

## 10-Minute Emergency Evacuation Challenge



If you had 10 minutes to evacuate your home what would you bring?

Sit down and take time to talk and pre-plan ahead of time. Decide who will pack what: medicines, picture albums, and comfort items. Pack emergency kit, medical records, birth certificates, wills, deeds, insurance policies, and financial records ahead of time. Create a home inventory and store elsewhere, other than in the home. Establish an out of town contact in case family members become separated. Know where your family should be and when you should be there. Plan for pets. Have some cash, as ATMs may be out of money or disabled.

**ALL FEBRUARY PROGRAMS HAVE BEEN CANCELLED  
DUE TO WEATHER.**

**BE READY. BE PREPARED.**

# BSNHW

**Bryan Street Neighborhood Watch**

**January 2010 Newsletter**

**For meeting information call 270-886-9330**

## BSNW Event – The United Neighborhood was a huge success.

Total attendance at the program was 20 people. This number represents almost 2/3 of the total number of residences on Bryan Street. Our goal is to gain the attendance of at least 1 person *from* every residence on Bryan Street.

The Neighborhood Watch formed with representation from one-half of every Bryan St. household. With the relocation of many early members, the Watch noted a steady decline in participation.

Your participation is encouraged in planning activities and programs, and in attending the same. Bring your ideas and concerns. Let's work together to make ideas realities, and find positive solutions for concerns.



### *Flowers Bestowed*

BSNW recognized its supporters and area leaders, during its December Program. Recognized for Outstanding Leadership and Service were:

- ❖ **Daniel Nicholson:** Pennyriple Regional Citizens Corp Council Chairman, BSNW Resource, Referral, and Programming Partner
- ❖ **Edward Moseley:** Most Prestigious BSNW Supporter
- ❖ **Wally Bryan:** Pres. Challenge House Board, and Venue Host for BSNW
- ❖ **Darlene Johnson:** Pres. Bryan Street Neighborhood Assoc. and Bryan Street Neighborhood Watch Supporter
- ❖ **Roberto Serrano:** Exec. Director of the Boys and Girls Club of Hopkinsville -Christian Co.; BSNW Study Circle Grant, Fiscal Agent; and BSNW Program Support Partner
- ❖ **Officer Paul Ray:** HPD - Crimestoppers, and HPD liaison to BSNW for help in forming the Neighborhood Watch in August 2004

## Study Circles Mini Grant on Public Safety

The Bryan Street Neighborhood Watch was awarded a mini grant in the amount of \$500.00 in December 2009. The Hopkinsville-Christian County Community Vision Plan and the Hopkinsville Human Relations Commission sponsored the grant, with support from Everyday Democracy.

The proceeds from the grant will be used to bring residents of Bryan Street together with law enforcement officials to celebrate a commitment to safe streets, and strong families. Innovated programs to achieve this goal are already being launched. Join in now.

## Winter Storm Survival

From the desk of Dan:

This month, huge winter storms hit the east regions of the United States. Unlike people in the northern and western states, we are unfamiliar with these storms. How can we be prepared to survive and thrive during these storms? Below is a checklist of items to have handy to help you.

1. A snow shovel
2. Chains for your tires, or snow tires
3. An Auto Emergency kit
4. Extra blankets, and layers of clothing
5. An alternative heat source
6. Extra Food Storage
7. Salt or Ice melt
8. Communication device
9. Emergency Lighting
10. A Sled!



## A Staggering Statistic

This survey report is staggering! The Substance Abuse & Mental Health Services Administration has completed a survey, which encompassed the years of 2006-2008, of 33,000 girls, aged 12 to 17. It found that 26.7 percent of surveyed girls had been engaged in a **serious** fight at school or work, a group-against-group fight, or had attacked someone with intent to do bodily harm, the year prior to the study. <sup>(1)</sup>

The survey notates a trend, with similar statistics being gleaned in analysis conducted by the same agency, from 2002-2004. It is unacceptable that approximately one in four female teens are involved in some sort of violent behavior at school, or work. The study found that males continue to exhibit a higher rate of violence, with 33.6 percent of them engaging in one of these behaviors, in the year preceding the study: 1 in 3 boys execute violent behavior.

Rates of violent behavior were shown to increase with incidences of binge drinking, and marijuana and other drug use, among low-income families, and for adolescents not attending school, or with poor grades.

"Violence rates were also highest for blacks, at 38.0 percent, and lowest for Asians, at 17.3 percent. Among other groups: mixed race, 30.2 percent; Hispanic, 29.0 percent; American Indian or Alaska native, 26.8 percent; and white, 23.7 percent."<sup>2</sup>

These numbers cement the fact that no child is safe, or race is exempt, as this vile phenomenon of violence is crossing all barriers. The article begs an answer to the question, "How many youth have been incarcerated because of, or murdered due to such violence?" After witnessing a high incidence of female related violence, on Bryan Street this past summer, I think we can safely assume that these figures were comparable in 2009. We must act quickly to uphold the self-esteem of our girls, preserve our males from self-extinction, safeguard the mental health of both, improve parenting skills, and re-establish social normalcy in our neighborhoods. Love of self, and for others is a good starting point.

