

MetroWest Adolescent Health Survey Regional Highlights

Informing data-driven school and
community health policies and practices



2025

MetroWest Region Middle School Youth

GRADES 7-8



**METROWEST
HEALTH
FOUNDATION**



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Regional Highlights from the 2025 MetroWest Adolescent Health Survey

MetroWest Region Middle School Report

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Background

The MetroWest Adolescent Health Survey (MWAHS), an initiative of the MetroWest Health Foundation, has been monitoring trends in adolescent health and risk behaviors for two decades. Since 2006, the survey has been administered to middle and high school students ten times, providing critical information on health behaviors and protective factors to drive programmatic and policy efforts at the local and regional levels, including efforts to reduce disparities and promote health equity. This decades-long effort demonstrates the MetroWest Health Foundation's commitment to advancing youth physical and mental wellbeing through data-driven strategies to support youth, families, schools, and communities.

Methods

Survey Instrument

The MWAHS content is based on the Centers for Disease Control and Prevention's Youth Risk Behavior Survey (YRBS),¹ which asks questions about health-related behaviors and experiences that can lead to poor health, death, and disability among adolescents, including: substance use, violence, behaviors related to unintentional injury, lack of physical activity, unsafe sexual behaviors (at the high school level only), and mental health. Based on input from stakeholders in the MetroWest region, the MWAHS expands on these topics to gather more detailed information on areas of current concern (e.g., use of electronic vapor products and mental health) as well as to explore other priority topics relevant to the current challenges youth are facing (e.g., smartphone and other digital media use, protective factors like adult support and school connectedness, and access to mental health services). The survey was available to all students in English, Spanish, and Portuguese, and students could choose which language to use.

Collecting self-report data from youth is an important way of determining the prevalence of health and risk behaviors. There is no evidence that asking students about their health behaviors will encourage them to engage in those behaviors. Students respond truthfully when they perceive the survey as important, that their privacy is being protected, and that their participation is anonymous.²

Data Collection

The 2025 survey is the third online survey administration of the MWAHS, which is a voluntary and anonymous survey. Other school-based surveillance studies have switched from paper-and-pencil to online surveys in recent years, including the National YRBS¹ and Massachusetts YRBS.³ Research has shown that findings from online and paper-and-pencil surveys of youth risk behaviors are equivalent.⁴

As in all prior survey waves, local procedures were followed to inform parents/guardians of the survey in advance, provide them with the option to view the survey, and give them the choice to opt out their child(ren). Students were also informed that their participation was voluntary, that they could skip any question they did not wish to answer, and that no names or other identifying information were collected. A student video was created and shown to students in advance of the survey to describe the survey's purpose and procedures and to emphasize its anonymous and voluntary nature. Data collection at each school was guided by a standard protocol that protected the privacy of students' responses. Precautions were taken through online platform procedures to ensure that data being collected electronically would remain anonymous and that survey responses could not be linked to an individual student or classroom.

Participants

A census of students in grades 7 and 8 across 27 middle schools in 23 school districts in the MetroWest region participated in the 2025 Middle School MWAHS. Among these school districts, 18 included 6th grade students in their survey. In total, 14,516 students in grades 6 through 8 completed the 2025 survey, representing 88.2% of youth.

Participants in grades 7 and 8 only are included in this report, as 6th grade was not surveyed in all school districts. Following data cleaning, the analytic sample included 10,331 students. The demographics of participants described in this report are shown in Table 1.

Analysis and Reporting

The MWAHS data allows for a valuable examination of behavioral and attitudinal trends across ten time points from 2006 to 2025, with emphasis in this report placed on recent trends. The small amount of data from students who answered with implausible response patterns is not included in the analysis.

This report includes a description of risk and protective behaviors by grade and sex¹ as well as race/ethnicity, sexual orientation/gender identity, and learning/physical disability status. These data on disparities in health and risk behaviors are provided to identify groups of students that may need increased support and are influenced by inequities in the forces and systems (e.g., economic, social, educational, health care) that influence the conditions of daily life.

Cross-tabulations looking at associations across various indicators are also described, most often focusing on the relationship between risk behaviors or protective factors with mental health given the attention that youth mental health has received locally and nationally in recent years. Relationships shown are significant at the $p < .05$ level or below, meaning the relationships described are highly unlikely to be due to chance. Note that these associations cannot be interpreted as causal, meaning that it is not possible to tell the directionality based on cross-sectional survey data (data collected at one point in time that does not follow individuals over time). The associations are provided to increase understanding of the co-occurrence of risk behaviors, as well as associations of risk behaviors and protective factors, to inform strategies for supporting students.

Table 1. 2025 MetroWest Adolescent Health Survey, Middle School Participant Demographics (n=10,331)

Demographic	n	%
Sex		
Female	5,124	49.7
Male	5,188	50.3
Grade		
7 th grade	5,149	49.8
8 th grade	5,182	50.2
Race/ethnicity		
Asian	972	9.5
Black	423	4.1
Hispanic/Latino	1,607	15.7
White	5,783	56.5
Multiracial/other	1,450	14.2
Sexual orientation and gender identity		
LGBTQ+	1,285	13.5
Heterosexual cisgender	8,252	86.5
Learning disability		
Yes	1,018	10.6
No	8,552	89.4
Physical disability		
Yes	748	7.8
No	8,821	92.2

Note: %'s represent valid percents, meaning among students who responded to the question

* Sex is used to examine trends from 2006 to 2023 and not gender, as the survey did not ask about gender until 2021.

Comparisons of MetroWest data with state and national trends are provided when similar data is available from other recent surveys. Comparisons with data from the most recent YRBS are not provided, as the most current state and national data available at the time of this report are from spring 2023, more than two full years prior to the 2025 MWAHS survey administration.

The 2025 MWAHS report provides important data to understand the current state of adolescent health, showing areas where progress is being made and highlighting areas needing continued efforts. The data will help to focus school and community attention on the most critical aspects of adolescent health.

Substance Use

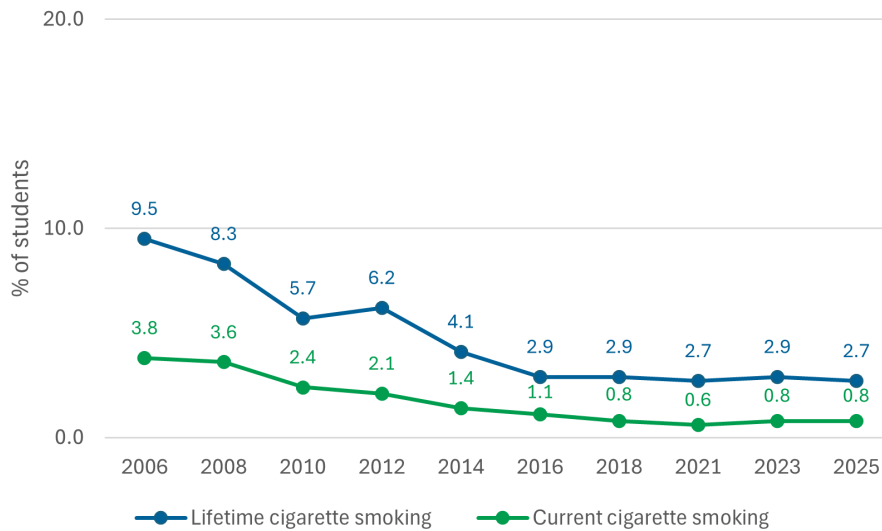
Cigarette Smoking

Cigarette smoking has remained low, with only 3% of MetroWest middle school students reporting that they ever tried a cigarette.

Trends in Cigarette Smoking (2006 to 2025)

- » **Lifetime cigarette smoking** has remained stable at 3% since 2016, down from a high of 10% in 2006 [See Figure 1].
- » **Current cigarette smoking** (past 30 days) has held at 1% since 2014, decreasing from a high of 4% in 2006.

Figure 1. Trends in Cigarette Smoking, 2006-2025 (Grades 7-8)



Demographic Patterns in Cigarette Smoking (2025)

- » **Sex:** Lifetime cigarette smoking is similarly low among females (3%) and males (2%).
- » **Grade:** There is a slight difference in lifetime smoking from grade 7 (2%) to grade 8 (3%).
- » **Race/ethnicity:** Lifetime cigarette smoking is slightly higher among Hispanic/Latino youth (5%) compared to Black youth (3%), multiracial/other youth (3%), White youth (2%), and Asian youth (1%).
- » **Sexual orientation and gender identity:** LGBTQ+ youth are more likely than heterosexual cisgender youth to report lifetime cigarette smoking (6% vs. 2%), with only a slight difference in current smoking (2% vs. 1%).
- » **Disability status:** Youth with physical and/or learning disabilities are more likely to report cigarette smoking than youth without disabilities (5% vs. 2%), with low reports of current smoking among both groups (2% vs. less than 1%).

Electronic Vapor Product Use

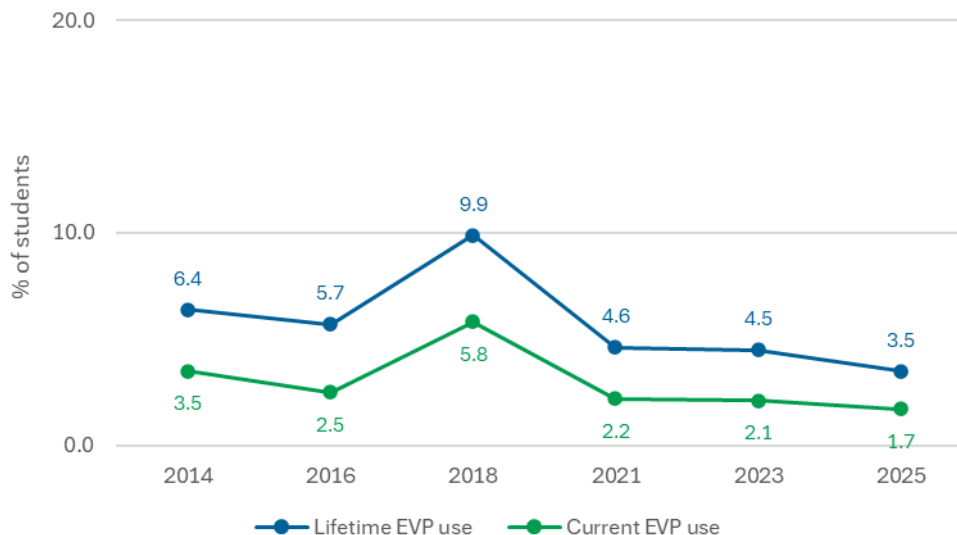
Electronic vapor product use among middle school students has decreased steadily since its peak in 2018, with 4% of youth reporting lifetime vaping in 2025.

Trends in Electronic Vapor Product Use (2014 to 2025)

- » **Lifetime use of electronic vapor products (EVPs)** decreased steadily from a high of 10% in 2018 to 5% in 2023, with reports at 4% in 2025 [See Figure 2].
- » **Current EVP use** (in the past 30 days) decreased from a high of 6% in 2018 to 2% in 2021, remaining steady at around 2% over the past two surveys.
- » **Lifetime use of flavored EVPs** was reported by 4% of youth in 2025, down from 6% in 2023 when this was first measured.
- » Only 1% of youth reported that they used **EVPs on school property** in the past 30 days, with earlier reports similar at 1-2% since 2018, when this data was first collected.

4%
of middle school youth
have **vaped** in their
lifetime.

Figure 2. Trends in Electronic Vapor Product Use, 2014-2025 (Grades 7-8)



Demographic Patterns in Electronic Vapor Product Use (2025)

- » **Sex:** Lifetime EVP use is low among females (4%) and males (3%).
- » **Grade:** Similar proportions of 7th grade (3%) and 8th grade students (4%) have ever used EVPs.
- » **Race/ethnicity:** Lifetime EVP use is highest among Hispanic/Latino youth (9%), followed by Black youth (6%), other/multiracial youth (3%), White youth (2%), and Asian youth (1%).
- » **Sexual orientation and gender identity:** LGBTQ+ youth are more likely to report lifetime vaping (7%) than heterosexual cisgender youth (3%).
- » **Disability status:** Youth with physical and/or learning disabilities are more likely to report lifetime vaping (6%) than youth without disabilities (3%).

Alcohol Use

Alcohol use among middle school youth has continued to decline across multiple measures, including lifetime use, current use, and binge drinking. However, alcohol remains the most prevalent substance used in middle school, reported by 8% of youth in their lifetime.

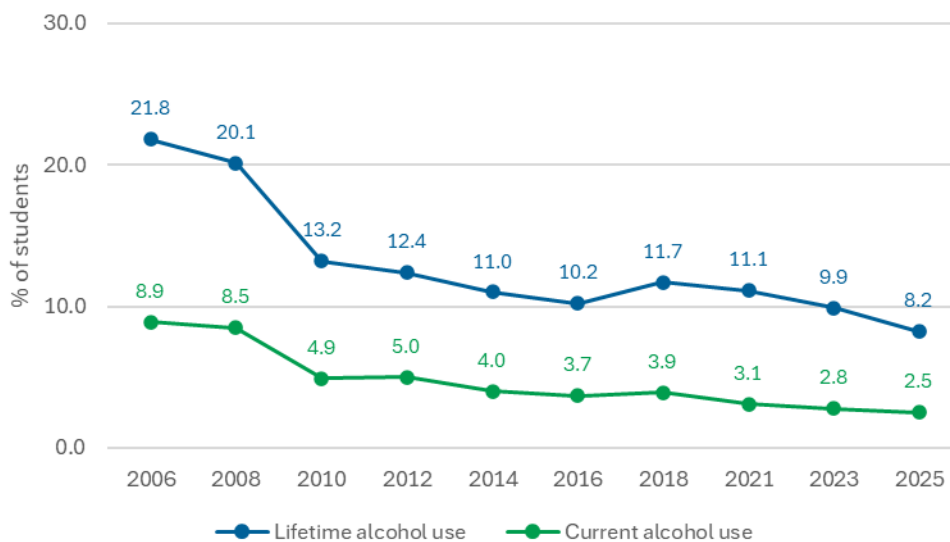
Trends in Alcohol Use (2006 to 2025)

- » **Lifetime alcohol use** decreased steadily from a high of 22% in 2006 to 10% in 2023, with reports at 8% in 2025 [See Figure 3].
- » **Current drinking** (in the past 30 days) declined from 9% in 2006 to 3% in 2023, remaining at that level in 2025.
- » **Binge drinking**, defined as four or more drinks in a row in the past 30 days, has been steady at 1% or lower since 2014.

