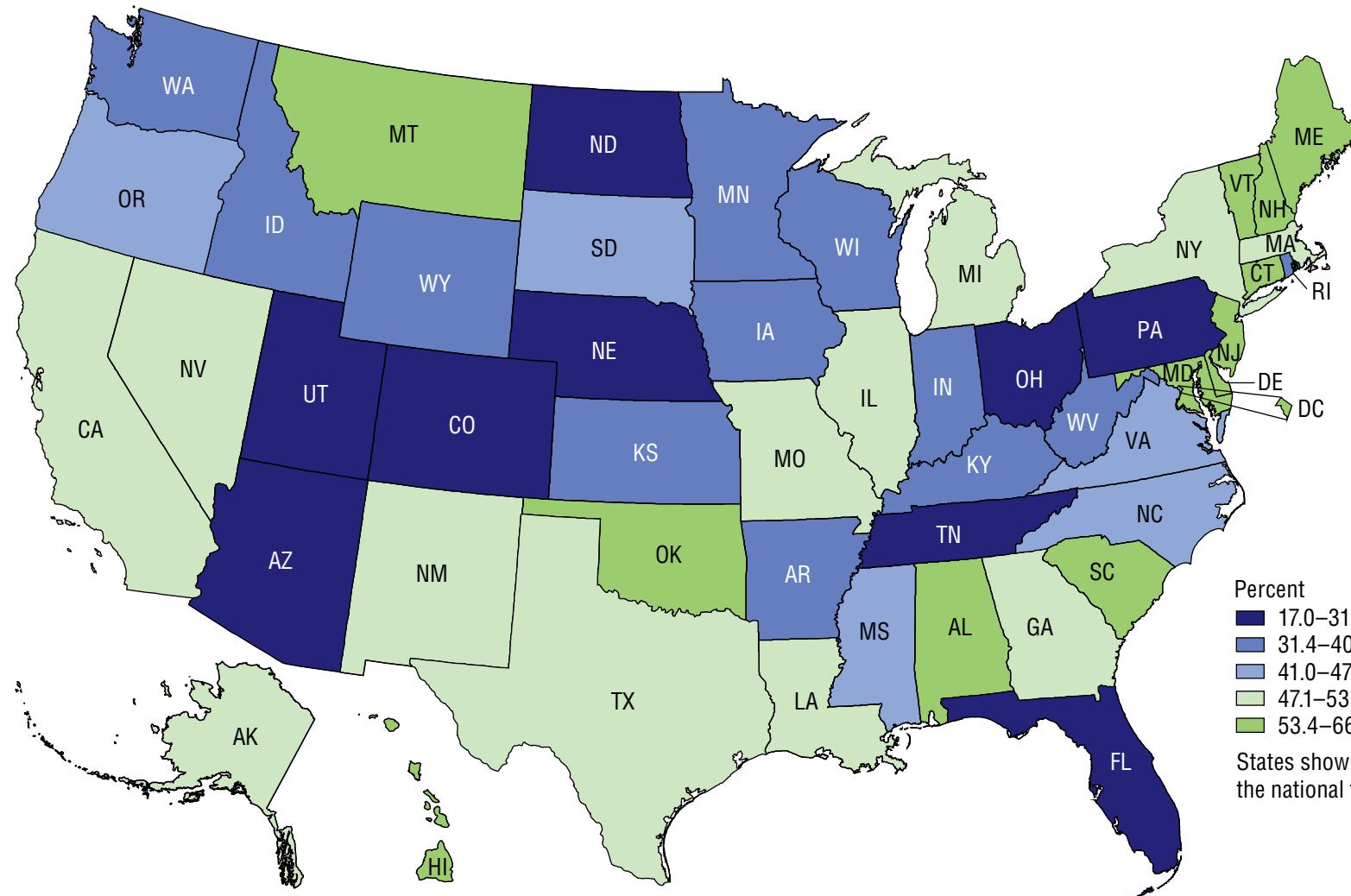
¹⁶Data are for persons whose families earned \$75,000 or more.