<sup>1</sup>The data was collected as part of SAMHSA'S National Survey on Drug Use and Health. On the Net: SAMHSA:<http://www.samhsa.gov>

This article was compiled from information obtained from SAMHSA:

<sup>2</sup><http://apnews.excite.com/article/20100114/D9D7AL180.html>  
(1/20/10)

## Adolescent Health Initiatives

The Adolescent Health Initiatives (AHI) section of the Division of Women's Health works in collaboration with multiple partners across the commonwealth to promote adolescent health. We are dedicated to improving the health well being of Kentucky's youth so that they will have every opportunity to grow up safe and healthy and develop into successful adults.

Addressing adolescent priority health risks, especially behaviors that put young people at risk for teen pregnancy, suicide, dating violence, H IV and other sexually transmitted diseases (STDs), remains a challenge. The AHI coordinators partners with the Kentucky Teen Pregnancy Coalition, the Kentucky Suicide Prevention Group, the Kentucky Stakeholders for HIV/STD Prevention and Coordinator School Health team, represents adolescent women on the Women's Health Coalition and is a member of the Kentucky Youth Development Partnership.

**Teen Pregnancy Prevention Initiatives** According to data released by the National Center for Health Statistics (NCHS), the teen birth rate in the United States increased 1 percent in 2007. From 2006 to 2007 the Kentucky teen birth rate fell 0.9 percent but still remains 10 points over the national rate. The national increase follows 14 years of continuous decline in the teen birth rate. That is, after declining 34 percent from 1991 to 2005, the national teen birth rate increased 5 percent from 2005 to 2007. The national birth rate for teens, age 15-19, in 2007 was 43 per 1,000. Kentucky's teen birth rate for the same age group and year was 53.1 per 1,000 overall or (7,443 births).

**Suicide Prevention:**

Suicide is the second leading cause of death for Kentuckians age 15-24. Although suicide is relatively rare among children, the rate of suicides and suicide attempts increases tremendously during adolescence. Even though we do not hear a great deal about teen suicide, it is a very real problem, causing the deaths of thousands of teenagers across the country each year.

Suicide is a serious health problem and is completely preventable. That is why the Kentucky Suicide Prevention Group has adopted the motto Let's Talk....

It is important to recognize the warning signs and behaviors of suicide and know what to do to intervene. Programs have been developed to educate adults and students in suicide prevention.

QPR (Question, Persuade, Refer) is a program offered throughout the state to train participants to recognize behaviors and other signs that can indicate a person is considering suicide, and methods to prevent teen suicide. Educators, parents and health care providers are encouraged to participate in this valuable training by contacting the Kentucky Department For Mental Health (502-564-4448) or visiting the Kentucky Suicide Prevention Group Web site for more information.

SOS (Signs of Suicide) is a program offered to students on an age-appropriate level to educate them about suicide and how to recognize the signs in their friends and what to do if they do recognize the warning signs in someone. Contact your local school or call Kentucky Child Now at 502-227-7722 or visit the Kentucky Child Now Web site.

**Teen Dating Violence Prevention:** One in three teens will experience abuse in a dating relationship and two-thirds of them will never report it to anyone. Dating violence is devastating to a young person's health and safety. The effects of dating violence are long-lasting and teens who experience abuse in relationships may act out, exhibiting higher rates of drug abuse, school drop-out, high-risk sexual behavior, acts of violence and suicide.

Everyone has the right to safe and healthy relationships. The Teen Dating Violence Prevention Team is a newly formed partnership in Kentucky working to identifying the resources to educate and enable teens to live free from violence.

**Kentucky Stakeholders for HIV, STD and teen pregnancy prevention:**

People ages 10 to 24 accounted for 13 percent of HIV cases reported in areas with confidential HIV reporting. This is about 22,000 youth in 33 reporting states (2006).

The Center for Disease Control (CDC) estimates there are approximately 19 million new cases of STDs each year in the United States, almost half of them among young people ages 15-24.

The goal of the Kentucky Stakeholders is to increase the capacity of schools, districts, and communities to promote and support healthy behaviors and choices in school-aged youth and to reduce the health disparities of HIV, STDs and teen pregnancy among this population.

**Youth Risk Behavior Survey**

Kentucky participates in the CDC Youth Risk Behavior Survey (YRBS), conducted every two years to a randomly selected sample of middle and high schools across the state. Students answer questions regarding their participation in risky behavior. All answers are confidential. Areas of interest include sexual risk behavior, alcohol and drug use, injury and violence, tobacco use, nutrition and physical activity. The data is compared to other states at the CDC level and state level. Data is used to note areas of need, effect policies and improve and structure programs on both a national and state level.

Source: <http://chfs.ky.gov/dph/info/wpmh/teenpregnancy.htm>

Excerpts from the **Youth Risk Behavior Survey** will be available at the BSNW Joint Effort Program. This survey is a must-read for every parent.