1 in 12

middle school youth have had a drink of alcohol in their lifetime.

Figure 3. Trends in Alcohol Use, 2006-2025 (Grades 7-8)



Demographic Patterns in Alcohol Use (2025)

- » **Sex:** Alcohol use does not differ notably among females and males. For example, lifetime use is reported by 8% of females and 9% of males.
- » **Grade:** Lifetime drinking increases slightly from 7% in 7th grade to 9% in 8th grade; current drinking is reported by 2% of 7th grade students and 3% of 8th grade students.
- » **Race/ethnicity:** Black youth (13%) and Hispanic/Latino youth (14%) are more likely to have ever used alcohol than multiracial/other youth (8%), White youth (7%), and Asian youth (4%). However, current use is more similar by race/ethnicity, ranging from 1-3% by group.
- » **Sexual orientation and gender identity:** LGBTQ+ youth are more likely to report lifetime drinking (13% vs. 8%) and current drinking (4% vs. 2%) than heterosexual cisgender youth.
- » **Disability status:** Students with physical and/or learning disabilities are more likely than students without disabilities to report lifetime drinking (13% vs. 7%) and current drinking (5% vs. 2%).

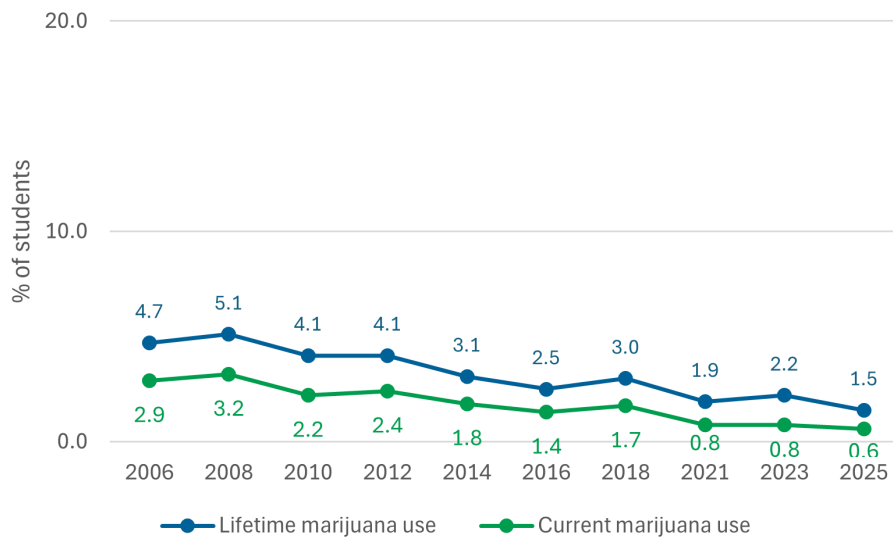
Marijuana Use

Marijuana use remains very low among MetroWest middle school youth, with fewer than 2% reporting ever having used marijuana in 2025.

Trends in Marijuana Use (2006 to 2025)

- » **Lifetime marijuana use** decreased from a high of 5% in 2006-2008 to 2% in 2021 and has remained at that level over the past two surveys [See Figure 4].
- » **Current marijuana use** (in the past 30 days) has remained below 1% since 2021.

Figure 4. Trends in Marijuana Use, 2006-2025 (Grades 7-8)



Demographic Patterns in Marijuana Use (2025)

- » **Sex:** Lifetime marijuana use is low among both females and males (less than 2% for each).
- » **Grade:** Lifetime marijuana use does not differ much from 7th grade (1%) to 8th grade (2%).
- » **Race/ethnicity:** Reports of marijuana use are low among all racial/ethnic groups, ranging from less than 1% to 3% by group.
- » **Sexual orientation and gender identity:** LGBTQ+ youth are more likely to try marijuana than heterosexual cisgender youth (4% vs. 1%).
- » **Disability status:** Lifetime marijuana use is low among youth with disabilities (2%) and youth without disabilities (1%).

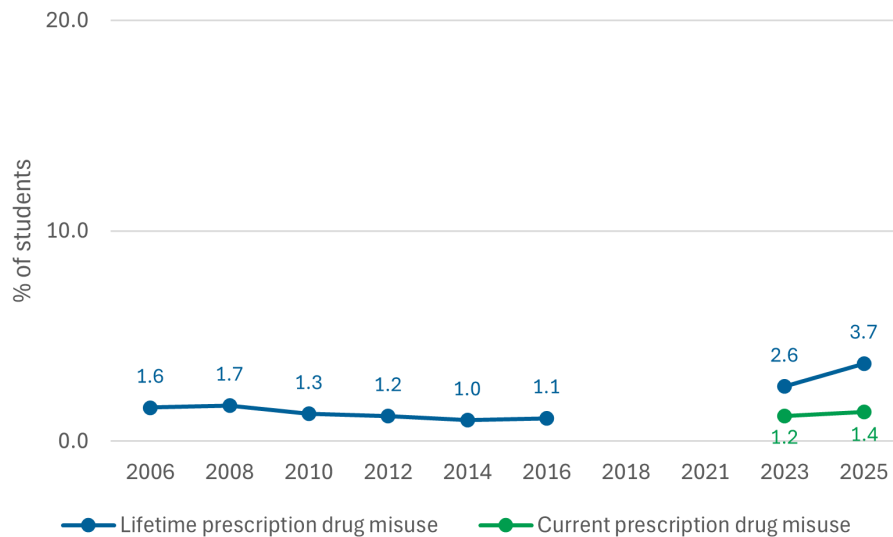
Prescription Drug Misuse

Prescription drug misuse is the only type of substance use reported by middle school youth to be higher in 2025 than in prior years, with 4% saying they have misused prescription drugs in their lifetime.

Trends in Prescription Drug Misuse (2006 to 2025)

- » **Lifetime prescription drug misuse**, defined as using prescription drugs without a doctor’s prescription or differently than how a doctor told you to use them, was steady at 1-2% in the first decade of the survey but increased to 3% in 2023 and then rose further to 4% in 2025 [See Figure 5]. (Data on prescription drug misuse was not collected on the middle school survey in 2018 and 2021.)
- » **Current prescription drug misuse** (in the past 30 days) was stable from 2023 to 2025 at 1%. (Data on current misuse was not collected on previous surveys.)

Figure 5. Trends in Prescription Drug Misuse, 2006-2025 (Grades 7-8)



Demographic Patterns in Prescription Drug Misuse (2025)

- » **Sex:** Lifetime prescription drug misuse does not differ by sex (4% for both females and males).
- » **Grade:** Prescription drug misuse also does not differ by grade (lifetime use is 4% among 7th grade students and 8th grade students).
- » **Race/ethnicity:** Lifetime prescription drug misuse is reported by 5% of Hispanic/Latino and multiracial/other youth, 4% of Black youth and Asian youth, and 3% of White youth.
- » **Sexual orientation and gender identity:** LGBTQ+ youth are more likely to misuse prescription drugs (7%) compared to heterosexual cisgender youth (3%).
- » **Disability status:** Youth with disabilities are more likely to report lifetime prescription drug misuse (7%) than youth without disabilities (3%).

Additional Findings Related to Substance Use (2025)

Perceived Risk of Substance Use

Perceived risk of electronic vapor products, alcohol, and marijuana, defined as “moderate” or “great” risk, has remained high in recent surveys across all of these substances. (This data was not collected for cigarettes or prescription drug misuse.)

- » Perceived risk of using **electronic vapor products** increased from 64% in 2016, when it was first measured, to 92% in 2021, and reports have remained high at 90% over the past two surveys.
- » Perceived risk of **alcohol use**, defined as having 5 or more drinks 1-2 times per week, is reported by 88% of youth, which has not changed notably in recent years (earlier reports ranged from 85-87% in 2021-2023).
- » Perceived risk of using **marijuana** once or twice per week decreased from 84% in 2018 to 79% in 2021, but since has increased steadily to 87% in 2025. A separate measure, perceived risk of people your age using marijuana almost every day, has been steady at 92-93% since 2018, when it was first included on the survey.

Access to Substances

There have been declines in ease of access to electronic vapor products and marijuana in recent years (Ease of access data was not collected for all substances).

- » In 2025, 16% of youth say it would be “fairly easy” or “very easy” to get electronic vapor products if they wanted to, down from 21% in 2021, when this question was first asked.
- » 8% of youth report that marijuana would be fairly easy to get if they wanted to, down from a high of 19% in 2018.

Substance Use and Mental Health

While prevalence of substance use is low in middle school, students who use substances are more likely to report mental health problems. For example:

- » Students who have used alcohol in their lifetime are more likely to report depressive symptoms in the past 12 months compared to students who have never had a drink (39% vs. 15%).
- » Students who report lifetime electronic vapor product use are more likely to report depressive symptoms in the past 12 months (60% vs. 15%) and seriously considering suicide in their lifetime (55% vs. 13%) than students who have never vaped.

Comparisons with Other Data Sources

- » The declines in EVP use, alcohol use, and marijuana use among MetroWest middle school youth are consistent with long-term and recent (one-year) declines in past 12-month use of these substances among 8th grade youth nationally, as reported by the national 2025 Monitoring the Future (MTF) survey.⁵
- » Comparable data on prescription drug misuse is not available from the MTF survey at the middle school level.

Violence

Physical Fighting

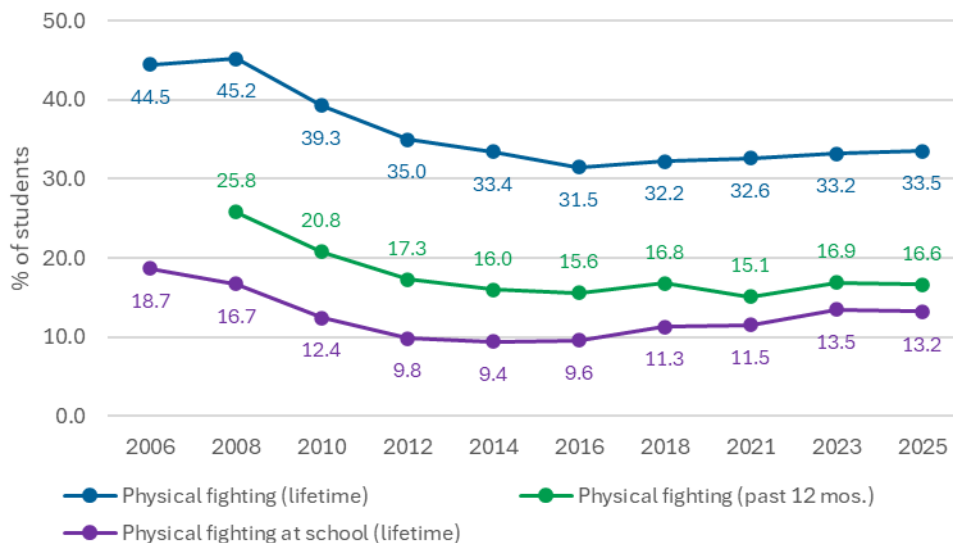
After declining in early years of the MWAHS, reports of physical fighting have remained steady in recent surveys, with one-third of youth reporting that they have been in a physical fight in their lifetime.

Trends in Physical Fighting (2006 to 2025)

- » **Lifetime physical fighting** is reported by 34% of youth. Reports have been steady at 32-33% since 2014, down from a high of 45% in 2008 [See Figure 6].
- » **Fighting in the past 12 months** is reported by 17% of youth. Reports have been similar at 15-17% since 2012 but are down substantially since 2008.
- » **Fighting on school property** has been similar at 12-13% since 2021.

34%
of middle school youth have been in a **physical fight** in their lifetime.

Figure 6. Trends in Physical Fighting, 2006-2025 (Grades 7-8)



Demographic Patterns in Physical Fighting (2025)

- » **Sex:** Males are more than twice as likely as females to report physical fighting in their lifetime (48% vs. 19%).
- » **Grade:** Lifetime physical fighting is reported by 35% of 7th grade youth and 32% of 8th grade youth.
- » **Race/ethnicity:** Lifetime fighting is highest among Black youth (42%) and Hispanic/Latino youth (40%), followed by multiracial/other youth (36%), White youth (31%) and Asian youth (30%).
- » **Sexual orientation and gender identity:** Reports of lifetime fighting are slightly higher among LGBTQ+ youth (36%) than among heterosexual cisgender youth (33%).
- » **Disability status:** Youth with physical and/or learning disabilities are more likely to report lifetime fighting (46%) compared to nondisabled youth (32%).

