# SAMPLE COUNTY DRUG & ALCOHOL AGENCY

# Substance Use and Problem Gambling Prevention Needs and Resource Assessment

Revised 6/27/25



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# I. Purpose

This needs/resource assessment was conducted during state fiscal year 24/25. The purpose of this assessment is to gather and analyze available data that can be used to inform the creation of a plan to implement programs/activities/strategies to prevent substance use and problem gambling. This needs/resource assessment examines the following:

- 1. (Substance Use/Gambling Behaviors) What substances are being consumed at what rate by which populations? What types of gambling are engaged in at what rate by which populations?
- 2. (Consequences) What are the health, safety, economic and community impacts of substance use and problem gambling?
- 3. (Why) What are the risk and protective factors that are influencing or contributing to substance use and gambling behaviors/consequences?
- 4. (Why Here) What are the more specific community level factors that are contributing to why problems or risk/protective factors are occurring?
- 5. (Resource/Readiness Assessment) How ready are our communities to address the problems and risk/protective factors influencing those problems? What resources do we have and what resources do we need to address the problems and risk/protective factors?

# II. County Demographics

County demographic data helps to identify populations that may need to be examined as part of the needs assessment to determine if there are groups at greater risk or groups that are disproportionately impacted by certain substance use or gambling behaviors and consequences. Listed below are populations or groups in our county for which it is important to assess potential behavioral health disparities. In some cases, data and capacity may not currently exist to assess disparities for these populations. These represent data gaps that would require additional resources to address.

## Table 1: Data Discussion/Interpretation

#### Important to assess existence of disparities for the following populations

**Hispanic/Latino**: This racial/ethnic group experienced the most growth, increasing 5 percentage points from 7% in 2012-2016 to 12% in 2018-2022 according to the American Community Survey (ACS) data.

**Young Adults**: Young adults ages 18-34 made up 24% of the population per 2018-2022 ACS data, ranking Sample County 8<sup>th</sup> highest among all counties for percent of population age 18-34. The 18-34 age population has increased 3 percentage points since 2012-2016.

**Individuals with a Disability:** 16% of the population reported having a disability per 2018-2022 ACS data an increase of 1.5 percentage points since 2012-2016. As disability status is not collected in the data sources available for this needs assessment, disparities for this population cannot be assessed. Enter text

# III. PA Youth Survey Data Limitations

The PA Youth Survey (PAYS) is a primary data source on youth substance use behaviors and risk and protective factors that was utilized in this needs assessment. The important limitations to this data source are noted below.

# Table 2: PAYS Data Limitations

## Schools Not Participating/Significant Changes in Schools Participating

Out of the 11 school districts in Sample County:

- Anytown School District did not participate in the PAYS in 2019, 2021 or 2023 making the survey results less representative of the urban area of Sample County.
- Smithville School District and Ridgeville School District did not participate in 2021 but did participate in 2019 and 2023. 2021 data may be less comparable to other years due to this change in schools participating.

#### Significant Changes in % of Students Participating by Grade

In 2019, 25% of participants were in 6th grade and 20% were in 12th grade. However, in 2023, 33% were in 6th grade and only 15% were in 12th grade. This shift toward younger participants in 2023 compared to 2019 likely restricts the comparability of All Grades data between those years.

#### Low Modified Participation Rate/Significant Changes in Modified Participation Rate

The modified participation rate for all grades combined (students taking survey out of all students enrolled in grades 6, 8, 10 and 12 in county) was 74% in 2019, decreased to 61% in 2021, but then increased to 72% in 2023.

# IV. Substance Use Behaviors

# Table 3: Youth Data Discussion/Interpretation

### Substances used by the most youth

Per 2023 PAYS, the top four most used substances for grades 6, 8, 10, 12 are:

- Alcohol (Lifetime Use: 39.6%; Past 30-Day Use: 11.9%)
- Vaping (Lifetime Use 15.6%; Past 30-Day Use: 8.7%). The two substances most commonly vaped were nicotine and marijuana.
- Marijuana (Lifetime: 13.4%; Past 30-Day Use: 7.9%)
- Cigarettes (Lifetime: 5.9%: Past 30-Day Use: 2.0%)

### Substance use behaviors with the largest or concerning increases over time

*If you there are no significant increases in use for any substances, you might write:* Comparing 2019 to 2023 PAYS data there were no increases in use of any substances.

*If you do have significant/concerning increases, you might write:* Per PAYS data:

- Lifetime **inhalant use** increased from 4% in 2019 to 6% in 2023 among 6<sup>th</sup> graders while use decreased for all other grades.
- Lifetime and Past 30 Day use of Over the Counter Drugs to get high increased for all grades combined (Lifetime: 3.3% in 2019 and 5.1% in 2023), with biggest increase for 6<sup>th</sup> graders (Lifetime Use: 2.9% in 2019 and 4.8% in 2023).
- **Binge drinking** during the past two weeks increased slightly for females in grades 10 and 12 from 9.2% in 2019 to 10.2% in 2023. While this increase is small it is notable given binge drinking decreased among those reporting male gender.

Substance use behaviors with high county ranking (top 15) or notably higher than neighboring or similar counties

If nothing ranks in top 15 or is higher than neighboring/similar counties, you might write: No substance use behaviors ranked in the top 15 of counties or were higher than neighboring counties.

# If you do have behaviors ranked in top 15 or higher than neighboring/similar counties, you might write:

Per PAYS data:

- While lifetime alcohol use for all grades combined in 2023 was ranked at 20<sup>th</sup> among all counties, lifetime use for 12<sup>th</sup> graders at 58.1% was ranked 13<sup>th</sup> and past 30-day used for 12<sup>th</sup> graders at 35.2% was ranked 12<sup>th</sup>.
- Lifetime **marijuana use** of 13.4% in 2023 was higher than the three neighboring counties: 10.1% for Hill County, 9.9% for Dale County, 9.6% for Wright County.

## Grades/age groups of particular concern for specific substance use behaviors

- **6**<sup>th</sup> **grade**: While 2023 PAYS data showed decreases in use for nearly all substances, 6<sup>th</sup> grade showed increases in inhalant use and over the counter drug use to get high.
- 12<sup>th</sup> grade: Alcohol use among 12<sup>th</sup> graders on the PAYS ranks within the top 15 of counties for 2019, 2021 and 2023 while remain 6<sup>th</sup>, 8<sup>th</sup> and 10<sup>th</sup> grades are at or below the state rate each year. In addition, binge drinking during the past two weeks decreased among 6<sup>th</sup>, 8<sup>th</sup> and 10<sup>th</sup> graders from 2019 to 2023 but remained at 12.5% for 12<sup>th</sup> graders.

#### Racial/ethnic/gender/other disparities in substance use behaviors

- Alcohol Use Among Hispanic/Latino: According to 2023 PAYS data, youth indicating they were "Hispanic, Latino or Spanish Origin" reported past 30-day alcohol use of 13.4% compared to 11.9% among all students.
- **Binge Drinking Among Females**: According to PAYS data, high school youth (grades 10 and 12 combined) who indicated they were female reported increases in past 2-week binge drinking from 9.2% in 2019 to 10.2% in 2023 compared to males who reported decreases from 11.9% in 2019 to 10.3% in 2023.
- Marijuana Use Among Black/African American: For youth reporting they were "Black/African American" lifetime marijuana use in 2023 PAYS was 15.7% compared to 13.1% among those reporting race as "White/Caucasian". While lifetime and past 30-day use of marijuana decreased from 2019 to 2023 among all students, among Black/African American students that decrease was much smaller (Lifetime use: 16.3% in 2019 and 15.7% in 2023; Past 30-day Use: 9.1% in 2019 and 8.6% in 2023).

#### Data limitations and other important information regarding substance use behaviors

Data Limitations

See Table 2 for information about PAYS data limitations. The younger average age of 2023 survey participants compared to 2019 is likely influencing the decreases seen in use for all grades combined, but when looking at data by grade, decreases were still seen for each grade for nearly all substances.

## Table 4: Adult Data Discussion/Interpretation

#### Substances used by the most adults

Publicly available data on adult substance use is limited to only alcohol and tobacco use. According to the 2020-2022 Pennsylvania Behavioral Risk Factor Surveillance System (BRFSS) regional data, 16% of adults (18+) reported binge drinking and 15% reported being a current smoker.