¹⁷Data are for urban locations and exclude suburban locations.

DATA SOURCES	
AH-1	National Health Interview Survey (NHIS), CDC/NCHS
AH-2	National Survey of Children's Health (NSCH), HRSA/MCHB and CDC/NCHS
AH-3.1	National Survey on Drug Use and Health (NSDUH), SAMHSA
AH-3.2	National Survey of Children's Health (NSCH), HRSA/MCHB and CDC/NCHS
AH-4.1	National Youth in Transition Database (NYTD), ACF
AH-5.1	Common Core of Data (CCD), ED/NCES
AH-5.2	Individuals with Disabilities Education Act data (IDEA data), ED/OSERS
AH-5.3.1	National Assessment of Educational Progress (NAEP), ED/NCES
AH-5.3.2	National Assessment of Educational Progress (NAEP), ED/NCES
AH-5.3.3	National Assessment of Educational Progress (NAEP), ED/NCES
AH-5.4.1	National Assessment of Educational Progress (NAEP), ED/NCES
AH-5.4.2	National Assessment of Educational Progress (NAEP), ED/NCES
AH-5.4.3	National Assessment of Educational Progress (NAEP), ED/NCES
AH-5.5	National Survey on Drug Use and Health (NSDUH), SAMHSA
AH-5.6	National Health Interview Survey (NHIS), CDC/NCHS
AH-7	Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP
AH-8	National Survey of Children's Health (NSCH), HRSA/MCHB and CDC/NCHS
AH-11.1	Uniform Crime Reporting Program (UCR), DOJ/FBI
AH-11.2	Uniform Crime Reporting Program (UCR), DOJ/FBI
AH-11.3	National Crime Victimization Survey—School Crime Supplement (SCS), Department of Justice, Bureau of Justice Statistics and Department of Education,
AH-11.4	National Center for Education Statistics (DOJ/BJS and ED/NCES)
	National Crime Victimization Survey (NCVS), DOJ/BJS

Map 2–1. Adolescents (17 years) in Foster Care Who Exhibited Early Readiness for Transition to Adulthood, by State: 2010–2011

Healthy People 2020 Objective AH-4.1 • National Target = 47.1% • National Rate = 42.8%