Weapon Carrying

Weapon carrying among middle school youth is slightly lower in recent surveys, with 12% of students reporting carrying a weapon in their lifetime.

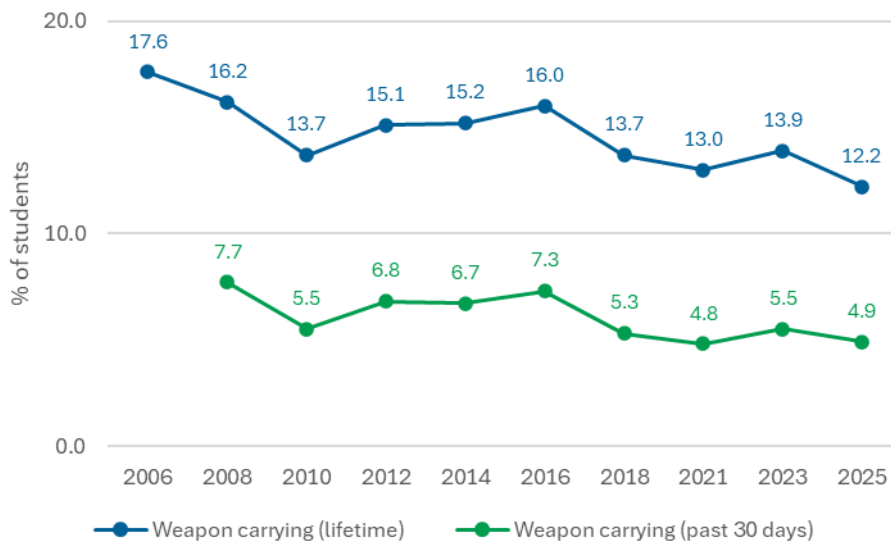
Trends in Weapon Carrying (2006 to 2025)

- » **Lifetime weapon carrying**, defined as carrying a weapon like a gun, knife, or club, is reported by 12% of youth in 2025, with earlier reports at 13-14% since 2018 [See Figure 7].
- » **Recent weapon carrying** (in the past 30 days) is reported by 5% of youth; reports have been steady at 5-6% since 2018.
- » **Weapon carrying on school property** is reported by 1% of youth in their lifetime; reports have been steady at 1% since 2010.

1 in 8

middle school youth have carried a **weapon** in their lifetime.

Figure 7. Trends in Weapon Carrying, 2006-2025 (Grades 7-8)



Demographic Patterns in Weapon Carrying (2025)

- » **Sex:** Three times as many males as females report carrying a weapon in their lifetime (18% vs. 6%).
- » **Grade:** Lifetime weapon carrying is similar by grade (12% in 7th grade and 13% in 8th grade).
- » **Race/ethnicity:** Lifetime weapon carrying is reported by 13% of White youth, 12% of multiracial/other youth, 11% of Black youth, 10% of Hispanic/Latino youth, and 9% of Asian youth.
- » **Sexual orientation and gender identity:** LGBTQ+ youth are more likely to report lifetime weapon carrying than heterosexual cisgender youth (16% vs. 12%).
- » **Disability status:** Youth with disabilities are about twice as likely to report lifetime weapon carrying than youth without disabilities (20% vs. 11%).

Bullying and Cyberbullying

Overall Bullying and Bullying on School Property

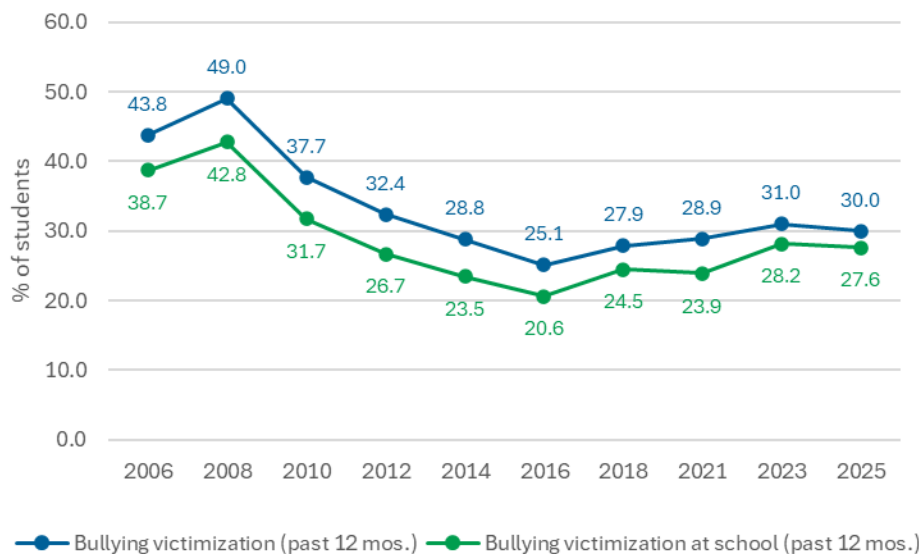
Reports of bullying—overall and on school property—have increased over the past decade since they reached a low in 2016. However, there has been little change over the past two surveys. In 2025, 30% of middle school students reported being bullied in the past 12 months, and 28% reported being bullied on school property.

Trends in Bullying (2006 to 2025)

- » **Bullying** in the past 12 months, defined as when one or more students tease, threaten, spread rumors about, hit, shove, or hurt another student over and over again, increased from a low of 25% in 2016 to 31% in 2023, with reports similar in 2025 at 30%. However, reports are still lower than in the early years of the MWAHS, when they peaked at 49% in 2008 [See Figure 8].
- » **Bullying on school property** in the past 12 months follows the same pattern, increasing from a low of 21% in 2016 to 28% in 2023, remaining at that level in 2025.
- » While females have always reported being bullied at school more often than males, that gap is narrowing. Since 2021, reports of being bullied at school among females have fluctuated from 28-31%. During the same time, reports among males increased from 20% in 2021 to 26% in 2025.

28%
of middle school youth were bullied at school in the past 12 months.

Figure 8. Trends in Bullying, 2006-2025 (Grades 7-8)



Demographic Patterns in Bullying (2025)

- » **Sex:** Reports of being bullied are slightly higher among females than males (e.g., 29% vs. 26% for bullying on school property).
- » **Grade:** Reports of bullying in the past 12 months are higher in 7th grade (32%) than in 8th grade (28%), with a similar pattern for school bullying.
- » **Race/ethnicity:** Overall reports of bullying are highest among Hispanic/Latino and multiracial/other youth (32% for each), followed by White youth (30%), Black youth (28%), and Asian youth (24%). Being bullied at school is highest among Hispanic/Latino youth (32%) and Black youth (31%), followed by multiracial/other youth (28%), White youth (27%) and Asian youth (21%).
- » **Sexual orientation and gender identity:** Reports of being bullied are nearly twice as high for LGBTQ+ youth than for heterosexual cisgender youth. For example, 45% of LGBTQ+ youth have been bullied at school in the past 12 months compared to 25% of heterosexual cisgender youth.
- » **Disability status:** Youth with disabilities are also much more likely to be bullied. For example, 42% of youth with learning and/or physical disabilities were bullied at school compared to 25% of nondisabled youth.

Cyberbullying

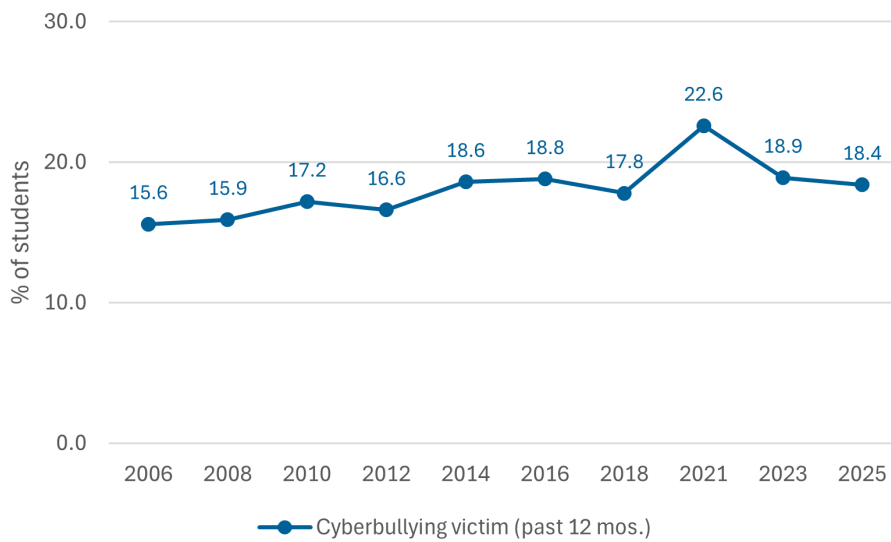
After peaking in 2021, reports of being cyberbullied have remained similar over the past two surveys, with 18% of students reporting they were cyberbullied in the past 12 months in 2025.

Trends in Cyberbullying (2006 to 2025)

- » **Cyberbullying**, defined as using the Internet, cell phones, or other electronic devices to bully, tease, threaten, or spread rumors about someone in the past 12 months decreased from a high of 23% in 2021 to 19% in 2023, with 2025 reports at 18%. However, reports of being cyberbullied are higher than they were in early years of the MWAHS [See Figure 9].
- » Over the past three surveys, cyberbullying has decreased more among females (from 27% in 2021 to 21% in 2025) than among males (from 19% to 16%).

18%
of middle school youth were cyberbullied in the past 12 months.

Figure 9. Trends in Cyberbullying, 2006-2025 (Grades 7-8)



Demographic Patterns in Cyberbullying (2025)

- » **Sex:** Females are more likely to be cyberbullied (21%) than males (16%).
- » **Grade:** Cyberbullying does not differ notably from 7th grade (18%) to 8th grade (19%).
- » **Race/ethnicity:** Reports of being cyberbullied are highest among Hispanic/Latino youth (26%) and Black youth (23%), followed by multiracial/other youth (18%), White youth (17%), and Asian youth (14%).
- » **Sexual orientation and gender identity:** LGBTQ+ youth are more likely to report being cyberbullied than heterosexual youth (25% vs. 18%).
- » **Disability status:** Youth with disabilities are nearly twice as likely to be cyberbullied than nondisabled youth (29% vs. 16%).

Additional Findings Related to Bullying and Cyberbullying

Identity-Based Bullying

- » 14% of youth were bullied in the past 12 months—either online and/or on school property—based on their race or ethnicity, 8% based on their religion or culture, 7% based on a disability they have or others think they have, 6% based on their sexual orientation, and 5% based on their gender.
- » 34% of LGBTQ+ youth report being bullied based on their sexual orientation, and 23% of youth with disabilities report being bullied due to their disability.
- » Bullying due to race/ethnicity increased from 10% in 2021 to 14% in 2023-2025, while there have been slight declines in bullying due to gender and sexual orientation over the past three surveys. Other forms of identity-based bullying have not changed in recent years.

Help-Seeking Among Bullied Students

Many youth who are being bullied are not seeking help from adults at school or outside of school, particularly for cyberbullying:

- » Among youth who were **bullied at school** in the past 12 months, fewer than half (40%) told a school adult and 57% told a non-school adult that they were being bullied.
- » Among youth who were **cyberbullied** in the past 12 months, only 18% told a school adult and less than one in three (30%) told a non-school adult that they were being cyberbullied.

Bullying and Mental Health

Being a victim of bullying—at school or online—is strongly associated with mental health problems among middle school youth:

- » Youth who were bullied at school in the past 12 months are about three times more likely to report depressive symptoms in the past 12 months (33% vs. 10%) and seriously considering suicide in their lifetime (28% vs. 9%) compared to students who were not bullied at school.
- » Similarly, youth who were cyberbullied in the past 12 months are around three times more likely to report depressive symptoms (39% vs. 12%) and seriously considering suicide (31% vs. 11%) than youth who were not cyberbullied.

Mental Health

Stress and Anxiety

Reports of recent stress are slightly higher in 2025 than 2023, while reports of anxiety are slightly lower. However, certain groups of youth—females, Hispanic/Latino youth, LGBTQ+ youth, and youth with disabilities—are more likely to report anxiety relative to their peers.

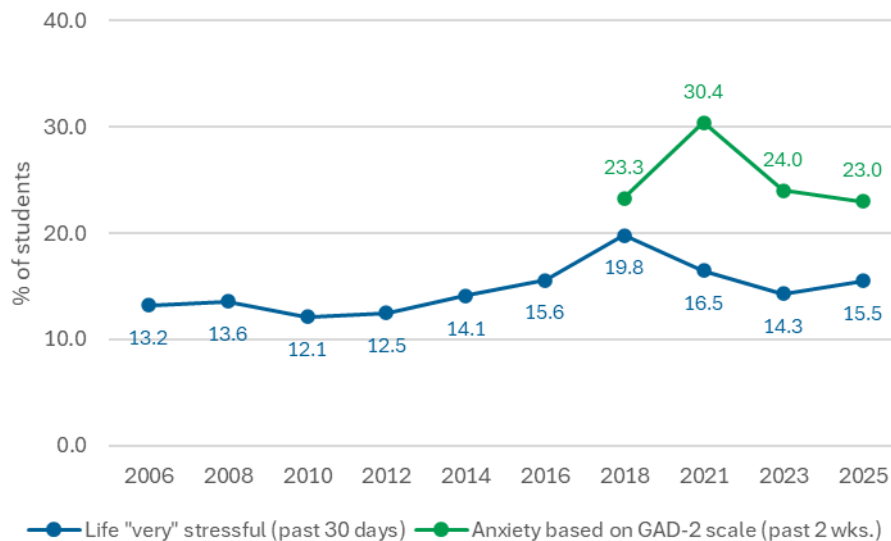
Trends in Stress and Anxiety (2006 to 2025)

- » **Overall stress**, defined as life being “very” stressful in the past 30 days, peaked at 20% in 2018 and lowered to 14% in 2023, with reports slightly higher in 2025 at 16% [See Figure 10].
- » From 2023 to 2025, reports of stress increased slightly among females (from 20% to 22%) but remained steady among males at 9%.
- » **Anxiety** in the past two weeks,^{*6} was highest in 2021 at 30% and then decreased to 24% in 2023, with reports at 23% in 2025.
- » From 2021 to 2025, anxiety decreased more among females (from 44% to 34%) than males (from 17% to 12%).