A county level needs assessment survey was conducted to gather additional data on substance use. This survey indicated the most used substances in the past 30-days among adults (18+) in 2022 were:

- Any Alcohol Use (55%); Binge Alcohol Use (20%)
- Tobacco products (22%)
- Marijuana (14%)

#### Substance use behaviors with the largest or concerning increases over time

If you there are no significant increases in use for any substances, you might write: Comparing 2018-2020 to 2020-2022 BRFSS data there were no increases in alcohol and tobacco use measures.

*If you do have significant/concerning increases, you might write:* 

- Alcohol Use: BRFSS regional data on adults reporting "chronically dinking" (average of 2 or more drinks every day in the past 30 days) increased to 7% in 2020-2022 after holding steady at 5% since 2016-2018.
- Alcohol Use: Per capita alcohol sales (in thousands) increased from \$58,750 in 2018-2019 to \$66,675 in 2021-2022 (per PLCB data).
- Marijuana Use: According to our county needs assessment survey, past 30 day marijuana use among adults (18+) increased from 11% in 2019 to 14% in 2022. Adults ages 18-30 had the biggest increase from 17% in 2019 to 24% in 2022.

Substance use behaviors with high region ranking or county ranking (top 15) or notably higher than neighboring or similar counties/regions

If nothing has a high ranking or is higher than neighboring/similar counties, you might write: No substance use behaviors had a high ranking or were higher than neighboring counties.

*If you do have behaviors with high ranking or higher than neighboring/similar counties, you might write:* 

- **Tobacco Use**: Region ranked 4<sup>th</sup> of 26 regions for adults (18+) reporting they are a current smoker for 2020-2022 per BRFSS data.
- **Binge Drinking**: 23% of adults ages 18-44 reported past month binge drinking per 2020-2022 BRFSS which ranks the region 5<sup>th</sup> of 26 regions. Neighboring regions are ranked 17<sup>th</sup> at 18% and 19<sup>th</sup> at 17%.
- Alcohol Sales: Sample County per capita alcohol sales (per PLCB data) in 2021-2022 of \$66,675 (in thousands) are higher than all neighboring counties (\$51,002 Hill County; \$42,868 Dale County; \$37,912 Wright County).

#### Racial/ethnic/gender/age/other disparities in substance use behaviors

If no disparities were noted, you might write:

Reviewed data for young adult age group compared to all adults and Hispanic/Latino compared to non-Hispanic/Latino and no disparities were identified.

If you did not have capacity to assess disparities or data was not available, you might write: Did not have capacity to assess disparities for key populations of concern due to a lack of data broken out by race and gender.

If you do note disparities, you might write:

- Current Smoker Among Non-White/Non-Hispanic: According to regional BRFSS data, in 2020-2022 adults (age 18+) reporting they are a current smoker was 15% for those reporting race/ethnicity of White, non-Hispanic and 17% for those reporting another race/ethnicity (including Hispanic). In 2018-2020, current smoking rates were 16% for White, non-Hispanic and 19% for other race/ethnicity (including Hispanic).
- **Binge Drinking Among Females**: While BRFSS regional data shows higher rates of past month binge drinking for males than females, rates among males have decreased from 25.9% in 2018-2020 to 23.8% in 2020-2022 but have increased from 14.3% to 16.0% for females.
- Marijuana Use Among Young Adults: According to our County Needs Assessment Survey, 24% of adults ages 18-30 in 2022 used marijuana in the past 30 days compared to 10% of adults over 30.

# Data limitations and other important information regarding substance use behaviors

- Data Limitations:
- BRFSS data is regional and includes the following counties: Hill County, Dale County, Wright County, Marsh County. This regional data may not be adequately representative of Sample County.
- The County Needs Assessment Survey was conducted using a convenience sample (surveys collected online and at community events) and therefore is not fully representative of all adults in Sample County. The size of the survey sample also increased significantly from 223 surveys in 2019 to 412 in 2022, which may impact comparability of data for those years.

# V. Substance Use Consequences

# Table 5: Data Discussion/Interpretation

#### Substance use consequences impacting the largest number of people

- Alcohol Related Crashes: Pennsylvania Department of Transportation (PennDOT) reported 181 alcohol related crashes (rate of 106 per 100,000 population age 16 and over) in 2022.
- **DUI Arrests**: In 2022, according to PA Uniform Crime Reporting (UCR) data, there were 423 arrests (rate of 53.8 arrests per 10,000 population) for Driving Under the Influence (DUI) for age 18+.
- Marijuana Possession Arrests: There were 240 arrests (rate of 30.7 per 10,000 population) for marijuana possession for age 18+ in 2022 per UCR data.
- **Drug Overdose Deaths**: There were 80 drug overdose deaths (rate of 5.8 per 10,000 population) in 2022. 80% of these deaths involved an opioid and 75% involved fentanyl. Preliminary data from Pennsylvania Department of Health's Office of Drug Surveillance and Misuse Prevention (PA DOH ODSMP).

#### Substance use consequences with the largest or concerning increases over time

If there are no significant increases in any consequences, you might write: No significant increases since 2019 in any substance use consequences measured.

*If you do have significant/concerning increases, you might write:* 

- **DUI Arrests:** DUI arrests for ages 18+ per PA UCR data have increased from 360 in 2019 to 423 in 2022 (rates per 10,000 population of 46.9 in 2019, 44.5 in 2020, 52.6 in 2021 and 53.8 in 2022).
- **Drug Overdose Deaths**: Any drug overdose deaths as reported by PA DOH have increased each year since 2019 (rates per 10,000 population of 3.0 in 2019, 4.9 in 2020, 5.3 in 2021, 5.8 in 2022).

Substance use consequences with high county ranking (top 15) or notably higher than neighboring or similar counties

If nothing has a high ranking or is higher than neighboring/similar counties, you might write: Some data sources could not be accurately compared across counties (e.g. arrest data and substance use disorder treatment admissions). For those that could be compared across counties, no substance use consequences had a high ranking or were higher than neighboring counties.

If you do have consequences ranked in top 15 or higher than neighboring/similar counties, you might write:

Some data sources could not be accurately compared across counties (e.g. arrest data and substance use disorder treatment admissions). For those that could be compared across counties, the following was identified:

• Alcohol Related Crashes: The 2022 alcohol related crash rate of 106 per 100,000 population age 16 and over (per PennDOT) is ranked 14<sup>th</sup> out of all counties and is higher than all neighboring counties (rate of 81 for Hill County; 75 for Dale County; 73 for Wright County).

#### Racial/ethnic/gender/age/other disparities in substance use consequences

If no disparities were noted, you might write:

Reviewed data for young adult age group compared to all adults and Hispanic/Latino compared to non-Hispanic/Latino and no disparities were identified.

If you did not have capacity to assess disparities or data was not available, you might write: Did not have capacity to assess disparities for key populations of concern due to a lack of data broken out by race and gender.

If you do note disparities, you might write:

- **Drug Possession Arrests Among Young Adults**: Per 2022 PA UCR data, the drug possession arrest rate for 22 to 29 year olds was 87.2 per 10,000 population compared to 40.5 for all ages.
- **Overdose Deaths Among Hispanic/Latino**: The overdose death rate in 2022 per PA DOH was 7.7 per 10,000 population for Hispanic and 4.9 for Non-Hispanic. While the overdose death rate decreased among those who were Non-Hispanic from 2019 to 2022, the rate increased among those who were Hispanic from 5.6 in 2019 to 7.7 in 2022.

#### Data limitations and other important information regarding substance use consequences

Data Limitations

**PA UCR**: Participation in the UCR program by law enforcement agencies is voluntary. It is not known which Sample County law enforcement agencies have reported data each year. Changes in participation could be impacting trends over time. Inconsistency in participation across counties also limits the ability to accurately compare to other counties. In addition, it is unclear if there have been changes in levels of enforcement that could be impacting changes in arrest rates.