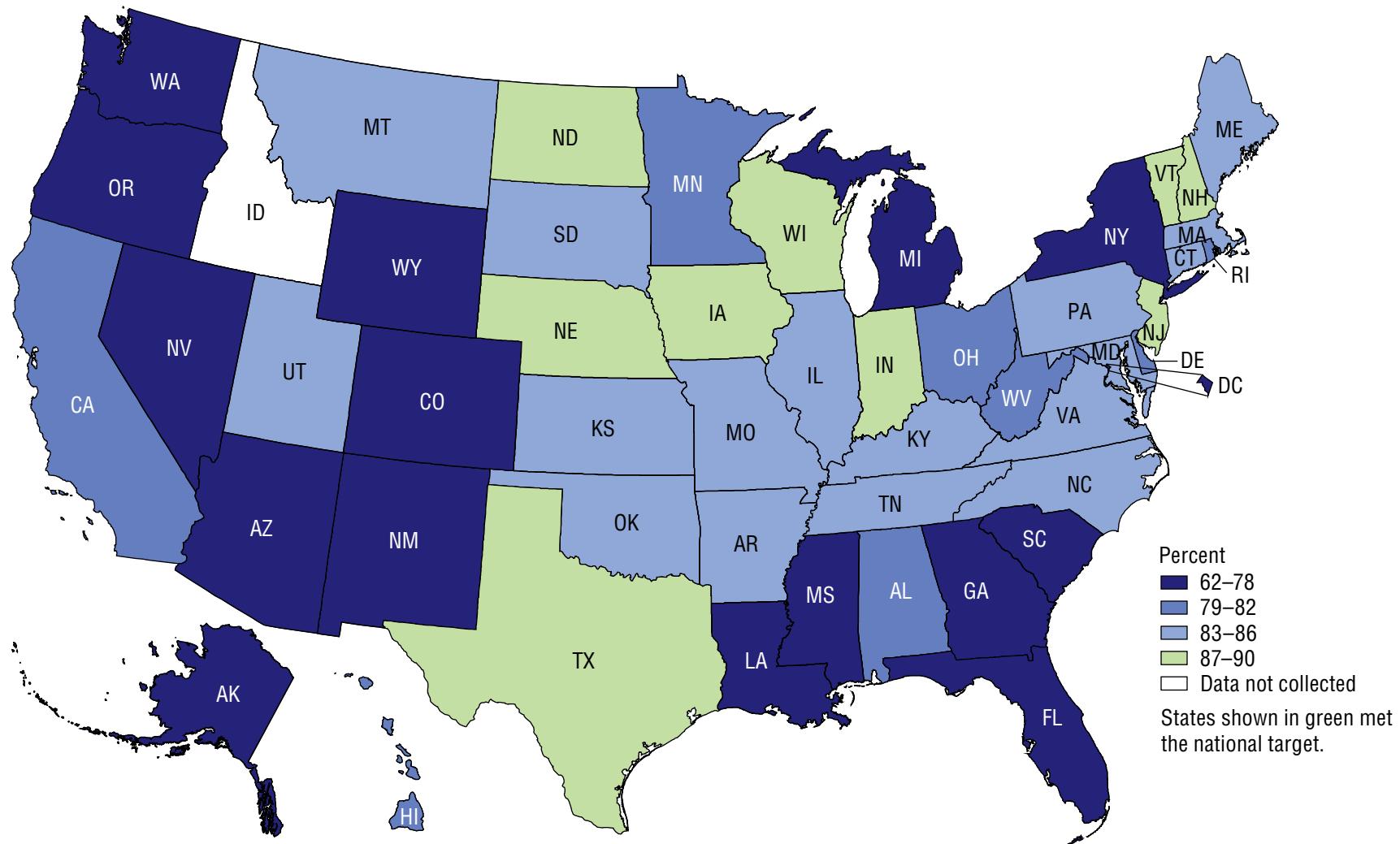


NOTES: Data are for youth in foster care who exhibited positive early indicators of readiness for transition to adulthood by meeting all of the following criteria: (1) either employed part/full-time or had employment skills or were enrolled in and attending school; (2) reported having a positive connection to an adult; (3) did not report ever having been referred to substance abuse counseling or assessment; (4) did not report a history of incarceration; and (5) did not report giving birth or fathering a child. Data are displayed by a modified Jenks classification for U.S. states which creates categories that minimize within-group variation and maximize between-group variation. The [Technical Notes](#) provide more information on the data and methods.

DATA SOURCE: National Youth in Transition Database (NYTD), ACF

Map 2–2. Students Who Graduated From High School 4 Years After Starting 9th Grade, by State: 2012–2013

Healthy People 2020 Objective AH-5.1 • National Target = 87% • National Rate = 81%