1 in 4

middle school youth report experiencing generalized anxiety in the past two weeks.

Figure 10. Trends in Stress and Anxiety, 2006-2025 (Grades 7-8)



* Scores on the Generalized Anxiety Disorder Scale (GAD-2) indicate need for further evaluation based on reports of feeling nervous, anxious, or on edge and feeling unable to stop or control worrying in the past two weeks.

Demographic Patterns in Stress and Anxiety (2025)

- » **Sex:** Females are more likely than males to report recent stress (22% vs. 9%) and anxiety (34% vs. 12%).
- » **Grade:** Reports of stress and anxiety are similar among 7th and 8th grade youth (22% and 24%, respectively, for stress; 15% and 16% for anxiety).
- » **Race/ethnicity:** Reports of stress vary from 14-18% by race/ethnicity, with the highest reports among Hispanic/Latino youth (18%) and multiracial/other youth (17%). Reports of anxiety show greater variation by racial/ethnic group, with the highest reports among Hispanic/Latino youth (29%), followed by White youth (23%), multiracial/other youth (21%), Black youth (20%), and Asian youth (19%).
- » **Sexual orientation and gender identity:** LGBTQ+ youth are more than twice as likely to report recent stress (32% vs. 13%) and anxiety (44% vs. 20%) than heterosexual cisgender youth.
- » **Disability status:** Youth with physical and/or learning disabilities are also much more likely to report stress (28% vs. 13%) and anxiety (39% vs. 20%) than nondisabled youth.

Depressive Symptoms, Self-Injury, and Suicidality

After peaking in 2021, reports of depressive symptoms, self-injury, and suicidality have remained lower over the past two surveys, with little change since 2023. In 2025, 17% of middle school youth reported depressive symptoms in the past 12 months, and 14% considered suicide in their lifetime.

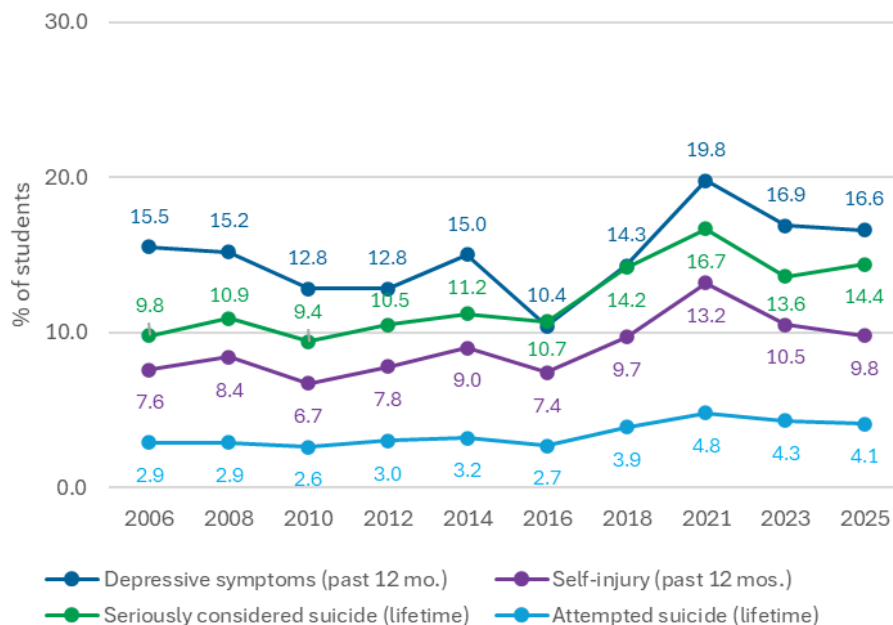
Despite improvements in youth mental health since 2021, mental health problems remain more prevalent than they were in early years of the MWAHS, particularly among females. LGBTQ+ youth and youth with disabilities also continue to report more mental health problems compared to their peers.

Trends in Depressive Symptoms, Self-Injury, and Suicidality (2006 to 2025)

- » **Depressive symptoms** in the past 12 months decreased from a high of 20% in 2021 to 17% in 2023, remaining at that level in 2025 [See Figure 11].
- » **Self-injury** in the past 12 months follows a similar pattern, peaking at 13% in 2021 and then declining to 11% in 2023, lowering further to 10% in 2025.
- » **Seriously considering suicide** in their lifetime was reported by 14% of youth in 2023 and 2025, down from a high of 17% in 2021.
- » **Attempting suicide** in their lifetime was reported by 4% of youth in 2023 and 2025, down slightly from 2021 reports (5%).
- » From 2021 to 2023, mental health problems decreased more among females than males, with little change among either sex in 2025. However, compared to earlier years of the survey, mental health problems remain elevated, particularly among females. For example, depressive symptoms peaked among females at 27% in 2021 and decreased to 22% in 2025, but they are still higher than their low of 13% in 2016. Among males, 2025 reports of depressive symptoms (11%) are also higher than in 2016 (7%), though there has been far less variation.

17%
of middle school youth report depressive symptoms in the past 12 months.

Figure 11. Trends in Depressive Symptoms, Self-Injury, and Suicidality, 2006-2025 (Grades 7-8)



Demographic Patterns in Depressive Symptoms, Self-Injury, and Suicidality (2025)

- » **Sex:** Females consistently report more mental health problems than males. For example, self-injury in the past 12 months is reported by 15% of females and 5% of males and seriously considering suicide in their lifetime is reported by 19% of females and 10% of males.
- » **Grade:** Reports of mental health problems do not vary notably by grade in middle school. For example, depressive symptoms in the past 12 months are reported by 16% of 7th grade students and 17% of 8th grade students.
- » **Race/ethnicity:** Mental health problems are most prevalent among Hispanic/Latino youth. For example, depressive symptoms in the past 12 months are highest for Hispanic/Latino youth (28%), followed by Black youth (20%), multiracial/other youth (18%), White youth (14%), and Asian youth (12%). Suicidal ideation and attempts follow a similar pattern.
- » **Sexual orientation and gender identity:** LGBTQ+ youth are 2.6-4.0 times more likely to report mental health problems than heterosexual cisgender youth, including depressive symptoms (36% vs. 14%), seriously considering suicide (39% vs. 11%), and suicide attempts (12% vs. 3%).
- » **Disability status:** Youth with physical and/or learning disabilities are 2.2-2.7 times more likely to report mental health problems than nondisabled youth, including self-injury (20% vs. 8%), depressive symptoms (30% vs. 14%), and seriously considering suicide (27% vs. 12%).

Additional Findings Related to Mental Health (2025)

Causes of Stress

Stress related to school, social, family, safety, appearance, and health issues all showed small declines from 2023 to 2025:

- » Among the three top causes of stress, there were decreases in feeling stress “often” or “very often” due to school issues (from 52% to 49%), appearance issues (from 30% to 26%), and social issues (from 28% to 24%).
- » Over the past two years, reports also declined for stress related to physical/emotional health issues (21% to 17%), family issues (from 17% to 14%), and safety issues (6% to 4%). Note that these six named issues do not account for all potential sources of stress.

Mental Health Support

- » Among students in need of help when feeling sad, empty, hopeless, angry, or anxious, only one in three (34%) got the help they needed “most of the time” or “always”.

Use of Artificial Intelligence (AI) for Mental Health Support

- » 13% of all middle school youth used AI, such as a chatbot, for support with emotional challenges or problems in the past 12 months. Among students with depressive symptoms, 30% used AI for emotional support.

Mental Health Services Use

- » Many students experiencing mental health problems are not receiving formal mental health services. Among students reporting depressive symptoms in the past 12 months, only half of youth (52%) received mental health services at school outside of school. Specifically, 39% talked to a school counselor, therapist, or psychologist at school about emotional challenges or problems during that time, and 36% talked to a therapist, psychologist, or other mental health professional outside of school.
- » Among youth with depressive symptoms, Black youth (38%) and Asian youth (39%) are least likely to receive any formal mental health services either at school or outside of school, with higher reports of service receipt among multiracial/other youth (48%), Hispanic/Latino youth (51%) and White youth (58%). Males are also less likely to receive mental health services than females (46% vs. 56%). LGBTQ+ youth are more likely to receive services in comparison to heterosexual cisgender youth (66% vs. 48%), and youth with disabilities are more likely to receive services than youth without disabilities (63% vs. 48%).

Barriers to Seeking School-Based Mental Health Support

- » The most common barriers to not seeking help for emotional challenges or problems at school are: students feeling like they should handle problems on their own (37%) and not wanting other students to know they were seeking help at school (36%).
- » Other frequent barriers include: being too embarrassed or scared to talk about it (33%), not having time/not wanting to miss class (32%), not thinking that counseling at school would help (31%), and believing that a school/counselor might not understand them or the challenges they were experiencing (30%).

Comparisons with Other Data Sources

- » The decline in depressive symptoms, seriously considering suicide, and suicide attempts from 2021 to 2025 among middle school youth in the MetroWest region is consistent with data from the 2024 National Survey on Drug Use and Health,⁷ which shows a decrease in reports of past-year major depressive episodes, serious thoughts of suicide and suicide attempts from 2021 to 2024 among adolescents aged 12 to 17.

Physical Activity and Weight-Related Behaviors

Physical Activity

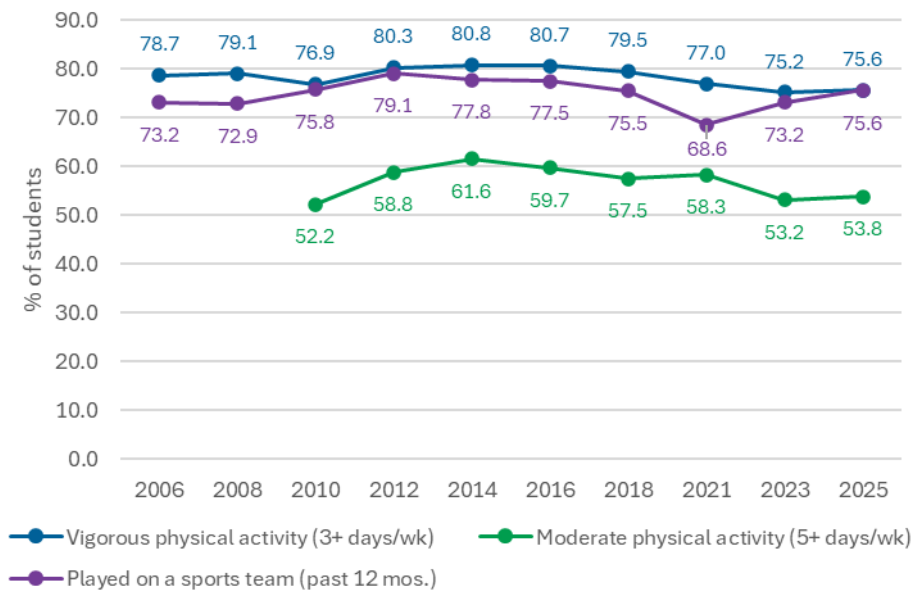
Three-quarters of youth (76%) participated in vigorous physical activity on three or more days in the past week, which is similar to 2023 but down slightly over the past decade.

Trends in Physical Activity (2006 to 2025)

- » **Vigorous physical activity**, defined as engaging in exercise or physical activity for at least 20 minutes that made you sweat and breathe hard on 3 or more days in the past week, decreased from a high of 81% in 2014-2016 to 75% in 2023, with reports similar at 76% in 2025 [See Figure 12].
- » **Moderate physical activity**, defined as being physically active for a total of at least 60 minutes that increased your heart rate and made you breathe hard some of the time on five or more days in the past week, lowered from a high of 62% in 2014 to 53% in 2023, remaining similar in 2025 at 54%.
- » **Participation on a sports team** in the past year increased from a low of 69% in 2021 to 76% in 2025.

76%
of middle school youth engaged in 3+ days of vigorous physical activity in the past week.

Figure 12. Trends in Physical Activity, 2006-2025 (Grades 7-8)



Demographic Patterns in Physical Activity (2025)

- » **Sex:** Males are more likely to report physical activity than females, for example, 80% vs. 71% for vigorous physical activity in the past week.
- » **Grade:** Physical activity reports do not differ by grade in middle school.
- » **Race/ethnicity:** Black and Hispanic/Latino youth are least likely to engage in physical activity. For example, moderate physical activity is reported by 35% of Black youth and 38% of Hispanic/Latino youth, compared to 51% of multiracial/other youth, 52% of Asian youth, and 60% of White youth,
- » **Sexual orientation and gender identity:** LGBTQ+ youth are far less likely to report physical activity than heterosexual cisgender youth (e.g., 55% vs. 80% for vigorous physical activity).
- » **Disability status:** Participation in physical activity is somewhat similar among youth with and without disabilities (e.g., 73% vs. 76% for vigorous physical activity).