# VI. Gambling Behaviors and Consequences

## Table 6: Data Discussion/Interpretation

#### Most common types of gambling among youth and/or adults

#### Youth

Per 2023 PAYS, the top three most common types of gambling for grades 6, 8, 10, 12 are:

- Lottery (15.8%)
- Games such as poker, card games, dice, pool, darts (11.4%)
- Sporting events, sports pools, or fantasy sports (10.6%)

#### Adults

Per 2020 BRFSS district level data, among adults (18+) who reported gambling in the past 12 months, 42% reported gambling at a casino and 15% reported gambling online.

The 2022 County Needs Assessment Survey of adults age 18+ asked respondents what types of gambling they participated in during the past year. The three most common types of gambling reported were (% out of all respondents):

- Lottery (50%)
- Sporting events/sports/pool/fantasy sports (20%)
- Online (16%)

#### Gambling behaviors/consequences with the largest or concerning increases over time

*If there are no significant increases in any gambling behaviors/consequences, you might write:* No significant increases since 2019 in any gambling behaviors or consequences measured.

*If you do have significant/concerning increases, you might write:* Youth

- Per PAYS, past 30 day gambling among all grades combined increased from 9.1% in 2019 to 11% in 2023. The biggest increase was for 6<sup>th</sup> graders from 7.0% in 2019 to 8.8% in 2023. Adults
- Per County Needs Assessment Survey, adults age 18+ reporting at least one potential problem gambling indicator increased from 1.8% in 2019 to 3.2% in 2022. The percentage of respondents reporting gambling online increased from 9% in 2019 to 16% in 2022.
- Calls to the Problem Gambling Helpline increased from 22 calls (10.5 per 100,000 population) in 2019 to 70 calls (33.5 per 100,000 population) in 2022.

Gambling behaviors/consequences with high county ranking (top 15) or notably higher than neighboring or similar counties

If nothing has a high ranking or is higher than neighboring/similar counties, you might write: No gambling behaviors or consequences had a high ranking or were higher than neighboring counties.

*If you do have consequences ranked in top 15 or higher than neighboring/similar counties, you might write:* 

Youth

• **Gambling on Lottery**: Per 2023 PAYS, 15.8% of students in all grades combined reported gambling on the lottery in the past 12 months. This is higher than the three neighboring counties: 10.4% for Hill County, 9.1% for Dale County, 7.8% for Wright County.

Adults

• Calls to the Problem Gambling Helpline ranked 2<sup>nd</sup> highest among all counties in 2023.

#### Grades/age groups of particular concern for youth gambling behaviors

6<sup>th</sup> Grade: Past 30 day gambling increased from 7.0% in 2019 to 8.8% in 2023 (compared to 8<sup>th</sup> and 12<sup>th</sup> grade which did not increase and 10<sup>th</sup> grade which had a very small increase). The rate of past 30 day gambling among 6<sup>th</sup> graders ranks 5<sup>th</sup> out of all counties.

#### Racial/ethnic/gender/age/other disparities in gambling behaviors/consequences

If no disparities were noted, you might write:

Reviewed data for young adult age group compared to all adults and Hispanic/Latino compared to non-Hispanic/Latino and no disparities were identified.

If you did not have capacity to assess disparities or data was not available, you might write: Did not have capacity to assess disparities for key populations of concern due to a lack of data broken out by race and gender.

If you do note disparities, you might write:

• **Problem Gambling Among Young Adults**: According to our 2022 County Needs Assessment Survey, 6.1% of adults ages 18-30 reported at least one problem gambling indicator compared to 3.0% of adults over 30.

#### Data limitations and other important information regarding gambling behaviors/consequences Data Limitations

- PAYS: See Table 2 for information about PAYS data limitations.
- BRFSS data on gambling is by district and includes the 12 counties in the northeast region (Sample, Hill, Dale, Wright, Marsh, Brown, Creek, Lake, Jones, Lewis, Clark, Hamilton). This district data may not be adequately representative of Sample County. For example, the percent of adults reporting gambling at a casino may be higher in counties with a casino compared to Sample County which does not have a casino in the county or in a directly neighboring county.
- The County Needs Assessment Survey was conducted using a convenience sample (surveys collected online and at community events) and therefore is not fully representative of all adults in Sample County. The size of the survey sample also increased significantly from 223 surveys in 2019 to 412 in 2022, which may impact comparability of data for those years.

# VII. Risk Factors

# Table 7: Youth Data Discussion/Interpretation

#### Five highest PAYS risk factor scales

- Per 2023 PAYS, the five highest risk factor scales for grades 6, 8, 10, 12 are:
- Low Commitment to School (56% at risk)
- Parental Attitudes Favorable Toward Antisocial Behavior (54% at risk)
  - This risk factor scale asks youth about how wrong their parents would feel it would be to pick a fight, steal something, draw graffiti. Over 90% reported their parents would feel stealing or graffiti would be wrong (similar to about 90% of students who reported their parents feel it would be wrong to drink regularly, smoke cigarettes or use marijuana). However, only 75% of students felt their parents would feel it would be wrong to pick a fight. The question on picking a fight is greatly influencing this overall scale. Without it, it would not be one of the top five risk factor scales.
- Low Neighborhood Attachment (44% at risk)
- Attitudes Favorable to Drug Use (40% at risk)
  - This scale is made up of four questions asking how wrong it is for someone their age to drink regularly, smoke cigarettes, use illegal drugs or use marijuana. The percentage of youth responding to would be wrong to smoke cigarettes and use illegal drugs was very high at 90% and 94% respectively. Drinking regularly was lower with 83% reporting it would be wrong and marijuana use was the lowest with 75% reporting it would be wrong.
- Laws & Norms Favorable Toward Drug Use (39% at risk)
- Depressive Symptoms (38% at risk)

## Other risk factors of concern due to magnitude (i.e. impacting large number of youth)

*If there are no other risk factors of high magnitude, you might write:* No other risk factors of concern due to high magnitude.

*If there are other risk factors of concern due to magnitude, you might write:* 

- Lack of Sleep: Per 2023 PAYS data for all grades, 39% reported sleeping less than 7 hours a night on school nights (with a high of 58% for 12<sup>th</sup> graders).
- Family Member with Substance Use Problem: Per 2023 PAYS data for all grades, 30% reported someone in their family has had a severe alcohol or drug problem.
- Attitudes Toward Marijuana Use: Per 2023 PAYS data for all grades, 25% reported it would be not at all wrong or only a little bit wrong to use marijuana.

#### Risk factors with the largest or concerning increases over time

*If you there are no significant increases in risk factors, you might write:* Comparing 2019 to 2023 PAYS data there were no increases in any risk factors.

If you do have significant/concerning increases, you might write:

The following PAYS risk factor scales for all grades combined increased (% represents % of youth at risk for engaging in problem behaviors due to the risk factor listed):

- Sensation Seeking saw the biggest increase from 32% in 2019 to 37.5% in 2023.
- Low Commitment to School increased from 52% in 2019 to 56% in 2023.
- **Poor Family Management** increased from 34% in 2019 to 36% in 2023. Biggest increase seen for 6<sup>th</sup> grade which increased from 42% in 2019 to 51% in 2023.

The following items on the PAYS also increased:

- The % of youth reporting it would be **not at all wrong or only a little bit wrong to drink regularly** increased from 15% in 2019 to 17% in 2023, with the biggest increase for 10<sup>th</sup> grade from 19% in 2019 to 23% in 2023.
- The % of youth reporting they **felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities** increased from 22% in 2019 to 27% in 2021 and then decreased only slightly to 26% in 2023.

**Risk factors with high county ranking (top 15) or notably higher than neighboring or similar counties** *If nothing ranks in top 15 or is higher than neighboring/similar counties, you might write:* No risk factors ranked in the top 15 of counties or were higher than neighboring counties.

*If you do have risk factors ranked in top 15 or higher than neighboring/similar counties, you might write:* 

Per 2023 PAYS data:

- **Poor Family Management**: Ranked 7<sup>th</sup> highest among all counties for all grades combined. Sample County is ranked as 3<sup>rd</sup> highest among all counties for 6<sup>th</sup> grade specifically with 51% of 6<sup>th</sup> graders at risk of engaging in problem behaviors due to poor family management.
- Laws & Norms Favorable Toward Drug Use: Ranked 9<sup>th</sup> highest among all counties for all grades combined.
- **Poor Mental Health**: 33% of students in all grades combined reported their overall mental health in the past month has not been good. This is higher than the three neighboring counties: 23% for Hill County, 24% for Dale County, 26% for Wright County.