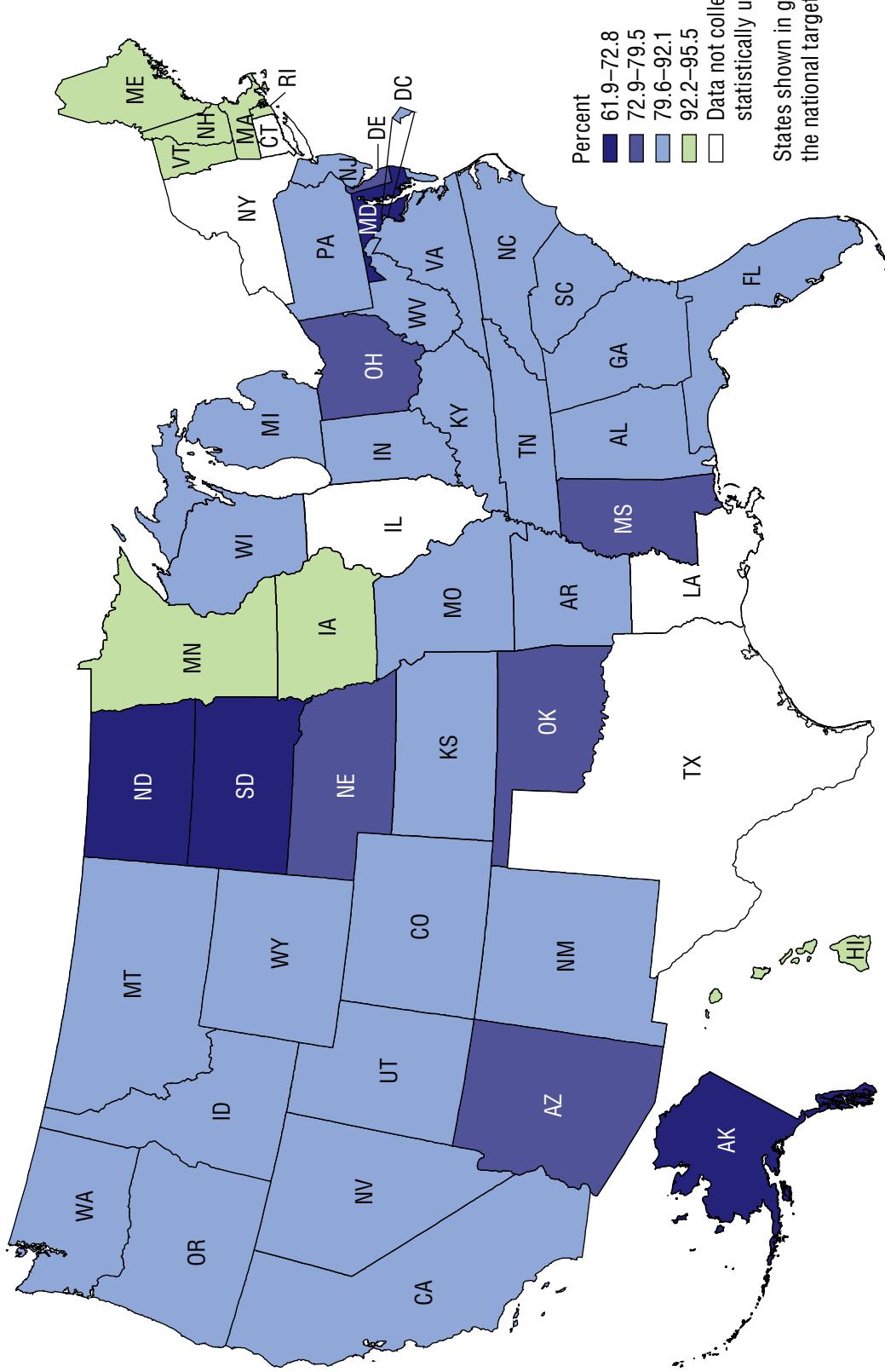


NOTES: Data are for students who graduated from high school 4 years after starting 9th grade and are measured using the 4-year adjusted cohort graduation rate. Data are displayed by a modified Jenks classification for U.S. states which creates categories that minimize within-group variation and maximize between-group variation. The [Technical Notes](#) provide more information on the data and methods.

DATA SOURCE: Common Core of Data (CCD), ED/NCES

Map 2-3. Middle and High Schools That Prohibited Harassment Based on a Student's Sexual Orientation or Gender Identity, by State: 2012

Healthy People 2020 Objective AH-9 • National Target = 92.2% • National Rate = 87.4%



NOTES: Data are for middle and high schools that prohibited harassment based on a student's sexual orientation or gender identity. Data are displayed by a modified Jenks classification for U.S. states which creates categories that minimize within-group variation and maximize between-group variation. The [Technical Notes](#) provide more information on the data and methods.

DATA SOURCE: School Health Profiles, CDC/NCHHSTP