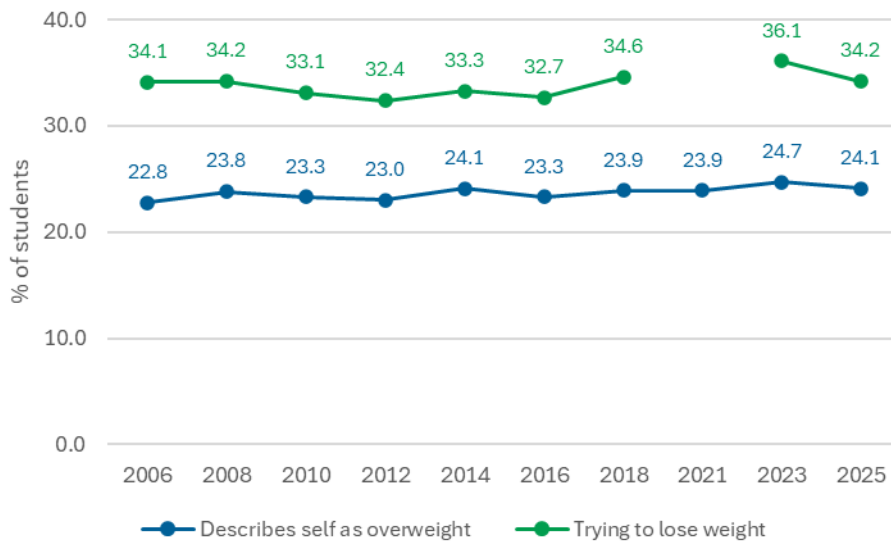
Weight-Related Behaviors

In 2025, one in four youth report that they are slightly or very overweight, but 34% are currently trying to lose weight.

Trends in Weight-Related Behaviors (2006 to 2025)

- » **Perceptions of being slightly or very overweight** have been similar in the range of 23-25% since the beginning of the MWAHS [See Figure 13].
- » **Trying to lose weight** is reported by 34% of youth in 2025, down slightly from 36% in 2023.
- » **Exercising to lose weight/keep from gaining weight** is reported by 71% of youth, up from 68% in 2023. Other efforts to lose weight/keep from gaining weight have remained similar over the last two surveys, including food restrictions (37-38%), skipping meals (22-23%), fasting for more than 24 hours (8-9%), vomiting or taking laxatives (4% in both years), and taking diet pills (3-4%).

Figure 13. Trends in Weight-Related Behaviors, 2006-2025 (Grades 7-8)



Demographic Patterns in Weight-Related Behaviors (2025)

- » **Sex:** Perceptions of being overweight are somewhat higher among females than males (26% for females and 22% for males), but more females report they are trying to lose weight (43% vs. 25%). Exercising to lose/maintain weight is more common among males (74% vs. 64%), but methods involving diet or food restriction are more common among females (e.g., 28% vs. 16% for skipping meals).
- » **Grade:** There are slight increases in students trying to lose weight/keep from gaining weight from 7th grade (33%) to 8th grade (35%) and corresponding increases in dieting/food restriction by grade (e.g., 36% restricted their calories or food intake in 7th grade and 38% did so in 8th grade).
- » **Race/ethnicity:** Black and Hispanic/Latino youth are most likely to report they are overweight and trying to lose weight. For example, 50% of Hispanic/Latino youth and 44% of Black youth are trying to lose weight, compared to 36% of multiracial/other youth, 31% of Asian youth, and 30% of White youth. Consistent with this finding, Black and Hispanic/Latino youth are more likely to restrict their food intake to lose weight/keep from gaining weight, though reports of exercising to control weight do not differ notably by race/ethnicity.
- » **Sexual orientation and gender identity:** LGBTQ+ youth are more likely than heterosexual/cisgender youth to report they are overweight (32% vs. 23%) and trying to lose weight (43% vs. 33%). LGBTQ+ youth are less likely to exercise to lose weight/keep from gaining weight (62% vs. 73%), but more likely to restrict their food intake (e.g., 35% vs. 20% for skipping meals).
- » **Disability status:** 29% of youth with disabilities describe themselves as overweight, compared to 23% of nondisabled youth, and youth with disabilities are also more likely to be trying to lose weight (39% vs. 33%). They are also more likely to restrict their food intake (e.g., 43% vs. 36% for eating less food/calories).

Sleep

59% of middle school youth report getting 8 or more hours of sleep, up from a low of 54% in 2021. Despite this improvement, reports of sleep are still lower than they were a decade ago.

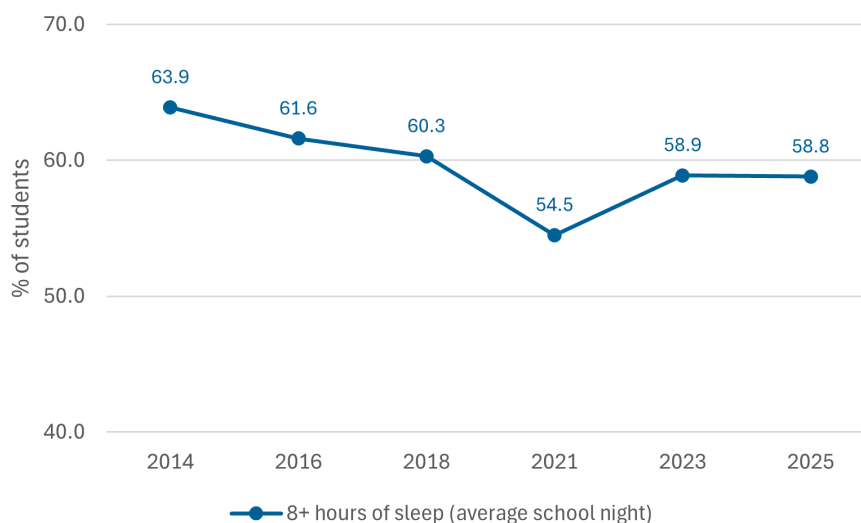
Trends in Sleep (2014 to 2025)

- » **Adequate sleep**, defined as 8 or more hours on an average school night, decreased from a high of 64% in 2014 to a low of 55% in 2021, rising to 59% in 2023-2025 [See Figure 14].
- » Since reaching a low in 2021, reports of sleep have improved slightly more among males (from 60% to 65%) than among females (from 50% to 53%).

2 in 5

middle school students get less than 8 hours of sleep on an average school night.

Figure 14. Trends in Sleep, 2014-2025 (Grades 7-8)



Demographic Patterns in Sleep (2025)

- » **Sex:** Females are less likely to get 8 hours of sleep on an average school night than males (53% vs. 65%).
- » **Grade:** Reports of getting adequate sleep decrease from 63% in 7th grade to 54% in 8th grade.
- » **Race/ethnicity:** Black youth (47%) and Hispanic/Latino youth (51%) are less likely to get adequate sleep than multiracial/other youth (57%), White youth (61%), and Asian youth (62%).
- » **Sexual orientation and gender identity:** LGBTQ+ students are much less likely to get adequate sleep than heterosexual cisgender youth (41% vs. 61%).
- » **Disability status:** Youth with physical and/or learning disabilities are less likely to get adequate sleep than youth without disabilities (50% vs. 61%).

Additional Findings Related to Sleep (2025)

Inadequate Sleep and Mental Health

- » Students who sleep less than 8 hours on an average school night are more likely to report mental health problems, such as depressive symptoms (26% vs. 10%), compared to students who sleep 8 or more hours.

Digital Media Use

Time Spent Using Digital Media

On an average school day, almost half of youth (46%) spend 3 or more hours on a smartphone, 29% of youth spend 3 or more hours on social media daily, and 19% spend 3 or more hours gaming daily. Reports of social media use and gaming are lower in 2025 after rising in earlier years of the survey, but smartphone use has decreased only slightly since 2023.

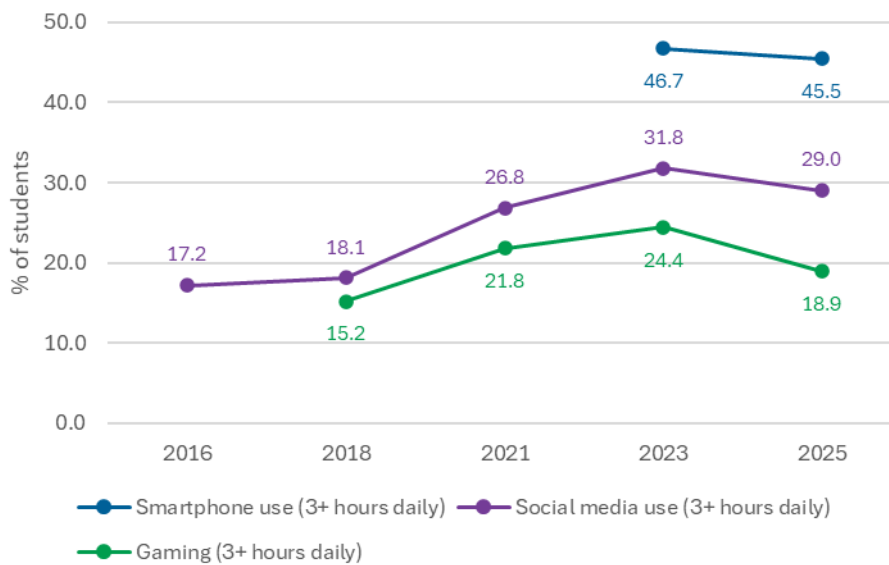
Trends in Time Spent Using Digital Media (2016 to 2025)

- » **Smartphone use** of three or more hours on an average school day (not for school or homework) was reported by 46% of middle school youth in 2025, slightly below 2023 reports (47%) [See Figure 15].
- » **Social media use** (three or more hours on an average school day) increased from 17% in 2016 when it was first measured to 32% in 2023, declining to 29% in 2025.
- » **Gaming** (three or more hours on an average school day) follows a similar pattern, increasing from 15% in 2018 to 24% in 2023, with 2025 reports at 19%.

29%

of middle school youth spend 3+ hours on social media on an average school day.

Figure 15. Trends in Time Spent Using Digital Media, 2016-2025 (Grades 7-8)



Demographic Patterns in Time Spent Using Digital Media (2025)

- » **Sex:** Females are more likely than males to report 3 or more hours daily using smartphones (52% vs. 39%) and social media (35% vs. 23%) and less likely to report 3 or more hours of gaming daily (12% vs. 26%).
- » **Grade:** From 7th to 8th grade, there are increases in smartphone use (from 39% to 52%) and social media use (from 25% to 33%), but gaming does not differ by grade (19% in both grades).
- » **Race/ethnicity:** There are wide variations in digital media use by race/ethnicity, with the highest reports among Hispanic/Latino and Black youth. For example, 62% of Hispanic/Latino youth and 58% of Black youth use smartphones for three or more hours daily, followed by White youth (46%), multiracial/other youth (37%), and Asian youth (30%). Time spent on social media and gaming are also notably higher among Black and Hispanic/Latino youth than among other racial/ethnic groups.
- » **Sexual orientation and gender identity:** LGBTQ+ youth report more time than heterosexual cisgender youth on smartphones (52% vs. 46%), social media (34% vs. 29%), and gaming (28% vs. 17%).
- » **Disability status:** Youth with disabilities also report more smartphone use (50% vs. 44%), social media use (34% vs. 27%) and gaming (27% vs. 17%) than youth without disabilities.

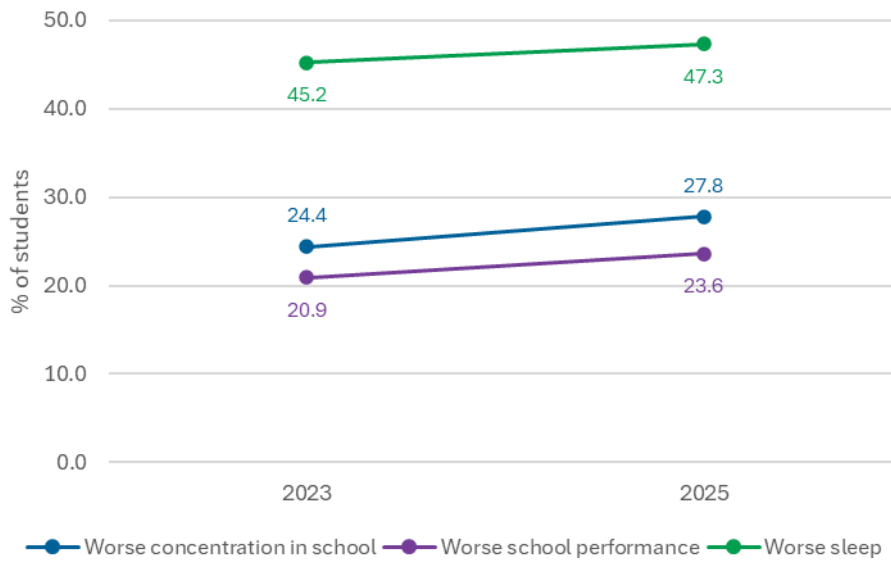
Consequences of Digital Media Use

Nearly half of middle school youth (47%) report negative impacts on their sleep due to their digital media use, with other top consequences including difficulty concentrating in school (28%), and negative impacts on mental health (24%).