#### Grades/age groups that are of particular concern for specific risk factors

- **6<sup>th</sup> Grade Poor Family Management**: 51% of 6<sup>th</sup> graders at risk compared to 36% for all grades. 6<sup>th</sup> grade is also seeing a larger increase over time in the percentage of students at risk due to poor family management.
- **12<sup>th</sup> Grade Attitudes Toward Marijuana Use**: 40% of 12<sup>th</sup> graders reported it would be not at all wrong or only a little bit wrong to use marijuana compared to 25% for all grades.

#### Racial/ethnic/gender/other disparities in specific risk factors

- **Poor Family Management among Hispanic/Latino**: 45% of those indicating "Mexican, Mexican American, Chicano" at risk of engaging in problem behaviors due to poor family management compared to 36% at risk for non-Hispanic.
- **Depressive Symptoms among Hispanic/Latino:** 43% of those indicating "Mexican, Mexican American, Chicano", 47% of those indicating "Puerto Rican", 45% of those indicating Cuban, and 49% of those indicating "another Hispanic, Latino, or Spanish origin" at risk due to depressive symptoms compared to 38% at risk for non-Hispanic.
- **Depressive Symptoms Females**: 50% of females at risk due to depressive symptoms compared to 29% at risk for males.

#### Data limitations and other important information regarding risk factors

#### Data Limitations

See Table 2 for information about PAYS data limitations. The younger average age of 2023 survey participants compared to 2019 is influencing the increase seen in Poor Family Management when looking at data for all grades combined since the increase in that risk factor scale is largest for 6<sup>th</sup> grade and smaller in other grades.

#### Other Important Information

**Anxiety**: While the PAYS measures depressive symptoms, suicide risk and overall mental health, it does not ask specifically about anxiety. Anecdotal information shared by students participating in after school and mentoring programs as well as anecdotal information from school staff and counselors indicate significant increases in youth struggling with anxiety. In addition, a new screening tool implemented by Student Assistance Program liaisons in the 23/24 school year in 4 of the 11 school districts found that 67% of students screened indicated an anxiety concern.

## Table 8: Adult Data Discussion/Interpretation

Data on risk factors for adults is very limited, which limits ability to draw conclusions about the key risk factors that are most influencing adult substance use.

Risk factors of potential concern based on number of adults impacted, trends over time or comparison to other counties/regions

*If you are unable to identify an adult risk factor of concern due to limited data, you might write:* Adult risk factors of potential concern could not be adequately identified due to a lack of data.

If you have anecdotal data on an adult risk factor of concern you want to highlight, you might write: **Trauma/PTSD**: While not formally measured, anecdotal data shared by staff working with individuals in substance use disorder treatment and recovery programs indicates that trauma such as physical and sexual abuse and PTSD are important risk factors influencing substance use.

If you do have data pointing to adult risk factors of concern, you might write:

- Per 2020-2022 BRFSS regional data, 18% of adults (18+) reported their **mental health was not good** for 14 or more days in the past month. This ranks the region 2<sup>nd</sup> out of 26 regions.
- The County Needs Assessment Survey measured **perceived norms regarding binge alcohol use**. In 2022, respondents in all age groups overestimated the percent of adults ages 18-44 who binge drink (75% of respondents selected an answer over 40% when true norm is near 23%).

Data limitations and other important information regarding risk factors

Data Limitations

- BRFSS data is regional and includes the following counties: Hill County, Dale County, Wright County, Marsh County. This regional data may not be adequately representative of Sample County.
- The County Needs Assessment Survey was conducted using a convenience sample (surveys collected online and at community events) and therefore is not fully representative of all adults in Sample County. 412 surveys were collected in 2022.

# VIII. Protective Factors

# Table 9: Youth Data Discussion/Interpretation

#### Three lowest PAYS protective factor scales

Per 2023 PAYS, the three lowest protective factor scales for grades 6, 8, 10, 12 are:

- **Religiosity** (34% with protection)
- Community Rewards for Prosocial Involvement (36% with protection)
- School Opportunities for Prosocial Involvement (44% with protection) Not all opportunities for prosocial involvement were low. The percentage of youth reporting they have lots of chances in school to get involved in sports, clubs and other activities outside of class was very high at 93%. Over 80% of students also reported having lots of chances to be part of class discussion and talk one-on-one with a teacher. However, only 25% reported teachers ask them to work on special classroom projects and 50% reported they have lots of chances to help decide things like class activities and rules.

#### Protective factors with the largest or concerning decreases over time

If you there are no significant decreases in protective factors, you might write: Comparing 2019 to 2023 PAYS data there were no decreases in any protective factor scales.

#### If you do have significant/concerning decreases, you might write:

Per PAYS for all grades combined (% represents % of youth protected against engaging in problem behaviors due to the protective factor listed):

- Family Rewards for Prosocial Involvement saw the biggest decrease from 60% in 2019 to 52% in 2023.
- Belief in the Moral Order decreased from 58% in 2019 to 53% in 2023.
- School Opportunities for Prosocial Involvement decreased from 47% in 2019 to 44% in 2023.

Protective factors with low county ranking (bottom 15) or notably lower than neighboring or similar counties

*If nothing ranks in bottom 15 or is lower than neighboring/similar counties, you might write:* No protective factors ranked in the bottom 15 of counties or were lower than neighboring counties.

*If you do have protective factors ranked in bottom 15 or lower than neighboring/similar counties, you might write:* 

Per 2023 PAYS data:

- **Community Rewards for Prosocial Involvement:** Ranked 10<sup>th</sup> lowest among all counties for all grades combined. Sample County is ranked as 4<sup>th</sup> lowest among all counties for 6<sup>th</sup> grade specifically (only 32% of 6<sup>th</sup> graders with protection due to community rewards for prosocial involvement).
- Belief in the Moral Order at 53% with protection is lower than the three neighboring counties: 60% for Hill County, 58% for Dale County, 57% for Wright County.

Grades/age groups that are of particular concern for specific protective factors

**6<sup>th</sup> grade**: Per 2023 PAYS data total protection across all protective factors scales measured is lowest for 6<sup>th</sup> grade and has decreased from 2019 to 2023 (compared to 10<sup>th</sup> and 12<sup>th</sup> grades where total protection increased). Specific protective factors of concern for 6<sup>th</sup> grade that are lowest or decreasing are: **Community and Family Rewards for Prosocial Involvement, School Opportunities for Prosocial Involvement and Belief in the Moral Order**.

Racial/ethnic/gender/other disparities in specific protective factors

Per 2023 PAYS data

- **Community Rewards for Prosocial Involvement among Hispanic/Latino**: Only 26% of those indicating "Mexican, Mexican American, Chicano" with protection compared to 36% with protection for non-Hispanic.
- Family Domain Risk Factors among females and Hispanic/Latino:
  - The percent of youth with protection for all family domain risk factors was lower for females compared to males. Family Attachment had largest disparity: 57% with protection for females compared to 65% for males.
  - The percent of youth with protection for all family domain risk factors was lower for Hispanic/Latino compared to non-Hispanic. Family Rewards for Prosocial Involvement had the largest disparity: 41% with protection for those indicating "Mexican, Mexican American, Chicano" compared to 54% with protection for non-Hispanic.

#### Data limitations and other important information regarding protective factors

#### Data Limitations

See Table 2 for information about PAYS data limitations. The largest decreases in protective factors were seen among 6<sup>th</sup> and 8<sup>th</sup> grade, the younger average age of 2023 survey participants compared to 2019 is likely influencing the decrease seen when looking at data for all grades combined.

#### Other Important Information

**Social emotional competence** is an important protective factor that is not measured on the PAYS. We do not have county level data on this protective factor. However, pretests administered for the Second Step social emotional learning curriculum implemented with 800 students in three elementary schools in SFY 23/24 show low baseline levels of social emotional competence. Anecdotal information from schools regarding SEL assessments also indicate low levels of social emotional competence that are impacting learning outcomes.

## Table 10: Adult Data Discussion/Interpretation

No county level data on protective factors among adults is available through public data sets. If county or local surveys measuring protective factors among adults are available, key findings from that data are below.

Protective factors of potential concern based on number of adults impacted, trends over time or comparison to other counties/regions

*If you do not have any data on adult protective factors, you can leave this blank or write:* No available data on adult protective factors.

If you do have data on adult protective factors, you might write:

A county needs assessment survey of adults age 18+ was conducted in 2019 (223 respondents) and 2022 (412 respondents). Respondents were asked about civic engagement. In 2022 only 40% reported they are committed to serve in their community and 36% reported they are involved in a structured volunteer position in the community (this is down from 44% and 38% respectively in 2019).

# IX. Contributing Factors/Community Conversations

Review of the data presented above resulted in the identification of the top problems and risk/protective factors of concern. See this list in the <u>Top Areas of Concern</u> section below. These top areas of concern guided community conversations and assessment of contributing factors.

**Contributing Factors**: Contributing factors are the specific local conditions that give rise to the problems and risk/protective factors. Contributing factors answer "why here" questions such as: why do our youth have low perception of risk of marijuana, why do our youth perceive parent attitudes as favorable toward vaping, why is family conflict high, in what ways are laws favorable toward adult alcohol misuse. Identifying contributing factors involves digging deeper into the local root causes of problems and risk/protective factors.

**Community Conversations**: Contributing Factors were assessed by holding "community conversations". Community conversations could include focus groups, large group discussions (e.g. town hall meetings), listening sessions, interviews or surveys to collect information from community members, youth, parents and others.

## Table 11: Community Conversation Summary

For this assessment the following community conversations were conducted. See <u>Appendix – Community Conversation Questions</u> for the list of questions asked during community conversations.

COMMUNITY CONVERSATION FORMAT	DATE/DATE RANGE CONDUCTED	POPULATION	NUMBER COMPLETED	HOW PARTICIPANTS WERE IDENTIFIED OR SURVEYS DISSEMINATED
Focus Group	1/15/2025 2/12/2025	Youth	8	Four groups of high school age youth (40 total) and four groups of middle school age youth (40 total) were recruited from four school districts. The afterschool program staff and other youth serving organizations shared the focus group opportunity with youth and they were able to volunteer to participate with parent permission. Focus groups took place at schools at the end of the school day.
KEY THEMES	General	more time for the Not learning about wellness/money Perceived Norms Perceived Norms Perceived Norms Perceive majoritipeers were using Reasons for Using Substate Marijuana: Over avoid the feeling Vaping: High schederstress/anxiety/c Alcohol: Most cate Community Rewards for Know few of or their family. Mot Rules/Consequences for Most said their a rule about not after marijuana Several noted fr Few felt they we and they have lot Felt more likely	hings like recess, bu out skills/topics that is management, result of their peers ar g alcohol, vaping ar ances rwhelmingly, partic gs of stress and an hool age participant depression. Middle ommon reasons the Prosocial Involven none of their neigh ost often those adul Substance Use parents have rules drinking and drivin use. iend's parents who ould be caught by to the of time when th to get caught using	ts most commonly noted that <b>peers who use regularly do so to manage</b> e school age participants said peers <b>vape to feel cooler like older kids</b> . ought peers drink was to <b>have fun with friends and fit in</b>

KEY THEMES	Resources/	Substance use among youth is priority for school but not community – Most did not believe the community cared		
Readiness about youth using substances or some didn't know if other adults in community thought it was an importation				
	However, they felt like the school makes it a high priority (have programs talking about dangers of substance use,			
		teachers express concerns about use and warn of risks, rules about substance use are enforced, have vape detectors).		

COMMUNITY CONVERSATION FORMAT	DATE/DATE RANGE CONDUCTED	POPULATION	NUMBER COMPLETED	HOW PARTICIPANTS WERE IDENTIFIED OR SURVEYS DISSEMINATED
Focus Group	2/11/2025 2/18/2025	Parents/Caregivers	2	Parents/caregivers who attended parent-teacher conference nights were given the opportunity to sign up to participate. Parents of youth in after school programs were sent a text inviting them to participate. 18 total parents consented to participate. Each received a \$25 gift card.
KEY THEMES	General	really like and fe Perceived Norms of Yout Perceive many r school students Were very unsu Parent Rules and Commu Most shared the they permit thei these rules when Parents shared the talk about it mou Nearly all said the Community Rewards for Felt community (e.g. more free a	eel supported by). th Substance Use a more youth are usi drink and more tha re about how man unication Around S ey have a general r ir child to drink in n in they are going to they feel uncomfor re, but don't becau hey didn't have or Prosocial Involven could do more to activities and provid for more awards of	ng substances than actually are. Most thought more than 50% of high an 30% have vaped or used marijuana. y youth gamble but didn't think it was very common. Substance Use/Gambling ule that their children cannot drink or use any substances. Some said noderation if with them at home. Many said they remind their children of events like a party, dance, etc. table talking with their kids about substance use. They noted wanting to se the conversations felt awkward and they didn't know what to say. communicate any specific rules around gambling.

KEY THEMES	Resources/	Importance of Preventing Youth Substance Use/Gambling			
	Readiness	• Felt is important to prevent alcohol/vaping/marijuana use, particularly among younger youth. For youth over age 16, several felt that it was more important to teach them to use alcohol and marijuana responsibly than to prevent use entirely.			
		Did not see youth gambling as an important problem to address. Saw as less prevalent and having less negative outcomes compared to substance use.			
		What is Needed to Prevent Substance Use			
		More free after school and summer activities.			
		• Supports for children in households where parents or other adults have a substance use disorder.			

COMMUNITY CONVERSATION FORMAT	DATE/DATE RANGE CONDUCTED	POPULATION	NUMBER COMPLETED	HOW PARTICIPANTS WERE IDENTIFIED OR SURVEYS DISSEMINATED
Large Group	3/25/2025 3/25/2025	Faith Based Organizations Healthcare Professionals Social Service/Youth Serving Agencies	1	Each of the five community coalitions in the county reached out to their sector representatives to invite representatives from organizations serving youth. In addition, email invites were sent to various organization contacts throughout the county. A total of 40 participants attended and were broken into small groups who rotated through tables discussing specific topics.
KEY THEMES	General	competitions are Youth who aren families. Need t listen/watch for Youth who are r outside of schoo	or teams who are e recognized in man i't star athletes or s to better equip adu what youth are do not connected to a of often lack a conn and family income	hent excelling in sports, academics, winning awards or other non-athletic my ways such as awards ceremonies, newspaper, and banners/signs. students don't receive much recognition for doing well beyond their own filts who are engaging with youth in various activities or programs to ing well and take the time to offer praise in meaningful ways. faith community or involved in sports or other organized activities nection to caring adults outside their family/school. Family members' pose barriers to participation in activities that can provide a connection to

KEY THEMES	Resources/	Needed Resources to Support Prevention
	Readiness	<ul> <li>Need more sustainable, long-term funding sources. Patchwork of grant funding makes it challenging to develop and sustain comprehensive prevention strategies.</li> </ul>
		<ul> <li>Limited funding makes it challenging to make programming more accessible (e.g. providing more free programs, providing transportation, providing services in more languages).</li> </ul>
		<ul> <li>Hard to recruit staff to fill vacancies. Need a pipeline of professionals with training and interest in prevention science.</li> </ul>
		<ul> <li>Challenging to engage parents/caregivers. Busy schedules, lack of transportation and parent/caregiver struggles with their own mental health are barriers to engagement.</li> </ul>
		Key Partners in Prevention
		<ul> <li>Schools are bought-in to the value of prevention and are very supportive of prevention, wellness and other health promotion programming.</li> </ul>
		<ul> <li>County Commissioner Smith has been a long-time champion of efforts to promote positive youth</li> </ul>
		development. Deb Jones and Hector Lopez are also active and influential advocates for prevention.
		<ul> <li>Wecare Hospital and Health System has made substance use a priority in their community health needs assessment and has several staff who are championing vaping prevention efforts.</li> </ul>
		Misconceptions about Youth Alcohol and Marijuana Use & Prioritization as a Concern
		• Community members see alcohol use among youth as common and inevitable. They recognize negative consequences but are not aware of how use can be prevented.
		<ul> <li>There is a very vocal segment of the community who promotes marijuana use as harmless.</li> </ul>
		<ul> <li>Addressing youth substance use in general is a priority for many in the community.</li> </ul>
		Awareness & Prioritization of Problem Gambling as a Concern
		<ul> <li>Addressing youth gambling is not perceived as a high priority among community members. However, hearing more people mention experiences with someone they know having a potential gambling disorder or experiencing negative consequences.</li> </ul>