Trends in Consequences of Digital Media Use (2023 to 2025)

- » Worse **sleep** related to digital media use, defined as “a little worse” or “a lot worse,” is reported by 47% of youth in 2025, up slightly from 45% in 2023 [See Figure 16].
- » Worse **concentration in school** related to digital media use also increased over the past two years (from 24% in 2023 to 28% in 2025), as did worse **school performance** (from 21% to 24%).
- » There were also slight increases in the effects of digital media use on worsening **mood** (from 20% to 22%) and **relationships with family** (from 16% to 18%).
- » **Mental health** impacts related to digital media use were steady from 2023 to 2025 at 24%, and **physical health** impacts were similar over the past two surveys at 21-22%. There was also no change in the effects of digital media use on worsening **relationships with friends** (10% in both years).

Figure 16. Trends in Consequences of Digital Media Use, 2023-2025 (Grades 7-8)



Demographic Patterns in Consequences of Digital Media Use (2025)

- » **Sex:** Females are more likely than males to report negative effects of digital media use on their mental health (29% vs. 20%) and mood (25% vs. 19%), as well as sleep (50% vs. 45%). Other consequences are more similar by sex.
- » **Grade:** Worse sleep related to digital media use increases from 7th grade (45%) to 8th grade (49%), as does its impact on concentration in school (from 27% to 29%), with minimal grade differences in other consequences of digital media use.
- » **Race/ethnicity:** Some consequences of digital media use do not show large differences by race/ethnicity. For example, reports of worse sleep range from 45-48% by racial/ethnic group. However, there are more notable differences in effects of digital media use on worsening concentration in school (ranging from a low of 22% for White students to a high of 28% for Black students) and worsening mood (ranging from a low of 16% for Asian youth to a high of 23% for White youth).
- » **Sexual orientation and gender identity:** LGBTQ+ youth are more likely than heterosexual youth to report worse sleep (52% vs. 47%) worse mental health (30% vs. 24%), and worse relationships with family (24% v. 16%) due to digital media use. Reports of impacts on school do not differ (e.g., worse school performance is reported by 24% of LGBTQ+ and heterosexual cisgender youth).
- » **Disability status:** Youth with disabilities are more likely to report worse mental health related to their digital media use (31% vs. 23%), worse mood (27% vs. 21%), and impacts on relationships with family (23% vs. 17%). Reports of impacts on school are more similar (e.g., 30% vs. 28% for worsening concentration in school).

Additional Findings Related to Digital Media Use

Age of Getting a Smartphone

- » 42% of youth report that they got a smartphone before 6th grade.
- » Students who got a smartphone before 6th grade are more likely to spend 3+ hours daily on social media (45% vs. 21%) compared to students who got one in 6th grade or later.
- » Youth who got a smartphone before 6th grade are also more likely to report anxiety symptoms in the past two weeks (28% vs. 20%) and depressive symptoms in the past 12 months (23% vs. 13%).

Positive Social Media Experiences

- » 62% of youth find people with shared interests and hobbies on social media (up from 53% in 2018), 57% feel more connected to peers (up from 54% in 2018), and 23% get support during challenging times (down from 32% in 2016).
- » Reports of positive social media experiences are relatively similar among females and males.

Negative Social Media Experiences

- » 44% say they spend too much time on social media (up from 27% in 2016), 28% say it keeps them from doing important things (up from 18% in 2016), and 21% feel bad about themselves after using social media (little change since 2016).
- » Reports of negative social media experiences are higher among females than males (e.g., 29% vs. 12% for feeling bad about myself when using social media, 31% vs. 25% for social media keeping them from doing important things).

Social Media Use and Cyberbullying

- » Youth who spend three or more hours on social media daily are more than twice as likely as youth who spend less time on social media to report being cyberbullied in the past 12 months (30% vs. 14%).

Social Media Use and Mental Health

- » Youth who spend three or more hours daily on social media are more likely to report mental health problems, including recent anxiety symptoms (34% vs. 19%), depressive symptoms in the past 12 months (28% vs. 12%), and seriously considering suicide in their lifetime (23% vs. 11%).

Problematic Digital Media Use

- » Nearly one-third of youth (31%) report symptoms of problematic digital media use* that may need additional evaluation, based on the brief version of the Problematic and Risky Internet Use Screening (PRIUSS).⁸
- » These symptoms are more common among females than males (37% vs. 24%), older students (33% in 8th grade vs. 28% in 7th grade), LGBTQ+ youth compared to heterosexual cisgender youth (44% vs. 29%), and youth with disabilities compared to those without (42% vs. 28%). Variation across racial/ethnic groups ranges from a low of 28% among Asian youth to highs of 33% among Black youth and 34% among Hispanic/Latino youth.

* Scores on the 3-item brief version of the Problematic and Risky Internet Use Screening indicate need for further evaluation based on reports of how often students: experience increased social anxiety due to digital media use; feel withdrawal when away from digital media; and lose motivation to do other things that need to get done because of using digital media.

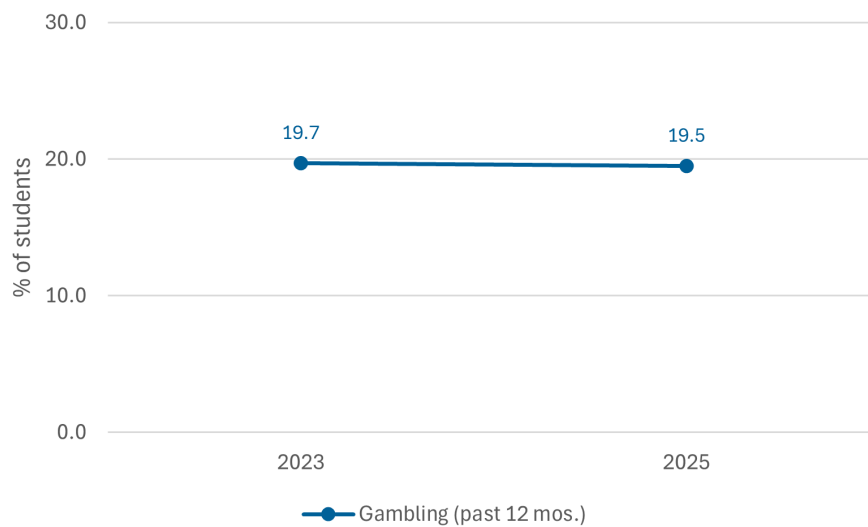
Gambling

20% of middle school students have gambled in the past 12 months; with no change since 2023, when gambling was first included on the middle school MWAHS.

Trends in Gambling (2023 to 2025)

- » **Gambling in the past 12 months** has been steady at 20% since 2023 [See Figure 17]. Reports of specific types of gambling also did not change over the past two surveys (e.g., online betting on real or fantasy sports, or casino games, playing the lottery, or betting on games of skill).
- » **Perceived risk of gambling** for “people your age” (moderate/great risk) was reported by 74% of youth; 2025 was the first year this question was asked.

Figure 17. Trends in Gambling, 2023-2025 (Grades 7-8)



Demographic Patterns in Gambling (2025)

- » **Sex:** Males are far more likely than females to report any form of gambling in the past 12 months (27% vs. 12%). Males are also more likely to report online gambling on real sports, fantasy sports, or online casino games (14% vs. 3%).
- » **Grade:** Reports of gambling are similar in 7th and 8th grades at 19-20%.
- » **Race/ethnicity:** Gambling in the past 12 months ranges from 14-21% by race/ethnicity, with highest reports among Hispanic/Latino youth (21%), Black youth (20%), and White youth (20%), followed by multiracial/other youth (18%) and Asian youth (14%).
- » **Sexual orientation and gender identity:** Gambling differs little among LGBTQ+ youth (19%) and heterosexual cisgender youth (20%).
- » **Disability status:** Youth with disabilities are more likely to gamble than those without disabilities (25% vs. 18%).

Protective Factors

Adult Support

Adult support at school is reported by 75% of middle school youth, the highest it has been since the MWAHS began and a substantial improvement since it dipped in 2021. Adult support outside of school has been consistently high, with a small drop in 2021, returning to 93% in 2025.

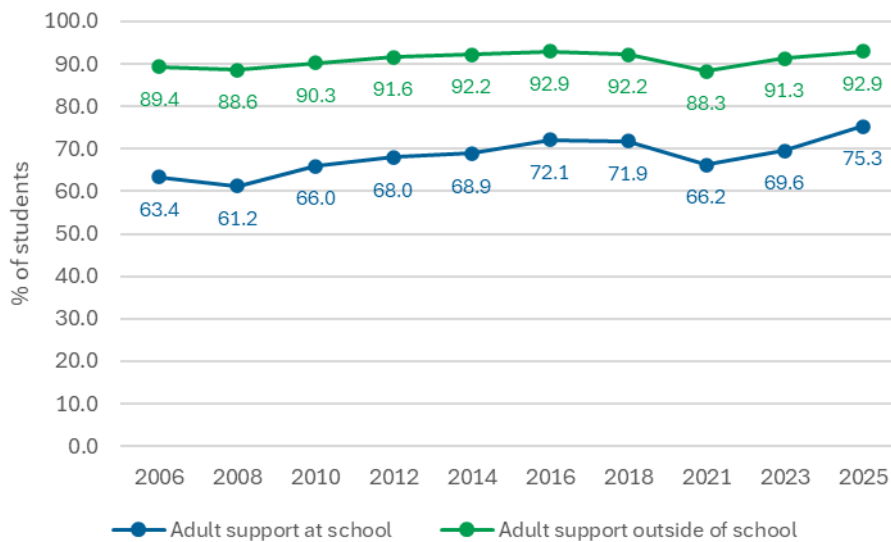
Trends in Adult Support (2006 to 2025)

- » **Adult support at school**, defined as having an adult at school you can talk to if you have a problem, increased to 72% in 2016-2018, dipped to 66% in 2021, and rebounded in 2025 to its highest level (75%) since the MWAHS began [See Figure 18].
- » **Adult support outside of school**, defined as having a family or non-family adult to talk to about things that are important to you has always been high; however, after decreasing to 88% in 2021, reports increased over the past two surveys, returning to 93% in 2025.

3 in 4

middle school students have an **adult at school** to talk to if they have a problem.

Figure 18. Trends in Adult Support, 2006-2025 (Grades 7-8)



Demographic Patterns in Adult Support (2025)

- » **Sex:** Adult support at school is similar among females and males (76% and 75%, respectively), but adult support outside of school is slightly lower among females than males (91% vs. 95%).
- » **Grade:** Adult support is similar by grade, both at school (75-76%) and outside of school (92-94%).
- » **Race/ethnicity:** White students are more likely to report adult support at school (79%) compared to students in other racial/ethnic groups (ranging from 70-72%). Outside of school, adult support is high among all racial/ethnic groups, with reports highest among White youth (95%) and Asian youth (92%), followed by multiracial/other youth (91%), Black youth (90%), and Hispanic/Latino youth (88%).
- » **Sexual orientation and gender identity:** LGBTQ+ youth report less adult support than heterosexual cisgender youth at school (71% vs. 76%) and outside of school (82% vs. 95%).
- » **Disability status:** Adult support at school is the same for youth with and without disabilities (75% for each); adult support outside of school is slightly lower among youth with disabilities than those without disabilities (90% vs. 94%).

School Connectedness

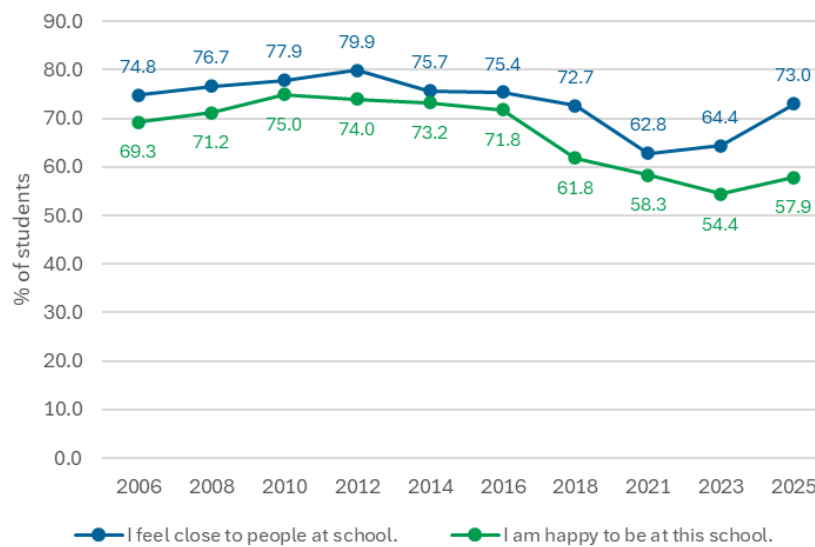
After declining from 2012 to 2023, all measures of school connectedness increased in 2025. While not as high as in the early years of the survey, the 2025 data shows marked improvement in students' perceptions of belonging, safety, happiness, and fairness at school.

Trends in School Connectedness (2006 to 2025)

- » **School connectedness** increased substantially from 2023 to 2025, as indicated by agreement with statements such as "I feel like I am part of this school" (from 64% to 69%) and "I feel close to people at this school" (from 64% to 73%) [See Figure 19].
- » While all measures increased over the past two surveys, reports are not as high as a decade ago. For example, agreement with the statement, "I feel safe at my school" decreased from a high of 85% in 2016 to a low of 69% in 2023, rising to 74% in 2025.

73%
of middle school students feel close to people at their school.