COMMUNITY CONVERSATION FORMAT	DATE/DATE RANGE CONDUCTED	POPULATION	NUMBER COMPLETED	HOW PARTICIPANTS WERE IDENTIFIED OR SURVEYS DISSEMINATED
Interview	1/8/2025 1/31/2025	School Staff	7	Through school SAP teams, invited specific teachers/school staff to participate in an interview. 7 agreed to participate.
KEY THEMES	General	Attitudes Toward Substa		participate in an interview. 7 agreed to participate.
	General	<ul> <li>Students who m with more appro- for marijuana.</li> <li>Policies/Enforcement         <ul> <li>Inconsistent enf during after school</li> <li>Vaping – Many se</li> <li>Need for more se need for more in just punishment</li> <li>No one was awae</li> </ul> </li> <li>Gambling         <ul> <li>Most said not ar within online ga</li> </ul> </li> <li>Mental Health         <ul> <li>Anxiety is the m stress/anxiety ar parents/society</li> </ul> </li> <li>Strategies to Increase Co         <ul> <li>Greater focus or readiness skills</li> <li>More flexibility ar</li> </ul> </li> </ul>	ay have negative at oving attitudes are forcement – Several col activities or sch schools have vape of upportive consequents to school options to school opt	<ul> <li>detectors, but find enforcement challenging because so easy to conceal.</li> <li>ences - Have students who are caught vaping repeatedly. Several noted a support youth in quitting vaping or addressing substance use (rather than tences may be for student caught gambling (not on radar screen)</li> <li>an paying much attention to but have heard kids talk about gambling alking about making bets on sporting events/sports pools.</li> <li>al health concern they see among students. Their biggest sources of plwork demands, demands of many other activities, pressure from cial media (pressure to be accepted/appear a certain way).</li> <li>and the spent on social emotional learning and career</li> <li>bpics or do other projects that aren't on standardized tests but are of</li> </ul>
		More opportunities for incentives to encourage engagement		
KEY THEMES	Resources/ Readiness	<ul> <li>More programs/services to support families who are struggling (need to address barriers to far engaging in those services – transportation, stigma, time)</li> <li>More programs/services provided in Spanish</li> <li>Free afterschool and summer programs for youth</li> </ul>		
		<ul> <li>Education for families/others working with youth about ways youth are gambling and signs of potent problem gambling to look out for</li> </ul>		

COMMUNITY CONVERSATION FORMAT	DATE/DATE RANGE CONDUCTED	POPULATION	NUMBER COMPLETED	HOW PARTICIPANTS WERE IDENTIFIED OR SURVEYS DISSEMINATED
Survey	2/3/2025	Young Adult/College	172	Collaborated with the AOD Coordinator at two colleges to disseminate
	3/21/2025			the survey. The survey was sent out via email and promoted online. Peer educators also promoted the survey during events on campus.
KEY THEMES	General	to 24% of 18-25 Future in 2022). • Misperceived us students see car • Mental health is escape, relax or Gambling • 17% of responde • The most comm stress" (23%). Th • 56% of responde outweighed the • 48% reported ac regularly. Mental Health • Depression: 43% students reporte • Stress: 65% of st • Low Resilience: when changes of	year olds in PA per se norm: 73% of re- nabis use as far mo s key reason for use relieve stress" (519 ents reported they on reasons given for nose reporting deple ents believed that t harms. dults in their family % of students repor- ed feeling worthles tudents reported th 30% and 24% of stu-	e from 18-27) indicated they used cannabis in the past 30 days (compared NSDUH in 2022 and 28.8% of 18-30 year olds in US per Monitoring the spondents said more than 50% of students use cannabis indicating ore common than it actually is. e: The two most common reasons given for using cannabis were "to %) and "to manage anxiety or depression" (40%). gambled in the past 30 days. or gambling were "to win money" (36%) and "to escape, relax, or relieve ressive symptoms were 3 times more likely to report daily gambling. the harms of gambling outweighed the benefits. 25% believed the benefits would feel it was "not at all wrong" or "a little bit wrong" to gamble ted feeling so sad nothing could cheer them up in the past 30 days. 40% of s in the past 30 days. neir level of stress in the past 30 days as high. udents responded "not at all true" or "rarely true" to "I am able to adapt o bounce back after illness, injury or other hardships" respectively.
KEY THEMES         Resources/ Readiness         N/A – Resources/readiness topics were not asked on survey		asked on survey		

## Contributing Factors of Concern

The key themes from the community conversations were analyzed to determine the contributing factors influencing the top problem and risk/protective factors of concern. See Table 21: Contributing Factors for Top Areas of Concern for a list of contributing factors of most concern.

# X. Resources/Readiness Assessment

Community conversations also provided opportunities to assess resources and readiness to address problems and risk/protective factors of concern.

- Resources: The fiscal, human, organizational and other resources available to address an issue.
- Readiness: The degree to which a community is ready to take action on an issue.

Key themes about resources/readiness from these community conversations are outlined in Table 11.

### Prevention Program/Service Inventory

A review was conducted of prevention programs and services that are currently funded by our agency and also programs implemented by other organizations and partners.

#### Table 12: Organizations Connected with To Learn About Other Prevention Programs/Services

Sample County Community Action Agency	Enter text
Sample County Community College	Enter text
Hope for Tomorrow, Inc.	Enter text
YMCA of Greater Sample Area	Enter text
Bright Futures	Enter text
United Way of Sample County	Enter text
Sample Area Intermediate Unit	Enter text

#### Table 13: Inventory Summary

#### # of Evidence-Based/Informed vs Non Evidence-Based/Informed Programs Being Implemented

# of evidence-based/informed programs	10
# of <b>non</b> evidence-based/informed programs	8

#### # of Programs Being Implemented by Domain

Peer/Individual	13
Family	4
School	1
Community	0

#### # of Programs Being Implemented by Setting

School	9
After School	3
Community	6

#### **Top 3 Most Common Age Groups Served**

Elementary School
Middle School
Parents

#### **Other Program Access/Availability Factors**

# of programs provided in a language other than	2
English	

Populations of high need that are underserved (e.g. no or few programs reaching that	Young adults
population)	
Populations that aren't accessing or have barriers	Low-income families in rural areas have
accessing programs	challenges accessing services due to lack of public
	transportation. After school programs in
	Anytown and Smithville do not provide
	transportation which limits access for youth living
	in the rural areas of those school districts. Rural
	families and families without access to reliable
	transportation also have barriers accessing
	parenting programs (Strengthening Families
	Program and Guiding Good Choices).
Geographic gaps in services	Ridgeville Area: The Ridgeville School District is
	not currently implementing prevention programs
	in school and no prevention programs are
	currently offered in out of school time programs
	in the Ridgeville area.

# Strengths/Gaps in Resources/Readiness

The top behaviors, consequences and risk/protective factors of concern were assessed to rate the level of resources and readiness to address it. See capacity column of Tables 16 through 20 under <u>Top Areas</u> <u>of Concern</u> for these ratings. The biggest strengths and gaps identified for resources and readiness are:

## Table 14: Resource/Readiness Strengths

-	
1	Many evidence-based programs are being implemented with youth
2	Schools are very supportive of prevention. Evidence-based programs are being implemented in all
	school districts in the county.
3	Strong partnerships with several faith-based organizations. Help support promotion of
	prevention programs, provide free meeting space and help coordinate donations of meals for
	parenting programs.
4	Have several influential local champions for prevention
5	Addressing youth substance use is a priority for many in the community as well as many
	community sector partners
6	Enter text

# Table 15: Resource/Readiness Gaps

1	Only 1 program addressing school domain and 0 addressing community domain
2	Need more accessible after school, summer and parenting programs. Key accessibility barriers
	are few programs/services are offered in languages other than English and lack of transportation.
	Lack of funding is a barrier to increasing accessibility of programs.
3	Very few programs/services available to reach young adults and limited capacity to serve young
	adult population
4	Lack of capacity and expertise for evaluating program outcomes
5	Community does not see problem gambling as an important concern
6	Lack of community awareness that substance use can be prevented

# XI. Areas of Concern Summary

## Top Areas of Concern

Review of available data and community conversations pointed to the following areas of most concern. Capacity indicates the current resources and readiness to address the behavior, consequence or risk/protective factor.

## Table 16: Substance Use Behaviors

Substance Use Behaviors of Most Concern	Population(s) of Most Concern for the Substance Use	Priority for Discussion in Community Conversations	Capacity
Alcohol Use	Youth	Yes	High
	Adults		Low
	Hispanic/Latino Youth		Medium
Vaping	Youth	Yes	High
	Enter text		Choose an item.
	Enter text		Choose an item.
Marijuana Use	Youth	Yes	High
	Young Adults		Low
	Enter text		Choose an item.
Alcohol Use - Binge Drinking	12 <sup>th</sup> Grade	No	Medium
	Adults		Low
	Female		Unknown
Nicotine/Tobacco Use	Adults	No	Medium
	Youth		High
	Hispanic/Latino Adults	]	Low

## Table 17: Substance Use Consequences

Substance Use Consequences of Most Concern	Population(s) of Most Concern for the Consequence	Substance Use Behavior(s) Connected to the Consequence	Priority for Discussion in Community Conversations	Capacity
Arrests - Driving Under	Adults	Alcohol, Marijuana	No	Medium
the Influence	Enter text			Choose an item.
Crashes - Alcohol	Adults	Alcohol	No	Medium
Related	Enter text			Choose an item.
Arrests - Marijuana	Youth	Marijuana	No	Medium
Possession	Young Adults			Low
Deaths - Opioid Related	Adults	Opioids	No	Medium
Drug Overdose	Hispanic/Latino			Low
Choose an item.	Enter text	Enter text	Choose an item.	Choose an item.
	Enter text			Choose an item.

Gambling Behaviors/Consequences of Most Concern	Population(s) of Most Concern for the Gambling Behavior/ Consequence	Priority for Discussion in Community Conversations	Capacity
Any Gambling	Youth, particularly 6 <sup>th</sup> grade	Yes	Medium
	Adults		Low
	Enter text		Choose an item.
Problem Gambling Indicators	Young Adults	Yes	Low
	Adults		Low
	Enter text		Choose an item.
Gambling - Lottery	Youth	No	Medium
	Adults		Low
	Enter text		Choose an item.
Gambling - Online	Adults	No	Low
	Enter text		Choose an item.
	Enter text		Choose an item.
Gambling - Sports Betting/Fantasy	Youth	No	Medium
Sports	Adults		Low
	Enter text		Choose an item.

# Table 18: Gambling Behaviors and Consequences

## Table 19: Risk Factors

Risk Factors of Most Concern	Population(s) of Most Concern for the Risk Factor	Priority for Discussion in Community Conversations	Capacity
Low Commitment to School	Youth	Yes	Medium
	Enter text		Choose an item.
	Enter text		Choose an item.
Attitudes Favorable Toward	Youth	Yes	High
Substance Use (particularly alcohol	Enter text		Choose an item.
and marijuana)	Enter text		Choose an item.
Laws & Norms Favorable Toward	Youth	Yes	Medium
Substance Use	Enter text		Choose an item.
	Enter text		Choose an item.
Poor Family Management	Youth	Yes	High
	Hispanic/Latino Youth		Medium
	Enter text		Choose an item.
Depressive Symptoms	Youth	No	Medium
	Adults		Low
	Hispanic/Latino		Unknown
Low Neighborhood Attachment	Youth	No	Low
	Enter text	]	Choose an item.
	Enter text	]	Choose an item.
Sensation Seeking	Youth	No	Unknown
	Enter text	]	Choose an item.

Risk Factors of Most Concern	Population(s) of Most Concern for the Risk Factor	Priority for Discussion in Community Conversations	Capacity
	Enter text		Choose an item.
Mental Health Concerns	Adults	Yes	Low
	Youth		Medium
	Enter text		Choose an item.

#### Table 20: Protective Factors

Protective Factors of Most Concern	Population(s) of Most Concern for the Protective Factor	Priority for Discussion in Community Conversations	Capacity
Community Rewards for Prosocial	Youth, particularly 6 <sup>th</sup> grade	Yes	Medium
Involvement	Hispanic/Latino Youth		Low
School Opportunities for Prosocial	Youth, particularly 6 <sup>th</sup> grade	No	Medium
Involvement	Enter text		Choose an item.
Family Rewards for Prosocial	Youth, particularly 6 <sup>th</sup> grade	No	High
Involvement	Hispanic/Latino Youth		Choose an item.
Belief in the Moral Order	Youth, particularly 6 <sup>th</sup> grade	No	Unknown
	Enter text		Choose an item.
Social-Emotional Competence	Youth	No	High
	Enter text	]	Choose an item.
Other: Civic Engagement	Adults	No	Low
	Enter text		Choose an item.

# Table 21: Contributing Factors for Top Areas of Concern

Community conversations conducted revealed the following factors that are contributing to the risk/protective factors and problems of most concern.

Contributing Factors of Most Concern	Population(s) of Most Concern for the Contributing Factor	Top Substance Use/Gambling Behavior(s) and/or Risk and Protective Factor(s) Most Connected to the Contributing Factor
Not learning topics/skills youth feel are important for life and future career (includes SEL skills)	Youth	Low Commitment to School, Social-Emotional Competence
Perceive substance use is far more common than it actually is	Youth, Young Adults	Alcohol Use, Marijuana Use, Vaping, Attitudes Favorable to Use, Laws/Norms Favorable to Use
Manage/relieve stress, anxiety, depression through substance use/gambling	Youth, Young Adults	Marijuana Use, Vaping, Problem Gambling, Mental Health Concerns
Lack of recognition for youth doing well in areas other than sports	Youth	Community Rewards for Prosocial Involvement

Contributing Factors of Most Concern	Population(s) of Most Concern for the Contributing Factor	Top Substance Use/Gambling Behavior(s) and/or Risk and Protective Factor(s) Most Connected to the Contributing Factor
Parents do not feel comfortable talking with	Youth	Alcohol Use, Marijuana Use,
children about substance use and gambling		Vaping, Poor Family Management
Lack of awareness of potential harms of gambling	Youth, Young Adults	Problem Gambling
Lack of consistent enforcement and supportive	Youth	Alcohol Use, Vaping, Marijuana
consequences for substance use in schools		Use, Laws/Norms Favorable to Use
Low resilience	Young Adults	Marijuana Use, Problem Gambling, Mental Health Concerns
Enter text	Enter text	Enter text
Enter text	Enter text	Enter text

# Final Priority Problems and Risk/Protective Factors

Top areas of concern were narrowed down further into a final selection of priority problems and risk, protective and contributing factors.

#	Substance Use Behavior (Problem)	Population
P1	Alcohol Use	Youth, Hispanic/Latino Youth
P2	Marijuana Use	Youth, Young Adults
Р3	Vaping	Youth
#	Risk/Protective Factor	Associated Problem #
RPF1	(R) Low Commitment to School	P1, P2, P3
RPF2	2 (R) Laws & Norms Favorable Toward Substance Use P1, P2, P3	
RPF3	3 (R) Mental Health Concerns P2, P3	
RPF4	4     (R) Poor Family Management     P1, P2, P3	
RPF5	5 (P) Community Rewards for Prosocial Involvement P1, P2, P3	
#	Contributing Factor	Associated Problem and/or RPF #
C1	Not learning topics/skills youth feel are important for life and future career (includes SEL skills)	P1, P2, P3, RPF1
C2	Perceive substance use is far more common than it actually is	P1, P2, P3, RPF2
C3	Manage/relieve stress, anxiety, depression through substance	P2, P3, RPF3
	use	
C4	Parents do not feel comfortable talking with children about substance use	P1, P2, P3, RPF4