Figure 19. Trends in School Connectedness, 2006-2025 (Grades 7-8)



Demographic Patterns in School Connectedness (2025)

- » **Sex:** Males report higher levels of school connectedness across all measures. For example, 73% of males and 64% of females feel like part of this school.
- » **Grade:** Reports of school connectedness are similar among 7th and 8th grade students.
- » **Race/ethnicity:** Black and Hispanic/Latino youth consistently report lower levels of school connectedness than students in other racial/ethnic groups. For example, 51% of Black youth and 50% of Hispanic/Latino youth feel happy to be at their school, compared to 59% of White youth, 60% of multiracial/other youth, and 66% of Asian youth.
- » **Sexual orientation and gender identity:** LGBTQ+ youth consistently report much lower levels of school connectedness than heterosexual cisgender youth (e.g., 57% vs. 76% for feeling close to people at school).
- » **Disability status:** Students with disabilities consistently report lower school connectedness than nondisabled students (e.g., 52% vs. 62% for feeling that teachers at school treat students fairly).

Peer Support

After reaching a low in 2021, reports of peer support have increased over the past two surveys, such as feeling you have a friend to talk to about a personal problem and feeling like part of a group of friends. Feelings of loneliness were similar from 2023 to 2025, after peaking in 2021.

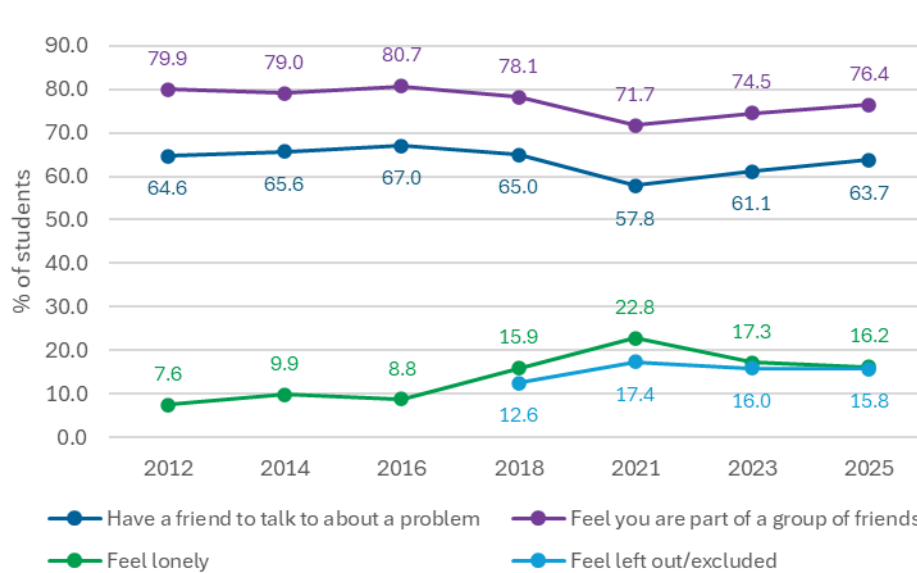
Trends in Peer Support (2012 to 2025)

- » Having **peer support**, defined as a friend to talk to about a personal problem “often” or “very often,” declined to a low of 58% in 2021, but increased over the last two surveys to 64% in 2025 [See Figure 20].
- » Feelings of **peer connection**, such as feeling like part of a group of friends often/very often increased from a low of 72% in 2021 to 76% in 2025.
- » Feelings of **loneliness** (often/very often) peaked in 2021 at 23% but then dropped to 17% in 2023, with reports at 16% in 2025.
- » Feelings of **being left out or excluded** (often/very often) have been similar at 16-17% since 2021 but are higher than 2018 levels (13%) when this was first measured.

2 in 3

middle school youth have a friend to talk to about a personal problem.

Figure 20. Trends in Peer Support, 2012-2025 (Grades 7-8)



Demographic Patterns in Peer Support (2025)

- » **Sex:** Females are more likely than males to report having a friend to talk to about a personal problem (68% vs. 59%); however, they are also more likely to report feeling lonely (22% vs. 10%) or excluded (21% vs. 10%).
- » **Grade:** Reports of peer support do not differ from 7th to 8th grade.
- » **Race/ethnicity:** Black youth are least likely to report having a peer to talk to about a personal problem (52%), with higher reports among Hispanic/Latino youth (58%), multiracial/other youth (59%), Asian youth (63%), and White youth (67%). Feelings of loneliness and exclusion are highest among Black and Hispanic/Latino youth. For example, 21% of Hispanic/Latino youth and 19% of Black youth feel left out and excluded by others, followed by 15% of multiracial/other and White youth, and 12% of Asian youth.
- » **Sexual orientation and gender identity:** LGBTQ+ youth are less likely to have a friend to talk to than heterosexual cisgender youth (58% vs. 66%), and they are more than twice as likely to feel lonely (35% vs. 14%).
- » **Disability status:** Youth with physical and/or learning disabilities are less likely to have a friend to talk to than youth without disabilities (59% vs. 65%), and more likely to feel excluded/left out by others (26% vs. 14%).

Additional Findings Related to Protective Factors

Consistently across surveys, youth who report protective factors in their lives are less likely to report risk behaviors and poor mental health. Here are some examples:

Youth who have **adult support** (either at home and/or at school) are less likely to:

- » Use substances such as EVPs (3% vs. 11%), alcohol (8% vs. 18%), and marijuana (1% vs. 5%) in their lifetime.
- » Perpetrate or experience violence, including physical fighting in the past 12 months (16% vs. 26%).
- » Experience poor mental health, such as depressive symptoms (15% vs. 44%) in the past 12 months, and suicidal ideation in their lifetime (13% vs. 41%).

Youth who report **school connectedness** also report fewer risk behaviors. For example, youth who feel like part of their school are less likely than youth who don't feel like part of their school to:

- » Use substances such as EVPs (2% vs. 6%) and alcohol (6% vs. 13%) in their lifetime.
- » Perpetrate or experience violence, including physical fighting in the past 12 months (15% vs. 20%).
- » Experience poor mental health, such as depressive symptoms (10% vs. 32%) in the past 12 months, and suicidal ideation in their lifetime (9% vs. 26%).

Youth who have **peer support** (have a friend to talk to about a personal problem often or very often) are less likely than youth without peer support to:

- » Perpetrate or experience violence, including physical fighting in the past 12 months (14% vs. 20%).
- » Experience poor mental health, such as depressive symptoms (13% vs. 23%) in the past 12 months, and suicidal ideation in their lifetime (12% vs. 19%).

Conclusions

The 2025 MetroWest Adolescent Health Survey findings highlight meaningful progress and ongoing challenges in the health and wellbeing of middle school youth:

- » Use of electronic vapor products, alcohol, and marijuana continue to decline, though close attention should be paid to misuse of prescription drugs in coming years.
- » Bullying—both at school and online—remains a concern. While the recent data shows little change, reports remain higher than in earlier years of the survey.
- » Mental health has shown some improvement since reports of mental health problems peaked in 2021 around the time of the COVID-19 pandemic; however, they are still elevated and require persistent efforts to improve mental health supports.
- » The growing impact of digital media use on sleep, mental health, and academics underscores the need for comprehensive efforts to address youth digital wellness.
- » Notably, disparities by sex, race/ethnicity, sexual orientation/gender identity, and disability status remain evident across many indicators, emphasizing the importance of equity-focused strategies.
- » Encouragingly, adult support and school connectedness have shown marked improvement in recent years.

Together, these findings underscore the importance of sustained collaboration among schools, families, and communities to strengthen prevention efforts, promote equity, and ensure all youth have the support they need to thrive.

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Appendix A

Middle School Trends (2006-2025) Key Indicators

Table 1A. Trends in Substance Use, Mental Health, and Violence and Bullying, 2006-2025
MetroWest Adolescent Health Survey
MetroWest Region Middle School Students (Grades 7-8)

	MetroWest Region (%)									
	2006 (6,821)	2008 (10,546)	2010 (11,597)	2012 (12,224)	2014 (12,191)	2016 (12,307)	2018 (12,107)	2021 (11,975)	2023 (11,540)	2025 (10,331)
Substance Use										
Cigarette smoking (lifetime)	9.5	8.3	5.7	6.2	4.1	2.9	2.9	2.7	2.9	2.7
Cigarette smoking (past 30 days)	3.8	3.6	2.4	2.1	1.4	1.1	0.8	0.6	0.8	0.8
Electronic vapor product use ^a (lifetime)	—	—	—	—	6.4	5.7	9.9	4.6	4.5	3.5
Electronic vapor product use (past 30 days)	—	—	—	—	3.5	2.5	5.8	2.2	2.1	1.7
Alcohol use (lifetime)	21.8	20.1	13.2	12.4	11.0	10.2	11.7	11.1	9.9	8.2
Alcohol use (past 30 days)	8.9	8.5	4.9	5.0	4.0	3.7	3.9	3.1	2.8	2.5
Marijuana use ^b (lifetime)	4.7	5.1	4.1	4.1	3.1	2.5	3.0	1.9	2.2	1.5
Marijuana use (past 30 days)	2.9	3.2	2.2	2.4	1.8	1.4	1.7	0.8	0.8	0.6
Prescription drug misuse ^c (lifetime)	1.6	1.7	1.3	1.2	1.0	1.1	—	—	2.6	3.7
Prescription drug misuse (past 30 days)	—	—	—	—	—	—	—	—	1.2	1.4
Mental Health										
Life "very" stressful (past 30 days)	13.2	13.6	12.1	12.5	14.1	15.6	19.8	16.5	14.3	15.5
Generalized Anxiety Disorder brief scale (GAD-2) ^d suggests need for evaluation (past 2 wks.)	—	—	—	—	—	—	23.3	30.4	24.0	23.0
Depressive symptoms (past 12 mos.)	15.5	15.2	12.8	12.8	15.0	10.4	14.3	19.8	16.9	16.6
Self-injury ^e (past 12 mos.)	7.6	8.4	6.7	7.8	9.0	7.4	9.7	13.2	10.5	9.8
Seriously considered suicide (lifetime)	9.8	10.9	9.4	10.5	11.2	10.7	14.2	16.7	13.6	14.4
Attempted suicide (lifetime)	2.9	2.9	2.6	3.0	3.2	2.7	3.9	4.8	4.3	4.1
Violence and Bullying										
Physical fight (past 12 mos.)	—	25.8	20.8	17.3	16.0	15.6	16.8	15.1	16.9	16.6
Weapon carrying (past 30 days)	—	7.7	5.5	6.8	6.7	7.3	5.3	4.8	5.5	4.9
Bullying victim (past 12 mos.)	43.8	49.0	37.7	32.4	28.8	25.1	27.9	28.9	31.0	30.0
Bullying victim on school property (past 12 mos.)	38.7	42.8	31.7	26.7	23.5	20.6	24.5	23.9	28.2	27.6
Cyberbullying victim ^f (past 12 mos.)	15.6	15.9	17.2	16.6	18.6	18.8	17.8	22.6	18.9	18.4

^a Includes e-cigarettes, vapes, vape pens, e-cigars, e-hookas, hookah pens, and mods that contain nicotine

^b Includes smoking, vaping, or using edibles; does not include CBD-only or hemp products

^c Use of prescription drugs without a doctor's prescription or differently than how a doctor told you to use it; includes using someone else's prescription or obtaining the medicine illegally

^d Scores on the GAD-2 indicate need for further evaluation based on reports of feeling nervous, anxious, or on edge and feeling unable to stop or control worrying in the past two weeks.

^e Includes injuring yourself on purpose, such as cutting, burning, or bruising yourself

^f Using the Internet, cell phones, or other electronic devices to bully, tease, threaten, or spread rumors about someone

Table 1B. Trends in Digital Media Use, Weight and Physical Activity, and Other Behaviors, 2006-2025
MetroWest Adolescent Health Survey
MetroWest Region Middle School Students (Grades 7-8)

	MetroWest Region (%)									
	2006	2008	2010	2012	2014	2016	2018	2021	2023	2025
	(6,821)	(10,546)	(11,597)	(12,224)	(12,191)	(12,307)	(12,107)	(11,975)	(11,540)	(10,331)
Digital Media Use										
Social media use: ^a 3+ hours daily (average school day)	—	—	—	—	—	17.2	18.1	26.8	31.8	29.0
Gaming: 3+ hours daily (average school day)	—	—	—	—	—	—	15.2	21.8	24.4	18.9
Smartphone use: 3+ hours daily (not for school or homework; average school day)	—	—	—	—	—	—	—	—	46.7	45.5
Weight and Physical Activity										
Describes self as slightly or very overweight	22.8	23.8	23.3	23.0	24.1	23.3	23.9	23.9	24.7	24.1
Trying to lose weight	34.1	34.2	33.1	32.4	33.3	32.7	34.6	—	36.1	34.2
Participated in vigorous physical activity (≥20 min. on 3+ days/week) ^b	78.7	79.1	76.9	80.3	80.8	80.7	79.5	77.0	75.2	75.6
Participated in moderate physical activity (≥60 min. on 5+ days/week) ^c	—	—	52.2	58.8	61.6	59.7	57.5	58.3	53.2	53.8
Played on one or more sports teams (past 12 mos.)	73.2	72.9	75.8	79.1	77.8	77.5	75.5	68.6	73.2	75.6
Other Behaviors										
Sleep: 8+ hours (average school night)	—	—	—	—	63.9	61.6	60.3	54.5	58.9	58.8
Gambled ^d (any form; past 12 months)	—	—	—	—	—	—	—	—	19.7	19.5

^a Such as Instagram, Snapchat, or TikTok (not for school work or homework)

^b Physical activity that made you sweat and breathe hard

^c Physical activity that increased your heart rate and made you breathe hard some of the time

^d Betting money or something of value to you on a game or event; includes Internet/online gambling on sporting events, fantasy sports, or casino games, lottery games/tickets, and skill games

Table 1-C. Trends in Protective Factors, 2006-2025
MetroWest Adolescent Health Survey
MetroWest Region Middle School Students (Grades 7-8)

	MetroWest Region (%)									
	2006	2008	2010	2012	2014	2016	2018	2021	2023	2025
	(6,821)	(10,546)	(11,597)	(12,224)	(12,191)	(12,307)	(12,107)	(11,975)	(11,540)	(10,331)
Adult Support										
Have adult at school to talk to about a personal problem	63.4	61.2	66.0	68.0	68.9	72.1	71.9	66.2	69.6	75.3
Have parent/non-school adult to talk to about important things	89.4	88.6	90.3	91.6	92.2	92.9	92.2	88.3	91.3	92.9
Peer Support										
Feel you have a friend you can talk to about a personal problem (often/very often)	—	—	—	64.6	65.6	67.0	65.0	57.8	61.1	63.7
Feel you are part of a group of friends (often/very often)	—	—	—	79.9	79.0	80.7	78.1	71.7	74.5	76.4
Feel lonely (often/very often)	—	—	—	7.6	9.9	8.8	15.9	22.8	17.3	16.2
Feel you have a lot in common with the people around you (often/very often)	—	—	—	—	—	—	62.8	55.4	58.3	63.0
Feel there are people who really know and understand you (often/very often)	—	—	—	—	—	—	64.0	58.2	60.3	64.4
Feel left out and excluded by others (often/very often)	—	—	—	—	—	—	12.6	17.4	16.0	15.8
School Connectedness										
I feel close to people at school. (agree/strongly agree)	74.8	76.7	77.9	79.9	75.7	75.4	72.7	62.8	64.4	73.0
I feel like I am part of this school. (agree/strongly agree)	75.4	76.3	80.2	79.7	76.2	75.6	67.4	64.5	63.9	68.7
I am happy to be at this school. (agree/strongly agree)	69.3	71.2	75.0	74.0	73.2	71.8	61.8	58.3	54.4	57.9
Teachers at this school treat students fairly. (agree/strongly agree)	65.0	67.0	69.1	70.3	71.8	67.7	59.3	61.8	56.1	60.0
I feel safe at my school. (agree/strongly agree)	79.7	79.7	84.6	84.4	83.7	84.5	74.3	73.3	69.3	73.6

Appendix B

Middle School Demographic Patterns (2025) Key Indicators

Table 2A. Demographic Patterns in Substance Use and Mental Health, 2025
MetroWest Adolescent Health Survey
MetroWest Region Middle School Students (Grades 7-8)

	<u>Sex (%)</u>		<u>Grade (%)</u>		<u>Race/Ethnicity (%)</u>					<u>LGBTQ+ Status (%)</u>		<u>Any Disability (%)</u>	
	Female (10,358)	Male (10,698)	7th (6,075)	8th (4,579)	Asian (2,112)	Black (744)	Hispanic/ Latino (3,577)	Multi- racial/ Other (2,126)	White (12,418)	Hetero- sexual and cisgender (17,121)	LGBTQ+ or question- ing (3,341)	Yes (3,468)	No (15,383)
Substance Use													
Cigarette smoking (lifetime)	2.4	2.2	2.3	3.1	1.1	3.2	4.0	2.3	2.0	2.0	4.8	4.3	1.7
Cigarette smoking (past 30 days)	0.6	0.7	0.6	0.9	0.2	0.5	1.1	1.0	0.5	0.5	1.7	1.4	0.4
Electronic vapor product use ^a (lifetime)	3.5	2.5	2.7	4.3	0.8	5.3	7.9	2.8	2.0	2.6	6.1	5.2	2.4
Electronic vapor product use (past 30 days)	1.6	1.2	1.4	2.0	0.7	2.6	3.2	1.7	0.9	1.1	3.7	2.4	1.1
Alcohol use (lifetime)	6.6	8.5	7.1	9.3	3.8	12.0	12.8	7.1	6.6	7.4	11.7	12.2	6.5
Alcohol use (past 30 days)	2.2	2.1	1.7	3.3	1.1	3.2	2.4	2.4	2.1	2.0	3.9	4.4	1.7
Marijuana use ^b (lifetime)	1.2	1.2	0.9	2.1	0.3	2.1	2.4	1.1	0.9	1.0	3.1	2.1	1.0
Marijuana use (past 30 days)	0.4	0.5	0.4	0.7	0.1	0.9	0.7	0.7	0.4	0.4	1.2	0.8	0.4
Prescription drug misuse ^c (lifetime)	3.6	3.8	3.7	3.7	3.8	3.9	4.9	4.4	3.1	3.3	6.6	6.7	3.0
Prescription drug misuse (past 30 days)	1.3	1.3	1.2	1.6	0.8	1.8	1.7	1.5	1.1	1.1	2.3	2.7	1.0
Mental Health													
Life "very" stressful (past 30 days)	20.0	9.0	14.7	16.3	12.4	14.8	17.2	15.4	14.0	12.5	30.9	27.9	12.3
Generalized Anxiety Disorder brief scale (GAD-2) ^d suggests need for evaluation (past 2 wks.)	31.2	11.5	22.0	24.1	17.6	19.1	26.8	20.3	21.2	19.1	42.7	37.5	18.6
Depressive symptoms (past 12 mos.)	21.0	11.3	16.5	16.7	12.1	21.2	27.4	17.2	13.4	13.6	35.9	29.2	13.6
Self-injury ^e (past 12 mos.)	13.6	5.4	9.6	9.9	7.2	10.5	14.2	10.4	8.5	6.8	29.5	19.6	7.6
Seriously considered suicide (lifetime)	17.9	9.6	13.9	14.9	13.5	19.4	21.0	13.6	11.6	11.0	36.9	26.1	11.4
Attempted suicide (lifetime)	5.4	2.3	3.7	4.4	2.8	5.1	8.1	3.7	3.0	2.8	12.2	8.4	3.0
Violence and Bullying													
Physical fight (past 12 mos.)	9.2	27.0	18.0	15.1	15.1	22.1	19.8	20.8	17.0	18.1	18.8	25.2	16.3
Weapon carrying (past 30 days)	2.0	8.0	4.9	5.0	3.5	4.9	2.8	5.4	5.7	5.2	5.4	9.3	4.4
Bullying victim (past 12 mos.)	33.7	28.8	31.5	28.5	25.3	31.6	33.2	34.4	30.8	28.5	49.9	47.5	28.3
Bullying victim on school property (past 12 mos.)	30.5	26.9	29.1	26.2	22.4	32.2	33.7	30.4	27.6	26.0	46.8	43.4	25.8
Cyberbullying victim ^f (past 12 mos.)	20.3	15.3	18.1	18.7	13.5	21.7	25.1	17.7	16.4	17.3	25.2	28.7	15.7

^a Includes e-cigarettes, vapes, vape pens, e-cigars, e-hookas, hookah pens, and mods that contain nicotine

^b Includes smoking, vaping, or using edibles; does not include CBD-only or hemp products

^c Use of prescription drugs without a doctor's prescription or differently than how a doctor told you to use it; includes using someone else's prescription or obtaining the medicine illegally

^d Scores on the GAD-2 indicate need for further evaluation based on reports of feeling nervous, anxious, or on edge and feeling unable to stop or control worrying in the past two weeks.

^e Includes injuring yourself on purpose, such as cutting, burning, or bruising yourself

^f Using the Internet, cell phones, or other electronic devices to bully, tease, threaten, or spread rumors about someone

**Table 2B. Demographic Patterns in Digital Media Use, Weight and Physical Activity, and Other Behaviors, 2025
MetroWest Adolescent Health Survey
MetroWest Region Middle School Students (Grades 7-8)**

	<u>Sex (%)</u>		<u>Grade (%)</u>		<u>Race/Ethnicity (%)</u>					<u>LGBTQ+ Status (%)</u>		<u>Any Disability (%)</u>	
	Female (10,358)	Male (10,698)	7th (6,075)	8th (4,579)	Asian (2,112)	Black (744)	Hispanic/ Latino (3,577)	Multi- racial/ Other (2,126)	White (12,418)	Hetero- sexual and cisgender (17,121)	LGBTQ+ or question- ing (3,341)	Yes (3,468)	No (15,383)
Digital Media Use													
Social media use: ^a 3+ hours (average school day)	30.3	20.3	24.7	33.1	12.9	43.0	44.8	19.8	23.1	26.3	30.3	30.6	23.9
Gaming: 3+ hours (average school day)	12.6	24.9	18.6	19.3	11.0	35.3	30.1	19.2	15.9	17.6	27.3	25.9	17.0
Smartphone use: 3+ hours (average school day, not for school or homework)	46.0	34.6	39.1	51.9	26.9	52.1	57.0	32.5	40.1	42.1	47.1	46.0	39.0
Weight and Physical Activity													
Describes self as slightly or very overweight	25.2	21.8	23.1	25.1	20.2	28.1	34.5	25.6	20.9	22.7	32.7	28.4	22.6
Trying to lose weight	41.3	25.4	33.1	35.3	30.5	44.0	49.0	35.9	29.1	32.6	43.0	38.3	32.5
Participated in vigorous physical activity (≥20 min. on 3+ days/week)	71.0	79.1	75.5	75.6	73.7	59.7	61.9	72.2	80.1	79.4	55.2	72.5	75.5
Participated in moderate physical activity (≥60 min. on 5+ days/week) ^b	47.5	59.2	54.1	53.6	52.3	35.6	38.4	50.2	59.1	57.4	33.9	52.5	53.5
Played on one or more sports teams (past 12 mos.) ^c	73.3	78.5	76.5	74.6	69.1	61.3	60.9	70.0	83.5	80.6	51.3	73.2	76.4
Other Behaviors													
Sleep: 8+ hours (average school night)	57.3	67.5	63.2	54.4	64.9	50.0	53.3	61.3	64.9	64.0	43.8	53.1	64.0
Gambled ^d (any form; past 12 months)	11.7	25.7	19.0	20.0	13.9	20.1	20.2	16.7	19.5	19.3	18.3	24.7	17.4

^a Such as Instagram, Snapchat, or TikTok (not for school work or homework)

^b Physical activity that made you sweat and breathe hard

^c Physical activity that increased your heart rate and made you breathe hard some of the time

^d Betting money or something of value to you on a game or event; includes Internet/online gambling on sporting events, fantasy sports, or casino games, lottery games/tickets, and skill games

Table 2C. Demographic Patterns in Protective Factors, 2025
MetroWest Adolescent Health Survey
MetroWest Region Middle School Students (Grades 7-8)

	<u>Sex (%)</u>		<u>Grade (%)</u>		<u>Race/Ethnicity (%)</u>					<u>LGBTQ+ Status (%)</u>		<u>Any Disability (%)</u>	
	Female (10,358)	Male (10,698)	7th (6,075)	8th (4,579)	Asian (2,112)	Black (744)	Hispanic/ Latino (3,577)	Multi- racial/ Other (2,126)	White (12,418)	Hetero- sexual and cisgender (17,121)	LGBTQ+ or question -ing (3,341)	Yes (3,468)	No (15,383)
Adult Support													
Have adult at school to talk to about a personal problem	76.1	75.8	74.7	75.8	71.5	72.6	70.2	73.0	79.6	76.8	70.0	75.2	76.4
Have parent/non-school adult to talk to about important things	91.2	94.9	93.6	92.2	92.1	90.7	88.3	91.2	95.4	95.0	82.4	90.0	93.9
Peer Support													
Feel you have a friend you can talk to about a personal problem (often/very often)	66.4	57.3	62.5	64.9	61.2	52.3	57.2	56.6	65.4	65.0	55.2	58.1	63.1
Feel you are part of a group of friends (often/very often)	73.2	79.6	76.5	76.3	80.0	68.2	68.0	73.5	79.3	79.3	63.8	70.3	78.0
Feel lonely (often/very often)	21.1	10.1	15.5	17.0	12.2	16.8	22.2	16.0	14.4	13.4	33.7	26.3	13.6
Feel you have a lot in common with the people around you (often/very often)	61.1	63.7	62.4	63.6	62.4	54.7	51.5	57.3	67.2	66.7	44.1	55.4	64.4
Feel there are people who really know and understand you (often/very often)	64.1	65.6	65.6	63.2	64.7	54.6	55.0	61.5	69.0	67.5	50.9	58.0	66.5
Feel left out and excluded by others (often/very often)	20.6	9.9	14.9	16.7	11.7	18.1	20.5	14.9	14.5	14.1	26.6	25.8	13.3
School Connectedness													
I feel close to people at school. (agree/strongly agree)	70.9	75.9	74.0	72.0	72.8	66.1	66.5	69.5	76.7	76.0	58.0	66.1	74.7
I feel like I am part of this school. (agree/strongly agree)	66.2	74.8	69.1	68.3	73.6	59.0	60.9	67.7	73.5	72.9	50.8	61.6	72.1
I am happy to be at this school. (agree/strongly agree)	56.9	64.7	58.3	57.5	68.6	52.9	53.5	61.8	61.3	62.3	43.6	50.8	62.5
Teachers at this school treat students fairly. (agree/strongly agree)	60.5	64.9	60.8	59.3	69.0	55.6	53.3	60.9	64.8	62.9	54.0	53.9	64.3
I feel safe at my school. (agree/strongly agree)	71.7	78.5	73.3	73.9	82.0	66.0	64.2	73.4	77.4	77.0	59.8	66.4	76.7