#### Table 22: Final Substance Use Problem Priorities

## Table 23: Final Problem Gambling Priorities

#	Gambling Behavior (Problem)	Population
GP1	Problem Gambling Indicators	Young Adults
GP2	Any Gambling	Youth
#	Risk/Protective Factor	Associated Problem #
GRPF1	(R) Depressive Symptoms	GP1
GRPF2	(R) Availability of/Increased Exposure to Gambling GP1, GP2	
GRPF3	Choose an item. Enter text	
#	Contributing Factor Associated Problem and/or RP	
GC1	1 Lack of awareness of potential harms of gambling GP1, GP2	
GC2	Manage/relieve stress, anxiety, depression through gambling GP1	
GC3	Low resilience GP1, GRPF1	

# Appendix – Community Conversation Questions

Outlined below are the questions for each community conversatio	'n
Outlined below are the questions for each community conversation	

FORMAT	POPULATION	QUESTIONS
Focus Group	Youth	1. What percent of your peers do you think
		drink alcohol regularly
		• vape
		use marijuana
		2. Why are kids your age
		drinking alcohol
		<ul> <li>vaping or using marijuana</li> </ul>
		3. Do you think reducing student alcohol use is an important issue to
		adults in your school? What about reducing student vaping or
		marijuana use?
		4. Do you think reducing youth alcohol use is an important issue to other
		adults in your community? What about reducing youth vaping or
		marijuana use?
		<ol><li>What are some rules your parents/caregivers have about vaping, drinking or using other drugs? Do your friends' parents have similar</li></ol>
		rules?
		6. What happens if you were caught using alcohol or vaping at school?
		What about if you were caught by your parents/caregivers at home?
		7. What would you change about school if you could?
		8. What things do you wish you could be learning about in school that
		aren't being taught?
		9. How many of your neighbors or people who live near you do you know (a lot, some, only a few, none)?
		10. Do you have adults outside of your family who encourage you or can
		give you advice, support or help? Are these adults neighbors, friends
		of your parents, coaches, leaders or a group or activity you are
		involved in, someone else?
Focus Group	Parents/Caregivers	1. What percent of youth do you think:
		drink alcohol regularly
		• vape
		use marijuana
		• gamble
		2. How important is preventing youth alcohol, vaping or marijuana use?
		What about preventing youth gambling?
		3. What rules do you have for your kids about alcohol, use, vaping or
		marijuana use? What about rules for gambling? How often do you
		communicate these rules to them?
		4. How comfortable do you feel or do you think other parents feel
		talking to your children about topics around substance use such as why they shouldn't use alcohol or other substances, your
		rules/expectations, or what to do if offered alcohol or other
		substances?
		5. What do you think needs to be done to help prevent youth from
		using substances?
		6. What do you think helps kids stay engaged and interested in school?

		7. What things do you think your community could be doing to better support, recognize or praise kids when they are working hard, doing something well or making healthy decisions?
Large Group	Faith Based Organizations Healthcare Professionals Social	<ol> <li>What specific resources or types of resources are you most in need of to support or grow your prevention related programs/services?</li> <li>Who are your most supportive partners in your prevention work? What stakeholders do you need more support from or engagement with?</li> </ol>
	Service/Youth Serving Agencies	3. What are the misconceptions among community members about youth alcohol and marijuana use (e.g. why it occurs, how much it occurs, what consequences are)?
		4. How much of a priority is addressing youth alcohol and marijuana use to community members?
		<ol> <li>How much do community members know about problem gambling? How much do they know about its causes? How much do they know about its consequences?</li> </ol>
		6. How much of a priority is addressing youth gambling to community members?
		<ol> <li>How are communities recognizing youth who are doing well and how could this be improved?</li> </ol>
		8. What, if any, groups of youth don't have a connection to a caring
laten derri	Calcal Chaff	adult in their community outside of their family?
Interview	School Staff	<ol> <li>What are the biggest concerns you see at your school related to substance use?</li> </ol>
		<ol> <li>What policies does your school have about substance use? What</li> </ol>
		about gambling?
		3. What are student's attitudes like around alcohol use? Positive views?
		Negative views? What about vaping and marijuana use?
		4. Where or how do you see students gambling?
		<ul><li>5. What types of resources are lacking in your school and/or community to address substance use and gambling?</li></ul>
		<ol> <li>What are the most common mental health concerns you see students struggling with?</li> </ol>
		<ol> <li>What are the largest contributing factors impacting students' stress and anxiety? What are their biggest sources of stress?</li> </ol>
		<ol> <li>Low commitment to school is the top risk factor for students based on our 2023 PAYS data. What do you think would need to change to</li> </ol>
		increase students' commitment to school or interest in school? What
		do you think helps them stay engaged and interested in school?
Survey	Young	1. Age (enter age)
	Adult/College	2. Race/Ethnicity (select all that apply): American Indian or Alaska
		Native, Asian, Black or African American, Hispanic or Latino, Middle
		Eastern or North African, Native Hawaiian or Pacific Islander, White, I
		prefer not to answer
		3. Gender: Male, Female, Transgender, Gender Nonconforming, Other, I
		prefer not to answer
		4. Student Status: Full-time, Part-time
		5. Approximate cumulative grade point average: 0-1.0, 1.1-2.0, 2.1-3.0,
		3.1-4.0

6. How often have you used cannabis in the past 30 days? Never; Once
or twice; Once or twice per week; About once a day; More than once
a day
7. Overall, what percentage of students here do you think do NOT use
marijuana at all? Just give your best estimate.
8. How much do you think people risk harming themselves (physically or
in other ways) if they use cannabis daily? (No risk; Slight risk;
Moderate Risk; Great Risk)
9. How wrong do your friends feel it would be for you to use cannabis
daily? (Not at all wrong; A little bit wrong; Wrong; Very wrong)
10. How wrong do adults in your family think it is to use cannabis daily?
(Not at all wrong; A little bit wrong; Wrong; Very wrong)
11. In the past 12 months, what was your primary motivation or reason
for using cannabis? Although you may have multiple reasons, please
think about the one that best describes you.
I have not used cannabis in the past 12 months
To experiment - see what it felt like
To feel good or get high
To have a good time
Because of boredom - nothing else to do
Because I can't stop using     To assess ratio a ratio a tracs
To escape, relax, or relieve stress     To some with negative (difficult facilings)
To cope with negative/difficult feelings     To manage anyiety or depression
<ul> <li>To manage anxiety or depression</li> <li>To manage pain</li> </ul>
<ul> <li>For a medical reason</li> </ul>
Other, please specify
<ul> <li>I don't have a primary reason</li> </ul>
12. How often have you gambled for money or anything of value in the
past 30 days? Never; Once or twice; Once or twice per week; About
once a day; More than once a day
13. Considering the relative harms and benefits of gambling, which of the
following do you believe:
The harms far outweigh the benefits
<ul> <li>The harms somewhat outweigh the benefits</li> </ul>
The harms and benefits are about the same
<ul> <li>The benefits somewhat outweigh the harms</li> </ul>
The benefits far outweigh the harms
Don't know/unsure
14. How wrong do adults in your family think it is to gamble regularly?
(Not at all wrong; A little bit wrong; Wrong; Very wrong)
15. In the past 12 months, what was your primary motivation or reason
for gambling? Although you may have multiple reasons, please think
about the one that best describes you.
<ul> <li>I have not gambled in the past 12 months</li> <li>To win money</li> </ul>
<ul><li>To win money</li><li>For enjoyment/excitement/fun/entertainment</li></ul>
<ul> <li>For enjoyment/excitement/iun/entertainment</li> <li>To develop my skills</li> </ul>
<ul> <li>To complete, or for the challenge</li> </ul>
<ul> <li>To socialize</li> </ul>
<ul> <li>To support worthy causes</li> </ul>

	<ul> <li>To escape, relax, or relieve stress</li> </ul>
	<ul> <li>It makes me feel good about myself</li> </ul>
	Other, please specify
	<ul> <li>I don't have a primary reason</li> </ul>
1	5. During the past 30 days, about how often did you feel (All of the
	time, Most of the time, Some of the time, A little of the time, None of
	the time)
	Nervous
	Hopeless
	Restless or fidgety
	• So sad nothing could cheer you up
	That everything was an effort
	Worthless
1	7. Within the last 30 days, how would you rate the overall level of stress
	you have experienced? (No stress, low, moderate, high)
1	8. Please indicate how much you agree with the following statements
	(Not at all true, Rarely true, Sometimes true, Often true, True nearly
	all the time)
	I am able to adapt when changes occur
	I tend to bounce back after illness, injury or other hardships